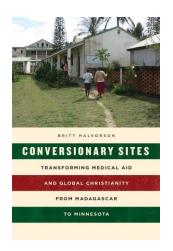
## **BOOK REVIEW**

## Conversionary Sites: Transforming Medical Aid and Global Christianity from Madagascar to Minnesota...

By Britt Halvorson

## Reviewed by Thomas Hampton



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As internationally networked Christian aid organizations struggle with the implications of colonial legacies that shaped them, there is a common trend toward partnership with an emphasis on local leadership. Less comfortable sending people, some organizations in the post-colonial era send only aid and equipment. This model leaves the sent objects to acquire and transform their meaning in less controlled ways that secular anthropological theories can help Christian relief and development organizations to understand.

Conversionary Sites is a comparative ethnography of Lutherans in Minnesota and Lutheran-run hospitals in Madagascar, as together they manage a church-based surplus medical equipment supply chain. In its six chapters, this book follows donated medical equipment through six "conversionary sites" – semiotic systems that restructure the value and meaning of the donations.

The value conversions arise because the international NGO is located at the intersection of multiple economic systems. The transfer of expired medical equipment from the U.S. to Madagascar generates the value that stimulates the exchange.

Volunteers sort the equipment in Minnesota, while medical practitioners in Madagascar decide for themselves what has value and what should be discarded as would have been required in America. Halvorson shows that, fundamentally, this decision comes down to risk calculations, though Christian language of redemption is frequently used throughout the process (134). Halvorson notes that volunteers often turn to religious language, especially in complex moments of cognitive dissonance (216-217).

Because supply chain management involves nurturing relationships, there is also a question about which relationships should be given priority. Because the equipment imported from Minnesota is not intended to fully supply the Lutheran hospital, hospital administrators need to maintain relationships with their Lutheran partners as well as suppliers in India and China. People who are key to maintaining positive partnerships are highly regarded by all involved. Halvorson describes the role of one white doctor living in Madagascar who picks up on the legacies of David Livingstone and Albert Schweitzer (175), rising to an almost mythical status through the constructed narratives. The description of certain doctors as heroes derives from the fact that they are rare and seen as having taken on a large amount of risk. It also implies that their position may be out of reach for many. Halvorson helpfully points out that relying on a few hero doctors is not ideal. It would be better for welltrained doctors with international connections to be common.

Halverson argues that accountability structures in international NGOs are often one-sided, and they betray who really has power in a partnership. If only one side can call for an audit and then enforce it, then there is still hierarchy and debt – with David Graber's theoretical work on the difficulty of reconciling asymmetrical debts featuring heavily in this book. American workers located in Minnesota and Madagascar say that God is ultimately the judge of them

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all as a way to assume equality, but Halverson argues that, organizationally and practically, there is imbalance in a one-sided audit culture. Importantly, the necessity for aid exists precisely because of inequality in the relationship, so ignoring it is unhelpful to understanding the relationship's dynamics. Because of historical colonial relationships there are varying financial and moral debts expressed between the US aid workers and the recipients of aid in Madagascar, but of course aid today cannot fully cancel out the effects of earlier colonialism.

While Halvorson draws largely from secular anthropological theories to support her observations, there are several valuable takeaways in this book specifically for the Christian relief, development, and advocacy community. One is that while missionary agencies often try to embody post-colonial processes and may be uncomfortable with the legacies of their own history, it is important to acknowledge that partners in the Global South will continue to see their historical colonizers as strategic partners, because a connection is already formed. They can see how the individuals who continue the relationships personally benefit. As Halvorson states in her concluding sentence: "...It [a colonial era relationship] seems somewhat like a muscle memory, reigniting a bodily connection" (246).

The most interesting practical implications are presented in the concluding chapter titled "Aid's End Times," which acts as a sort of postscript to the extensive research. Likely due to misunderstanding surrounding Madagascar's decision to increase taxes on imported goods (239-240), the American Lutherans were unable to understand why their export cost were increasing above the rate of the shipping costs. A volatile political situation, including a 2009 coup, a financial crisis, the hospital's difficulty in applying for non-profit status, and the discontent around audit practices led to the dissolution of the partnership. Surprisingly, at least to me, people involved in the aid partnership were generally OK with this.

Agency leaders in Minnesota had long said that aid partnerships were not supposed to last forever, so there was little emphasis on developing a sustainable business strategy (242). Imported discount medical equipment undercut local manufacturing efforts, and when the aid partnership ended, alternative supply chains from China and India were prioritized. Doctors in Madagascar, especially the ones who did not have direct relationships with the Americans, described this transition as a part of God's plan. They saw their self-reliance as a positive outcome resulting from decreased inequalities.

Like many books with six chapters, *Conversionary Sites* is based on a well-researched doctoral dissertation. The fieldwork providing its content stretches from 2003 to 2014, including two years of direct participant

observation in Minnesota and Madagascar. This volume is a well-edited culmination of conference presentations and chapter iterations, with much credit given to the University of Chicago editors in the footnotes. This book is for graduate level academics and practitioners willing to wade through citation-filled, 36-page chapters with long paragraphs. For those who take it on, they will be rewarded with a strong understanding of secular anthropological theory applied in the field of Christian medical relief and to the ways anthropology conceptualizes the changes in world Christianity.

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