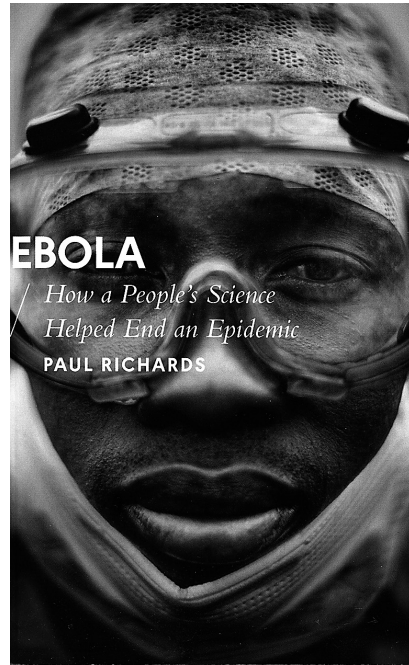


PAUL RICHARDS 2016. *Ebola: How a People's Science Helped End an Epidemic.* (African Arguments). London: Zed Books Ltd, 180 pp.

When in fall 2013 a two year old toddler from Guinea died after a couple of days of terrible suffering from an unknown illness nobody on the planet suspected that it was a beginning of an epidemics that will reach in its deadly wave three countries and lay fear in the entire planet. The toddler's mother too, who nursed him died ten days after, as well as his older sister and finally his grandmother. Next, a lot of people from various other regions attended the funeral of his grandmother, who was an estimated member of a sodality, and carried away with them the mysterious disease. Was the toddler the first victim? Or was it an elderly woman from the same who actually survived the strange disease that started as looking like malaria and ended looking like cholera. It turned out that the illness was highly contagious and in no time it crossed the junction between three countries of Western Africa along with the mobile population and the merchandise. What happened exactly? Considering that the virus—because it turned out the strange disease, unknown at that time in these countries—was Ebola, a zoonotic virus, transmitted from animals to humans. Was he playing under a tree where fruit-eating bats used to roam...? It remains a mystery how could a two year old toddler actually be the very first victim. His death was the first detected sign of the outbreak of Ebola.

It turned out that this epidemic of Ebola was the biggest one since the discovery of the virus in the 70es that has its name from a river ("the white river") in former Congo. It also turned out that Ebola can and will strike undoubtedly in regions in which it is not usually anticipated—it just a question of "when."

Paul Richard's book is about this outbreak of Ebola 2013–2016 when approximately 30.000 people died. It is an anthropological book dedicated to a wide range of public. It is also an attempt—and I would add, a very successful one—of how to apply social science not only in the aftermath of a health catastrophe, but as a practical application of the (anthropological) knowledge in the prevention and the development of future strategies in damage-control. Besides its undisputable anthropological merits, the book offers theoretical and practical stratagems of



virus-management. Richards positions his work smartly on the basis on the anthropology of body on the works primarily of Durkheim and Marcel Mauss, although the topic he approaches is one of the main themes of medical anthropology ever since the 80s since the Hewletts published their basic work on Ebola.

The detailed introduction contains "hints" of what is in the book, but also brings us side-information, as for instance how the local elites reacted on the spreading of the virus by leaving country from fear being contaminated. The author's main goal is early on introduced: he is exposing how social practices shaped the Ebola epidemics.

Richards who worked 45 years in West-African contexts, starts with the thought-provoking question do behaviours shape practices or it is vice versa? How change is introduced in social practices? He analyses the spreading of Ebola through the prism of Durkheim's theory. He clearly distinguishes the situational background: the panic that ensued when it was understood that the disease that spread rapidly is as a matter of fact the deadly virus Ebola. He smartly confronts the matter while using the scheme "true" disease vs "panic disease." He also produces a clever definition of Ebola as a social dis-

ease caused actually by social closeness/intimacy and bodily practices. It is an opposite image of the imaginary Ebola, mostly represented in western world as an illness that spreads and breaks out due to the strange (and forcibly “primitive”) customs of the African ethnic groups: consummation of bush meat and weird funeral rites. Space is given in examining stereotypes that immediately fall on the outbreak and hinder a more rapid, more convenient answer paid in human lives. While actually it turns out that for instance in Sierra Leone, 70% were contaminated from funeral rites, in which people say “goodbye” to their dead relatives and friends.

In all what ensued while Ebola was raging in West Africa Richards illuminates the events in a positive light. As a matter of fact, I would single out the leitmotif of “hope” on the pages of his book. He analyses how people’s science or group learning impacted—rapidly enough—the spreading and controlling of the outbreak. He also numbers out local factors such as the indigenous institutions, the sodalities—as e. g. Poro and Sande—that first facilitated the spreading of the virus but then also aided containing the virus and reproducing that knowledge for the future generations. He also scrutinizes the measures that were not always operative—and in case were contradictory—as for instance the effectiveness of quarantine. Richards also produces excellent graphic tables about the spreading of Ebola through countries, and the number of victims, the closeness of the affected communities to the main roads, implicating that the virus either ‘burned out’ or natural immunity was build up, while the human response became active. It seems that the third likelihood, the more effective human response, produced by the quick learning of communities, contributed in a crucial manner to stop the virus. He also notices that as soon as the people understood that the disease is similar to cholera, while implementing strategies from the outbreak of diseases of small ruminants, that affects their livelihood the goats, a significant improvement in the containing was tangible. People started to think as epidemiologists.

We learn on the case of Sierra Leone, that actually it was the road-system that enabled the quicker spreading of the virus. Richards provides an excellent individual case description for the “jump” of the virus. Ebola therefore spread for various reasons: closeness of human habitations with the wild-

life where the still uncovered reservoir of the virus lies, but also because the human mobility, extended family networking and commercial traffic activities were the main vectors of the spreading.

The most original theoretical approach to confront the topic how community learning impacted the containing of the virus is a parallel Richards evokes from his earlier research. It is his work on varieties of rice in Africa and how “primitive” technology created and sustained biodiversity (p. 63–65). Populations unwittingly, in a manner of speaking “culturally” use a form of genetic selection of rice to adapt to all social needs. Talking about popular science and popular technology drew from practical knowledge, Richards is (re)introducing his concept, a neologism which he calls “technography.” The concept evolves around the anthropological understanding how traditional, popular technology is deployed and used.

Beside the tremendous and fantastic fieldwork based on surveys, the author offers us also beautiful pieces of ethnography from time to time (as e. g. on p. 74 or p. 143–144).

Finally, he warns about the neglected elements of the Ebola-study such as social distrust and political goals that eternally remain to be settled and present a main disadvantage in cases like the Ebola outbreak.

Simply this book reads like a thriller. One just can’t put it down, it’s a page-turner. Personally I would put this book in every secondary school in the world not only as a partial recent history handbook, but also as a manual in basics of epidemiology and medicine. It is written in such a style that it is easy to read and to understand even by a really large scale of readership. Its contribution in anthropology stems exactly from that style—because it reminds us scientists that scientific research results can be “wrapped up” in a very easy-to-read style without losing on the importance of the content. Its contribution to anthropology also comes from the manner how the topic is actually tackled. The work is based on an original theoretical framework for a topic of usually medical anthropology. It takes us, anthropologists, back to the basics. It’s indeed, a miraculous thing when with the use of classical theoretical framework one tackles the seemingly most distant and complicated matters: everything becomes clear, clearer.

MARIA VIVOD