Who alone can ‘see’? Christian humanitarianism, aspect-perception and political critique

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Abstract
This article offers a critique of Christian humanitarianism in Zambia. But it does so by engaging with the arguments of anthropologists who have begun to question the status of political critique within the discipline. These anthropologists argue that critique often undermines ethnographic understanding because it problematically positions the anthropologist as an actor who is able to ‘uncover’ political realities that remain invisible to others. In this article, I take these concerns seriously and attempt to reconsider the practice of critique by drawing on an ethnographic description of the work of Christian medical missionaries in Zambia. Focusing on how these missionaries encouraged one another to ‘see’ their Zambian patients as ‘Christ-like’ and ‘faithful’ in moments of suffering, I argue that these practices of ‘seeing’ and ‘showing’ resemble certain forms of political critique. Rather than an exercise in ‘uncovering’ hidden realities, critique can also be understood as an act of ‘aspect-showing’ – the aim of which is to encourage others to ‘see’ the same things in a different light. The critique of Christian humanitarianism I offer here is therefore itself an act of aspect-showing that partially resembles that which missionaries themselves engaged in.

Keywords
Christianity, critique, humanitarianism, politics, Zambia

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In recent years, political critique has been called into question by a range of anthropologists. Some have been influenced by Bruno Latour’s (2004) famous argument that critique has ‘run out of steam’, which continues to have a significant influence throughout the social sciences and humanities. But many have also been influenced by a disciplinary trend that, in broad terms, emphasises the importance of foregrounding ethnographic concepts in anthropological analysis and calls for us to ‘take seriously’ the people we work with. These anthropologists are often suspicious of forms of analysis in which anthropological claims about reality appear to be superordinate to those of our interlocutors. Consequently, a number of these anthropologists have begun to question the status of political critique within the discipline because it often seems to violate these principles of anthropological analysis. The arguments here are diverse. For instance, anthropologists of development and humanitarianism have argued that a certain kind of ‘critical politicizing impulse’ (Chua, 2016) has begun to prevent us from understanding the ethnographic realities and dilemmas of aid work – as well as closing down the possibility that we might have something to learn from development professionals and aid workers (Green, 2009, 2012; Yarrow and Venkatesan, 2012; cf. Abramowitz and Panter-Brick, 2015; Gilbert, 2016). Other anthropologists have examined the analytical concepts that are central to critique, arguing that when we identify a wide variety of social situations, institutions and processes as ‘political’, we risk obscuring more than we are illuminating ethnographically – particularly when our interlocutors might not recognise or accept that they are engaged in ‘politics’ in the first place (Candea, 2011; cf. Spencer, 1997, 2007). At the same time, recent arguments against critique have also been made by anthropologists associated with the ‘ontological turn’, who claim that political critique tends to reinforce our prior analytical assumptions and concepts rather than allowing our ethnographic material to ‘recursively’ transform them (Holbraad, 2017; Holbraad and Pedersen, 2017).

Although they do so in different ways, these anthropologists all articulate a similar concern: namely, that when anthropologists engage in political critique they often problematically position themselves as actors who can ‘see’ and ‘uncover’ political realities that are not visible to others – a move that ultimately undermines the anthropological task of ethnographic description and understanding.¹

In this article, I consider how anthropologists who take these concerns seriously – but who nevertheless remain committed to engaging in political critique – might respond to them. One of the difficulties here is that proponents of political critique are unlikely to persuade anthropologists who have doubts of the kind I have described above. This can be seen if we consider a recent essay by Didier Fassin (2017), in which he calls for anthropologists to reaffirm the value and potential of political critique today. In this wide-ranging and stimulating essay, Fassin draws on the work of sociologists, anthropologists, and critical theorists – including Edward Said, Talal Asad, and Judith Butler – and uses a range of ethnographic examples from his research on policing in France, HIV/AIDS in South Africa, and
trauma among Palestinians. Fassin argues that anthropologists are uniquely positioned to engage in political critique for several reasons, one of which is that ethnographic research enables us to ‘uncover facts that remain invisible or inexpressible’ to the people we work with (2017: 22–3; see also Fassin and Harcourt, 2019). But it is precisely this kind of description of political critique that raises concerns for many anthropologists. Indeed, the idea that anthropologists can ‘uncover facts that remain invisible or inexpressible’ calls to mind Bruno Latour’s (2004: 239) memorable description of the academic who engages in critique as a kind of ‘never sleeping critic… [who] alone can see’.

In this article, I try to navigate a path through these debates. I take seriously the concerns of recent critics of critique – particularly the anxiety that anthropologists who engage in political critique are liable to position themselves as actors ‘who alone can see’. However, in this article, I demonstrate that a commitment to ethnographic description and understanding can provide us with the resources to reconsider what the practice of political critique itself involves. Ethnographically, this article describes the work of Christian medical missionaries from the United States who arrived to volunteer at a rural hospital in Zambia – precisely the kind of actors who have tended to incite the critical impulses of anthropologists. Indeed, anthropologists have often been quick to identify the many things that humanitarians are unable to ‘see’ – including, in particular, the ‘political’ nature and effects of their actions and interventions – and which, by implication, the anthropologist can ‘see’ clearly. By contrast, in this article I adopt a different approach by describing how these American medical missionaries were able to ‘see’ a great number of things that I could not. In particular, I describe how they were able to ‘see’ their Zambian patients as ‘faithful’ and ‘Christ-like’ in moments of hardship and suffering. In describing their capacity to see these things, I draw on the concept of ‘aspect-perception’ that we find in the later work of Wittgenstein (2001 [1953]), but which has since been developed by a number of philosophers and political theorists (e.g. Cavell, 1999; Havercroft and Owen, 2016; Mulhall, 1990). I describe how missionaries who had ‘seen’ such things at the hospital often tried to ‘show’ these aspects of hospital life to one another during conversations, prayers and sermons. My aim here is to take seriously what these missionaries were doing in these moments of aspect-showing, rather than focusing entirely on the content of their claims (cf. Cepek, 2016). I then use this ethnographic description to reflect on what kinds of ‘seeing’ and ‘showing’ are involved when anthropologists engage in political critique. My suggestion is that the Christian humanitarians I encountered in Zambia engaged in acts of aspect-showing that offer us a way of thinking differently about political critique. This is because critique is not always an exercise in ‘unmasking’ hidden or unseen realities. It can also be understood as a kind of aspect-showing, the aim of which is to encourage others to ‘see’ the same things in a different light. As I argue in what follows, anthropologists who engage in political critique are often performing acts of aspect-showing, rather than claiming to possess a superior understanding of reality.
The first part of this article describes the work of Christian medical humanitarians in rural Zambia, focusing on how these volunteers engaged in practices of ‘seeing’ and ‘showing’. In the second part of the article, I engage in more detail with the particular arguments that have been made by anthropological critics of critique. In the final section of the article, I demonstrate what critique as aspect-showing might look like by offering a critique of Christian medical humanitarianism in Zambia – one that is intended to be an act of aspect-showing.

**Christian medical humanitarianism in Zambia**

In the past thirty years, large numbers of American Christians have embarked on ‘short-term’ mission trips to different parts of the world, becoming ‘an enormous – and somewhat controversial – movement’ (Howell, 2012: 44). According to estimates, there are around 1.6 million Americans who engage in short-term mission trips every year (Wuthnow and Offutt, 2008) and Protestant missionary organisations spend over $2 billion annually on overseas mission projects (Hudson Institute, 2016: 37). These mission trips are increasingly undertaken by medical students and have begun to intersect with the rise of medical programmes for students to gain experience of ‘global health’ (Wendland, 2012; see also Sullivan, 2016). But many medical missionaries are health care professionals, already established in their careers, who make time to volunteer in other countries. Although these medical missionaries are often overlooked in recent anthropological work, they can be located within what Andrew Lakoff calls the regime of ‘humanitarian biomedicine’, which aims to address the enduring medical needs of people in parts of the world ‘where public health infrastructure at the nation-state level is in poor condition or non-existent’ (Lakoff, 2010: 60).

In rural southern Zambia, public health infrastructure is not non-existent, but it is in poor condition. Consequently, a large number of short-term medical missionaries have been arriving in recent years to provide health care to Zambian citizens. Between 2014 and 2016, more than 25 short-term missionaries arrived to volunteer at a small hospital that I call Matamba Mission Hospital. Built as a small dispensary in 1958 by several American Methodists, by 2014 the hospital had a maternity ward, an X-ray machine, a laboratory, 130 beds for in-patients, and the only operating room in the area for a catchment population of over 300,000 people. During the colonial period, missionary medical care did not typically extend ‘beyond a particular locality’ (Prince, 2014: 5), but many of these missionary hospitals have had an enduring presence within the landscape of health care in southern Africa. Missionary biomedicine therefore pre-dates and intersects with the more recent array of global health initiatives and non-governmental organisation projects that have proliferated during the past three decades (Pfeiffer and Chapman, 2010).

In late 2014, I began conducting fieldwork at Matamba Mission Hospital, while living with a Zambian family a few miles away from the hospital. I spent time with patients and their family members, Zambian staff members at the hospital, and
visiting short-term medical missionaries, almost all of whom were from the United States. I had many conversations with these missionaries, followed them as they worked in different sections of the hospital, and conducted detailed extended interviews with them. These medical missionaries were from a range of backgrounds and had different levels of clinical experience. They often decided to stay in Zambia for different lengths of time – from two weeks to six months. Some were veteran medical missionaries who had been on hundreds of short-term mission trips, while others had never before left the United States.

In the next section of this article, I focus on two different events involving two of these missionaries – a Christmas Eve celebration and a traffic accident. I focus here on what these missionaries were able to ‘see’ in these events in order to rectify the emphasis, in much recent anthropological work, on what humanitarians fail to see. Anthropologists of medical humanitarianism have often been concerned with the medical and humanitarian ‘gaze’, drawing on Foucault’s (1973) work on the biomedical gaze in order to describe how medical professionals learn to ‘see past the individual patient’s subjectivity, specificity, cultural and social embeddedness’ (Wendland, 2010: 7). Indeed, the concept of ‘the gaze’ has become crucial to ‘how scholars think through (and debate) the politics of [humanitarian] encounters’ (Sullivan, 2016: 151). One of the problems here is that what humanitarians ‘see’ is not described positively, but negatively – in terms of what is absent or lacking in their vision and gaze. For instance, anthropologists have considered how humanitarians tend to adopt ‘superficial’ and ‘decontextualized’ perspectives (Feldman and Ticktin, 2010: 15); how they ‘erase’ from view the pre-existing networks of care within which people are embedded (Bornstein, 2005, 2012; Malkki, 2015); and how they foreground the biological condition of individual bodies rather than considering the ‘biographical’ lives of persons (Fassin, 2012: 254). My suggestion here – in line with some of the arguments outlined above (e.g. Yarrow and Venkatesan, 2012) – is that these descriptions can sometimes prevent us from learning anything from these humanitarians. In the next section, I adopt a different approach by asking: what were these Christian medical humanitarians able to see that I could not?

Seeing patients as Christ-like

At midnight on Christmas Eve in 2014, the Zambian leaders of several local churches organised a service for patients at Matamba Mission Hospital. The ceremony involved representatives and pastors from several of the town’s Pentecostal churches, the Seventh-day Adventist Church, and the Catholic Church. These church leaders directed songs and prayers in different sections of the hospital, including the out-patient department (OPD), the maternity ward, and the children’s ward. The group in which I found myself was directed towards the hospital’s maternity ward. As we began to crowd slowly into the building we were given candles to hold as we greeted the mothers. All of these women had given birth recently and the pastor from one of the Pentecostal churches – a man called Daniel
– gave the women gifts of *chitenge* fabric, biscuits, and bottled drinks. The only American missionary present in the maternity ward on this evening was a woman called Hannah, who specialised in family medicine.

Daniel led the group in singing a hymn before asking Hannah if she would say a prayer. Hannah agreed to pray and, as she did so, Daniel translated her words into Chitonga, the language spoken by the majority of patients. Hannah began her prayer by thanking the Lord for bringing us together and she described the newly born children in the maternity ward as ‘a gift’ on this Christmas Eve. Hannah became visibly emotional as she continued her prayer:

Seeing these babies, Lord, it reminds all of us here that when you sent your only son to us, to save us, he was born of a woman and he looked just like these babies here. He was vulnerable and he was tiny and he needed to be looked after and cared for. He was just like these babies, but he was also your son. If Jesus was born again today, he would be just like one of these tiny babies.

Hannah held her tears back as she finished her prayer and the assembled crowd said ‘Amen’. Daniel expressed his appreciation and added some words of his own to conclude the service. The rest of us exchanged a few words with the mothers and when we eventually filed out of the maternity ward into the warm night air, the sound of louder and more energetic prayers echoed around us.

It is not surprising that Hannah chose to reflect on the image of the birth of Christ. Not only was this a Christmas Eve ceremony, but it was also relatively common for missionaries to stress the importance of seeing other people as Christ-like. Indeed, the idea that other people should be regarded as Christ-like is one way of expressing the moral obligation to care for others. We find this image in the gospel of Matthew (25: 44–5) when Jesus indicts those who call themselves Christians for failing to treat the poor and the needy as they would have treated him. This passage is central to the idea that ‘the individual’s relation to God is determined...at the point of his relation to the neighbour’ (Critchley, 2007: 51; see also Løgstrup, 1997). For many American missionaries at Matamba Mission Hospital, this Christian moral injunction also offered a language for describing their understanding of medical competence and care (see Wintrup, 2019).

But Hannah was also expressing a slightly different thought: that it is in moments of existential vulnerability that people reveal their embodied resemblance to Christ. In conversations with Hannah, she described many moments in which she saw her patients as ‘Christ-like’ in this embodied sense – particularly in their moments of suffering and vulnerability. Like several other missionaries, Hannah described how she was ‘reminded’ of Christ’s humanity and vulnerability during clinical encounters with Zambian patients. Hannah was not simply calling to mind certain visual images of the suffering Christ. Rather, in these moments she could ‘see’ these patients as Christ-like. These were moments of recognition in which the person she was treating came to resemble or exemplify the embodied vulnerability of Christ. This idea also found expression when Hannah once remarked that, if
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Christ were to return, then he would surely be found in a place like this – a small and neglected hospital in a rural part of Zambia.

But what does it mean to ‘see’ somebody as Christ-like? It is interesting to note that Christians have not always ‘seen’ Christ in the bodies of the suffering and vulnerable. The theologian Michael Banner (2014: 85) has described how the passion of Christ was often depicted as a ‘display of power’ before the medieval period. It was only during and after the medieval period that Christ came to be represented in an increasingly vulnerable and human form. In Banner’s view, this made it possible for Christians to engage in the act of ‘witnessing and entering into the pain of Christ’ as a way of inciting a range of sentiments: ‘compunction, sorrow, desire, compassion, a desire to imitate…[and a] resolution to follow’ (Banner, 2014: 89). The newly emphasised human dimension of Christ’s suffering made it possible to enter into the pain of Christ through the suffering of one’s fellow human beings. This required ‘seeing’ both the humanity of Christ and the Christ-like character of other human beings in a new way. In Banner’s analysis, this ‘deep appropriation of Christ’s suffering in Christian life…must be distinguished from mere spectatorship’ (2014: 83). But what is the difference between ‘deep appropriation’ and ‘mere spectatorship’?

One way of thinking about this difference is to consider two different types of ‘seeing’ that are described by Wittgenstein in his later work. There is a difference, Wittgenstein argued, between ‘seeing’ and ‘seeing as’. Wittgenstein’s notion of ‘seeing as’ emerges from his famous discussion of Jastrow’s duck-rabbit image, which can be seen as either a duck or a rabbit ([1953] 2001: 166). Wittgenstein was interested in what happens when the image changes for the viewer and – in a flash – they can ‘see’ either the duck or the rabbit for the first time. Although he sometimes referred to this as the ‘dawning’ of an aspect, Wittgenstein was not only interested in what happens when an individual looks at a visual image. He thought the notion of aspect-perception could illuminate many different forms of ‘seeing’, including those that take place in the midst of social life – finding humour in a remark or having an ear for a certain type of music. It is also possible to think about aspect-perception as something ‘continuous’, rather than as a discreet moment in which a new aspect ‘dawns’ on us for the first time (on this see Mulhall, 1990). But what has changed when somebody can ‘see as’? One of Wittgenstein’s answers is that one’s ‘attitude’ has changed (2001 [1953]: 178). Scholars of Wittgenstein have offered further reflections on this question. Stanley Cavell (1999: 378) argues that ‘seeing as’ involves putting things into new relations with one another. And Havercroft and Owen add to this by suggesting that a change in ‘attitude’ is not simply ‘an inner mental process’, but a mode of relating to something that becomes ‘manifest in one’s practical engagement’ (Havercroft and Owen, 2016: 742). This might be another way of describing what Banner calls ‘deep appropriation’.

In the example described above – and this is a point that will become important in what follows – I was ‘aspect-blind’ to the resemblance of these children to Christ. It did not occur to me to ‘see’ the resemblance of these children to the
newly born Christ. However, as Hannah delivered her prayer and described the vulnerability of these children, I experienced the ‘dawning’ of this aspect and could ‘see’ these children as Christ-like. This did not subsequently become a part of my practical engagement with the world or transform my continuous ‘aspect-perception’. (In other words, I did not become a Christian.) But Hannah’s prayer changed my ‘attitude’ within that moment.

To further understand Hannah’s prayer, I think it is important to point out that Hannah was not necessarily (or not only) making an ontological claim (i.e. that Christ was at that moment present within these children). This is not to say that these missionaries did not regularly make ontological claims or identify non-human agency at work (cf. Scherz, 2018). But in this particular moment Hannah was encouraging us to engage in a form of aspect-seeing – she was inviting us to ‘see as’. This is something we can consider in a further example.

**Seeing patients as faithful**

On a busy morning towards the end of September 2015, I was with an American missionary called Adam, a final year medical student from Texas who was visiting Zambia as part of his elective placement, when he received a phone call to say that there had been a road traffic accident with several casualties. After serious road accidents, injured people were usually brought to the hospital by those who first arrived at the scene or who lived nearby – a kind of improvised ambulance service. After walking with Adam to the hospital’s entrance, we found Zambian staff members already preparing for the arrival of the injured passengers. There was a tense atmosphere and many hospital patients and visitors had also joined the gathering as news of the accident began to circulate around the hospital.

After around ten minutes or so, people noticed a vehicle in the distance and, as it got closer, we could see that it was towing a cattle trailer containing the passengers who had been injured in the crash. There were groundnut shells and pieces of straw all over the floor of the trailer and around five people inside, all of whom were lying down. Nearest to us, as the vehicle stopped, was a girl of around six or seven years old who sat upright and looked at the assembled crowd. The left side of her face was badly bruised and her eye was swollen. The driver of the car explained to several of us in the crowd that he did not think anyone was seriously injured, but he was worried about this girl because she was stuck underneath the car when they arrived and they had needed to lift the vehicle in order to free her.

Adam and several other staff members focused their attention on the girl – whose name was Mutinta – and they took her to one of the examination rooms. Adam was concerned that Mutinta might have fractured her skull in the accident. However, after being given an X-ray, it was found that she had only fractured her collarbone. Mutinta was taken to the children’s ward and she was reunited with her mother later on in the day. During his encounter with Mutinta, Adam only exchanged a few words with her. It was the Zambian staff members on duty who asked her direct questions about where she was feeling pain and what had
happened during the accident. Nevertheless, Adam felt strongly that he had learned a lot about Mutinta in this encounter. As these events unfolded, Mutinta was quiet and composed. Although she must have suffered considerably during the accident and its aftermath, she did not cry or complain.

At the end of the day, I discussed the accident with Adam. Like other staff members and American missionaries who had been present, he was shocked by the event. But he was also keen to talk about Mutinta and he described how her composure in the face of suffering was a sign of her ‘faithfulness’. Adam felt that he had been in the presence of somebody – even though she was a young child – who had responded to suffering in a deeply ‘faithful’ way.

Several days later, Adam delivered a sermon at the hospital’s small chapel in which he began by saying that he was going to tell us a story about a person whose faith had been put to the test: ‘She was a person who was able to endure such hardships because she believed in God and she trusted him and had faith that her suffering wasn’t in vain.’ This person had recently suffered deeply in the form of a painful accident, Adam told us, before describing the car accident. For Adam, Mutinta exemplified what it meant to endure suffering faithfully. We could all learn something, he told us, from her example and her ability to demonstrate ‘trust’ in the face of this suffering. Adam explained that he would tell people back in the United States about what he had seen and learned in Zambia from his encounter with Mutinta.

Adam’s sermon was an attempt to ‘show’ Mutinta’s ‘faithfulness’ to those of us in the chapel – many of whom had been present at the hospital at the time. Missionaries often attempted to show one another such things. When missionaries returned to their compound after working at the hospital, they shared such stories and told each other about what they had ‘seen’ in the course of their work. But they did not only ‘show’ one another, but also family members, friends and fellow church members back in the United States – with whom they communicated extensively during their time in Zambia (see Wintrup, 2019). Indeed, many missionaries described feeling an obligation to tell people at home what they had ‘seen’ in Zambia. Although missionaries engaged in these forms of ‘showing’ in a range of contexts – including during prayers, sermons and conversations – we can think of all of these instances as acts of ‘showing’.

For instance, Adam was encouraging those of us present in the chapel that morning to ‘see’ what had taken place in a certain light so that we might adopt a certain ‘attitude’ towards Mutinta’s conduct. Similarly, Hannah was encouraging those of us in the maternity ward to ‘see’ the children in a certain way. Adam and Hannah were not only making propositional claims of the kind, ‘Mutinta is a faithful person’ or ‘these children are Christ-like’. In both cases, Adam and Hannah were also performing an act that we might call ‘aspect-showing’. This is a term that has been suggested by the political theorist Zeev Emmerich, who points out that, if we can discuss the notion of ‘seeing-aspects’, then it is also possible to consider acts of aspect-showing. This enables us to recognise that sometimes
‘what seems to be a proposition stating a fact is a complex performance of a certain kind’ (Emmerich, 2011: 61).

In both of these examples, Hannah and Adam were encouraging those of us present to adopt a different attitude to things we were already able to see. They were not revealing the hidden presence of unseen actors or offering us new ‘facts’ about what was happening. Hannah’s prayer made it possible for me to ‘see’ the children in the maternity ward as Christ-like. When listening to Adam’s sermon I was also able to ‘see’ Mutinta’s conduct as ‘faithful’. Although I was not spontaneously ‘alive’ to these aspects at the time, I was still able to engage in this form of aspect-seeing, even if only fleetingly. What is also important about these examples, is that engaging in these forms of aspect-seeing did not simultaneously prevent me from seeing what I was able to see before – including what I was able to ‘see’ as an anthropologist. To engage in aspect-seeing does not necessarily make it impossible to see other aspects of the situation; rather, it can add an aspect. It is not the case that if one can ‘see’ Mutinta’s conduct as ‘faithful’ then one cannot, at the same time, understand other aspects of her behaviour. For instance, in southern Zambia (as elsewhere in the region) children are taught and encouraged to be able to overcome pain without expressing discomfort (see Colson, 1971). Julie Livingston (2012) has written memorably about strategies for enduring pain among people in Botswana:

Women learned during labour, and children during the scrapes and accidents of childhood, that becoming overwrought would only intensify pain… This is a cultivated disposition, one that is respected as much for its rationality as for its mark of self-discipline and self-control. (Livingston, 2012: 144)

I found the same emphasis on enduring pain among the people I lived and spent time with in southern Zambia and it is possible to understand Mutinta’s endurance of suffering in this context – alongside a range of other explanations including, for instance, that she might have been in shock. But it is entirely possible to be able to ‘see’ all of these aspects of her behaviour at once. It is possible to culturally contextualise somebody’s behaviour and simultaneously regard it as ‘faithful’. This is one reason why it is possible to be an anthropologist and a Christian (cf. Howell, 2007). The act of inviting and encouraging others to engage in practices of ‘seeing as’ is central to many forms of Christianity – indeed, the theologian Sarah Coakley (2002: 140) has written that ‘practice in seeing the world differently’ is central to all Christian life. But aspect-seeing and showing – as I have described it here – is not peculiar to Christianity. It can also help us to think about recent debates about political critique in anthropology.

**Anthropological critics of critique**

As I pointed out in the first part of this article, a number of anthropologists have expressed doubts about political critique, arguing that it can undermine the task of
ethnographic description and understanding because it is often premised on the anthropologist’s claim to possess a superior understanding of reality, thus positioning the claims of our interlocutors as subordinate to our own. However, before addressing these criticisms, it is worth considering in greater detail how anthropologists have articulated this idea in recent years.

First of all, some anthropologists have suggested that only certain forms of critique inhibit our capacities of ethnographic description and understanding. For instance, several anthropologists of humanitarianism have argued that the impulse to engage in political critique can make it difficult to understand the dilemmas and experiences that humanitarian workers actually encounter. Sharon Abramowitz and Catherine Panter-Brick point out that the kind of political critique that anthropologists produce often seems to have ‘little understanding of the contingent conditions that surround humanitarian projects and . . . [these anthropologists] overstate the ability of humanitarians to forecast future developments and foresee unintended consequences’ (2015: 8; see also Gilbert, 2016). For these anthropologists, the problem is with particular instances of political critique that, to some extent, simplify ethnographic realities. These anthropologists are not necessarily objecting to the practice of critique itself, but to certain forms of it. And the argument I am making here – and the critique I offer in what follows – seeks to avoid this problem by foregrounding the ethnographic realities and perceptions of medical missionaries themselves.

By contrast, other anthropologists have suggested that most forms of critique stifle our efforts at ethnographic understanding. For these anthropologists, it is not only critique that does so, but various other forms of anthropological analysis that take too much for granted at the outset. Critique here is one example of the more general problem of imposing pre-existing analytical concepts onto ethnographic material in ways that distort our ability to describe and understand it. The anthropologists I have in mind here are those associated with the ‘ontological turn’ (Holbraad, 2012; Holbraad and Pedersen, 2017). But it is worth noting that a wide range of anthropologists are associated with the turn to ‘ontology’ within the discipline and not all of them would make this particular criticism of political critique – indeed, there are some anthropologists who argue that we need to take radically different ontological claims seriously in the name of producing critique (see Blaser, 2013). The particular arguments I am concerned with here have been made by those who call for ‘recursivity’ in anthropological analysis (Holbraad and Pedersen, 2017). For these anthropologists, the ethnographic encounter should produce new analytical concepts that enable novel forms of ethnographic description and understanding. Holbraad and Pedersen (2017) argue that the conceptual resources for anthropological analysis need to emerge as the product of a transformative encounter with ethnographic alterity. Therefore, ‘the anthropologist [should] refuse in principle . . . to take any of his or her own concepts, methods or assumptions as axiomatic’ (Holbraad, 2017: 276). But although they claim to be radically open to the transformative potential of the ethnographic encounter – because ‘anything is up for grabs, even the most basic ideas about what
anthropology is’ (Holbraad, 2017: 276) – these anthropologists seem to offer a rather narrow vision of what is possible because, as Paolo Heywood (2018) has noted, they prescribe in advance what the results of ethnographic encounters should look like: namely, conceptual innovations (cf. Bessire and Bond, 2014; Cepek, 2016; Graeber, 2015). Indeed, if we loosen the idea that anthropological analysis is principally about the recursive reconstitution of our own analytical concepts, then it is possible to retain the idea that we can learn from those we work with, without prescribing in advance the precise form that this learning should take.

Indeed, this is much closer to the position of the final group of anthropological critics of critique whose work I wish to engage with in more detail. These anthropologists argue that critique undermines our capacity for ethnographic understanding and limits the opportunity for ethnography to influence our thinking about our own work and knowledge practices. They suggest that we need to suspend our ‘critical politicizing impulses’ (Chua, 2016), reconsider the ‘out-of-the-box critique’ we often practise (Candea, 2011), or indeed move ‘beyond critique’ altogether (Yarrow and Venkatesan, 2012). But these anthropologists do not tend to advocate doing so in the name of ‘recursive’ conceptual analysis, as if this was the only available option. Rather, they suggest that we need to be sceptical about critique to the extent that it prevents us from reflecting on our own anthropological practices and risks ‘occluding various ethnographic specificities’ (Chua, 2016: 737).

For these anthropologists, critique is too often articulated as an exercise in ‘unmasking’ and ‘unveiling’ a reality that can be ‘seen’ by the anthropologist alone. These anthropologists question political critique that seems to rest on the existence of a ‘political reality visible only to the analyst’ (Chua, 2016: 753). In their discussion of anthropological critiques of development, Soumhyia Venkatesan and Thomas Yarrow (2012: 5) point out that many anthropologists seem to ‘[comment] “on” development from a position of superiority that has tended to be assumed rather than elucidated’. From this position, anthropologists then engage in the ‘critical unmasking of the political relations that underlie surface representations’ (2012: 5), often reinforcing the idea that ‘anthropologists are able to see more about the world of development than are the various people who occupy that world’ (Venkatesan and Yarrow, 2012: 4).

One particularly influential version of this line of argument can be found in an article by the anthropologist Matei Candea (2011), which I will describe in more detail here. Candea argues that a great deal of political critique in anthropology has been possible because anthropologists have increasingly expanded the concept of ‘politics’ to the extent that ‘everything is political’ (2011: 314). Candea points out that, from the 1970s and 1980s onwards, the concept of ‘politics’ was gradually broadened and ‘political anthropology’ as a subdiscipline began to lose its coherence. Drawing on Marxist, feminist and postcolonial theorists – in addition to the work of thinkers such as Foucault and Agamben – anthropologists began to identify ‘politics’ as pervasive throughout human social life (cf. Ssorin-Chaikov, 2012).
In Candea’s view, this can be a problem because anthropologists who identify social situations, institutions, and processes as ‘political’, are ultimately making claims about reality that become superordinate to the claims of our interlocutors – who might stridently reject the idea that these social situations, institutions or processes are ‘political’ at all. When our own claims about reality become superordinate to those of our interlocutors, there is a good chance that we will fail to ‘take seriously what . . . [our interlocutors are] actually saying’ (Candea, 2011: 311).

To demonstrate this, Candea offers an exposition of a classic example of the kind of political critique he has in mind: James Ferguson’s (1994) famous account of a World Bank project in Lesotho. In Ferguson’s analysis, these World Bank officials defined their intervention in a seemingly neutral and technocratic language that obscured and naturalized its ‘political’ effects – a process Ferguson termed ‘anti-politics’. As Candea describes it, this analytical move is one in which Ferguson shows how ‘the non-political is . . . the result of an eminently political operation on a pre-existing “political reality”’ (Candea, 2011: 313). As Candea puts it, the problem with ‘this denaturalization of the non-political . . . lies in a concomitant naturalization of the political’ in which anthropologists make ‘an assumption about the ontological status of politics as the really real ground of reality’ (2011: 313). When framed in these terms, the problem is that Ferguson’s critique involves making an implicit claim about ‘the ontological status of politics as the really real ground of reality’.

But Ferguson’s critique of development can be understood in a different way. Indeed, we can think about Ferguson’s critique as an attempt to invite his readers to ‘see’ the effects of a particular World Bank project as ‘political’. We are not necessarily being asked to commit to any ontological claims about the foundational reality of ‘the political’. In a sense, Candea is taking Ferguson too seriously as an interlocutor – that is to say, ontologically. As I suggested earlier, in order to understand what Hannah and Adam were saying and doing, it is not necessarily particularly illuminating to describe their claims first and foremost as ontological ones (see also Cepek, 2016). And, similarly, in order to understand what many anthropologists themselves are doing when they call something ‘political’, it is not particularly illuminating to highlight that they are making claims about the ontological status of politics as the ground of reality. In Candea’s analysis, to call something ‘political’ is to utter a proposition about what really exists: ‘politics’ and ‘the political’. But as with Hannah’s prayer and Adam’s sermon, sometimes what appears to be a proposition stating a fact is a ‘complex performance of a certain kind’ (Emmerich, 2011: 61). When anthropologists call something ‘political’ they are often engaging in an act of critique that is intended to encourage others to ‘see’ particular aspects of a situation in a new light. In short, many forms of political critique in anthropology are performative acts of aspect-showing.

If we consider critique as a form of aspect-showing, it becomes possible to articulate a vision of critique that does not necessarily risk obscuring our ethnographic understanding in the way that recent critics seem to imagine. It is possible to take one’s interlocutors seriously and at the same time ‘see’ certain aspects of
their social lives as ‘political’. It is important to note that this does not eliminate the need to define ‘politics’ – just as identifying somebody as ‘faithful’ requires a definition. But this would shift the discussion to a different register and would involve entering into classic questions about power relations, authority, sovereignty, and friend/enemy distinctions, among other issues. Furthermore, showing the ‘political’ aspects of a situation is only one form that political critique might take – other forms of critique as aspect-showing might be concerned with highlighting other aspects of a situation: religious, ecological, historical, and so on. What is more important here is that ‘seeing’ a certain aspect of a given situation is not the same as ‘uncovering’ an underlying foundational ontological reality, the presence of which makes it difficult to understand or take seriously the claims of our interlocutors. Indeed, it is a performative act that adds rather than occludes aspects. With this in mind, in the final part of this article I offer a critique of the American missionaries at Matamba Mission Hospital whose practices of aspect-seeing and showing I have already described above.

**Being ‘alive’ to aspects**

In the first part of this article, I considered how Hannah and Adam were able to ‘see’ certain aspects of the lives of their patients at Matamba Mission Hospital and I also pointed out my own ‘aspect-blindness’ to these dimensions. While I could ‘see’ these aspects when encouraged to do so, my ability to see them did not shape my ‘attitude’ in an enduring way or change my practical engagement with the world. It is possible to describe how this kind of aspect-blindness is present when anthropologists do fieldwork anywhere. They find themselves unable to perceive many aspects of social life. Anthropologists may eventually acquire the capacity to ‘see’ many of these aspects – and are then guided by the subsequent ongoing changes in their own ‘attitude’. In other cases, they might also remain ‘aspect-blind’ to many dimensions of social life. Perhaps they can enter into these aspects to a small extent – a flash of recognition here or there – or they might remain enduringly unable to perceive these things. Some anthropologists may actively wish to remain ‘aspect-blind’ to that which they find profoundly morally or politically troubling; they might not want to learn to ‘see’ these aspects or have their attitudes changed. But what is often distinctive about the position of the anthropologist is that he or she very actively wishes to acquire the ability to ‘see’ new aspects of social life and even attempts to sustain a range of different ‘attitudes’ at once. This sometimes makes the anthropologist’s attitude over time quite distinct from that of many of the people with whom he or she spends time.

This is one reason why the situation of the American missionaries at Matamba Mission Hospital was different to my own. As these missionaries began working at the hospital, many of them changed their attitudes and their practical engagement with the world. When they arrived at Matamba Mission Hospital, many missionaries understood that their work was regarded as controversial and has been subjected to a range of criticisms – including even from other North American
Christians. Many missionaries I encountered in Zambia had read books about missionary work and were interested in debates about whether it has beneficial consequences. One text in particular was regularly singled out by missionaries in discussions, a popular book entitled *When Helping Hurts* (Corbett and Fikkert, 2009). This book argues that missionaries from North America need to think carefully about the consequences of their actions because they can unwittingly cause ‘harm’ to the very people they are trying to help. The authors use Bible commentaries, alongside examples from their own missionary experiences, to emphasise that inequalities of wealth and power shape missionary encounters and the worst ‘harms’ are often caused by the ‘paternalistic’ attitudes of missionaries towards the people they are trying to ‘help’, in part because missionaries risk making people ‘dependent’ on outside assistance (cf. Fraser and Gordon, 1994).

In order to avoid these harms, the authors of *When Helping Hurts* encourage missionaries to develop relationships that involve mutual regard and cooperation. They argue that missionaries who work with people who are much poorer than themselves need to adopt a ‘relational understanding of poverty that sees the materially poor and materially non-poor as suffering from broken relationships, albeit in different ways’ (Corbett and Fikkert, 2009: 155). For the authors of *When Helping Hurts*, this means that it is important for missionaries to attend carefully to the relationships they form during the course of their work and to consider the material inequalities, power relations, and the consequences of redistributing wealth or offering medical care.

Missionaries who were influenced by this book often attended carefully to their relationships with Zambian patients and with staff members. They attempted to remain ‘alive’ to the inequalities and power relations of these encounters. However, attending to these aspects while working in the hospital was difficult for many missionaries because they also felt that their role was to attend to the immediate needs of large numbers of patients. This made it difficult, in particular, for many missionaries to attend as carefully to their relationships with Zambian staff members who worked in the hospital, a group that included midwives, nurses, lab technicians, and clinical officers. A visiting missionary called Karen – who took the book *When Helping Hurts* seriously as a guide to missionary work – told me that she found it hard to work at the hospital precisely because of the inequality that shaped her working relationships with Zambian staff members. As she pointed out, staff members had not received the same training as her, faced numerous challenges in their lives outside of work, and did not have the same material resources to draw upon. Karen was ‘alive’ to these aspects of her work and adopted a certain attitude towards Zambian staff members in light of being able to ‘see’ these aspects.

However, it was more common that missionaries – including both Hannah and Adam – found it difficult to apply the insights of a book like *When Helping Hurts* because it was a challenge to sustain this kind of attitude towards their relationships with Zambian staff members. For instance, Hannah was often concerned to make sure that the immediate medical needs of newly arrived patients were met. As
Hannah concentrated on treating her patients, it became easy for her to ‘see’ her work as oriented towards meeting the immediate needs of these patients – and, as we have seen already, these were patients that Hannah often regarded as ‘Christ-like’. But this practical engagement and ongoing ‘attitude’ towards her patients made Hannah less able to ‘see’ other aspects of her work at the hospital, such as the material inequality that made it possible and sustained it.

Another way of saying this is that Hannah become ‘aspect-blind’ to these other aspects of her work. But it is important to clarify what this means. It does not mean that Hannah was unable to perceive or understand the fact that her relationships with Zambian staff members were shaped over time by material inequalities. In fact, Hannah pointed out these material inequalities to me on several occasions. Hannah once told me how shocked she had been when she first saw the poor-quality accommodation of many staff members, describing how some staff houses were run down and often lacked readily available water. But although Hannah could literally see these aspects of the lives of staff members, she was not ‘alive’ to them in a way that changed her ongoing ‘attitude’ towards those staff members.

Like many other missionaries, Hannah expected staff members to be able to work extremely long hours. When Hannah found that staff members were leaving the hospital or taking time off – often because they had a network of relationships and responsibilities to which they had to attend – she would often reprimand them using a language of Christian morality. Staff members had many obligations outside of their work, including supporting dependent kin and attending funerals and weddings. But Hannah often viewed the behaviour of Zambian staff members as un-Christian. For instance, I once heard Hannah reprimand a young Zambian nurse by saying, ‘But you are supposed to be a Christian!’ (see also Bornstein, 2005; Wintrup, 2019). Unsurprisingly, many Zambian staff members came to resent being judged as uncaring and this created frictions in their relationships. Indeed, there is also a long history of medical missionaries scrutinising the moral character of Zambian health workers who have often found themselves being ‘judged on their morals as well as on their professional skills’ (Kumwenda, 2006: 218).

But if some missionaries became ‘aspect-blind’ to the material inequalities of their work, then many of the Zambian staff members I spent time with were profoundly alive to these aspects. Missionaries lived in a situation of extraordinary material comfort and wealth by local standards. They had no dependent relatives to provide for and many were only in Zambia for a short period time. Zambian staff members often felt that visiting missionaries were not aware of how these differences shaped their working relationships. Staff members themselves wondered how they could be expected to work in the same way as American missionaries, whose circumstances were so different. Staff members had families to support, had often worked at the hospital for decades, and had not been expensively trained in the United States.

A Zambian staff member called Elijah, who had worked at the hospital for ten years, explained to me that visiting missionaries were able to work long hours
because they were only in Zambia for a short time and did not have family members and relatives to attend to outside of their working days. By contrast, Elijah often had to visit his rural home and check on his family members, especially his elderly mother. The ‘social costs’ (Feierman, 1985) of working at the hospital were greater for Zambian staff members. Staff members such as Elijah had to respond to the multiple claims made on them by family members, neighbours, and friends – in other words, they were embedded within broader relationships of dependence and obligation (Englund, 2008; Ferguson, 2015). Working relationships between staff members and visiting missionaries were therefore shaped by these inequalities. Staff members like Elijah were ‘alive’ to these aspects of hospital life and it led him to adopt a particular attitude towards American missionary visitors. Some Zambian staff members expressed this idea when they told me that they felt that American visitors only seemed to ‘care’ about patients. To argue that these Christian medical missionaries were ‘aspect-blind’ to the profound material inequality that structured their relationships with Zambian staff members is to offer a critique of the work of these missionaries without claiming to possess a ‘superior’ understanding of reality. Indeed, one way of thinking about the critique I am making here is that it is almost the reverse of what some of these missionaries might (hypothetically) say about me: I was able to ‘see’ people as Christ-like and faithful, and yet I did not allow this understanding to change my attitude in an enduring way – I did not remain ‘alive’ to these aspects and allow my conduct to be transformed. Indeed, if aspect-seeing involves ‘the mastery of a technique’ and is even perhaps ‘an accomplishment requiring imaginative skill’ (Hester, 1966: 205) then saying that certain missionaries were not ‘alive’ to the inequality of their relationships with Zambian staff members is not the same as making a claim about their inability to understand or comprehend a true ‘reality’ beneath surface appearances. The description of the situation I have offered here changes the terms of the disagreement as it is imagined by recent critics of critique and offers a different way of thinking about the practice of critique.

Conclusion

At this point, we can return to Latour’s image of the ‘never sleeping critic who alone can see’. In producing the critique outlined above I was not ‘alone’. Indeed, my description was made possible by other people at Matamba Mission Hospital who offered critiques of the work of Christian medical missionaries themselves – not only Zambian staff members, but certain missionaries themselves (cf. Fassin, 2017). Furthermore, I was not ‘seeing’ in the sense that Latour has in mind, but ‘aspect-seeing’. Rather than an actor who ‘alone can see’, the anthropologist who engages in critique might be better described as one who, with others, can aspect-see.

This does not mean that anthropologists who engage in political critique have a superior understanding of reality. Indeed, describing critique as a form of aspect-showing offers a reminder of the limitations of critique as an activity. In his
discussion of ‘genealogy’ as a method of political critique, the philosopher Raymond Geuss (2002) points out that people who have a pre-existing attitude of disaffection towards a certain institution, identity or concept might find that a genealogy offers them a new way of seeing that can, in some sense, guide their action. However, for those who do not have any desire to change their attitude, then this kind of critique will not necessarily encourage them to do so (cf. Englund, 2011).

Indeed, just as I did not enduringly change my attitude having been able to engage in certain forms of Christian aspect-perception, the missionaries with whom I worked might not be persuaded that they need to change their conduct in light of the material inequality that structures their work. But it would not be very illuminating to describe this as a disagreement that is principally based on rival (ontological) claims about the nature of political reality. We are instead dealing with different forms of practical engagement with the world, different attitudes, and different forms of ‘aspect-seeing’. The critique of Christian humanitarianism that I have offered here is therefore itself an act of aspect-showing – and resembles that which missionaries themselves engaged in. And this seems to me to be one way of taking these missionaries seriously at the same time as subjecting them to critique.

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Notes

1. There are also anthropologists who have suggested that we should move beyond what Miriam Ticktin (2014: 283) calls the ‘cul-de-sac of critique’ in order to engage in more constructive political discussions. These writers argue that we should not simply engage in critique as denunciation but should articulate positive political visions (Ferguson, 2011). These arguments are slightly different from the criticisms of critique that I deal with in this article, which are more concerned with the theoretical and methodological status of critique within the discipline.

2. Some anthropologists have adopted a different approach to thinking about the biomedical gaze. For instance, in her study of a hospital in Papua New Guinea, Alice Street (2014) points about that the biomedical gaze is not as ‘authoritative’ or penetrative as scholars working in this Foucauldian tradition have tended to suggest. Furthermore, rather than feeling subjected to a surveilling or disciplinary gaze, many patients wished to make themselves visible to biomedical practitioners because they were so often ignored. As Diana Gibson (2004) also found in a hospital in South Africa, the problem for many patients is ‘precisely [that] the gaze does not permeate everywhere’ and certain patients ‘remain invisible’ (2004: 2014).

3. There is not space to discuss this at greater length, but in a context where images of a white Jesus were relatively common, Hannah’s suggestion that these Zambian babies resembled the newly born Christ undermined the assumed whiteness of Christ – which may have been one of the reasons why her prayer was met with a great deal of appreciation by many of those present.

4. In an argument that is related to this point, Joel Robbins (2013) suggests that anthropologists who attempt to show their readers the suffering of the people with whom they work often fail to culturally contextualise this suffering. I would suggest that these two activities are not mutually exclusive and that anthropologists can do both simultaneously. The fact that many works of anthropology that focus on the ‘suffering subject’ contain little ‘cultural contextualisation’ is not necessarily a consequence of the decision of these authors to focus on suffering, but a consequence of the fact that they are less interested in cultural contextualisation.

5. Recently, proponents of recursivity have addressed the question of the politics of their approach. For instance, Holbraad and Pedersen (2017: 297) describe the method itself as ‘political’ because it is ‘anti-authoritarian’. This is because ‘domination is a matter of holding the capacity to differ under control’ and, since the ontological turn is concerned with ‘the production of difference’, then it follows that ‘a kind of politics becomes immanent to the ontological turn’ (2017: 296). They accept that this understanding of the ‘politics’ of the ontological turn requires us to accept ‘such non-controversially “political” notions as power, domination or authority’ (2017: 296). But, in light of the argument that I make in this article, the claim that their own argument is ‘political’ involves them seeing it as ‘political’ in precisely the same way that anthropologists who engage in critique often see the ethnographic realities they encounter.

6. It should also be noted that there are some anthropologists who do appear to be making claims about the ‘ontological status of politics as the ground of reality’. For instance, in response to Candea’s article, Morten Axel Pedersen suggests that Candea is too quick to
dismiss the insight that ‘the political is dormant in everything at all times but is made visible only in certain minds, bodies, and things at a given moment...the political is potentially present in the form of latent affects waiting to be elicited through certain events’ (in Comments and Reply to Candea, 2011: 325). To the extent that it is a criticism of this view of politics, I think Candea’s argument succeeds.

8. It has been common for Christian missionaries to focus on patients whose suffering or vulnerability can be ‘seen’ as morally meaningful. Colonial-era Christian medical missionaries often ‘called up Biblical precedents for themselves’ (Peel, 2000: 9) and focused on ‘Biblical manifestations of disease and misery’ (Jennings, 2008: 35; see also Hardiman, 2006; Shankar, 2006). Indeed, this is one of the criticisms made of the famous Nobel prize-winning medical missionary Albert Schweitzer, who established a hospital in Gabon in 1913. According to Ali Mazrui, Schweitzer adopted an attitude that led him to treat ‘healthy Africans with arrogance, while medically treating sick Africans with compassion’ (Mazrui, 1991: 101; see also Redfield, 2013: 48–50).

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