

historical methodology. The author takes us to various archives to collect a variety of sources. Official documents, old newspapers, books written in vernacular languages (especially in Urdu) and political pamphlets are used to reconstruct an enthusiastic narrative. In this sense, it is an honest history of the changing contours of politics in Bihar.

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V. Sujatha, *Sociology of Health and Medicine: New Perspectives*, New Delhi: Oxford University Press, 2014, pp. 332, ₹995

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It is increasingly being acknowledged by academics, researchers and, to some extent, policy makers that the fields of health, illness and medicine need multidisciplinary engagement. But what is the nature and mode of such engagement? What are the specific contributions of social sciences to the understanding and practice of health and medicine? Has there been enough theoretical and empirical engagement with such contributions? What could conventional health disciplines (biomedicine, nursing, public health) learn from a social science lens to strengthen the policies and practices of health and medicine? These questions have generated an internal as well as an external dialogue within and between disciplines respectively. The book on *Sociology of Health and Medicine: New Perspectives* is located in this intellectual juncture. Drawing upon existing research, the book seeks to unpack the potential terrain of the sub-field of sociology of health and medicine arguing why sociology in general and sociology in India in particular needs to have a robust engagement with the field of medical sciences that include not only biomedicine but also other systems of medicine. By doing so, the author argues that sociology needs to go beyond its own disciplinary boundary to include contributions of other social science disciplines, more specifically Anthropology and History.

The book is organised into six chapters. The first half of the book (Chapters 1–3) delineates the subject matter, scope and themes that could qualify for social studies of health and medicine based on sociological, anthropological and historical writings. Drawing on these general concerns, the second half speaks to specific issues in regional contexts situating the emergence of the institutions of state and market in health and health care in India. Chapter 1 offers ‘some glimpses and insights’ (p. 1) into the subject matter of the sociology of health and medicine and outlines four broad themes including health and disease, medicine: medical care, institutions and professions, private and public sector in health: general trends. Chapter 2 draws on sociological theories grouped under functionalism, Marxism, feminism and pluralism to explain the relation between ‘health on the one hand and social relationships, social classes and inequalities on

the other' (p. 107) apart from looking at the role of medicine as a social institution. This chapter also discusses at length why sociology of health and medicine needs to engage not with *the* medicine but plural systems of medicine. Incorporating a medical pluralism lens to the field of sociology of health and medicine, the author argues, is one of the aims of the book and hence is a recurrent theme in all the chapters. Chapter 3 moves to a discussion on curing, healing and culture. Largely drawing from anthropological writings, it talks about meanings of treatment, cure and healing as patients and family members traverse through multiple therapies, negotiate with cultural norms and embody institutions of power. The chapter further discusses debates over efficacy from the perspectives of systems of medicine, medical practices and patients.

Drawing on the writings of historians of medicine, Chapter 4 discusses critical events in the Indian sub-continent during the last two centuries to situate the increased role of the state in issues of health and medicine including relative patronage of different systems of medicine, regulation of medical profession and the pharmaceutical industry. The discussion on the emergence of the institutions of power including both the state and non-state (market) is carried forward in Chapters 5 and 6. While Chapter 5 discusses the role of the post-colonial state in India with reference to broader themes of measurement of the health status of the population, health-care delivery and to some extent health policies, Chapter 6 unpacks the recent trends in the growth of the 'market'—the mushrooming private sector in health and increasing commercialisation of health.

The book is certainly a valuable addition to the increasing literature in the field of sociology of health and illness/medical anthropology. However, readers could have benefitted much more if the book had included critically relevant literature in this field both at the global level and specifically in India. The author does acknowledge that 'there are more omissions in the book than commissions and it would be too long to list the omissions' (p. 285). Yet, considering the fact that the field of medical sociology/anthropology has generated a huge body of research in the Indian context in the last couple of decades, inclusion of this body of scholarship could have strengthened the book. The author rightly argues that sociology in its engagement with health and medicine needs to go beyond its disciplinary boundary, however presentation of the material in the book seem to be constantly reinforcing the spurious and untenable distinctions between sociology and anthropology. In order for the readers to appreciate the contributions of sociology/anthropology to the field of health and medicine, the book could be read along with the contributions of the recent multidisciplinary field of health policy and systems research (HPSR). This field has a more explicit engagement in reinvigorating sociological theories and concepts in addressing critical and practical concerns in the field of health systems policies and practices.

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