Ethics and images of suffering bodies in humanitarian medicine

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ABSTRACT

Media representations of suffering bodies from medical humanitarian organisations raise ethical questions, which deserve critical attention for at least three reasons. Firstly, there is a normative vacuum at the intersection of medical ethics, humanitarian ethics and the ethics of photojournalism. Secondly, the perpetuation of stereotypes of illness, famine or disasters, and their political derivations are a source of moral criticism, to which humanitarian medicine is not immune. Thirdly, accidental encounters between members of the health professions and members of the press in the humanitarian arena can result in misunderstandings and moral tension. From an ethics perspective the problem can be specified and better understood through two successive stages of reasoning. Firstly, by applying criteria of medical ethics to the concrete example of an advertising poster from a medical humanitarian organisation, I observe that media representations of suffering bodies would generally not meet ethical standards commonly applied in medical practice. Secondly, I try to identify what overriding humanitarian imperatives could outweigh such reservations. The possibility of action and the expression of moral outrage are two relevant humanitarian values which can further be spelt out through a semantic analysis of 'témoignage' (testimony). While the exact balance between the opposing sets of considerations (medical ethics and humanitarian perspectives) is difficult to appraise, awareness of all values at stake is an important initial standpoint for ethical deliberations of media representations of suffering bodies. Future pragmatic approaches to the issue should include: exploring ethical values endorsed by photojournalism, questioning current social norms about the display of suffering, collecting empirical data from past or potential victims of disasters in diverse cultural settings, and developing new canons with more creative or less problematic representations of suffering bodies than the currently accepted stereotypes.

Introduction

Images of victims of trauma, illness, destitution or disasters are omnipresent and form a conspicuous part of mainstream public information worldwide. The naturalness of this social phenomenon has already been questioned or opened to ethical inquiry (Dauphinée, 2007; Ignatieff, 1985; Kleinman & Kleinman, 1996). Furthermore, specific criticisms have been addressed to humanitarian or developmental organisations acting as mediators of the representations of victims. For example, Plewes and Stuart (2007) and Kennedy (2009) argue that the imagery of victims for fundraising purposes provokes considerable tension with humanitarian values.

My main introductory remark is that the topic is too often curtailed because of established social norms. One idea that I hope to

convey in this paper is that social norms are confusing ethical debates around media representations of victims. Nowadays, the sort of public displays of 'suffering bodies' which are generally accepted by the public are supposed to fulfil at least two conditions: (i) the display should convey some precise meaning, for example through a 'communications' argument; and (ii) the display should be technically conveyed, for example through press photographs, filmed documentaries, television broadcasts, advertisements or online video clips. Taking Fig. 1 as an example, one could easily illustrate these basic conditions of public acceptance with two thought experiments. The first would be to hypothetically modify the poster and remove any explanatory content (i.e. the caption, but also the attending doctor and his affiliation). As a result, the same picture of the attended victim would become meaningless and therefore unacceptable or at least suspicious to the usual target audience. A signifier, preferably a personality or a volunteer from a humanitarian organisation should be attached to the picture to 'authenticate' the victim (Brauman, 1993, p. 150). In a second experiment, the need for technical media conveyance to ensure

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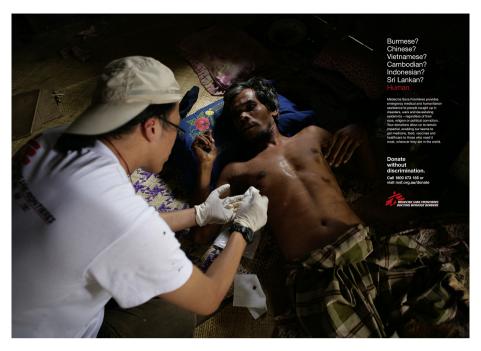E-mail address: philippe_calain@hotmail.com.

Fig. 1. Poster commissioned in 2009 by the Australian section of Médecins Sans Frontières [reproduced with permissions from MSF (Sydney) and Lavender (Sydney)].

social acceptance could easily be grasped if we imagine the following scenario: together with the attending doctor, the same victim from Aceh is displayed in person and 'immediately' to public view, this time laid behind a glass panel in a crowded street of Sydney, one among wealthy cities where the audience targeted by the poster lives. Such contempt for dignity and privacy would cause public offence beyond the reason that, for the fact of being displayed, the patient would obviously have been brought from Aceh to Sydney. The same sort of offence would be caused were a homeless and sick person from Sydney substituted for the victim from Aceh. What is going on here is a two-sided effect: pictorial display makes distant suffering not only closer to potential donors (Kennedy, 2009), but also socially acceptable by being mediatized. One should remember from an historical point of view that social norms and the limits of moral responsibility are evolving in this regard (Haskell, 1985). For example, public tours to Bethlem, an insane asylum in Georgian England, were routinely organised until 1770 so the public could observe inmates and thus 'generate good will' (Andrews, Briggs, Porter, Tucker, & Waddington, 1997, (Chapter 13: Visiting), p. 182). What counts for acceptance nowadays is the artificial distance (geographical or psychological) between the observer and the victim, and this is precisely why communications media exist. Obviously, any subjective sense of distance is enhanced if the victim and the viewer belong to socially or culturally distinct groups, an inevitable occurrence in the mediatized relationship between 'donors' and 'beneficiaries' of humanitarian assistance. While the two conditions introduced so far, i.e. meaning and technical display, are generally sufficient for pictorial representations of victims to fit current social norms, public acceptance itself does not necessarily imply moral rightness. In this paper, I argue that representations of suffering bodies displayed in the context of humanitarian medicine take on a particular significance from an ethical viewpoint and conceal unresolved divisions between different value systems.

A similar argument has already been made by others (Kennedy, 2009; Plewes & Stuart, 2007). Taking a slightly different approach, my own ethical reflection about suffering bodies and humanitarian action is derived primarily from a medical perspective, bearing in

mind that images can express suffering through several sorts of bodily representations, e.g. wounds, scars, images of dead bodies, the facial expressions of mental distress or shame. These images would normally belong to the private sphere of medical encounters, were it not for the fact that they appear at the same time in the realm of humanitarian action. Moreover, following Tiktin (2006a, pp. 117–118), I am specifically referring here to 'suffering bodies' instead of 'suffering persons'. This is to emphasize what several scholars have noted, i.e. the fact that representations in humanitarian iconography are typically those of anonymous, speechless, ahistorical or generic stereotypes of victims (see for example: Butt, 2002; Malkki, 1996; Ticktin, 2006b).

Having so far outlined current social norms about the imaging of suffering bodies, I will next illustrate how such representations create problems in the practice of humanitarian medicine. To be more precise, I will use a concrete example to show how tensions arise between medical ethics and humanitarian perspectives of the representations of suffering. Finally, in an attempt to make headway in clarifying these tensions, I will try to identify what overriding humanitarian values could outweigh such reservations about the imaging of suffering bodies, as those raised by a medical ethics standpoint.

Three pragmatic reasons why images of suffering are problematic in humanitarian medicine

There are at least three important reasons why the pictorial representations of suffering bodies in humanitarian medicine need to be examined from an ethical point of view.

My first reason is normative. Such representations raise moral questions that intertwine in at least three disciplines and their incompletely codified sets of values: medical ethics (World Medical Association, 2005 & 2006), humanitarian ethics (Hunt, 2011), and the journalistic ethics (Council of Europe, 1993; UNESCO, 2012). This disciplinary segmentation leaves us without clear universal guidance as to what standards should be applied to photojournalism when used or called upon by humanitarian organisations. In this paper, I will mostly examine the clash of values between