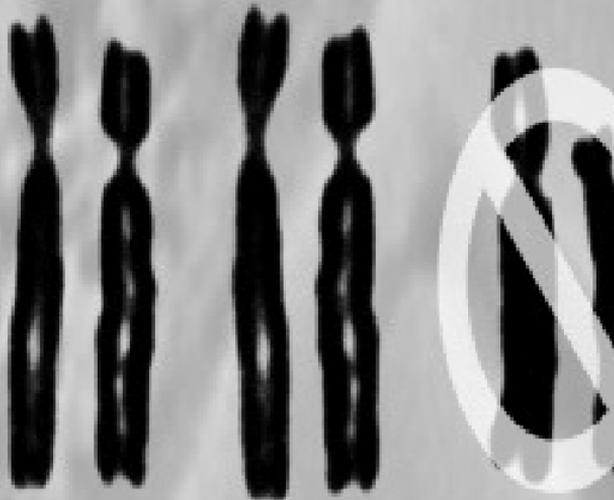


C H O I C E



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Eugenics: The Second Wave*

Eugenics never died after its failed implementation during the early portion of the 20th Century. It has merely been lying dormant until the social conditions for its deployment were more hospitable. Why would it disappear? Eugenics is a perfect complement to the capitalist political-economic imperative of authoritarian control through increased rationalization of culture. Why should the body or the gene pool be sacrosanct? Like a city, a factory, or any other construction of culture, these phenomena can be molded, enhanced, and directed to fit the dominant values of a culture, so that they might efficiently progress into the future. Eugenics, however, is still waiting on the margins of the social, partly because the first wave had a conspirato-

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rial aura about it. Once eugenics was associated with Nazi social policy, it was perceived as a top-down manifestation of social intervention and control that reflected the values of a fascist ruling class, and which negated democratic principles of choice. Eugenics is also still waiting in the wings because medical science did not have the methods and technology to efficiently implement eugenic policy during its first wave (eugenic policy could only be carried out by mandatory sterilization, selective breeding, and genocide). Not until medical science began to radically improve its interventionist practices (particularly on the microlevel) after World War II did all the various sectors of culture face a crisis concerning the limits of organic intervention. While the public could accept intervention in the process of dying, intervention in the process of birth was suspect. To inscribe the body as a machinic system that could be repaired or maintained through medical and scientific tinkering was (and is) perfectly fine, as long as medical science does not attempt to appropriate the role of creator. For example, to biologically support the immune system through vaccinations that strengthen the organic system can only be perceived as desirable and well worth voluntarily acquiring in a secular society, while creating a new and improved immune system through genetic intervention is not so desirable (at least not yet). The goals for eugenicists thus became finding a way to import the spirit of voluntarism associated with interventions designed to maintain life into those used to create it; and, discovering how to construct the perception that the body, as a machinic system that can be repaired, maintained, and purified through medical intervention, can also be improved through genetic intervention.

The eugenic visionary Frederick Osborn already had the answer to these questions as early as the 1930s when he was the director of the Carnegie Institute. Osborn argued that the public would never accept eugenics under militarized directives; rather, time must be allowed for eugenic consciousness to develop in the population. The population would have to come to eugenics rather than vice versa. Further, eugenic consciousness did not have to be aggressively and intentionally micro-manufactured; instead, it would develop as an emergent property as capitalist economy increased in complexity. All that was needed was to simply wait until a specific set of social structures developed to a point of dominance within capitalist culture. Once these structures matured, people would act eugenically without a second thought. Eugenic activity, instead of being an immediately identifiable, monstrous activity, would become one of the invisible taken-for-granted activities of everyday life (much like getting a vaccination).

The set of social structures that Osborn believed had to become dominant were consumer economy and what is now known as the nuclear family. To be sure, both of these social tendencies have come to pass, and are providing the foundation for a more clandestine second wave of eugenic practice. Consumer economy is a necessary foundational component for two reasons. First, if the question of production is solved, and needed goods (water, food, shelter) are generally taken for granted, citizens of the economy of surplus accept all remaining legitimized goods and services as mere purchasable commodities to be chosen or refused. Health care is just another service to be acquired. It becomes neither an unexpected luxury, nor a human right,

but just another business component of the economy. Regular medical intervention in everyday life becomes a desirable taken-for-granted service. If eugenic practices are offered as just another commodity under the legitimized authority of medical institutions, as Osborn predicted they would, they too will be taken for granted.

The second foundational characteristic that consumer economy offers is purchase strategies that are based on desire. Consumer economy provides an unending stream of goods, such that a consumer can always desire more. While the wealthiest class can take full advantage of the surplus, and wander into territories of profound waste, uselessness, and excess, the middle class is also offered limited participation. Participation in the rituals of surplus becomes a status symbol, a marker of prestige, a goal-laden value, if not the reason for existence itself. When this economic situation develops in tandem with the rise of the nuclear family, the perception of reproduction begins to significantly change.

It is very clear that the extreme reduction of the family unit is a necessary development in late capitalist economy. The extended family, which functions so well in agrarian-based economies, becomes an anachronism in an economy with a capacity for industrial farming. The situation becomes worse when the extended family is placed in the context of national/global economy; then it actually stops functioning efficiently from the perspective of power vectors, and becomes a detriment to corporate goals. Allowing the extended family to continue offers individuals participating in that institution a social and economic power base which gives them the opportunity to refuse corporate

culture. In addition, it creates a social process that has the potential to be more satisfying than participation in consumption processes. Individual loyalty to an institution (i.e., the extended family) that potentially contradicts or negates capitalist imperatives of production and consumption is simply not a possibility that can be allowed to continue. In an effort to eliminate this social possibility, capitalist economy has configured itself to make entrance to or maintenance of middle-class status dependent upon accepting the nuclear family as the model of choice. People are financially rewarded for showing an allegiance to participation in the production and consumption processes, over and above participation in extended family processes.

The process of socializing individuals into nuclear units begins with the education process. Children are immediately taught that “success” in life depends on a division of labor, and on separation from other family members; i.e., the adults work, while the children train in school to enter the workforce. At the end of secondary education, they are fully adjusted to the idea that it is time to leave home to join the workforce, or to attend university. In the US, this process of separation begins almost immediately, because over the past 30 years, production rates have increasingly intensified, while real wages have decreased, thus requiring both parents to work if they want to maintain middle-class status. Children are placed in daycare until it is time for them to attend school. Hence, domestic togetherness in the middle-class family has nearly ceased, and children spend more time with their socializers—education services and mass media—than with “significant others.”

The reward for power vectors in promoting this variety of family structure is twofold: First, since people are generally denied social possibilities outside of rationalized contexts, a profound alienation emerges. The only cures offered by capitalist society for this condition are “satisfaction” through success at work, or through acquisition of consumer goods. Second, the geographic mobility necessary for the efficient deployment of the upper echelons of the workforce is assured. People go where their employers send them without a second thought. Whether individuals are near their family or friends is of secondary importance; maintaining class rank (and more and more, simply to remain employed) is of primary importance.

The nuclear family guarantees both the physical and the ideological replication of the workforce; however, in terms of eugenic development, it offers even more. The nuclear family offers a specific set of concerns that complement voluntary eugenics. Since the middle-class nuclear family is generally small, thereby increasing the chances of total familial erasure, its members express a profound concern for reproduction. The extended family is also just as concerned with familial reproduction; the difference between the two, however, is that while the extended family is content with the quantity reproduced as a safeguard of familial survival, the nuclear family is concerned with the “quality” of reproduction. Quality, in this case, is dictated by capitalist demands. Quality means the extent to which a child will be successful, i.e., will be able to obtain a good job in order to maintain or heighten class rank. What nuclear family parents lose in nonrational association with their child, they gain in rationalized association. They can send the child to good schools. They can provide the child

with health care. They can offer the child a safe and secure environment in which to mature. The reason parents want to provide their children with these “advantages” is so the child will give society he/r best economic performance. In this thoroughly rationalized situation, *quality of life is equated with economic performance*. The perception is that the better the child performs economically in later life, the better s/he will be able to satisfy he/rself within the structures of production and consumption, and the greater the probability that s/he will be upwardly mobile.

Once the structural conditions of the economy of desire and the nuclear family are in place, which in turn lead to equating quality of life (perhaps even social survival) with economic performance by parents obsessed with their own genetic and/or cultural replication, the environment is ripe for voluntary eugenics—a situation which Osborn was certain would come to pass. If parents are offered goods and services which will give their few offspring a greater opportunity for success, would they not purchase them? Osborn thought that they would, and he believed that these goods and services would include services which would genetically engineer the child to insure he/r better economic performance. He predicted that parents would want to participate in the design of their children to help them to adapt economically and socially—eugenic participation would be a sign of benevolence. To be sure, once eugenics is perceived as a means to empower the child and the parent, it loses its monstrous overtones, and becomes another part of everyday life medical procedure. Capitalism will achieve its goals of genetic ideological inscription, while at the same time realizing tremendous profits for providing the service.

A Brief Note on Class and Eugenics

Traditionally, eugenic ideology has been deployed in the wealthier classes. Cleansing the gene pool of the lower classes has generally been perceived as unnecessary, since the tasks that the lower classes perform are simplistic and therefore almost any genetic configuration will do. Most likely, traces of this ideological tendency will continue in regard to the working class. At the same time, however, eugenic ideology will be vigorously deployed down the class scale, until a point is reached where the purchase of the services is no longer financially possible. Unlike in the past, power vectors believe including all levels of the middle class in genetic design to be more essential than ever, so that all “significant” populations can make the “evolutionary” jumps necessary to keep abreast of rapid cultural development.

The working class will probably not be called to participate in the new wave of eugenic practice. Since the poor are reproducing at a rate beyond that needed to keep low-end labor conditions stable, no reason exists for power vectors to construct interventions in their replication process (perhaps with the exception of slowing it down). In the US, it is ridiculous to think that members of the lower classes—who are not even granted health care—will be able to participate in costly eugenic practices. Currently, infant mortality among the poor is absurdly high simply because of a lack of prenatal care, so it seems unlikely that the lower classes will be presented with less necessary elements of “medical care.” In European nations, where health care is provided for all citizens, a different scenario could emerge. Eugenic practices may be promoted all the

way down the class scale. Much depends on whether or not eugenics delivers on its promise to rationalize the gene pool in a way that seems economically and socially productive to capitalist forces. Should eugenics fulfill its promises, the US would also have to comply with full-scale deployment, in order to stay competitive in the global economy.

Another element that will affect the deployment of eugenic practices will be the degree to which cyborg technology seeps down into the lower classes. If organic platforms are needed for duties below those filled by members of the middle classes, then eugenic deployment could go all the way down the class scale. However, this scenario seems unlikely, as the past record shows that when modified by technology, working class tasks tend either to go completely robotic or shift to a smaller number of low-end technocrats.

More Utopian Promises

As one would expect, eugenic practices are already receiving mass media support in an effort to build eugenic consciousness in consumers. Certainly, “eugenics,” “genetic cleansing,” or any other term suggesting the horror of the first wave of eugenics is never mentioned in these moments of spectacle, and the spectacularized narratives of bio-tech are presented to individuals in a seductive rather than a forceful way. For example, a consumer can purchase genetic testing (cleansing) services that promise to assure the parent of a healthier child. At the four-to-eight-cell stages, an embryo can be tested for a variety of genetic diseases and deformations. Some genetic defects can be

repaired. At the very least, a defective embryo can be terminated, and the parents can try again to produce a healthy, normalized one. Of course, no one is forced to take the test (it must be desired and purchased), and if any abnormality is found, no one is forced to terminate the creature. One can even choose to let the creature grow to the 16-cell stage, at which time it will self-terminate if it is not implanted in a uterus (perfectly natural). As promised, services such as this one allow concerned (obsessive) parents greater assurance that their child will be normal and healthy, and that they will be spared the financial and psychological burden of an abnormal child. The subtext, however, is just as Osborn predicted: The parents make the decision regarding termination in accordance with the imagined child's probability of success in life. They choose to accept or terminate the imagined child, not so much to fulfill their own needs as to fulfill the needs of pancapitalist culture. In spite of all the can-do spectacle regarding the productive and happy lives of the "differently-abled," the emphasis here is not on the "happy" (the nonrational) but on the "productive" (the rational). To be sure, "healthy" and "normal" correlate with the projected potential of the imagined child's productivity, combined with the parents' continued need to participate in particularized modes of consumption that do not include purchasing goods and services for the defective. Rational patterns of production and consumption in the economy of desire are presented as determinants of a happy parent-child relationship, instead of the happy parent-child relationship being determined by nonrational characteristics such as love, concern, and understanding. If the parent-child relationship were based on these latter qualities, and not those of potential production and consumption, what need would there be for the

test in the first place? The spectacle promises its viewers that testing benefits the parents and child by eliminating sickness, but what these half-truths lead to is a eugenic consciousness that serves ideological directives implanted in consciousness by pancapitalist initiatives.

The spectacle of reproductive bio-tech also promises to assure fertility in a majority of cases. Even if a reproductive system is in disrepair, it can be technologically modified and/or coaxed to function as expected. The demand for such technological insurance is peculiar, since there is no shortage of children in need of a parent. Certainly, nonrational beliefs explain much of this economic riddle: Perhaps parents value participation in the “magic” of the reproductive process; perhaps they want to see their own physical characteristics duplicated in the next generation; or perhaps successful reproduction validates their (essentialized) gender positions. The list of entries and the manner in which they can be combined is quite extensive, but not exhaustive. While nonrational associations with reproduction are useful in selling reproductive goods and services, rational concerns also come into play. Would-be parents tend to find it desirable to have total control over the physical care and early socialization of the child, so they can be certain that nothing can disrupt the future success of the child. The only way to have this assurance is to be a primary participant in these processes from conception until the child is turned over to the education system. (This would, in part, explain why obtaining genetic materials from outside sources is preferable to adoption).

One must also ask, why are there problems with individual fertility in the first place? Much of the answer lies outside the realm of cultural design, but part of the answer lies in the economy of investment for medical research: In regard to funding, research which could help to prevent infertility takes second place behind research that can insure fertility. (For example, funding for research aimed toward eliminating pelvic inflammatory disease, which can cause infertility in some women, is relatively meager when compared to investments in research to create products and services for assisted pregnancy). This funding tendency creates an expanded demand for the fertility products and services by underfunding research that could lead to a cure for root causes of infertility. Rather than investing in research that could produce preventive care, funding agencies invest in research to develop more profitable means to repair an injured reproductive system. In turn, the increased likelihood that women will need assisted reproductive care channels the target population into medical institutions where they are likely to engage additional reproductive services.

Extending fertility has similar consequences. This utopian promise does seem desirable for women in many ways. If reproductive assistance can increase the span of years during which a woman can reproduce, she would have far greater choice in how to plan her life. (Currently, the fertility range has not been significantly altered, since the success rate for assisted pregnancy drops dramatically after the age of 40). If a woman knew she was able to have a child after age 40, it would allow her uninterrupted time to establish herself in the workforce and acquire the wealth needed to best provide for the child. The option of being

both a successful mother and a professional woman would increase in likelihood. Obviously, the state would also benefit by delaying reproduction to later years (a trend which is occurring among middle-class women), since there is a greater structural demand for women to enter the workforce, and deferral of reproduction would allow them to function better within it. In addition, the prevalence of middle-aged pregnancy would channel (middle-class) women into medical institutions where they would be most likely to engage in voluntary eugenic practices. As with most seeming social benefits, the majority of them are gains for the state, while those the individual receives are primarily incidental consequences of state sanctioned social policy.

The Spectacle of Anxiety

The spectacle of anxiety also hides itself in utopian spectacle, but rather than aiming the presentation at individuals, this spectacle is normally directed at social aggregates. For example, there is considerable coverage of breakthroughs in medical science in media ranging from knowledge-specific journals to popular newscasting. The most glamorous subjects tend to be concerned with the rationalization of death (cancer, heart disease, AIDS, and so on), but genetic research, concerned with the rationalization of birth, also makes the list. For the most part, these discoveries are framed by a national identity. On the individual level, the nationality of the scientists who made a given breakthrough is fairly irrelevant, and most are relieved that medical science is constructing a healthier tomorrow. However, at the national level, who discovered what has

very deep economic implications. Each announcement of a surge in applied medical science that is beyond the national borders represents lost profits and an increase in the national research gaps. (The real loss, of course, is to other competing multinationals, rather than to nation states). The public perception of losing national economic advantage is a tremendous fuel to create a popular consensus for high-velocity research (a permanent corporate R&D policy, whether the public agrees or not) as opposed to cautious and critical low-velocity research. As with the individual purchase of goods and services that offer an economic advantage, will the development of goods and services that are perceived to give a nation an economic advantage also be pursued without question? This has certainly been the case in the past, and continues to be true now. Such a situation seems to indicate that the time is right for eugenic practices to flourish on the macro as well as on the micro levels of society.

Jamming the Eugenic Failsafes

In addition to utopian promises, medical science makes numerous ethical promises to the public designed to reassure populations that the eugenic beast will not be reborn. As far as involuntary eugenics is concerned, these promises have merit, although the promise not to engage in state-sanctioned involuntary eugenic practices is an easy one to keep, since the strategies to develop privatized voluntary eugenic practices are proceeding so smoothly. On the other hand, the ethical promises to forbid practices which either lay the foundation for the implementation of voluntary eugenic policy, or which are eugenic in and of



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It's too important to take chances.

themselves, can be looked upon with a great deal of skepticism. For example, one key promise from medical science is that human organic matter will not and cannot be sold. In some cases, medical science has lived up to this promise. In the case of organ sales, there are other options to pursue, such as artificial, cloned, and transgenic organs (all of which are still in various stages of experimentation). These organ replacement products can be sold. The promise of zero sales of human organs is also fortified by the fact that it is difficult to find donors willing to sell their organs, since doing so will either kill them or decrease their life expectancy. However, with human reproductive matter, the situation is much different. Sperm and eggs can be harvested without threatening the life of the provider. In this situation, medical science has *legally* kept its promise. Sperm, eggs, embryos, etc., are not being bought and sold; they are being donated. However, while the organic matter cannot be bought and sold, the harvesting and the implanting processes are salable services. The medical establishment has jammed this ethical failsafe simply by building the fiscal structure of the industry around the process, rather than around the product.

To make matters worse, eugenic screening practices are used to acquire suitable reproductive materials. Potential donors are thoroughly tested physically and psychologically to make sure they meet industry standards of health and normalcy. Family histories are acquired and scrutinized so that those receiving the materials can be sure that there are no latent genetic defects that could lead to a problematic outcome. If a potential donor is found to be suitably pure, then s/he can become an actual donor. Of course, no clinic would admit that it is constructing a pure

gene pool—a purity which is dictated by the political and economic demands of pancapitalism. Rather, such institutions claim that they are only attempting to provide consumers with top value for their purchasing dollar, and preserving their own reputations as institutions of high integrity that provide high-quality products and services. Screening is done for economic purposes, and not for political purposes. To an extent this is true. It seems very unlikely that conspiratorial teams of doctors are plotting a new master race; however, just as Osborn predicted, eugenic mechanisms are emerging out of the rationalized reproductive process which reflect the ideological values of the social context in which the process occurs (the primary value, as Osborn believed would come to pass in consumer economy, is that people's value is determined by their economic potential).

This same process is replicated in the implementation of selective reduction. To increase the probability of a successful implantation procedure, a small set of embryos (three to eight) is placed into the uterus; the number depends on the quality of the embryos and the age of the woman. The results vary; however, the probability of successful implantation (when an embryo attaches itself to the uterine wall) is increased. At times, the procedure is too successful, and produces more than one fetus. This leaves the client with the choice of bringing all the fetuses to term, or of reducing their number. Many times, the reduction is necessary as the number of fetuses conceived could pose a threat to the life of the client, but just as often, fetus reduction is implemented because the client desires a specific number of fetuses. The client can select (often in accordance with viability) which fetuses she wants to

keep. In the cases where the fetuses are equally viable, the client can select for aesthetic characteristics (such as the number of children, the gender, or the gender combination). Like donor screening, there is nothing genetically conspiratorial about the process; clients are simply purchasing the specific goods that they want. Yet once again, the desire for a specific product is manufactured by spectacle that is directed by ideological as well as marketing concerns. The process of *selective* womb cleansing is political and eugenic, and is an emergent byproduct of rationalized reproduction.

Conclusion

Osborn's predictions are coming to pass. The time is right for the second wave of eugenics because the economic foundation has been laid. Eugenics complements the grand pancapitalist principle of the total rationalization of culture. The foundation for consumer consciousness is replicated in the foundation for eugenic consciousness. Reproduction is spectacularly represented and publicly perceived as an object of surplus that can be produced to meet consumer desire. Desire itself does not emerge from within, but is imposed from without by the spectacular engines of pancapitalist ideological inscription. However, the situation has yet to reach catastrophic proportions. Eugenic practices are still crude and experimental; they still have to work their way across class levels and down the class ladder. Thus far, power vectors have not been able to turn perception into activity (the product is recognized, but few are buying). In order to truly accomplish the goal of making eugenic activity a part of everyday life, the

public must be convinced that rationalized processes of reproduction are superior and more desirable than the nonrational means of reproduction. In other words, large segments of the population (with an emphasis on the middle class) must still be channeled into this frontier market. This will take time, during which counternarratives and resistant strategies and tactics can be developed. Unfortunately, in order to seduce all who look upon it, eugenics has masked itself in the utopian surface of free choice and progress. In this sense, power vectors have stolen and are cautiously using the strategy of subversion in everyday life to create a silent flesh revolution.