powers towards ICRC involvement in challenges to their rule – instances of ‘barbarian
tribal unrest’, as one British Red Cross leader called them, in which no form of outside
intervention was wanted. In the Algerian case, the ICRC’s invocation of the laws of war
got down poorly with French authorities while being welcomed by the FLN. The latter
used prisoner releases (in cooperation with the ICRC) to demonstrate its commitment to
humanity in warfare, while producing literature on French violations of the Geneva
Conventions. These claims were also also aired at the UN, where a sustained petitioning
campaign by Algerian allies and concerned individuals gradually brought pressure for
the international organisation to act on the Algerian question. Using materials from the
Algerian National Archives, Johnson shows how FLN delegates based in New York
developed strategies for maximising their diplomatic impact.

*The Battle for Algeria’s* focus on the political aspects of health and human rights
means we are, thankfully, largely spared the horrors of this brutal conflict. More
colour and context, however, might have opened this book up further to those readers
not already familiar with the people and organisations it discusses. Nonetheless,
Johnson’s very convincing exposition of the way that medical humanitarian and
human rights issues operated on local, regional, and international levels makes a
very valuable contribution to our understanding not only of the Algerian War but
also of the practices and political implications of humanity in wartime.

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*Medical Humanitarianism: Ethnographies of practice*. Edited by Sharon Abramowitz
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*Medical Humanitarianism: Ethnographies of practice*, which opens with a foreword by
Peter Piot, the eminent microbiologist who discovered the Ebola virus and is director
of the London School of Hygiene and Tropical Medicine, and concludes with a post-
face by Peter Redfield, whose pioneering research has provided new insights into
humanitarian work thanks to its anthropological approach, was surely no disappoint-
ment to these two illustrious readers.

Organised in three sections, this edited volume provides a variety of thought-pro-
voking contributions that combine to produce an original and remarkable work.
*Medical humanitarianism* is a series of stories about people, of journeys through reality, illustrating the complex dynamics at play in the relationship between aid workers
and the people they are meant to help.

Sharon Abramowitz and Catherine Panter-Brick’s book is important on more than
one level. Firstly, it is a valuable and highly accessible tool for practitioners and
researchers on the one hand, and observers of the sector on the other – although
the two categories are not of course mutually exclusive. It also presents a remarkable
diversity of situations. While describing numerous situations in the Africa context, it
also includes contributions on Pakistan, such as when it looks at the safety of national employees, as well as setting out in more unexpected directions, like the description of the social and ethical circumstances of practicing medicine in Haiti. While building on well-rooted anthropological critical analysis of development (David Mosse, Jean-Pierre Olivier de Sardan) and humanitarianism (Dider Fassin, Peter Redfield and Miriam Ticktin), the book offers observations, often empathetic, occasionally even benevolent. Certain contributions are all the harsher.

For instance, in a particularly incisive chapter by Tim Allen, readers are encouraged to think critically about the role of aid organisations in the Gulu district IDP camps in Uganda. In the context of a counter-insurgency strategy aimed at eradicating the Lord’s Resistance Army, the description of the role of humanitarian organisations in setting up insecure and precarious camps certainly raises the question of the organisations’ capacity to devise their interventions. Humanitarian workers’ participation in processes to control people, processes that are sometimes even totalitarian or criminal (e.g. Ethiopia 1985; Zaire, Goma 1994), is a recognised phenomenon. However, his journey across east Africa is salutary, inasmuch as it shows the almost non-existent questioning of intervention approaches and their consequences.

For MSF, of which this reviewer is a member, Sharon Abramowitz’s chapter on the medical and economic consequences of the organisation’s interruption of medical projects in Liberia is a cruel reminder of the fact that the only moment when an organisation has complete control over its choices is when it chooses to withdraw. It can do so without worrying about the consequences, since its time is over.

Of equal interest is the brilliant illustration of the limits imposed by vertical projects. The undoubted success of the Carter Foundation’s campaign to eradicate the Guinea worm, described by Amy Moran-Thomas in the Ghanaian context, should not make us forget that it is almost always implemented in situations where access to drinking water and basic medicines is often very limited. The allocation of significant resources to the fight against this non-life threatening disease thus needs to be considered taking into account the triage process – the selection between those who will be saved and those who will not – which precedes it. This is indeed a key question at a time when the campaign to eradicate polio is still in place while facing opposition on many levels, including from those who see in it a proof of imbalance marked by the lack of attention that donors and authorities pay to access to primary care. The question of triage is also at the heart of an instructive chapter on military humanitarian medicine in Afghanistan. This reviewer feels it is important here to highlight Stuart Gordon’s transparency about his status as author and actor, as a former member of the British Armed Forces. Conversely, one of the book’s limits is the lack of clarity regarding the authors’ position vis-à-vis their subject: it would possibly have been difficult to do things differently given the limited length of each chapter, but for some chapters, it would certainly have been useful to know a little more about the researcher’s circumstances.

Other contributions are lighter in tone, or at least, illustrative of the little arrangements of daily life. In this respect, Ilil Benjamin’s work on Israel is certainly original while also bringing to mind research by Miriam Ticktin and Estelle d’Halluin on asylum in France. He describes the incorporation of humanitarian and compassionate approaches into frameworks determined by the State, often producing an uncomfortable space for co-management. Michel Agier coined the expression: the ‘management of undesirables’.
Sharon Abramowitz and Catherine Panter-Brick’s volume is occasionally, if not often, an uncomfortable read which raises painful questions. Nevertheless, as Peter Redfield so rightly points out in his postface, nothing here should come as a surprise. For anyone who knows about humanitarian practices in the field, the many little arrangements that have to be made, the minor daily dilemmas and more deep-seated questions about the nature and impact of medical humanitarian projects, the book’s chapters will serve as a reminder and, more especially, a plea to open the door to the sort of critical thinking this book, greatly to its merit, shows us to be absolutely vital. For in the profoundly uncertain world of aid, development and humanitarianism and the medical practices they encompass, the study of deviations, which first need to be identified, is certainly one of the most unarguably useful contributions the social sciences have made to the sector. I hope that a great many of my colleagues open the pages of this book and find it a fascinating read. It is an uncomfortable read, but surely that is the goal?

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The regulation of nationality remains a prerogative of States (Jennings and Watts: 1992, Pt 1, 849, S376; Cohen: 2012) despite recent developments in international law, which have created limitations in the attribution and deprivation of nationality. This evolution is addressed in the two publications under review, which can be used in a complementary way.

In *Nationality and Statelessness in the International Law of Refugee Status*, Fripp studies the interpretation of article 1 of the Refugee Convention which defines a refugee as a person who ‘owing to a well-founded fear of being persecuted for reasons of race, religion, nationality, membership of a particular social group or political opinion, is outside the country of his nationality and is unable or, owing to such fear, is unwilling to avail himself of the protection of that country; or who, not having a nationality and being outside the country of his former habitual residence...is unable or, owing to such fear, is unwilling to return to it’ (emphasis added).

More precisely, Fripp identifies *differing understandings* of nationality and statelessness in the broader context of international law. This analysis encounters several challenges due to the evolution of international law after the adoption of the Refugee Convention. This particularly relates to the 1954 Convention on the Status of Stateless Persons, the 1961 Convention on the Prevention of Statelessness, the adoption of human rights norms affecting States’ actions or omissions as far as the attribution or deprivation of nationality, and the principle of non-discrimination in customary international law.