

Travis Chi Wing Lau // While I was in graduate school, the issue of method was at the center of many discussions from reading practices to interdisciplinarity. In fact, a major conference organized by our Gender and Sexuality (“Gen/Sex”) Working Group was on the topic of method. Collectively we asked a number of difficult yet fundamental meta-questions about our scholarship: 1) how do we understand a field to have method(s), 2) why do we use such methods and to what ends? 3) how do we define our objects of inquiry? As I attempt to negotiate my relationship to multiple fields and my place in them, I have since returned to a work that has lingered with me for many years.

Robyn Wiegman’s *Object Lessons* (Duke UP, 2012) meditates on what it means to desire things from our objects of study. This desire animates our acts of thought labor and sustains us particularly through turbulent social and political climates like the one we collectively face now. Wiegman takes identity-based fields (“Women’s Studies, Ethnic Studies, Queer Studies, Whiteness Studies, and American Studies”) to task for how they tend to operate on the fundamental “belief in critical practice as an agency of social change” but frequently do not translate such knowledge produced into political praxis (10). There is instead this problematic gap: between interpreting the world and changing it, between meaning-making and intervention. By mistaking the production of knowledge as a stand-in for social justice, scholars forget that the theoretical work of the academy has implications beyond its walls, that our desires are political but may not actually manifest as political action. We must, Wiegman says, parse “the crucial difference between a field’s discourse of the political and the operations of the political that constitute it” (17).

Helping us to make sense of the numerous “death of the field” conversations pervading queer studies (and perhaps larger discussions about the limitations of critique), Wiegman asks us to think what it is we are doing when we demand more from our objects of study or even jettison them in favor of newer, “better” ones. As Zahid Chaudhary writes in an introduction[1] to a dossier on Wiegman’s book:

“If leftist criticism finds itself dissatisfied with its objects and replaces them with ‘new’ ones (for example, ‘sexuality’ replaces ‘gender,’ which replaced ‘women,’ and so on), then it must not assume that the replacement is a progress in thought, but it might do it some good to consider the dissatisfaction—the other side of desire—that animates the replacement of such objects.”
(130)

By disrupting this implicit progress narrative perpetuated through the constant replacement of objects of study, we might better understand the desires that motivate such replacement or even our disappointment with the objects themselves. What is it that eludes us about our critical objects, that resists our attempts to capture them through theoretical frameworks that don't always play out in the "real world"? What happens when the object has a life of its own, an autonomy that refuses the critic's attempts at forcing a fit between it and theory? "*What would it mean if we resisted the disciplinary imperative to 'move on'?*" Wiegman asks (53).

Though the health humanities are not quite identitarian in the same ways as the fields on which Wiegman focuses, I find her thinking about the very practical stakes of our scholarship to be timely and compelling at a moment when the field is beginning to really define itself and its critical objects. Rita Charon, a physician and literary scholar, helped to pioneer the field of narrative medicine, which has become a cornerstone of medical humanities. In a recent interview^[2] with the *Chronicle of Higher Education*, she reflects on the value of attending to narrative in fields beyond the humanities:

"We didn't create narrative medicine to address burnout—the emotional exhaustion, depersonalization, a decrease in one's sense of personal achievement—but these things have become urgent in medicine, and narrative medicine has been shown to decrease that."

While literary scholars and historians have rightly begun to critique the medical humanities for becoming reducible to exercises in empathy or self-reflection, Charon notes here how the field in some ways developed a life of its own as much as humanists want to demand more from the field and its objects of study. The progressive project of the medical humanities to make medicine more patient-centered and ethical demands a consistent questioning of what desires galvanize our field. As humanists, we desire to expand the archive of texts we study and the strategies by which we engage them, but how do we in the field negotiate our own desires with what has "become urgent in medicine" and the very real lives of the sick and disabled? If they are at odds, how do we mediate this impasse, particularly as an interdisciplinary field? What do we do with clashing "field imaginaries" as Wiegman calls them?

I want to follow Wiegman's lead here to "inhabit" this impasse: given the highly politicized nature of healthcare in the US, the medical humanities seem uniquely positioned to model the methodological "interplay of social life, critical practice, and political commitment" (21).

[1] "Inhabitations: A *Feminist Formations* Dossier on Robyn Wiegman's *Object Lessons*: Introduction." *Feminist Formations*. 25.3 (2013): 129—134.

[2] <https://www.chronicle.com/article/Why-Storytelling-Matters-in/244729>