

# OF ORDERLIES AND MEN

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*Of Orderlies and Men*  
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Nigel Rapport



# OF ORDERLIES AND MEN

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## HOSPITAL PORTERS ACHIEVING WELLNESS AT WORK

Nigel Rapport

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*To Frances, and her life-project*

For so work the honey-bees,  
Creatures that by a rule in nature teach  
The act of order to a peopled kingdom.  
They have a king and officers of sorts;  
Where some, like magistrates, correct at home,  
Others, like merchants, venture trade abroad,  
Others, like soldiers, armed in their stings,  
Make boot upon the summer's velvet buds;  
Which pillage they with merry march bring home  
To the tent-royal of their emperor:  
Who, busied in his majesty, surveys  
The singing masons building roofs of gold,  
The civil citizens kneading up the honey,  
The poor mechanic porters crowding in  
Their heavy burdens at his narrow gate ...

William Shakespeare  
*King Henry V*

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## SERIES EDITORS' PREFACE

# HEALTH CARE AND IDENTITY AS SEEN FROM HOSPITAL CORRIDORS

*Andrew Strathern and  
Pamela J. Stewart*

We are delighted to be able to include Professor Nigel Rapport's book, *Of Orderlies and Men*, in our Medical Anthropology Series. One emphasis of the Series is on ethnography, and Prof. Rapport has produced an ethnography of a relatively unusual kind, focusing on porters in a hospital in a Scottish port-city with a complex industrial history. His avowed aim in immediate terms is to achieve an understanding of the lives of these hospital orderlies through the lens of participant observation. More broadly, he uses the perspective of these lives to explore wider arenas of class-based, gender-based, and national senses of identity. Scotland has been a site where numerous historical changes have recently taken place, ushering in new contexts and frameworks that impinge on peoples' daily lives. From passing conversations to the contents of official government papers structural changes in the economy and politics of Scotland make their marks in the landscapes of consciousness that constitute those lives. Prof. Rapport's study contributes to the broad investigation of "vernacular" identities, and his reports of the sayings and viewpoints of his fellow orderlies give us a first-order, in-depth view of what such identities mean both in the hospital context and in the wider spheres of sociality and societal structures in which, and against which, identities are shaped and crafted.

The hospital is a big, urban, general service institution and as such must share commonalities with other hospitals in Scotland and England. It must also reflect circumstances of health care at large in the society. Our own field-work areas in Scotland include places north of "Easterneuk" where the hos-

pital studied, "Constance Hospital", is situated.<sup>1</sup> These areas of our research, in the Glens of Angus and Perthshire of Scotland, can be seen partly as catchment areas from which patients sometimes travel to Constance hospital to receive treatment that otherwise is not available to them in the smaller Health Centers that serve people in the towns of the Glens. One man whom we know, for example, goes there to rest in a flotation tank as a part of the therapy for a long-standing condition of muscular sclerosis. His wife drives him there, and they make a day's outing of it, navigating the city's traffic and finding places to park. When asked if he thinks this therapy helps he replies that he does not think so, but it is something to do and the hospital staff are pleased to see him: the observable effects are social. The city as a whole provides some shopping opportunities also not available in the country towns of Angus in Scotland. For example, we were told in one local shop that a particular brand of cotton shirt for women that the store used to hold was now available only in "Easterneuk". When asked why, the attendant told us that the wholesaler for this garment was nowadays willing to supply the garment only to outlets that could sell it in large numbers. Naturally, these outlets belong to large chains found all over the U.K. in the cities, whereas the retailer in the town that we were visiting runs a shop with a local history and continuing local presence.

Prof. Rapport provides his readers with an informative sketch of the history of issues surrounding Scottish nationalism and national identity and its varying successes and intensities over the years. He begins with a reference to an earlier observation of our own, that certain individual lives are memorialized by plaques affixed to numerous sites by organizations concerned with Scottish heritage generally (Strathern and Stewart 2001, e.g., p 249). Thus, the

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1. We have been carrying out fieldwork and archival research in Scotland for well over a decade, most intensively in the Counties of Ayrshire, Perthshire, and Angus, but also in Aberdeenshire, Dumfries and Galloway, and Fife; with research visits also to Barra, Gigha, Islay, Jura, and the Orkneys. Our research has entailed visits almost every year, sometimes twice or more often in a given year. It is thus both long-term and multi-sited. In our remarks here we draw mostly on our knowledge of Ayrshire, Perthshire, and Angus, recognizing that situations and people's views may be different in different areas. For some indications of our work to date see Strathern and Stewart 2001, 2003a, 2003b, 2004; Stewart and Strathern 1997, 1998, 2003a. our work in Scotland has been extended since 2001 to County Donegal in the Republic of Ireland, primarily with farming people whose roots lie in the early migration from the South-West of Scotland, including notably Ayrshire, to what is now Eastern Donegal, and who are cognizant of the current cultural and linguistic revival movement of the Ulster-Scots (see Strathern and Stewart 2005, 2006; Stewart and Strathern 2003b). This interest in the movements of people of Scottish descent has also been extended into Scots diaspora studies generally, with an emphasis on Dunedin, Otago, in the South Island of New Zealand.

individual lives in question become metonyms for the imagined nation over time, claiming it both backwards and, importantly, forwards in time—since the plaques refer to a memorialized past but will endure into the future. They also refer, variously, to personal, local, regional, and national dimensions of identity, capturing these both in the past time to which they relate and in the moment when they as memorials are set up. Viewers then come upon these memorials successively and interpret them according to their contemporary perceptions. They are appeals to what Prof. Rapport, citing the work of David McCrone, calls people's *aspirations* for the future. These may be fluid and contested, but they themselves constitute a stream of tradition and thought that finds its way into many parts of the political and cultural "landscape" that we have referred to above in the realm of consciousness.

This stream cannot be entirely separated from considerations of a special historical and cultural kind. Ethnicity in the narrower sense is not really at issue here: what is at stake is much more a perception of histories of struggle and of cultural achievement, for example in the spheres of the sciences (e.g., engineering, inventions), the humanities (poetry, song, philosophy, novels), and religion (the traditions of Presbyterianism counterposed with earlier Celtic and Catholic streams of creativity). Historical themes in particular engage people at all levels of social class. Outside of one flat in a small town in Ayrshire, Scotland, where we have strong ties and co-ownership of one property, we met by chance a tradesman (a "joiner") who was vacating one of the flats and had returned to collect some of his possessions. Hearing that we were interested in history, he at once launched into a discussion of the minutiae of the Battle of Bannockburn in 1314 (at which Robert the Bruce's army of Scots defeated the numerically superior forces of the English monarch Edward II), in particular the issue of whether at a crucial moment in the battle Bruce's troops were aided by an appearance of the Knights Templar. Mentioning this matter with great excitement, he went on to note that, in spite of these traditions of an intervention by the Knights, some people argue that it was a deputation of Scots farmers who came in to the rescue and helped Bruce to victory—a tradition that would fit well with the rural Ayrshire context in which our conversation was set. We have found repeatedly that pieces of history of this kind come as readily to people's lips as a commentary on the contemporary news or the weather or soccer scores.<sup>2</sup> This tendency is the quotidian correlate of the sta-

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2. Another component here is language usage. When an elderly Scottish lady, from the same area, entered a nursing home in which many of the caretakers were Scottish, a relative from England stated that he had difficulty speaking with the caretakers since they did not understand him and he did not clearly understand them. The caretakers were speak-

tistic which Prof. Rapport quotes in which 3 out of 4 Scots surveyed say they feel more Scottish than British. As Prof. Rapport also notes, such statistical products of sociological research need to be given meaning by more intimately observed anthropological findings.

To this we would add, further, that a kind of shifting and situational pragmatism tends to steer people's attitudes to political issues of integration with, or differentiation from, the wider context of the U.K. Such a pragmatism may (or may not) in the end give a new shape to that context itself. We work mostly with rural farming people in Scotland, and have been interested in issues of farming, conservation and heritage as these are influenced by European Union policies within Scotland.<sup>3</sup> For these people, as probably for many others, the question of a separate national government for Scotland depends to a good extent on how they see their interests. Farmers see how prices for their products are at the mercy of world trade conditions, European Union regulations, and national institutional controls. When these forces affect them adversely, they complain, and wonder if a stronger national Scottish government could or would look after them better. The intrusion of large-scale retail companies or "chains" into the country towns is viewed with ambivalence. Many of these companies buy widely, on an international scale. Products flow in from the new member states of the European Union, out-competing local products in terms of price. The customer is supposed to go mainly by price, not quality or local loyalty. As we ourselves have experienced, tomatoes from Eastern Europe may be cheaper, but they may not seem to taste as good as local ones, especially after traveling long distances and being preserved over this time by various means. At the same time, there is a constant demand that markets be opened to wider areas, e.g., of the "underdeveloped regions" of the world. Currently (2007–2008) there is an upsurge of demand for dairy products, resulting from changes in consumer preferences in China, and this has adventitiously helped

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ing with the lowlands Scots accent and terms, while the relative was using a particular English regional accent. The minutiae of daily language use are closely observed and inferences are made about identities from these details, which also bear on how people react to and are influenced by one another.

3. On March 28–29, 2008 we were the Co-Organizers for the 2008 Academic Conference of the European Union Center of Excellence in the University Center of International Studies at the University of Pittsburgh. The Conference topic was Landscape, Conservation, and Heritage: Farming Issues in the European Union. One ethnographic focus of the Conference was on Scotland and Ireland. Our presentation for the Conference was entitled: "Conservation and Heritage: Farming History and Change in Scotland and Ireland", (Prof. Andrew Strathern and Dr. Pamela J. Stewart).



to raise milk prices, which had been depressed for a long time and pushed down further by the buying practices of certain large companies. (The same change has helped dairy farmers in the South Island of New Zealand, as we noted in a research visit in December 2007.) When foot and mouth outbreaks, however, occurred in southern England during 2007, Scottish farmers were hit by a ban on moving stock to markets just when they needed to be able to do so. Within Scotland, in Angus and Ayrshire, farmers complained about this and noted that if they were not subject to the rules exerted from England by DEFRA (the Department of the Environment, Food, and Rural Affairs, a composite successor to the Department of Agriculture and Fisheries), they could have been freed from these restrictions. Since the Scottish National Party had by now won its slim majority in the Scottish Assembly and was very active in promoting changes to benefit Scotland, these same farmers began to reflect that maybe Independence from England might be a good thing; whereas in previous years they had been more cautious and skeptical about such political issues.

Similar considerations may underlie issues to do with health. Since the Scottish National Party gained its slender ascendancy in 2007, its members have, as we have noted, been very active in promoting a variety of welfare-oriented legislation to help the relatively disadvantaged categories of people, for example by making bus travel free throughout Scotland for pensioners; by addressing the question of affordable housing in the face of a huge increase in the cost of houses influenced by an influx of buyers from elsewhere; including notably the richer classes seeking to move out of Edinburgh or similar categories of people from the South of England; and by encouraging a drive on the part of health authorities to counter the deleterious effects of obesity and poor dietary practices, especially in urban lower-income areas; as well as various environmental issues. The SNP here has attempted to occupy the political spaces of the Greens and the Scottish Socialists and to differentiate itself from the Labour Party, particularly the legacy in that party of the policies of Tony Blair. The Party also made a rapprochement with farmers on the topic of compensation for putative market losses following the ban on moving stock during the foot and mouth crisis period.

Perceptions of the effectiveness, or lack of it, in the Health Service, are varied, and people are keen to compare it with conditions in other countries, such as the USA or Australia and New Zealand. Among the Scottish people with whom we work, complaints are often voiced about the growth of bureaucracy and the lack of access to a particular local physician. On the other hand, people tell us that they can rapidly get at least a short visit to see one of the doctors on duty in the Health Center nearest to them where they may be registered

as patients.<sup>4</sup> They also generally express satisfaction in the spheres of hearing aids, spectacles, and rehabilitative therapy for strokes or injuries.

With regard to more serious, life-threatening conditions that require surgery, another theme regularly enters the discourse of people's that we work with.<sup>5</sup> This is the need to have private medical insurance or to be able to pay for a private operation outside of the National Health Service system. The welfare system looks after the mass of people and conditions at a certain level. Beyond that, because of a great shortage of doctors, nurses, and facilities, the waiting lists for surgery grow very long. To jump the queue it is necessary to pay. From time to time there is an outcry. Nurses are recruited from elsewhere, and to a lesser extent doctors also. People go overseas to get surgery, within the European Union, and may even get the costs met by the U.K. authorities. With the population of the relatively elderly on the rise, these concerns become more salient. The division of labor in hospitals reflects these conditions. Doctors carry high status and are in demand. They vary in their competencies and attitudes and the demand for them facilitates their differentiation and their unequal reputations. Hospitals also rise and fall in people's perceptions, particularly with respect to fears of iatrogenic illness and the danger of hospital-harbored "superbug" infections. Individuals vary in their opinions, fears, and preferences, whether they are doctors or patients. After reviewing the contributions of critical medical anthropology and its focus on structural inequalities, Prof. Rapport (referring also to Strathern and Stewart 1999) recognizes the importance of studying human agency and of doing so in a holistic context that encompasses both curing and healing.

That context entails many dimensions. Two that Prof. Rapport notes are the use of computers and the penchant for derogatory classifications. Porters seek the use of computers and the knowledge to be obtained through them. Rather differently, they verbally classify one another and those above them in

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4. People sometimes say these visits are very short and sometimes they have different doctors treating them—ones with whom they do not have a pre-existing relationship, thus depersonalizing the experience. Also, people complain that doctors interact more with their computer screens than with their patients during consultations. Data about patients are sought in blood work and test results rather than in the words of the patients, so that the understanding of suffering and compassion becomes displaced, rather than brought to light, in the therapeutic encounter. Nevertheless, people do appreciate rapid access to medical professionals, even if the treatment is not very comforting or personalized.

5. The business model of "health care" underlies this situation. If people can pay, they can get service that is superior. The Health Service of the welfare state was supposed to obviate the need for private medical care, but the pressures of the system, from various causes, preclude this, and health care as such suffers.

the hospital in ways that appear to constitute a subversive mimesis or anti-structural version of the extensive classificatory procedures by which the hospital is run as an "institution". The interest in computers must derive at least partly from the prevalence of their use as instruments of power and knowledge by the doctors in the hospital; as an appropriation by the orderlies into their own domain of a tool of power otherwise tied to a hierarchical institution.<sup>6</sup> Over the years we have found in our work with Scottish farmers something parallel to this process. First, they were forced to use computers to deal with the growing need to fill in forms and track down subsidies or simply to keep records of their stock. Then they would take on a more enthusiastic attitude when they realized they could use the same kinds of skills for their own consumption purposes or to launch new small business ventures. Most recently, throughout 2007, we found that many people had become disillusioned with the "cargo-cult" aspect of computers,<sup>7</sup> because of the dangers of identity theft, fraud, and trickery, as well as potential intimidation that also flow from the actions of internet "sorcerers" (as we may put it: hidden and dangerous agents of "evil" that steal "soul-stuff"),<sup>8</sup> in addition to a general boredom with what the internet can actually provide to people overall in terms of "power" or "knowledge". This latest phase has occurred in a time period beyond that of Prof. Rapport's own fieldwork in "Easterneuk". Perhaps by now his porters have also become somewhat disillusioned and have turned to something else as a focus for self-expression.

Aside from giving us a unique "slice of life" in the ethnographic mode, Prof. Rapport has also presented his readers with some challenging thoughts on the process of "institutionalization" in contemporary life and the classifying and reclassifying that go with this. We add here, finally, an observation from another realm of experience: aircraft travel. During 2006 and 2007 we noticed in international flights a growing tendency to divide passengers up, into those with some special privileges and those who are the "Coach" class residue. These changes are no doubt driven by variations in business models designed to secure new revenues. An airline may announce that only one bag will now be allowed on domestic flights free of charge, with a surcharge for an "extra" bag,

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6. For an extensive and insightful early discussion on the use and influence of computers and new technologies in general in social life see Lyotard 1984, 1991.

7. Another expectation associated with computers that we observed in earlier years was that they would make selling and buying easier, and thus the "cargo" of consumer goods would be obtained. Later there was disillusionment with this for multiple reasons.

8. For considerations on the extended use of terms such as witch and sorcerer in contexts outside of their more conventional deployment see Stewart and Strathern 2004.

that in the past had been allowed,—but this surcharge may be waived for “Frequent Flyers” or those who have registered in a particular preferred way; and so on. People are categorized and re-categorized in terms of costs and expenditures. The privileges offered are very minor, for example boarding ahead of other passengers and so having freer access to stowing hand baggage; or a few inches extra of seating room by paying a bit extra (e.g., “Economy plus”); but they do make a difference to travelers feeling tired and under stress in contemporary airport contexts. Travelers thus become more and more “institutionalized” in a similar way to how categories are constantly being created in hospital and health care situations.

In the sphere of anthropological theory, Prof. Rapport has contributed notably to many dimensions of thought, particularly perhaps through his insistence that we pay adequate attention to individual creativity in social life. The individuals whom he portrays in this book emerge strongly from the page as figures of interest in search of their own wellness. At the same time he succeeds deftly in relating them and their lives to the wider domains of Scottish society, its demands, pressures, and opportunities, and the highs and lows of fortunes that persons experience within it. His title for the book perhaps echoes John Steinbeck’s *Of Mice and Men*, which in turn drew its resonance from Robert Burns’ poem, “To a Mouse”, with its well-known lines:

The best-laid schemes o’ mice and men  
 Gang aft agley  
 An’ lea’e us nought but grief an’ pain  
 For promis’d joy!

(Burns 1955 ed., pp. 111–112)

Burns’ poem was full of compassion for the mouse. He regrets that the “cruel coulter” has broken into its nest, and notes that its foresight in building the nest against the cold of December had been in vain. Then he reflects that foresight cannot always protect us, whether we are mice or men, and expresses fears for his own future. Such a spirit of conjoined individual compassion and self-reflection, we may suggest, we are invited by Nigel Rapport to bring to our reading of this book.

Cromie Burn Research Unit,  
 Blacksidend Section,  
 5 February 2008

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# PREFACE AND ACKNOWLEDGMENTS

The book is an ethnographic account of a working hospital, its institutionalism and hierarchy. More particularly, it is an examination of the sense of self-worth of the hospital orderly or ‘porter’ who works at the base of the specialized division of labour. Where the hospital organization esteems medical skill and managerial efficiency, the male, ancillary staff would appear to be involved with tasks calling for physical stamina more than an acquired skill. The book is also an account of how the hospital regimen is resisted, even transcended—subverted, obviated and made not to count—through the power of porters, individually and collectively, to effect their own construction of wellness.

How would Shakespeare’s *Hamlet* seem, Bertrand Russell once pondered, if the play were seen from the point of view of the ‘First Sailor’ whose sole contribution is to utter the words ‘God Bless You, Sir’? If there were a society of men whose business in life was to act out this part and there were habits of interpretation and practice according to which these four words were made the kernel of Shakespeare’s entire drama? Here is an account of the workings of a large-scale, modern hospital from the perspective of the ‘mechanic porter’.

The ethnography is located in the Scottish port-city of ‘Easterneuk’. Famous in its day as a centre of both imperial production and global exploration, Easterneuk more recently has represented a post-industrial urban landscape with a population of some 150,000 and a high rate of unemployment, especially for men. In this setting, ‘Constance Hospital’, part of the National Health Service run by the British Government, with a work-force of thousands (including some 135 porters), remains one of the key local employers. The ethnography was undertaken in 2000 and 2001, shortly after Scotland regained its own legislative assembly (Parliament) for the first time in some 300 years: issues of national identity, of devolution and local employment, regionalism and globalism, represent a backdrop to the issues which the porters make central to their day-to-day working lives.

The book is in three main parts. In Part I (‘Settings’), the reader is introduced to the nature of portering work, to Constance Hospital and Easterneuk,

to the tenor of everyday interaction at Constance as a worksite, to the identity of the fieldworker, and to the wider anthropological literature on the hospital and on local identity (in particular, national) to which the book relates. Part II consists of seven chapters which examine different aspects of the portering life: notions of work and leisure, well-being, poverty, power and resistance, subversion, compassion, age, gender, nationality and technology. Part III ('Epilogues') reconsiders the book's style and stance on porter's 'power' and 'resistance', and offers some more general pointers towards the anthropology of health, institutionalism, nationality and identity.

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