

РЕЦЕНЗИИ

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BETWEEN THE 'TIGHT LITTLE ISLAND' OF THE HOSPITAL AND THE OUTSIDE WORLD

Temkina A., Novkunskaya A., Litvina D. (2023) Pregnancy and Birth in Russia: The Struggle for Good Care. Routledge. ISBN 9780367688950

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In his 2004 article on an orthopaedic ward of a Bangladeshi hospital, Shahaduz Zaman wrote:

When I stated the goal of my research, I argued that a hospital ward is not an end in itself, but that it can mirror various features of the life of the country of which it is a part. It is evident that biomedical practice in the orthopaedic ward of the Bangladeshi hospital has taken a definite shape due to some particular social and cultural factors. Broken limbs caused as a consequence of various criminal acts, patients' position in the ward, the involvement of relatives in patient care, the frustration of the staff members and the indigenous solutions for medical and administrative problems have contributed to form the distinguishing characteristics which Wilson (1965) called the 'personality' of the ward. ... The hospital is therefore not a 'tight little island', rather its culture is simultaneously created by its population and constrained by the political-economic context in which individuals and the institution itself are situated (Zaman 2004).

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Zaman's work came to my mind as I was reading *Pregnancy and Birth in Russia: The Struggle for Good Care* (Temkina et al. 2023), as this book is a brilliant example of the sociological explorations into the unbreakable bond between culture and health – between the 'tight little island' of the ward or clinic and the outside world.

Pregnancy and Birth in Russia: The Struggle for Good Care traces the challenges of maternity care in contemporary Russia as part of the changing structure and function of the Russian healthcare system affected by both the legacies of Soviet paternalism and global neoliberal economic doctrines. Addressing the question of what constitutes "good maternity care", the book offers multiple perspectives on maternity care based on the experiences of expecting mothers, health providers, and administrators.

Maternity care is the book's field of study. The book's introduction situates it within the context of the current Russian healthcare system by tracing the historical, social, and economic processes that shaped the system as a whole. After a methodological section focused on studies in healthcare settings, four analytical chapters explore the impact of Soviet and post-Soviet legacies, the power of consumerism in defining good maternal care and the role of providers, and the political struggles for good care. The book's conclusions highlight the themes underlying the book as they trace the problems of Russian maternity care in a web of patriarchy and paternalism, hybridization of the healthcare system, and market reforms. The authors' ultimate answer to the question 'what constitutes good maternity care in the 21st century's Russia' is that good maternal care is not solely a project of women's empowerment, as the literature on maternity care often suggests, but rather a complex process of negotiations between multiple actors and social processes.

Two of the themes outlined by the authors of *Pregnancy and Birth in Russia* highlight the importance of this book and its authors' journey into the world of maternity hospitals in Russia: 'sociologists in white,' that is sociologists working within healthcare settings, and the hybridization of healthcare systems in general and in Russia in particular, and its impact on 'good care.'

The first theme echoing in the book, and phrased as 'sociologists in white,' is methodological choices, and the breadth of fieldwork conducted for this book. No less important is the depth of the relationships the authors were able to build in highly hierarchical institutions that are notoriously unwelcoming to outsiders (and not just in Russia). Much of the book addresses issues that are rooted in Russian culture and history, as well as the unique structure of the Russian healthcare systems. However, the authors also do a remarkable job of describing and analyzing scenarios that are very familiar to other 'sociologists in white' studying hospitals worldwide – from the suspicious and intimidating head nurse to the moment the researcher finds herself in sterile garments in the operating theater wondering how she got there and how come this is an ok place to be, before realizing that most people in the room have no idea who she

is, nor do they care. Walking this fine line between the particular (the Russian healthcare system) and the universal (studying healthcare systems), the authors of Pregnancy in Russia provide the readers with a compelling account of not only maternity hospitals in Russia, but also of the process of conducting sociological studies in hospitals with their limitations, surprises, and successes.

Another methodological strength, that plays an important role in the analysis provided in the book, lies in its methodological innovation. Breaking away from the tradition of lone-wolf ethnographers, the authors team up to gain a deeper understanding of the hospitals they study. Unlike most ethnographies written by multiple authors, this is not a combination of studies following the same themes, but a true collaboration based on complementary roles allowing the researchers to gain access to multiple angles of observation on the same field. Not only this choice improves the accessibility and the multiple viewpoints such a team can have, but also shapes a unique way in which the three researchers form a text that speaks with one coherent voice without blurring the three separate perspectives.

Through this unique ethnographic perspective that a group of collaborating ethnographers once called 'the wolf-pack strategy' (Closser et al. 2016), we learn about the hospital from multiple perspectives and physical spaces. Coordinating such a project must have been an enormous challenge. However, many lone-wolf ethnographers would be jealous of what Temkina, Novkunskaya, and Litvina were able to experience as a team. A second theme echoing in the book is the fragmented, or 'hybrid' as the authors describe it, nature of the Russian health system and its impact on all involved in pregnancy and birth in Russia. In this analysis lies an important lesson—happy health systems are all alike, while every fragmented health system is fragmented in its own way. Thus, while the study of health systems (especially outside the field of health policy and management) often results in a description of a 'broken' fragmented system, only a few of the studies, albeit the excellent ones, take the time to study, analyze, and explain how the current system came to be through a complex network of often contradicting and conflicting historical, economic, and social processes and influences

Health systems are monsters to explore, explain, and understand. In his 2010 article, Julio Frenk addressed what he saw as the misconceptions surrounding health systems. According to Frenk, health systems are seen as either 'black-boxes' – too complicated to understand – or 'black holes' – no amount of resources will suffice to achieve the desired outcomes (Frenk 2010). Frenk's argument is focused on the strengthening of the health system. However, his argument resonates here as well. Health systems are complicated, but not inaccessible. Understanding their structure, power relations, history, and influences is a crucial stage in understanding how they impact both patients and providers. This understanding will also help to elucidate how the 'tight little island' relates to the outside world. In their book, Temkina, Novkunskaya, and Litvina unpack these processes to show how maternity hospitals in Russia

became what they are, and how these processes of fragmentation are experienced by both pregnant women and health providers.

Outlining the legacy of the Soviet health system and the impact of post-Soviet policies and neo-liberal free-market influences on the latter, the authors of Pregnancy in Russia do an exceptional job of tracing the context in which their field of study came to be. These are hard times to be an observer of society, and I applaud Temkina, Novkunskaya, and Litvina for their achievement. May we all have such courage to speak the truth and complexity of the fields we study in uncertain times.

References

Closser S., Rosenthal A., Maes K., Justice J., Cox K., Omidian P. A., Mohammed I. Z., Dukku A. M., Koon A. D., Nyirazinyoye L. (2016) The Global Context of Vaccine Refusal: Insights from a Systematic Comparative Ethnography of the Global Polio Eradication Initiative. Medical Anthropology, 30 (3):321–41.

Frenk J. (2010) The Global Health System: Strengthening National Health Systems as the Next Step for Global Progress. PLOS Medicine, 7 (1): e1000089.

Temkina A., Novkunskaya A., Litvina D. (2023) Pregnancy and Birth in Russia: The Struggle for Good Care. Routledge.

Zaman S. (2004) Poverty and Violence, Frustration and Inventiveness: Hospital Ward Life in Bangladesh. *Social Science and Medicine*, 59 (10): 2025–2036.