

## Tuberculosis as Survival? Shifting Meanings and Strategies for Wellness in post-Soviet Georgia

In this paper I examine changing meanings of and experiences with pulmonary tuberculosis in contemporary Georgia. In particular, I focus on the spread of tuberculosis among imprisoned populations, for whom securing a positive TB diagnosis has become a strategy for attempting to improve conditions of detention. Drawing on ethnographic research about the implementation of WHO standards for TB control in Georgia's National Tuberculosis Program, I argue that illness may become a survival tool among vulnerable populations that are emerging and being reconfigured along the fault lines of Georgia's stressed market economy, privatization, and a fledgling primary health care system. Here, I aim to open up a space for exploring two critical aspects of health in light of post-Socialist transitions that are under-theorized in medical anthropology and anthropological studies of the former Soviet Union. First, I argue that the transformation of tuberculosis into a potential form of constrained agency pushes us to investigate the ways in which vulnerability itself, and the making and governing of "at risk" populations in the post-socialist context, may (through a sad irony) take on aspects of health agency or advocacy. Second, I suggest that the conditions of incarceration in which tuberculosis becomes part of the punishment as well as a vector of agency among detainees provide a compelling lens for furthering anthropological studies "of policy" in which development and aid organizations, policy institutions and (in the case discussed here) global standards for disease control are incorporated *within* the ethnographic inquiry and analysis. My intention is to point to the interconnected processes by which particular populations are named and biosocially positioned in relation to illness susceptibility or risk, the (constrained) forms of agency developed and deployed to improve some aspects of daily life via ill health, and the role of globalized aid and health policy programs in these courses of action.