Book review


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*Deadly Biocultures* offers an in-depth analysis and critique of contemporary U.S. biocultures by showing how biomedicine has become central to our everyday life. The authors investigate the imperative of life-making as

all those contemporary efforts to make people live more – to exponentially expand their capacities for life, to optimize and extend what counts as life and to encourage people to pursue positive life-enhancing practices. (1)

These quests for more life make up biocultures understood as a range of activities, practices and technologies found in late Western liberalism. The thesis of this book is that liberal biocultures lead to the unintended consequence of “an intensification of stratified living or subjection of bodies to new risks” (135). More specifically, this book traces the emergence and expansion of such biocultures in the United States. However, far beyond providing an account of contemporary biocultures in the United States, the rich variety of case studies in *Deadly Biocultures* confirms a global trend.

The authors’ conception of life-making and bioculture fruitfully engages with the growing literature on biocitizenship (Nikolas Rose, Carlos Novas), biosociality (Paul Rabinow), biovalue (Catherine Walby), and biocapital (Kaushik Sunder, Melinda Cooper), to name just a few.

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However, the key proposition of this book remains faithful to the theoretical framework and paradigm shift Foucault advances under the name of biopolitics and governmentality. As in Foucault’s notion of biopolitics, ‘life-making’ reflects both a positive project, i.e., the enhancement and proliferation of life, and a negative project, i.e., the regulation, discipline and governing of life.

Life-making operates as a regulatory politics of affirmation. Life-making governs by orienting people toward certain ways of looking after themselves, particular goals of health, and constrained understandings of body and self. (2)

Following Foucault’s understanding of biopolitics as a politics of making live and letting die, life-making is inseparable from what the authors call ‘deadly life-making’. The key objective of the book is to better understand how ‘deadly life-making’ manifests itself in the way in which biomedicine has become central to our relationship to ourselves and to others. The key question is “how death is folded into life through intimate and often mundane forms of governing” (15).

Contemporary biocultures in the United States, according to the authors, provide three distinct forms of ‘letting die’, three ways in which death is folded into life. One kind of life-making practices obscure death either by ignoring it or by seeking to make it invisible. Another kind of life-making practices produces deathly conditions of inequality, such as unequal access to health services, treatment, and inadequate care, etc. A third kind brings about death and/or death effects by increasing the vulnerability and precarity of certain individuals and communities.

A key finding of the book is that in late Western liberalism, ‘letting die’ takes the form of a ‘declining welfare imperative, the increasing absence of the idea of society or of a collective social good, and a heightened individualizing of the administration and management of life and risk” (5). As a result, under neoliberal rationalities and policies, the onus is placed on the individual as the only one who is responsible for “being healthy and maintaining health” (5): “health has become an endless and hypervigilant individual enterprise” (27).

The book furthermore confirms a trend towards the corporatization of health care and biomedicine with an increasing shift towards a customization of the body: “life has been geneticized and molecularized,
leading to expanding opportunities to further individualise life and intimately govern everyday life” (6). Again, the insight that neoliberal biopolitics, health care and biotechnologies further stratify society based on race, gender, class, disability, etc. is not new and has already been documented widely through the work of Nikolas Rose (2007), Melinda Cooper (2008), Thomas Lemke (2007), to name just a few. However, Deadly Biocultures provides insightful case studies of the workings of biopolitics and governmentality in biomedicine in the United States and for that reason alone is a very worthwhile read.

Adopting Foucault’s (2007) hypothesis of an intimate relationship between life, sexuality and truth, the authors argue that each bioculture is structured by “a central affirmation – an ostensibly positive ‘truth claim’ – that regulates and intimately governs that sphere” (7). Deadly Biocultures investigates the deathly dimension of these affirmations as they occur in the biocultures that structure the treatment and regulation of cancer (Chapter 1), racial health (Chapter 2), obesity (Chapter 3), aging (Chapter 4) and corporal disposal (Chapter 5). Each chapter traces the central truth claim that structures a respective bioculture: the affirmation to hope (Chapter 1), the affirmation to target (Chapter 2), the affirmation to thrive (Chapter 3), the affirmation to secure (Chapter 4) and the affirmation to green (Chapter 5).

The authors are careful to point out that their understanding of affirmation should not be confused with the affirmative branch of biopolitics, notably the one presented in the work of Roberto Esposito (2006). The authors convincingly argue that examining ‘affirmation as a governing operation’ does not mean that the path to emancipation is foreclosed. Instead, each chapter concludes with what could be called counter-affirmations or practices of resistance that undo the various logics of affirmation in view of opening other possibilities of life and death.

The core ethical motivation of the book is to “enhance our understanding of the ways people are positioned unequally within biomedicine and its logics” (17). As such, the main focus of critique is the structural inequalities in health care and regulation pertinent to neoliberal policy and governance. Deadly Biocultures is inscribed with the broader tradition of critical theory insofar as it “seeks to refashion the normative terms of existence” (17).

Chapter 1 explores “how the affirmation of hope is used to orient individuals and the population more broadly toward vigilant survival
following cancer diagnosis – to persist and affirm life through the individual and collective deployment of hope” (7). Under the affirmation of hope, life is understood as something that can be “endlessly enhanced, optimized, customized, commodified, and biologized” (28). Here the affirmation of hope stands for a refusal to accept finitude. The chapter investigates cancer activism and treatment and shows how the affirmation of hope has shifted from earlier national protection efforts to an individualized/biologized disposition and activity: a “commercialised mass spectacle and an optimistic – at times militant – enterprise” (9, 5). Cancer-related biocultures actively make for and maintain hope via “spectacles of hope, infrastructures of care, and bioethics of faith” (20), with the ‘hope gun’ as one of the most remarkable examples reflecting the cruel optimism of hope (29ss). In these biocultures, hope also functions as theopolitical discourse of faith that underpins the belief in biomedical progress (35). The authors’ main objective is to show how insistence on hoping for the biomedical cure for cancer “precludes a social justice approach that would actually apprehend the environmental, class-based, and racialized causes of cancer incidence and deaths” (9). By contrast, the authors suggest to counter-act the dynamics of hope by creating alternative ‘tactics of hope’ that operate as critiques of the dominant conventions of hope (45) and open other ways to live and die from cancer. The authors find these alternative ways to hope exemplified by the Beautiful and Bold Movement (41) and the photographic works of Bob Carey’s Tutu Project (42ss), among others.

Building on the entanglement between biopolitics and racism outlined in Foucault’s (2000) lectures Society Must Be Defended, Chapter 2 addresses the affirmation to target within the context of race-based health (9). The central claim of this chapter is that “race-specific pharmaceuticals and medical hot-spotting position race as a proxy for corporal/genetic truth, geopolitically delimit life, and threaten to make health and other social inequalities even worse” (10). By contrast, the authors call for an ‘abolitionist biomedicine’ that recognises and challenges the multifarious ways that race is ontologized as a corporal and/or spatial truth while attending to the very real embodied effects of structural racism (10).

Chapter 2 traces these countercultures from President Johnson’s ‘unconditional war on poverty’ in 1960, via the Black Panther Party in the 1970, to today’s Black Lives Matter movement (BLM). One counter-prac-
tice organised by the BLM movement is the provocative protest actions known as die-ins, where groups of protesters ‘play dead’ in public spaces to contest the racism dispersed throughout the spaces of everyday life (67). According to the authors, an ‘abolitionist biomedicine’ would consist of more imaginative and visionary practices, rather than the prescriptive and constraining re-instantiations of racial essentialism that characterize current biocultures in the United States (68).

Based on Foucault’s (1999) thesis of the body as a machine and of disciplinary power as a way of optimising and maximising the functioning of the body, Chapter 3 analyses the affirmation to thrive in relation to fatness/fat and the accompanying ‘economy of fat’ in two biocultural spheres. The first is the sphere of biomedical and public health practices that work to eradicate fat from the body with obesity as an example of an individual ‘failure to thrive’. For the authors, these practices fail to address the structural inequalities that produce and advance obesity in the first place, making it an “unequal opportunity disease” (10). The authors show how the individualization of obesity “potentially subjects people to numerous deathly conditions and forms of punitive administration” (79) and therefore obscures the ways in which people are often conditioned by material deprivation based on race and class (80).

The second biocultural sphere examined in this chapter is the rise of fat harvesting in regenerative medicine and stem cell research, practices that build on the biovalue of fat and the role fat plays in the (re)generation of life (73). In this sphere, fat becomes an ‘entrepreneurial material’ that can be used to make individuals live more (83). Like the eradication of fat, the practice of harvesting fat “solidifies the unequal distribution of life based on economic access” (73) insofar as these biotechnologies are privileges enjoyed predominantly by a white, upper-middle class, insured population (89). Against these two dominant forms of affirmation to thrive, the authors signal some “more inclusive and socially accountable ways to thrive” (11). Some of the examples given are the Health at Every Size movement and the ways in which this movement advocates for ways of eating that are flexible and respect the social conditioning that determine eating options (90). Another example are Latin American kitchens as sites of culinary care that nourish social ties and build communities of women coming together to share their stories on how they redefined food and eating as pleasure. Again, the key here is to move
away from regulatory, individualizing and life-threatening practices that institute an inequitable distribution of health towards a commitment to “vitalizing and maintaining sustainable lives” (94).

In line with Foucault’s (2004, 2009) thesis on the relationship between biopolitics, governmentality and securitisation, Chapter 4 explores the affirmation to secure the life of the elderly and to secure against aging and decline in a society in which aging is largely associated with dependency, pathology and declining productivity and perceived as a fiscal burden and an indication of national decay. The chapter examines practices associated with ‘aging well’, including the economic rationalities (biofinancialization) that condition the treatment of older individuals in nursing homes and hospice care (12). The chapter discusses the relentless biomedical efforts to extend the life of the elderly in their own homes, i.e., to secure “dependency-free life expectancy” (100), as a means of postponing the need for an elderly person to require institutionalised health care. The authors convincingly demonstrate that this securitisation may not actually lead to the desired independence in old age. On the contrary, “aging at homes involves relinquishing some degree of autonomy and privacy rights” and “may lead to a general condition of ‘house arrest’ for seniors and data mining-operations” (103).

As in previous chapters, one of the main problems of these practices is that they promote individualist notions of personhood and independence (98) that undermine “a sense of accomplishment and commitment to the meaningfulness of aging as a kind of transformation connected to and proceeding death” (107). Furthermore, the authors discuss how the broader political economy of institutionalised elderly care oriented towards efficiencies ends up intensifying inequalities of old age and producing practices that subject individuals to “deadly care” or what the authors also refer to as landscapes of abandonment (117), “shadowlands” of dependency (115). The chapter conclude with a reflection on counter-conducts of aging and alternative biocultures of aging that “reaffirm aging based on positive understandings of dependency” and “vulnerability as integral to life and social relationships” (12). The authors seek to open a critical reflection on the governance of aging, old age and decline by asking how an “emancipatory gerontology” may look like (126). Some of the examples discussed include the national Village to Village movement, the Co-housing Association of the United States and
other intergenerational housing communities governed by principles of mutual care, shared services and social justice opening new relational possibilities (124-132).

The final chapter is dedicated to an analysis of the afterlife of the human body, critically surveying “contemporary disposal technologies and commemorative efforts that seek to ‘green’ the dead human body, from recycling body parts to returning the corpse to nature” (12). According to the authors, these practices extend the “biomedical truth discourse” by affirming the “afterlife”: “the governance of death now affirms a material afterlife of efficiency, utility, adaptation, and exploitation of dead bodies for entrepreneurial purposes and/or personal legacy” (142). Case studies include environmentally friendly conceptions of ‘sustainable death’ and the emergence of new cadaver-sourced bioproducts which transform the dead body into forms of biovalue producing enhanced efficiencies within the broader circuit of capital (142). Accompanying these trends, the authors document an increased demand for customized products and activities to enhance personal legacy and new forms of memorialization that has spurred the transformation of the material remains of the dead into new forms of postmortem “biopresence” (148).

Not surprisingly, these new practices perpetuate inequalities and exclusions to the extent that life is affirmed as afterlife unevenly and contradictorily while other parts of the population are denied self-determination and/or social legacy (150). The authors warn that the increased privatization of death could mean both the “social death of death” (151) and further “colonising of the natural world with human biopresence” (154):

In such cases, nature does not preserve legacy but serves to depoliticize death, because human remains do not appear to signify or surface as the material ruins of injustice. In other words, green death risks further green-washing an already stratified and racialized nature. (155)

In response to the various practices of affirming the ‘afterlife’, Chapter 5 explores “an environmental ethics of human remains that contributes to rather than eclipses environmental justice and civil rights projects” (13). Such an ethics would require counter-acting the disciplining of the dead body into a labouring and productive body and into a vehicle for value-generating environmental legacies (156). It would also require reversing the depolitization of death for example by acknowledging
the neglect of African American burial grounds (157). Death would then become “an opportunity to address social failures and democratize the ‘good life’ through enacting and sustaining more just relations with human remains” (159).

*Deadly Biocultures* is a very welcome addition to the literature on neoliberalism, biopolitics and governmentality. I highly recommend it.

**Bibliografía**


