

Identifying Future Bodies: Ethics, Disability and the Postmodern

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A few months ago, I decided to re-watch *Gattaca* (1997), a sci-fi film that imagines a future world where the idea of liberal eugenics (i.e., the practice of tailoring the genetic traits of foeti) is commonplace. In the film's futuristic milieu, biotechnology becomes the organizing instrument of society, as a person's social class is genetically determined by way of her or his DNA. For this reason, citizens living in this world are frequently screened to ascertain their "genetic fitness." However, the protagonist, Vincent Freeman, is born without the facilitation of liberal eugenics. As such, he is susceptible to the development of mental disorders, has a heart condition, and is projected to live only 30 years. Nevertheless, Vincent aspires to be an astronaut, even though the odds are stacked against him due to genetic discrimination. Those who are genetic "superior" tend to hold a strong prejudice against anyone with bodily and cognitive defects. In a world where babies are treated like commodities and parents are able to customize the physical characteristics and capabilities of foetuses, it seems that the identification of these so-called 'future bodies' is fraught with ethical ambiguities.

Despite the fictionality of its content, *Gattaca* raises some serious questions regarding the categorization of people according to their genetic makeup, which in turn determines their physical and mental capabilities, a classification system that is similar to the disability/normalcy matrix used in our contemporary world. Vincent is very much like most of us, a naturally born human being (that is, to be born without the aid of technological implements other than a Caesarean section) with physical and mental 'defects' in the form of myopia, a heart condition, and a potential for developing mental disorders. Within the futuristic world of the film, he is considered defective and disabled. In our contemporary world, however, Vincent would appear to be a 'normal' human being. He is independently mobile and does not suffer from any medicalized 'intellectual deficiency'. We might even be tempted to call him a 'regular' guy. Yet, in the film's imagined universe, Vincent faces genetic discrimination. He is constantly outperformed by those around him who have been genetically engineered before birth to become so-called 'perfect bodies,' custom-built bodies that are capable of doing 'super-human

feats' such as the ability to lift heavy weights with minimal effort. For Vincent, his dream is to become an astronaut. In order to fulfil his desire, he borrows the superior genetic identity of Jerome, a former elite swimmer whose genetic profile is flawless. However, Jerome's genetic superiority had taken a mental toll on him when he only managed to win a silver medal at a high-profile competition. In light of his perceptibly subpar performance, he decided to throw himself in front of a car. The accident left him wheelchair bound. Nevertheless, he still retains a superior genetic profile, which Vincent is able to borrow in order to qualify as an astronaut.

The appearance of Jerome, whom we might categorically term a 'disabled person' in our contemporary world, is striking on two levels. On the one hand, he is supposed to be the flawless product of genetic engineering, and despite his paralysis he still possesses a genetic profile that is superior to Vincent's. On the other hand, because he has mobility issues, Jerome has to rely on a technological prosthesis (i.e., the wheelchair) in order to move around. In this sense, he embodies the inherent contradiction between the ideology of genetic superiority and the material reality of his physical condition. It is due to the gap between the symbolic reality of Jerome's genetic profile and the materiality of his current state of being that enables Vincent to inherit the perceived superiority of his identity. Once Vincent is in possession of Jerome's superior genetic identity, he is allowed to enter the spaceflight facility. In this way, *Gattaca* problematizes the notion of identity in relation to future bodies that are supposed to be genetically engineered to perfection, as both Vincent and Jerome exist on the levels of both the symbolic and the real.

Eugenics Revisited

The idea of "birth defects" foregrounded in the

film is based on the "eugenic model of the human body" (Davis 20). Eugenics is still alive and kicking today. As Lennard Davis points out, eugenics is now carried out through prenatal screening and genetic engineering. While prenatal screening methods such as amniotic testing has proven to be only somewhat effective, genetic engineering has only worked for plants and animals thus far. There is, as the scientific establishment informs us, quite some way to go before the customization of human characteristics and capabilities can become a social reality. Nevertheless, what *Gattaca* foreshadows is the possibility of creating designer babies "who will not contain, for example, genes for breast cancer or high blood pressure" (Davis 22). But here is where we need to be careful about the potential for controlling a natural process such as sexual reproduction. As the film portends, the possibilities that genetic engineering offers could also further obfuscate the social and cultural forces that inform the categorization of bodies into the dichotomous distinction between 'valid' and 'invalid,' 'normal' and 'disabled'. Davis argues that we need a "new ethics of the body that acknowledges the advances of science but also acknowledges that we can't simply go back to a relatively simple notion of identity" (22). In order to resist any attempt to further *essentialize* the body by re-inscribing old cultural attitudes and prejudices onto it, Davis proposes that this "new ethics of the body begin with disability rather than end with it" (23). Perhaps a reconstitution of social justice through the critical lens of disability studies might enable us to react against the prevailing social and cultural prejudices towards the disabled body.

However, to devise a new ethics that resists essentialism, Davis is mindful that disability needs to acknowledge the instability of its self-definitions in order to transcend the problems of identity politics. As such, he contends that we need to question the clear

distinction between the socially constructed 'disability' and the impairment that is thought to be prior to it (23). In this regard, it appears that *Gattaca* has served to foreground the problem with such a distinction, as Jerome's physical impairment does not precede the condition of his disability. Rather, both are inscribed at the exact moment that his body becomes disabled (that is, right after the car accident). But because the social context in which he lives privileges genetic perfection over the actual physical ability of the person (i.e., it is a society that prefers to cite the codification of the body as a basis for the type of treatment that a particular body deserves), he is able to transfer the genetic identity of his body to Vincent, even though in reality, his body as code and his body as material do not coincide. For this reason, I take Davis' point that a new ethics of the body has to be rigorously debated, especially as we begin to imagine and identify future bodies. However, we also need to ensure that this new ethics is not simply a rehashing of old (Eugenic) assumptions about the human body and its capabilities or a straightforward reiteration of an ableist ideology that reinforces the normalcy/disability matrix. Transposing the ethical frameworks used to analyze our present social and cultural contexts into the future would almost certainly mean that the identification of future bodies would also be based upon the eugenic perception of the disabled body as 'defective' and 'flawed.'

What Davis proposes is not a postmodern ethics, but rather, a dismodernist ethics that reacts to the localization of identity. He explains that a dismodernist ethics consists of three areas that can be summarized as caring of, for, and about the body. This form of ethics takes into consideration the impact of global economic forces and the biases of class in terms of the formation of cultural attitudes towards the body. For Davis, the postmodern subject actually disguises the hegemony of normalcy by

presupposing a self that is de-centred and localized but nonetheless complete and able. It is still an ideal rendition of the body that is at once autonomous and physically and cognitively able. As such, Davis argues that dismodernism advocates the "commonality of bodies within the notion of difference" (31). For this reason, a dismodernist ethics aims to "create a new category based on the partial, incomplete subject whose realization is not autonomy and independence but dependency and interdependence" (Davis 30). What this means is that a new ethics of the body (whether we choose to call it dismodernist ethics or something else) should take into consideration the community within which human beings are situated. Instead of imagining the human body as singular and independent, it would be more productive to think of the ways in which our bodies relate to one another. While the contexts of these interactions may be localized, the ethical impulses that drive the relations between different bodies should be universal. In other words, the new ethics need to be general enough to be applicable to a multitude of contexts, even though the way in which it is applied in each context would depend on its specific social and cultural conditions as well as the human agents involved.

The material reality of the socio-cultural situation that surrounds an ethical relationship between two or more human agents cannot be discounted. As Tobin Siebers explains it, the realist model –as opposed to the social constructionist model – holds the view that "there is no contradiction between identity politics and a certain moral universalism because both rely on the belief that human beings, regardless of culture or society, are capable of rational agency and therefore of cultural and political self-determination" (83). However, I am inclined to contend that the assumption that human beings are rational beings who are capable of behaving in an

ethically responsible manner needs to be robustly debated, especially given that moral universalism works best only when the complexities of specific local contexts are taken into account. Consider for instance the main conflict in the film, *Gattaca*. Vincent's borrowing of Jerome's genetically superior identity for the advancement of his own career ambition is ethically contentious, as he is effectively exploiting the latter's symbolic existence, whereas he remains physically disabled in reality. Jerome's disability is a material fact, despite the superiority of his genetic profile. Vincent's disability in the film, however, is based entirely on a symbolic projection of his deficiency by way of genetic determinism.

If we were to analyze the relationship between Vincent and Jerome from the perspective of moral universalism, we might be tempted to conclude that Vincent has committed an ethically contentious act by exploiting the identity of a person with a disability. However, by considering the specific socio-cultural context in which the relationship between the two characters takes place (i.e., the futuristic world where liberal eugenics and genetic discrimination are commonplace), we might well arrive at a different conclusion. Perhaps we could argue that given the inherent prejudice against Vincent's genetic profile, a social barrier that effectively deprives him of any opportunity to become an astronaut, he has 'no other choice' but to borrow the superior genetic identity of a person who happens to be physically disabled due to a car accident. Yet, no matter how we may choose to analyze the ethical quality of his relationship with Jerome, this relationship actually foregrounds the dominance of an ableist ideology in the future world of the film. In order to deconstruct this 'problematic,' it is imperative that we should work towards the development of a new ethical perspective that takes into consideration the social and cultural forces that inform the

identity politics surrounding future bodies. However we choose to name this new ethical paradigm (whether postmodernist or dismodernist), it should be continually challenged and subjected to rigorous debate, so as to foreground its contradictions and biases.

Towards a New Ethical Paradigm

In the field of Disability Studies, two terms feature prominently in almost all discussions of the ethical impact of social policies on the lives of persons with disabilities: (1) The Medical Model and (2) The Social Model of Disability. Fundamental to the first model is the idea that "the body of the subject is the passive tablet on which disorder is inscribed" (Bordo 67). Medical professionals believe that the body is the value-neutral medium through which a rationalizing discourse can be produced in order to explain its deficit, lack, and disorder by determining the cause of the problem. Contemporary society has bestowed upon doctors and scientists the status of a highly trained and specialized "professional whose expertise alone can unlock the secrets of the disordered body" (Bordo 67). By entrusting medical professionals with the power to define and re-constitute the body through the diagnostic inscription of disorder, symptom, and cause, we have allowed the 'medical gaze' to dominate our view of disability as a pathological defect that requires a cure – that is, an intervention that can only be carried out by the skilled attendants to medical authority and knowledge. Given such a scenario, to ignore the social and cultural factors that reinforce the power hierarchy between doctor and patient as well as between the medical establishment and society would be to willingly succumb to the seduction of the 'medical gaze' that is buttressed by the impulse to discipline the body through the perceived superiority of knowledge

and power.

The social model of disability, however, “sees disability as socially created, or constructed on top of impairment, and places the explanation of its changing character in the social and economic structure and culture of the society in which it is found” (Corker and Shakespeare 3). The social model is predicated upon the political endeavour towards emancipation that aims to deliver persons with disabilities from the cultural trappings of identity typecasting that artificially curtail the development and progress of anyone with a disability in contemporary society. Armed with an arsenal of epistemological apparatuses and practical strategies for political activism, advocates of the social model often set out to champion a reconfiguration of disabled identity by challenging the prevailing cultural assumptions about disability and disabled people. Through the social model, a dichotomy is established between ‘disability’ and ‘impairment,’ whereby the former is deemed to be a social construct that is ideologically conceived, while the latter is considered a material reality that is tactile and immutable. It is this dichotomy that Mairian Corker and Tom Shakespeare find most problematic, as it seems to suggest that impairment, as opposed to disability, occurs naturally and is therefore impervious to the influence of social and cultural forces.

For Corker and Shakespeare, the existing theories of disability are no longer adequate, as “the medical model and the social model seek to explain disability universally, and end up creating totalizing, meta-historical narratives that exclude important dimensions of disabled people's lives and of their knowledge” (15). This simplification of the multi-faceted experiences and identities of persons with disabilities bears witness to the epistemological ‘tyranny’ of meta-narratives such as the Judeo-

Christian Bible in the times prior to postmodernity. Priests were deemed to be the paragon of ethics and morality, while doctors were seen as the custodian of priced medical knowledge about how best to treat (or rather, to discipline) the fragility of the human body. With the advent of postmodernity in the late-twentieth century, such meta-narratives were subjected to a critical re-evaluation that subverted much of what was considered to be the epistemological constants of the modern era. As Corker and Shakespeare explain it, postmodernity “implies a shift from meta-narratives to local narratives and from general theories to pragmatic strategies,” whereby the universality of the rational knowing subject is replaced by the multiplicity (or plurality) of “minds, subjects, and knowledges reflecting different social locations and histories” (5). Jean-Francois Lyotard characterizes this paradigm shift – albeit in the form of an extreme redaction of the postmodern phenomenon – as “the incredulity towards meta-narratives” (xxiv). Indeed, it is the inclination of the postmodern subject towards scepticism and subversion that opens up an array of possibilities for social, cultural, and political change in contemporary society. However, such a political endeavour requires a critical apparatus that seeks to interrogate and unveil the underlying structures that sustain the prevailing cultural attitudes towards disability and persons with disability. Only then would it be possible to work towards a truly inclusive society in which the rights and treatment of all citizens are actively debated and reformulated with close regard to the specificity of the context within which each individual is situated. To this end, it is perhaps imperative that we should examine disability and the treatment of persons with disabilities in our society through the critical lenses of ethical theory and social justice.

When I mention ethics, I do not mean it in the traditional Kantian sense of *Der gute wille*,

whereby the will of the rational knowing subject is assumed to be the fount from which moral acts flow into the relationships that he or she establishes with other rational knowing subjects. Instead, I am thinking of an ethical imperative that the Polish-born British sociologist Zygmunt Bauman terms 'Postmodern Ethics'. As Bauman contends in *Postmodern Ethics* (1993), the condition of postmodernity has not abandoned the concept of moral conscience, which he argues, "has only been anaesthetized, not amputated. It is still here [...] often stunned, sometimes shamed into silence [...] but capable of being awoken" (249). He holds that ethics in its ideal form exists as "a code of law that prescribes correct behaviour 'universally' – that is, for all people at all times; one that sets apart good from evil once for all and everybody" (*Life in Fragments* 1995: 11). However, Bauman insists that moral phenomena are non-rational. Therefore, they cannot be defined by ethical rules that do not account for the conditions of the specific contexts in which an ethical relationship occurs. But then again, Bauman is quick to caution that an individual's "[r]esponsibility for the Other is itself shot through with ambivalence" (1995: 2). Without an ethical code to govern the way we must or ought to act, we are left with nothing more than "[our] own moral autonomy" (Bauman 1995, 37). For this reason, we have to come *face to face* (to borrow a critical phrase from Emmanuel Levinas' ethical philosophy) with the reality of our moral responsibility towards another human being.

Connecting Bauman's theory of postmodern ethics to my analysis of critical disability studies, I claim that any investigation into the ethical relationships between nondisabled people and persons with disabilities should consider the possibility of improving current social policies and cultural attitudes towards persons with disabilities. Furthermore, it is important to interrogate the ways in which

disability as an identity has been disciplined by a confluence of social and political forces (buttressed by the authority of the medical and judicial establishments) and how this identity has been deemed purely a social construct layered upon the material reality of impairment. It is this ideological manoeuvre that renders the neutrality and transparency of disability as a social identity, thereby allow it to be subjugated under the normative gaze of the nondisabled populace. As Shelly Tremain rightly argues, "the agenda for a *critical* disability studies should be to expose the disciplinary character of that identity. That is, it should expose the way that disability has been naturalized *as* impairment by identifying the 'constitutive mechanisms of truth and knowledge' within scientific and social discourses, policy and medico-legal practice which produce it and sustain it" (44-45). As such, I believe that a concerted effort is needed to integrate a postmodern ethical perspective with a critical study of the embodied experience of disability, so as to expose the disciplinary power that the medical establishment (with its assemblage of trained professionals, specialized knowledge, and technological implements) exercises upon the human body, especially bodies that are clinically defined as physically and/or cognitively 'disabled.'

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extensive experience in intermedial productions.

Biography

Stephen Fernandez works at the intersection of dramatic theatre, critical theory, and digital media. His research explores the mobilization of performativity as an embodied activity in intermedial performance, with complementary interests in technoculture and disability studies. Stephen is also a theatre practitioner, with