more generally in the Mediterranean, a practice that extends spatially to early-modern Europe and the Ottoman east and temporally from the nineteenth to fifteenth centuries and possibly (or more interestingly, probably not) to the navies of ancient times.

The chapter on contemporary slavery covers twelve cases of abuse in eleven pages. It thus reads more like a human rights plea than a historical analysis and not everyone may agree that the label of “slavery” is appropriate for all of these situations e.g., bonded immigrant labor and child soldiers. But here the idea of provoking classroom discussions works very well. If one recognizes Gordon’s general pedagogical purpose, the same can be said for the book as a whole.

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In a carefully considered and imaginatively organized work, Melissa Graboyes addresses the ethical questions that arise from medical research conducted in contexts of deep economic and power inequalities. East Africa has a long history of medical research and of dubious ethical standards dating back to the nineteenth century. Graboyes, however, and with good reason, starts her book with the East African Medical Survey that began in 1949, after the Nuremberg trials had established the necessity of informed consent and ethical research. The Experiment Must Continue explores the ethical dilemmas that face all medical researchers as they design their protocol, obtain consent from subjects, conduct the research, and terminate their projects. It also effectively presents the varied responses of East Africans to their role as research subjects as well as the diverse attitudes and behaviors of researchers, both during colonialism and since.

In order to achieve this, Graboyes pairs a historical narrative with a contemporary one for each aspect of research ethics she explores. This works well to set up the ethical dilemmas and responses of East African research subjects at different moments in a research project and to highlight the continuities in ethical challenges as well as improvements that have been achieved. The narratives, along with her careful discussion of other case studies in the substantive chapters, work to ground her historical analysis of problematic situations, such as the overuse of particular communities as research populations. Framing her book is the case of Gonja, a town in Tanzania that has become, in the minds of researchers, emblematic of an almost atavistic—and certainly irrational—reaction against medical research. But the people of Gonja have been subject to repeated, extensive and intrusive use in medical research since 1952. Each new round of this barrage of experimentation and measurement thus builds on what Graboyes terms the “residue” of previous ones, accentuating moments of tension around the drawing of blood samples or the entry into homes for spraying insecticides. Cases such as this and the notion of residue highlight the critical role that historical awareness needs to play in any consideration of the ethical issues of medical research in particular communities.
The particularity of ethical considerations—far beyond the bureaucratic world of institutional review boards—also emerges clearly in the discussion of therapeutic misconception and the incommensurability of understandings of medical research and experimentation. Graboyes discusses, for example, how very different ideas held by scientists and lay people in East Africa shaped blood drawing into part of a transaction that required reciprocation. For those concerned with the question of informed consent, her discussion of language and the difficulty of translating concepts such as “experimental drug” shows the complexities involved in ensuring that both parties understand it in the same way. That this is the case even in a language like Kiswahili, which has been the focus of substantial efforts at language building, just serves to emphasize the potential for misunderstandings.

*The Experiment Must Continue* is also effective at unpacking the categories of researcher and subject. During the colonial period some researchers called on the colonial state to punish East Africans who refused to participate in experiments, but others insisted on offering drugs and treatments to communities even against the direct orders of their superiors. More recently, some researchers have invested significant time and money in ensuring that informed consent really is both informed and consent, while others take short cuts in translation that inhibit clear communication. Similarly, those who participate in research are themselves complex individuals embedded in social networks whose responses may change across the research period and are conditioned by their contexts. Thus, while anthropological explorations of the differing meanings of blood may be useful, ultimately people’s responses cannot be separated from the economic, political, and historical contexts in which research is conducted.

This is a book that should be of interest to a wide range of audiences, from scholars of colonialism to historians and anthropologists of medicine and science. Her work should be of particular interest to those currently engaged in or contemplating medical research precisely because, as Graboyes so convincingly shows, the residue of East Africans’ past experiences shapes their responses to new projects. She writes in an engaging and accessible style, including clear explanations of diseases like filiarisis that should also make this a popular book for undergraduates.

*RHIANNON STEPHENS*

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In simplest terms, this book reconstructs an intricate web of claims to land and belonging, to futures and pasts around the Mutirikwi River near Masvingo town in Zimbabwe from the early nineteenth century to 2013. Joost Fontein is interested in the “political materialities of land and water” (p. 309). Here, older mixes of human and natural