Kotte, Gudrun 2009, *Wissen, Körper, Kompetenz: Das Erleben von Schwangerschaft, Geburt und Wochenbett von chinesischen Frauen in Berlin* (Knowledge, body, competence: Chinese women experiencing their pregnancy, giving-birth and the post-partum period in Berlin), Berliner Beiträge zur Ethnologie (Berlin contributions to ethnology) [ISSN 1610-6768], Volume 16, Berlin: Weißensee Verlag. Pp. 312. € 28.00 Paperback. ISBN 978-3-89998-139-1. German

This study examines how women from China reflect upon the process of their pregnancy and giving birth to their child in Berlin. It presents a spectrum of individual and collective experiences and perceptions that provide insights into transnational fields of competence and practice. We learn how the mothers consult knowledge from different sources. Some knowledge is provided by health care experts, such as midwives, gynaecologists, and instructors in courses and trainings. However, just as important is the knowledge that the women collect about medicine and about how to behave through their family and friends, who go through the months-long process together with them creatively and decide with them selectively step-by-step what to do or learn next. The picture includes also the post-partum period of about six weeks that has its own history and culture in Germany (Wochenbett) and in East Asia.

The author has first-hand professional experience in the field of birth-related health care. She observes who and what know-how are involved. In addition to the voices of the mothers—who are the main actors in this study—we read remarks from some of the Chinese or German fathers, and episodes about how the Chinese women managed to consult their mothers' and step-mothers' advice in Berlin. The mainstream biomedical health-care environment in Germany is certainly present and reflected upon in the informants' and the author's views. Also, the background of health care in contemporary China forms part of the practices. Furthermore, a large portion of the basic know-how and help is certainly provided not through any national hospital system on its own but, as the ethnography shows, face-to-face in the mixed group of families, professionals, and laymen who bring each child into the world. The women from China do what any mother in Berlin does and build up their support group and their competence from advice. Surprisingly, they hardly use the internet but pragmatically rely on the often non-institutionalised knowledge available where they live, and on non-verbal instructions and self-perception of their bodies.

Gudrun Kotte bases her analysis on a series of interviews with 21 women and on 40 'mental maps' of places they visited and persons who played major roles. She introduces the situation in Berlin and sums up challenges in the research on Chinese migrants in Germany. In her introduction she looks back on only a decade of research on the Chinese in Europe and points out two main reasons why they had been overlooked both in public discourse and in research: they were neither associated with causing ethnic problems nor were they visible in the image of the German capital and its ethnic businesses or the ethno-festivals on its streets. The highly-qualified mothers add to a picture of migrants from China in Europe that differs from what we know about old patterns of migration. Kotte also shows how different her informants are from the 'weak wives', or the citizenships of spatially mobile artists and cosmopolitans, explained elsewhere.

Chinese practices are part of health care in a European city like Berlin. Beyond ethnic belongings, as the Chinese mothers underline, they appreciate the security of modern institutions and professional expertise. Kotte's approach is to reconstruct each base of 'knowledge' as it is actually acquired in the nearly a dozen cases of transnational networks. Here the social and bodily practices are negotiated and assembled as a combination that originates from traditional as well as modern China, from the local evaluation and bricolage with contributions from both parents, from grand-parents, and several professional advisers. 'Competence' is performed as a cultural mosaic and built up by individuals and collectives that cuts across the images of expert versus patient. Cultural competence is not to be taught and applied just as a sub-field for ethnic minorities nor can it be explained by essentialisms. Instead, Kotte reconstructs it according to

the flows of information among differentiated actors. The third focus of the book is the ‘body’. The ethnography follows the body as the mother and child go through the three phases of the pregnancy, birth, and post-partum period, and thus demonstrates how each phase is prepared for, carried out, and reflected upon.

For learners and experienced professionals of health care, the book is not only highly significant as a case study but also as a tool for applied anthropology. It makes a case for including the competence of personal networks and transnational families in health care in the West. The bibliography includes articles and textbooks from the debate in midwifery and other applied fields. This book could hardly have been written by anybody except an author like Gudrun Kotte. She is a Sinologist but develops the discipline beyond its classical scope. As an ethnographer she has also visited three clinics and six physicians and has collected more than a dozen clinical cases during her fieldwork in Hangzhou—the provincial capital in one of China’s main emigration regions—in 2005/2006.

This study has the great advantage that it examines migrants and medicines not through an ethnic lens but specifically as the different actors in birth-related health care. Kotte exemplifies what needs to be further studied in migration studies in reluctant receiving countries where migrants and Asian medicines already belong to the society and culture. She combines medical anthropology with urban anthropology. Comparative studies too often pre-determine the scope of their investigation, concentrating on, for example, only the Chinese post-partum period (*zuo yuezi* 坐月子). More comparison with ethnographies of Asian medicines and family health care in the West is needed. Comparable ethnographies of medical practices may further illustrate the life-worlds of highly-skilled migrants. The author’s analysis is best when she sticks to her rich ethnographic insights. She sometimes refers to comparison with studies of similar experiences of migrant and non-migrant women as they shape their combined health care. Further studies should take up the impulse and contextualise like this one has in respect to the history of health care in modern East Asia and of non-Western medicines practised, taught, sold, and researched in the West.

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