

# WORLD ANTHROPOLOGIES

## Commentary

# Medical Anthropology in an Era of Authoritarianism

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Başak Can's timely essay speaks to the challenges of medical anthropological research under authoritarian regimes not only in Turkey but in other parts of the Middle East. There, governments led by dictators, monarchs, or warring parliaments may feel threatened by the critical findings of health-related ethnographic research. Obstacles placed in researchers' way may include failure to receive research funding, visas, or permits; lengthy institutional review board processes resulting in research delays and denials; requests for study revision that fundamentally alter the nature of research; and refusal of individual hospitals, clinics, or physicians to allow a research project to move forward, either out of fear of what a medical anthropological study might reveal or because clinicians themselves feel professionally jeopardized, especially in state-run healthcare settings. Even in the private medical sector, research access may be hard to achieve, particularly when research topics are sensitive (e.g., infertility, abortion) or when physicians are concerned about protecting their paying patients' privacy. Gaining access to private clinics and hospitals may require powerful physician allies to act as intermediaries, or *wastas*, to use the Arabic term. This "politics of patronage" (Inhorn 2004) may create compromising conditions of hierarchy and indebtedness, including the possibilities of research surveillance, expectations of reciprocity, or censorship of research findings.

As two medical anthropologists who work on reproductive health care in the Middle East, we have experienced most of these struggles in our own studies. For example, Marcia C. Inhorn, who has researched infertility and assisted reproductive technologies in the Arab world over thirty years, has experienced all of these obstacles, to varying degrees. Beginning her project in Egypt in the late 1980s, she was able to situate her study with relative ease in an Alexandrian public maternity hospital. There, she conducted more than a year's worth of research with little intervention. However, the political climate in Egypt had shifted by the mid-1990s, when she returned to study the introduction of in vitro fertilization (IVF) in the country. Increasing repression of the Islamic movement under the authoritarian regime of Hosni Mubarak meant that research questions surrounding religion were now quite "sensitive," as she was told by Egypt's Binational Fulbright Commission. By the early 2000s, the Fulbright Commission itself was under new

regimes of surveillance by the *mukhabarrat*, or Egyptian security forces. Inhorn's proposal to study male infertility and intracytoplasmic sperm injection (ICSI), an assisted reproductive technology to overcome infertility, was repeatedly denied, with requests by reviewers to eliminate any mention of the terms "fertility," "infertility," "men," "masculinity," or "manhood"—in other words, the very subject of the study itself. Deeming the situation hopeless, Inhorn moved her project to Lebanon in 2003—a country that was relatively eager to embrace researchers following twenty-five years of civil war and military occupation. However, as in Egypt, Lebanon is no longer such a "research-receptive" environment. Indeed, in any given Middle Eastern country, the research enterprise can vary significantly across time and place in response to political exigencies, regime change, and heightened security measures.

Such forces are clearly at play in Turkey, where Başak Can is a professor of medical anthropology and writes courageously in this essay about the precarities of contemporary medical anthropological research in her country. She provides a detailed account of the many ways the Turkish government now attempts to regulate researchers' access, activities, data collection, and dissemination. In the so-called New Turkey, the nature of regulation has shifted from ethical to political: research projects, questions, and sites have been curtailed by the government—sometimes inexplicably and on arbitrary grounds. Pointing to the opacity and capriciousness of the government's administrative offices, Can's essay provokes important questions about the possibilities and limits of scholarly production under an increasingly authoritarian regime.

Many of the experiences of Can's students described in this essay resonate with those of the first author, Hatice Nilay Erten, as she attempted to secure a research permit in 2014. As a citizen of Turkey educated in the West, Erten returned to Istanbul to conduct dissertation research on the politics of reproduction amid Turkey's new pro-natalist discourse of "at least three children." In order to understand how pro-natalist policies were being implemented, reworked, and negotiated, Erten needed to secure access in public and private maternity hospitals. During her preliminary research, the doctors Erten interviewed informed her that research permission would involve two steps: first, she would need to secure an ethics committee approval from a local university, then she would need permission from the administrative

doctors (*başhekim*, the chief of the hospital) at the hospitals. She received the local ethics committee approval in the fall of 2014. She then visited a private hospital and a public maternity hospital to introduce herself to the chiefs and present her project. While both chiefs were genuinely supportive of the project, the public hospital chief stipulated that the research could only be conducted if the administrative committee under the Provincial Directorate of Health granted research permission as well.

Similar to the stories narrated by Can, Erten prepared her documents, carefully worded her research proposal and interview schedule, and visited the administrative office to obtain permission. She met with a sympathetic official who expressed interest in the project and promised to help in navigating the bureaucratic system. Two weeks later, Erten received an email informing her that her project at the public maternity hospital had been granted—a welcome turn of events, especially in the aftermath of the Gezi Park protests. However, Erten's elation soon turned to disappointment when her research permit was revoked within a week.

The same sympathetic official called her to explain, "There is this one question . . . [which] can be taken as if you are opposing our prime minister. Now, I know that you were abroad in the last couple of years and you probably were not aware that question could be misunderstood, right?" When queried by Erten, the official explained, "You say that you will be asking women if they have ever heard of the phrase 'at least three children.' You cannot ask this question." She told Erten that the committee would reconsider her application if the objectionable question was removed. Erten complied, and after a long wait, the research permit was reissued. As for the question itself, Erten never asked it, but every single woman in her study volunteered the phrase "at least three children," revealing the power of the Turkish state's new pro-natalist motto.

Stories such as this and those recounted in Can's essay demonstrate how very precarious research access has become in the New Turkey. Had the sympathetic official not framed Erten as a "naive" doctoral student who was not aware of the seriousness of the question, or had this application process taken place two years later under the state of emergency following the failed coup attempt, the dissertation research would likely have been disapproved. The suspension of the research permit based on a question seen as "opposing" Turkey's leader speaks to the fact that

pro-government sensibilities now inform—and constrain—the research process in significant ways. In this context, any researcher, project, or question that is in any way critical of government policy can be denied outright.

Unfortunately, such constraints on research are now found in a growing number of global settings. The rise of authoritarianism, alt-right populism, and nativist politics may affect whether research is deemed permissible, acceptable, or fundable. Andaya and Mishtal (2016, 2), for instance, note that "abortion has moved out of the anthropological gaze," perhaps as a result of researchers' concerns regarding funding opportunities and research permissions. Last year, multiple media outlets reported that US Health and Human Services staffers categorized "vulnerable," "diversity," and "entitlement" as "words to avoid" when making budget requests to Congress (Cohen 2018). Given the Trump administration's efforts to reduce government spending and make major cuts to public health and scientific funding, staffers at the HHS encouraged those at the Centers for Disease Control and other agencies to refrain from using these "trigger" words (Engber 2017).

What kind of scholarship are we able to produce, then, if the questions we ask and the data we seek are subjected to the sensitivities of governments? These are the important issues being raised in Can's essay. Indeed, it serves as a grim reminder about how medical anthropological research can be egregiously affected by authoritarianism, not only in the New Turkey but in many other societies around the globe.

## REFERENCES CITED

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