

Introduction: Health, Security, and Identity

Everyone who is born holds dual citizenship, in the kingdom of the well and in the kingdom of the sick. Although we all prefer to use only the good passport, sooner or later each of us is obliged, at least for a spell, to identify ourselves as citizens of that other place.

Susan Sontag

Susan Sontag suggests in *Illness as Metaphor* that health and disease constitute two different countries, two nations in which everybody holds citizenship, though only begrudgingly to the “kingdom of the sick.” She uses this image of two different nations to open her seminal study on the metaphorical understanding of disease. It was written in the late 1970s just before the emergence of AIDS at a time when disease and the body were still largely neglected in the study of culture. Sontag criticizes the dominant view that sickness can be understood purely in biological terms emphasizing its dependence on cultural frameworks and narratives. She asserts that illness is not a purely physiological experience and cautions that “it is hardly possible to take up one’s residence in the kingdom of the ill unprejudiced by the lurid metaphors with which it has been landscaped” (Sontag, *Illness and Metaphor* 3). She thus articulates one of the central premises of the field of biocultures, namely that biological and cultural understandings are intimately intertwined.¹

More importantly, the national metaphor, which Sontag uses to introduce her study of cancer and tuberculosis, expresses two further components which are in essence what I will attempt to explore more thoroughly with my study of the confluence of health, security, and identity. Sontag reiterates the understanding of health and biology as inflected in terms of national security – in her study most crucially through the metaphor of warfare and battle. With the image of kingdoms and citizenship, she represents health as

1 In 2007 Lennard Davis and David B. Morris wrote the “Biocultures Manifesto” defining the perspective of the nascent field. Their declaration is based on assumptions already formulated by critics such as Philipp Sarasin and Michel Foucault, namely that science is not factually objective but that the findings are always inflected by culture and cultural narratives.

a closed “space” that can be secured and protected by the appropriate authority over security. It is imagined as a space that can be separated from other territories. Furthermore, her introduction echoes the commonly held misconception that being healthy is the norm and the normal which everybody should experience with few and temporarily limited exceptions. This assumption reflects a pervasive “cultural imaginary” (Fluck) of biological security, as I will argue, that was produced by the rise of medical and scientific normative power since the 19th century. At the same time, her image of a dual citizenship antagonizes this expectation of security produced by what I will analyze as the messianic narrative of scientific and medical salvation and the promise of radical self-empowerment, which still dominate cultural beliefs today.

Today the border between the two countries of healthy and sick, to stick to Sontag’s metaphor, is more arbitrary and untenable than it seemed in the 1970s and 1980s. At the same time, it represents a highly securitized zone with border guards and high-tech security equipment enforcing the borderlands. The all-encompassing reach of medicalization and biomedicalization² has significantly changed the understanding and experience of health and disease. Both “states” cannot be distinguished in a clearly delineated binary opposition discerned by a person feeling healthy or the presence of disease. Biotechnological developments have allowed for the diagnosis of presymptomatic illness, so for the detection of a disease before the body expresses symptoms. They have altered the “medical gaze” (Foucault, *Birth* xii) and understanding of the body. Contemporary surveillance medicine³ “has redrawn the boundaries between health, illness, and disease to promote a regime of total health” (Earle et al. 96). This imaginary of total health promises security through the controllability of the body, while at the same time rendering health a “precarious state” (Armstrong 397) that one can never be quite sure of. This “problematization of the normal” (Armstrong 395) produces an “always precarious normality” (Luhmann vii) which dominates the experience of biological security. The “kingdom of the well,” thus, describes rather a transitional zone that everybody holds only a visa for. And this visa needs to be certified and renewed regularly and can be revoked at any point.

Biology and health have not only metaphorically been increasingly understood in terms of security and risk. In addition to detecting diseases earlier and in their molecular stages, biotechnological developments have progressively focused on uncovering disease potentials in the form of increased susceptibility, such as the risk for breast cancer, diabetes, or depression. It has therefore become crucial to know one’s risks and to identify one’s security status. Such a diagnosed risk does not describe a change in terms of health but in terms of security, or rather a future state of security. Nonetheless, increased risks, as well as presymptomatic illness, initiate an “anticipatory mode of patienthood” (Nye

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- 2 Medicalization is commonly understood as “the processes through which aspects of life previously outside the jurisdiction of medicine come to be construed as medical problems” (Clarke et al., “Biomedicalization” 161). Biomedicalization, which started in the mid 1980s is conceptualized as the “transformations of such medical phenomena and of bodies, largely through sooner-rather-than-later technoscientific interventions not only for treatment but also increasingly for enhancement” (Clarke et al., “Introduction” 2).
 - 3 Armstrong asserts that medical practice today needs to be understood as surveillance medicine, which relies on techniques different from other medical practices and forges a distinct relation between individual, the body, and illness (Armstrong 402).

105) that demands the individual to act. In fact, the risk of falling ill becomes in this context a “diseaselike state in itself” (Fosket 331).

Most Americans, thus, live in a space between the two kingdoms, in the borderland that “is a constant state of transition” (3) as Gloria Anzaldúa describes it in a different context. This is a fearful space, as every transgression seems to constitute a security threat – for the individual as much as for the community at large – representing punishable offences. “[S]elf-techniques” (Rose, *Politics* 24) to ensure one’s security in terms of biology are therefore paramount. “Under this regime, the individual is not just subjected to the technologies of medical surveillance but is expected to engage in the practice of self-surveillance” (Earle et al. 96), making security practices and logics an inherent part of understanding the body and the self. It is therefore the understanding of biological security rather than merely health, as I will argue, that demands attention and critical thinking, especially in the United States of America.

Historically, security has been an important concept for the self-understanding of the United States of America. Framed in the terminology of freedom and liberty, which was inseparable from the understanding of security at the time (Reid 70), it was the ideal of the American Revolution and became enshrined as a “God given Right” in the Declaration of Independence. With shifting meanings, security has remained a central part of U.S. American self-perception and representation. Today, John T. Hamilton even asks in *Security: Politics, Humanity and the Philology of Care* if we are living in an “age of security” (2). But security is not just one of the leading topics of today’s discussion in terms of national and international measures; it also pervades American society and culture in a more intimate manner. Security, or rather the contemporary understanding of security is increasingly central to the understanding of biology and health, as well as the conception of what “good life” is. In this book I will examine the biologically inflected understanding of security as an increasingly central paradigm in American culture and society.

The intersection of security and biology is commonly understood and studied in terms of biosecurity designating governmental practices that protect the nation from contagious disease outbreaks.⁴ Biosecurity has become such an important cultural and political paradigm that its study has established the burgeoning field of Biosecurity Studies. Especially following the Covid-19 outbreak this association is more fixed and more tangible than it was just a couple of years ago. And President Trump’s repetitive use of the term “China-Virus” and his blame campaign against China show how closely connected national security and disease are. The pandemic also exposed how biosecurity affects the most private and intimate spaces of life. Private bodies are not only public texts but are understood as public threats and are regulated and defined within the

4 There is a decisive definitional difference between biosafety and biosecurity in the US: biosafety refers to measures taken in laboratories; biosecurity refers to infectious disease outbreaks (as terrorist attacks or naturally occurring). In Europe biosecurity is focused on food security and in Oceania on imported agrarian practices and species that endanger indigenous flora and fauna. (Bingham and Hinchliffe 173)

responsibilities of “biological citizenship” (Rabinow and Rose 197).⁵ Though in the U.S. American context, biosecurity as a term is used predominantly to refer to contagious diseases, epidemics, and bioterrorism, the logics of security have also been integrated in the understanding of biology and health outside of contagious diseases. I therefore wish to argue that the term can and should be extended to include the biomedicalization of U.S. American society. With this book I aim to show that security holds a central position in U.S. American culture that extends beyond questions of national security to the biological, applying the same logics to the individual body and life as to the nation at large. In applying the term biosecurity to non-contagious disease contexts I want to imply both that many of the measures and practices of “official” biosecurity find ample use and are rather routinely applied to individual bodies (such as surveillance) as well as that the logics, rhetoric and images used to represent biological security of the individual body are inflected by logics of national security: most importantly prevention and pre-emption.

The confluence of these logics with biotechnological and biomedical possibilities, I will argue, facilitates or produces new and renewed identity formations, collectively as well as individually. Pre-emptive and preventive security logics determine the way the body is understood and encountered, influencing the understanding of self and identity. They produce new relations between the individual and their body, engendering new biosecurity identities or “biosecurity individuals” as I will call them. When Pathway Genomics as a global genetic testing laboratory, for instance, advertises their genetic tests with the promise to decode not only the biological make-up of the body but the fate of the targeted consumer,⁶ the relation of body and self becomes inherently interconnected and attached to a new logic of bodily security. Life is here not represented as a fateful and given fact, but rather as a controllable process that can be optimized and maximized – that can be secured. And it is the responsibility of the biologically self-empowered biosecurity individual to engage in the proper security practices and to take advantage of their right to choose. This responsibility for the self is a crucial expression of “biological citizenship” (Rabinow and Rose 197) which is framed as fundamentally American. It is represented as an essential part of the freedom and liberty which allows the self-reliant individual to take part in the American Dream. Knowing one’s risks and therefore knowing one’s security status has thus become an increasingly important part of understanding body and self, that goes far beyond medical practice and health, and which seems to have become a precondition for a successful and happy life. “To live well today is to live in the light of biomedicine” (Rose, “Human Sciences” 7). Biological security is therefore an insightful object of research representing a dominant paradigm of culture as well as a crucial vantage point on how “good life” is conceptualized and shaped in U.S. America today. With the analysis of literary and cultural representations I aim to explore how the bio-

5 Nikolas Rose and Carlos Novas define this term in the homonymous article as the new and old ways of understanding citizenship as well as who is excluded from such a designation (“Citizenship”).

6 Pathway Genomics advertises their genetic test-kit on their homepage with the claim “This is about gaining more knowledge about yourself.” Similar claims can be found in the self-representation and the promises of 23andMe.

logically inflected understanding of security determines life and identity constructions, structuring U.S. American society and producing new paradigms of difference.

It would be suggestive to assume that security in the context of biology is simply health. Both – security and health – are usually regarded as fixed properties or characteristics. Security is most frequently understood as a clearly defined goal and endpoint, which serves as motivation and legitimization (Brunner et al. 856). A closer look reveals, however, that security is rarely a fixed property or characteristic. It has to be produced by convincing narratives in order to be intelligible and to develop its cultural force. Similarly, health is often talked and written about as if it was a definitive condition or a natural state that can be protected. But as Georges Canguilhem already argued in *The Normal and the Pathological*, health is a relational concept defined in opposition to its antonym the “pathological.” Rather than understanding health as a definable fixed state he described it as “life lived in the silence of the organs” (*Writings* 43), which depends on individual experience.⁷ Despite Canguilhem’s critique, the understanding of the body as machine, which either works or is broken and has to be fixed, prevails and has been further exacerbated by the rise of the “Biomedical TechnoService Complex, Inc.” (Clarke et al., “Biomedicalization” 162). In the current state of biomedicalization the understanding of the “normal” depends on the expectations of security. And these expectations are commonly organized in narratives that serve to make security and risk intelligible and represent them as manageable.

The processes of biomedicalization and its securitizing trends are predominantly analyzed within a sociological framework in terms of biopolitics. In contrast to the leading focus on the practices of securing health in these studies I wish to examine the narratives that facilitate such practices in the first place. Instead of focusing on the increasing normative power of biomedicine only, I would like to question how the understanding of biological security is constructed and made pervasive. And here my primary contention is that it is made culturally present in narrative form. I therefore propose to analyze biological security within the framework of performativity stressing that the understanding of biological security relies on narratives. I will thus regard biological security not as a determined end point but as a condition which has to be defined to become meaningful and acquire its culturally constructed meaning. In that sense, notions of security deeply depend on narratives that make a particular understanding of security intelligible and pervasive in a way that compels people to recognize it and to act or react accordingly. I regard security thus not as a stable state or self-evident object, but as a moving target that has to be narratively fixed. This narrative construction is all the more pertinent in the context of biological security, which often relies on highly professionalized and specialized knowledge. Since biosecurity is located in a “high technological frontier” (Giddens 3) where diagnosis of susceptibilities and predispositions are not experientially present to the person concerned – besides the medical procedures that go along with it – these narratives become all the more crucial.

7 Canguilhem focused on genealogical studies – similar to Foucault – looking at the history of the production of knowledge to understand contemporary practices. His study aims to “destabilize . . . a system of knowledge that has proclaimed itself to be the only fount of truth” (*Writings on Medicine* 6).

The understanding and study of security as narrative is by now an established part of Security Studies, especially Feminist Security Studies (Wibben). Literary Studies have also started to engage in the field by forming an emerging “literary security studies,” as Johannes Völz proclaims (“Aestheticizing” 616), attempting to find ways in which literature can illuminate something more about security in the United States. David Watson asserts in the special edition “Security Studies and American Literary History” that the field reveals how questions of security and the logics of pre-emption pervade contemporary literature. Völz cautions, however, that “literary security studies” should not limit itself to a form of “surface reading” which results in a form of “security realism” (“Aestheticizing” 619). Publications such as “In/Security” edited by Martina Deny and Elaine Morley are more centered on raising the question of an aesthetics of security responding to an “[a]tmosphere of fear” (1). Völz, in specific, asserts that literature contains the possibility to represent and understand security differently, facilitating an enabling and empowering understanding of security. Literature, he claims, turns to insecurity performing a form of “transvaluation” (Völz, “Aestheticizing” 619). But also, the focus on the aesthetic quality of security is discussed controversially, as negating the material realities and suffering produced by security practices (Watson, “Beautiful Walls”).⁸ Most of these studies predominantly include biological security only in a cursory statement which subsumes it under the wider analysis of governmental power controlling the public. With this book I wish to raise biological security from its position in a subordinate clause, as I am convinced that its impact on life and the understanding of the self is far greater than such a position indicates and allows for. I will argue that the security narrative established by the rise of science and medicine as the arbiter of biological security has established a forceful fiction of biosecurity, a pervasive “cultural imaginary,” which relies on narrative and performative acts.

I will therefore study biosecurity as both, performance and performativity to fully understand the growing phenomenon of “cultures of biosecurity.” This Performance Studies lens allows me to include and further understand the performances that surround and constitute the biosecurity identities I am studying. Judith Butler developed her theory of performativity in *Gender Troubles*, and extended as well as defended it in *Bodies that Matter* and *Precarious Life*. Performance and performativity have long become dominant theoretical paradigms in Literary and Cultural Studies. At the same time, her theoretical approach has been harshly criticized for negating materiality and foreclosing subjectivity. It therefore might seem paradoxical to turn to this particular theory. However, I consider Butler’s approach to materiality and the body a promising vantage point to understanding biosecurity and the identities forged by its narratives. Her writing seems to search for something hidden to be recovered from behind a “social mask” (*Precarious* 37). Similarly, the studies of biomedicalization seem to struggle to secure the human threatened by nature and/or medical practice and biomedical definitions. Both approaches have considerable shortcoming, especially in regard to bodies that defy the biosecurity narrative of

8 David Watson responds to the critique by Völz, which was targeted at his edited journal edition, by emphasizing the dangers of reducing “security” to aesthetics by quoting Trump’s description of the wall he attempts to build.

an intact able body remaining caught in the role as the threatening other.⁹ Nonetheless, I consider performativity the most productive approach when turning to a field of scientifically defined security with a forceful truth claim to the objective description of biological states and processes.

This does not mean, however, that scientific results are not to be taken seriously nor do I mean to engage in a discourse of the post-factual or “fake news,” which is diametrically opposed to my academic and ethical conviction. Rather, the theoretical approach aims to contribute to a productive reassessment of narratives represented as unquestionable truth by a field that seems to effectively “lose sight” of the conceptual cultural frameworks, which gave rise to the research, and which reiterate the biased assumptions and violence of the cultural narratives they are based on. Science does not establish natural categories of security, as I will show, but represents an ableist and healthist security discourse that is deeply influenced by social and cultural bias. Rather than diminishing the suffering of individuals as non-referential, this perspective facilitates the critique of security narratives and practices which influence the production of disparate securities and biosecurity individuals under the guise of the natural. As a Cultural Studies project the central concern is therefore not to define the elusive and intangible object of biological security but rather to analyze how security narratives are constructed and what the material effects they produce are.

Since biosecurity practices are not enforced but rely on the complicity of biosecurity individuals as self-reliant subjects, affects are crucial to studying these material effects. Security narratives rely on fear as well as desire and hope to legitimize the practices as a necessary means to maintain and protect a “good life.” “[W]e can see that bioscience is not only about the production of truth: it can become invested with hope and optimism by citizens who have an active stake in their health and that of others” (Rose and Novas 28).¹⁰ I therefore wish to explore biosecurity as a “desired object” in terms of affect theory predominantly based on Sara Ahmed and Lauren Berlant. Rather than relying on an a priori meaning and feeling, biological security relies on the attachment to fears and hopes to become pervasive constructs and performative scripts. Similarly to Völz, I therefore wish to emphasize how security narratives “appeal” (Foucault, *Security* 21) to the individual and how they compel people to act. While Völz seeks to investigate the “appeal” of the concept of security by analyzing the narratives provided in literary fiction, my own approach both widens and narrows the investigative scope. It widens it by looking at diverse discursive formations emphasizing the antagonisms, commonalities, and reciprocities of the different forms of biosecurity narratives, and it narrows the perspective by focusing on security in the context of biomedicine and biotechnology.

9 Tobin Siebers explains in “Disability in Theory” that the disabled body is a blind spot in theory – including the theory of performativity – where it is pushed to the margin as much as in society built for able bodied.

10 In a similar way Deborah Lupton points out that “[i]t is not the ways in which such discourses and practices seek overtly to constrain individuals’ freedom of action that are the most interesting and important to examine, but the ways in which they invite individuals voluntarily to conform to their objectives, to discipline themselves, to turn the gaze upon themselves in the interest of their health” (*Imperative* 11).

In part I – “Framed by Theory: Security, Biomedical Science, and the Biosecurity Individual” – I will establish my theoretical approach to biological security narratives and identity formation and provide the historical context of biology and security in the United States. In chapter 1 I will first elaborate on security narrative as performative following theoretical approaches of John Langshaw Austin and Jacques Derrida. With the theoretical terminology at hand, I will then trace how the body and life became securitized by focusing on the historical processes of medicalization and biomedicalization to establish the “historical ideas” (Butler, “Performative” 521) that shape the understanding of biosecurity today. I will trace and highlight the security logics which form a development from prevention to pre-emption and total control, and show how the messianic narrative of scientific and medical salvation has become more and more forceful. In chapter 3 I will then show how the growing complex of biomedicalization and its adherence to logics of prevention and pre-emption define the relation of the individual to their body, producing new biosecurity identities. After establishing the historical genealogy of biosecurity culture and the individual in the present, in chapter 4 I will return to performativity to facilitate a more thorough understanding of the “new” biosecurity individuals in terms of identity theory.

In part II – Fictions of Biosecurity – I will turn to the analysis of biosecurity narratives as cultural form which pervade society and culture at every turn, creating an essential part of “biosecurity culture” and its necessary stories to understand the self. Analyzing biosecurity narratives in different discursive formations I will use the renderings in classical memoir, testimonies, documentary, and fiction to draw attention to the performativity of security and the material effects produced by the security narratives. I chose a wide variety of texts to argue that fictions of biosecurity and its intertextual dependence on the messianic narrative of scientific salvation are not restricted to fictional renderings but constitute an essential part of how we understand bodies and identities.

In chapter 5 I will examine Alice Wexler’s memoir *Mapping Fate* focusing on an early expression of the biosecurity identity forged by the nascent possibilities of genetically testing for Huntington’s disease and the security promised by this practice. I will show how the understanding of biological security as well as of her identity relies on narrative construction accomplished by the act of life writing. In chapter 6 I will read previvor testimonies of pre-emptive mastectomies, which are performed because of the diagnosis of hereditary breast and ovarian cancer risk, as paradigmatic examples of biosecurity individuals today. The identification of risk instigates and demands narratives that performatively produce both risk and security as present realities leading to changed understandings of the self and to invasive material effects. While the pre-emptive surgical interventions in the context of breast cancer produce the fiction of control and total security, in chapter 7 I will turn to the failure of such security promises and the possibility of escaping the seemingly all-encompassing regimen of biosecurity. In the analysis of Physician Assisted Dying represented in the documentary *How to Die in Oregon* by Peter Richardson I will focus most explicitly on the re-negotiation of the dominant narrative of scientific and medical salvation, as well as on what biological security in terms of good life really means. In the last analysis chapter I will turn to fictional accounts of biosecurity and its failure by examining Nathaniel Hawthorne’s “The Birth-Mark” and Gary Shteyngart’s *Super Sad True Love Story*. Analyzing these two texts of failed utopian attempts to

establish perfection or total biological security together aims to highlight the continuities and changes in the imagination of biosecurity and the narratives that produce it.

Health and biology have become dominant paradigms in the study and understanding of U.S. American culture and identity. Sociologists have even pointed out that biology represents one of the “key sites for the fabrication of the contemporary self” (Rose, *Politics* 111). Also in the humanities the significance of health and biology has been widely acknowledged. Already in 2005, Priscilla Wald wrote that it is important to consider “how ‘biology’ is articulated within social institutions through narratives that can shift to incorporate new formulations into familiar hierarchical structures” and that “[t]he nation is an important site at which those narratives are produced” (“What’s in a Cell” 220–1). She reasserted this focus in her 2009 presidential address to the American Studies Association when she called for American Studies to recognize the importance of this “turn” to biology, or bio-cultures, as a crucial lens and object of study (“American Studies” 186). With this book I wish to emphasize the underlying processes shaping the understanding of allegedly “natural” corporealities and fixed meanings that constitute the dominant apprehension of what “good life” is, and what it means to be human. By making visible the structures that help to make an understanding of biological security pervasive, I wish to provide a basis on which prevalent structures and ostensibly fixed meanings can be questioned, critiqued, and potentially challenged. My cultural critique of the intersection between health and security is committed to the efforts of Biocultural Studies, and that is the “bringing together of science and culture” – not to pit them against each other but to bifurcate each other. The study is thus intended to be more productive than a formulation of hostile *resentiments* against a field of academia that is clearly striving while the humanities, my own home ground, is struggling for legitimacy, funding, and relevance. Instead, I hope to show that cultural critique based on performance and performativity can raise questions that might also be productive in the life sciences. In “disarming the disciplinary firewalls” (Davis, “Biocultures” 950), literary and cultural analysis should not just serve as a way to humanize science, but should be consulted in bioethics commissions as well as in policy questions as both Jay Clayton and Lennard Davis point out: “Although there is now required ethical, legal, and social research and information that must accompany major federal grants in areas like genomics and nanotechnology, it isn’t clear that there is also a cultural dimension that needs to be included” (Davis, “Biocultures” 950). This book turns to these cultural dimensions.

