## **SIMUKAI CHIGUDU** The Political Life of an Epidemic: Cholera, Crisis and Citizenship in Zimbabwe: Cambridge University Press (hbk £,75 9781108489102). 2020, v-230 pp.

In April 2020, as the COVID-19 pandemic was spreading across the world, the WHO Secretary General pleaded with world leaders not to "politicise this virus". This sentiment of frustration with the seemingly undue influence of domestic and international politics on the course of the pandemic has reverberated across all stages of this global crisis. The problem is that, as Simukai Chigudu shows masterfully in his analysis of the 2008-09 cholera outbreak in Zimbabwe, epidemics *are* political. He carefully reveals the deep and tangled roots of what may otherwise have been seen as a sudden and shocking crisis. He takes us through the intersections of long-term trends, from colonial segregation to post-independence urban planning visions, and the rapid economic decline and political crisis of the early 2000s: a "perfect storm" that resulted in thousands of deaths from cholera in Harare's high-density townships. One of the most important messages of the book is that "epidemics are many things at the same time". Indeed, cholera, like other infectious diseases, is not only a biological phenomenon; it has historical, social and political causes and consequences.

Through the narratives of multiple actors involved in the response to cholera, we also see that epidemics mean different things to differently situated people. How an epidemic is interpreted and narrated, by whom, for what purposes and with what consequences matters because it determines what kind of action is possible, but also because epidemics become sites of interpretive struggle. Chigudu teases out the tensions between medical humanitarians' emergency claims, opposition framings of cholera as a symptom of governance failure, and government counter-narratives about the effects of international sanctions and neo-imperialism. These are not only discursively significant; they have also hindered the development of concerted efforts to control the spread of the virus. However, a question that remains—one that may be the most difficult of our time—is whether the "multiple ontologies" of epidemics can or should be reconciled, and whether a "common ground" is even possible when radically different realities confront each other.

The book provides a valuable addition to growing calls for more interdisciplinary approaches to understanding and responding to epidemics, and the integration of social scientific analysis to shed light on the social dimensions of disease and effectively engage rather than eschew the political nature of health emergencies. Its reconstructions of the cholera epidemic shows that casting politics aside when it comes to epidemics is not only myopic; it also has material, indeed *political*, consequences. This is particularly visible in the portrayal of how a humanitarian "anti-politics machine" set on finding quick technical solutions and save lives, propelled by the urgency of human suffering, left the social, economic and political determinants of the epidemic essentially untouched. This raises important questions about political legitimacy and responsibility that strike at the core of humanitarian practice. As Chigudu acknowledges, humanitarian organisations may not be expected to address the structural problems states are responsible for and, we might add, would scarcely have the democratic mandate to do so. As one of his interlocutors points out, tackling political questions head on may also have led to organisations being prevented from doing essential work. At the same time, as the book shows, short-term fixes may simply prolong the status quo and even undermine states' capacity for structural transformation, leaving the next crisis to be a matter of when, not if. This appears to be an impasse, but it leaves us wondering under what conditions epidemics become a catalyst for political action. If crises at once make social realities such as inequality more visible and upend the status quo, even if temporarily, might these exceptional moments offer possibilities for reconfiguring the present and re-imagining the future?

The final chapter partly takes this up through the voices of inhabitants of townships affected by cholera. Unlike in humanitarian reports, where they often appear as suffering bodies and stimuli for moral indignation, here they appear as decisively political actors. Their condemnations of

government and international organisations are based on an intimate knowledge of the political economy of disaster: their recollections weave together painful memories of the outbreak as bodily experience, social disaster, and political outrage, whilst also tending to its roots in inadequate service provision. Their explicit claims for more meaningful inclusion remind us that, across contexts, substantive citizenship often remains the goal, not apolitical notions of resilience that continue to be fashionable in development and humanitarian circles. Inspired by Adriana Petryna's seminal work on the subjectivities of Chernobyl survivors, I wondered whether the collective experience of cholera gave rise to disaster-based political claims or contestations and re-inventions of local authority. Beyond a political critique of the past emergency, how did cholera reshape citizens' contestations about the future and what were the possibilities and constraints for mobilising around this renewed consciousness and specific experience of suffering? What opportunities do these considerations present for an effective repoliticising of "resilience", or should this concept simply be thrown out?

The Political Life of an Epidemic has provided us with an invaluable template for how to produce a post-mortem of a health emergency. Through its nuanced and empathetic analysis, it can help to persuade readers across disciplines and professions of the inexorably political nature of epidemics. Armed with this knowledge, and as we confront the fallouts of the ongoing pandemic, our next challenge is to determine what we are going to do about it.

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