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Debates about the implications of conducting genetic research on ethno-racial groups have largely revolved around two opposing assumptions. This research is either viewed as problematic because it supports the idea that biological races exist which is considered to have been the root of racist actions and historical tragedies of times now past, or this research is viewed as medically progressive such that not including all ethno-racial groups as subjects of genetic research is regarded as discrimination. This thesis takes a different approach to exploring the relationship between ethno-racial groups and biomedical developments, such as genetics, through conducting a comparative case study of how one particular ethno-racial group, Jews, have negotiated their group identity and broader societal belonging in relation to biomedical developments. Focusing particularly on two contexts in which a liberal governance informed the negotiations of Jewish ‘inclusion’ in their broader societies, nineteenth and early twentieth century England, and twentieth century and contemporary America, the concept of biomedical citizenship is used to provide a critical analysis of the ways in which this negotiation of Jewish identity was and continues to be shaped by biomedical developments given the norms embedded in the ‘healthy behaviours’ these developments prescribe. This thesis, therefore, contributes to contemporary debates over the implications of conducting biomedical research on ethno-racial groups by demonstrating the significance of biomedical developments in shaping the ‘inclusion’ of these groups in liberal societies.
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CHAPTER 1. INTRODUCTION

Genetic research on American Ashkenazi Jews\(^1\) exploded in the mid-1990s leading to intense public debate over the implications of Jews being 'pinpointed' by genetic researchers (Wadman 1998, 314). The main concern of these debates was that research on genetic mutations among this group (and particularly, its representation in the media) 'amplifies the possibility of racial eugenics' (Donelle, Hoffman-Goetz & Clarke 2005, 94) because it gives Jews the reputation of being genetically defective (Stolberg 1998), and therefore has the potential to lead to their job, health and general social stigmatization and/or discrimination (Wen 2000). In order to prevent this from happening, it was concluded that the solution to this potential problem was for genetic researchers to recognize their 'responsibility to combat stigmatization based on genetic difference' (Ashkenazi Signals 1997), which then led to the use of 'nonstigmatizing language' in research and to efforts to develop and maintain 'ongoing dialogue' between genetic researchers and members of the Jewish community when considering and/or conducting medical research projects on them (Rothenberg & Rutkin 1998, 152).

It would seem, therefore, that a potential catastrophe was avoided, and that the genetic research on American Jews was a success. That is, the scientific community and the population upon which it had focused genetic research seem to have together found a way to ensure that this group could not and would not be harmed by this research.

However, other contemporaneous projects that attempted to follow these same principles,

\(^1\) In the following, for reasons of brevity, I will generally be referring to American Ashkenazi Jews simply as American Jews because the majority of Jews living in America (somewhere between 90-95% according to genetic researchers [see Brandt-Rauf, Raveis, Drummond, Conte & Rothman 2006, 1982]), who represent the majority of Jews who participate in genetic research, are descendants of Eastern European Jews such that American Jewry is largely defined by this specific group of Jewry.
but had focused their research on other ethno-racial\(^2\) groups, have not had these same results (see, for example, Reardon 2005) which leads to the question of why the genetic research on American Jews had this particularly ‘successful’ outcome. Was it because of the fact that many of the researchers were members of the Jewish community themselves (Reilly 1998, 684; Wade 2003) and/or that those who were non-Jewish researchers were particularly sensitive to this community’s culture (Stolberg 1998)? Was it based on this community’s pride in the outcome of their participation in a prior genetic project for Tay-Sachs disease (Brand Rauf et al. 2006, 1980)? Were these people following Jewish culture’s perceived commitment to the advancement of science (Stolberg 1998; Press & Burke 1997, 136; Phillips et al. 2000, 381) or their social/religious obligation to be genetically screened (Geller, Bernhardt, Helzouer, Holtzaman, Stefanek & Wilcox 1995; Colen 1996; and Rosner 1998, 233)? Or finally, was this outcome simply the result of participants’ altruism; these people being ‘happy to contribute’ to the advancement of knowledge about both their own community and the wider world (quoted in Brandt-Rauf et al. 2006, 1981; see also Lehrman 1997)? To date, these have been the explanations offered as to why contemporary genetic research among American Jews has been so ‘successful,’ but none of them provide a satisfactory reason as to why this group, for whom the memory of the atrocities of the Holocaust is still present (see Freedman 2000, 344), would identify itself with susceptibility to particular diseases. Their ‘successful’ participation, therefore, appears to be ‘one of the profound ironies of modern science’ (Ashkenazi Signals 1997).

\(^2\) I use this term because these groups are sometimes referred to as races, and other times referred to as ethnicities given that the lines of distinction between these two terms are very fluid and a source of great debate. See my conclusion for a brief description of some elements of this debate.
In the following, an account for this seemingly ironic development is offered. In order to do so, the implications of genetic research have been explored from a different perspective than that about which the above judgments of ‘success’ have been made. The particular appeal for this group to participate in genetic research must be reevaluated from a framework that does not position them as only ever potential victims of this research, or as members of a timeless culture/religion, or as merely altruistic participants in the noble mission of medical progress. This first assumption is problematic because, while genetic discrimination is an important issue to consider within the context of any genetic research, simply denouncing it is a dangerously comfortable ethical position. It is something that anyone can feel virtuous about, thereby leading to what Rabinow has called ‘a non-dialogue of radiant pessimism’ (1993, 151) reminiscent of Foucault’s ‘speaker’s benefit’ (1990, 6). In other words, critiques of the possibility (or inevitability) of the eugenic application of current genetic research on American Jews do not account for the fact that they are articulated from within the context of contemporary power relations, and, consequently, do not allow for the acknowledgement of how they are involved in creating the terms of these debates. Most importantly, these kind of critiques do not allow for recognition of the fact that groups involved in genetic research are not only ever, or always, being imposed upon by researchers but may be ‘democratically’ involved in promoting research on themselves (Rabinow 1993, 147).

This leads to the second explanation that has been offered about American Jewish participation in genetic research: the idea that it is because of the culture and/or religion of this particular group that genetic testing has gone so well. Press and Burke (1997) explain that American Jews are often viewed as a group that ‘places particular value on
science and medicine’ and that has ‘a great sense of community.’ Given this combination, it is assumed that Jews have ‘a perceived responsibility to take part in any sort of research endeavor that has a potential to help the community,’ which is used to explain a ‘particular attentiveness among Jews to issues of health’ (1997, 137). To look at their participation from this perspective, however, is just as problematic as the assumption that genetic research only ever poses a threat to ethno-racial groups. While it certainly helps shed light on the perceived imperatives of contemporary American Jewish culture and/or religion, it does so by ‘mobiliz[ing] the fantasy of a frozen culture, of arrested cultural development,’ thereby, ‘reduc[ing] cultural [and religious] traditions to the simple process of invariant repetition’ (Gilroy 2004, 13). As a result, the much-needed exploration of how and why this understanding of Jewish culture and/or religion came to be is not undertaken; it is simply assumed that ‘this is who Jews are, and have always been.’

The final explanation of American Jews’ participation in genetic research, as a rather altruistic undertaking, is in need of a similar exploration. While I would not deny that many of those participating in genetics decide to do so for either the betterment of their ethno-religious group or for medicine more generally, these motives need to be regarded more critically. Indeed, to make the oversimplified claim that the Jews do not wish to ‘bury [their] heads in the sand’ (Stolberg 1998), but responded to genetics ‘in an educated, responsible manner’ (quoted in Kuska 1995, 1578), denigrates the opposition towards genetic testing demonstrated by other ethno-racial groups, and a minority of American Jews themselves, as having been uneducated, irresponsible, and even, selfish.3

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3 Kuska describes the minority of American Ashkenazi Jewish communities that did not wish to be part of the breast cancer genetic studies as being ‘unwilling to participate unless they believe there is a personal
As Reardon’s (2005) research on the Human Genome Diversity Project demonstrates, the failure of collaboration between the ethno-racial groups it targeted and the genetic researchers that were involved cannot, and must not, be explained according to these polarizing - good or bad - evaluations. Rather than regarding the genetic research and testing on American Jews as having been ‘successful’ because it avoided harming this group through careful language and consultation, and/or because this particular group understood that participation in genetics would be beneficial to them and medicine more generally, instead, I follow Reardon’s suggestion that it is necessary to examine ‘the role genomics might play in constructing identity and novel forms for governance’ (2005, 15). American Jews, as objects-subjects of genetic research, obviously do not present the same challenge to the norms of Western ‘biopolitics’ that other ethno-racial groups seem to pose. Their participation in genetics, therefore, needs to be examined as that which both reaffirms and supports the particular social and moral order that underpins contemporary biopolitical norms.

This is not to claim that American Jews are in a most comfortable position vis-à-vis Western biopolitics, however. I recognize that even if Jewish people are viewed as positively different, this carries its threats to them as well (as the still prevalent ideas about Jewish world domination so readily demonstrate); and I also acknowledge the fact that this group remains the subject of negative stereotypes and persecution. So instead of taking an either/or approach to describing the ‘success’ of genetic testing and research among this group, I want to try to account for the very tenuousness of American Jews’ medical benefit to knowing if they have a mutation for a cancer-causing gene’ (1995, 885 – emphasis added).

4 I borrow the term ‘biopolitics’ from Foucault (1990). Simply put, biopolitics are politics that are informed and shaped by the knowledge produced in biomedicine. See my theoretical framework, pages 20-26 for, further elaboration.
participation in genetics given that it is understood as having been achieved both despite and because of this groups' difference. Looking at it from this point of view calls for a tracing of the 'conditions of possibility' (Foucault 1994a, xxii) for these perceptions of 'success,' which are not only based upon the normative evaluations specific to contemporary genetics and participation therein, but are informed by the relationship between biopolitical norms and a broader politics of 'inclusive' citizenship that has been in existence in much of the West throughout the era of 'biopower.'

While the scope of this thesis is limited in that it is only based upon comparing two contexts in which the relationship between diasporic Jewry and their 'inclusive' host societies is/was often (but certainly not always) declared 'successful' - in the sense that this group was not viewed as having been harmed/rejected by its broader society but, rather, was allowed, and, at the same time, compelled, to be included within it in both generally and biomedically - this comparison is made as an invitation to further research into, and debate over, the role contemporary biomedicine can play in definitions and evaluations of ethno-racial groups' differences. Biomedicine is bound up with struggles in identity politics, and in issues of power and social order, and I want to bring these struggles, as they pertain to ethno-racial identity negotiations, into contemporary debates about developments in biomedicine. My goal in drawing parallels between the two contexts within which diasporic Jewry found itself in nineteenth and early twentieth century England, and in the twentieth century and contemporary United States, therefore,

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5 This term is in quotes to reflect the fact that this inclusion is not straightforward inclusion, but is an inclusion that allows for 'Others' to be members of the society by placing limits upon how these 'Others' might act and who they might be as included members.

6 Biopower, briefly stated, is the term Foucault uses to explain the power circulating through and informing relations since the development of possibilities to control and maintain life, beginning in the seventeenth and eighteenth centuries. I explain this term further on pages 20-22 of my theoretical framework chapter.
is an attempt to demonstrate the significance of biopolitical imperatives in shaping the possibilities of acceptable group difference within ‘open societies’ (Dench 2003) that ‘include’ ‘Others’. Through this work, then, I hope to contribute to greater reflection on what is at stake for ethno-racial groups in the ways that participation in the biomedical ‘advancements’ of ‘inclusive’ societies is defined therein. We must avoid the easy evaluation of the involvement of these groups in biomedical developments as either inherently problematic or progressive, and analyze more thoroughly their relationship to how we understand ourselves so as to recognize how biomedical practices are profoundly caught up in ‘social and moral choices about what we want to know and who we want to become’ (Reardon 2005, 8).
CHAPTER 2. THEORETICAL FRAMEWORK

In this chapter, I describe the theoretical framework I use both for my analysis of the negotiation of Jew's citizenship in English society of the late nineteenth and early twentieth century, and for my comparative analysis of how this negotiation has also taken place, and continues to take place, in American society. This framework is largely informed by Foucault's ideas about power, discourse, and knowledge, and their relationships to each other, so I begin this chapter by providing a brief explanation of each of these ideas and the connections between them. I then go on to further explain Foucault's more general conception of governmentality, and following this, the two particular forms of power Foucault recognises to be at work within the kind of rule that governmentality entails: pastoral power and biopower. Finally, I bring all these ideas together in the concept of biomedical citizenship that I have employed to analyse the negotiations of Jewish identity within the context of these two societies, and I conclude by explaining the 'method' used for conducting this analysis.

Overview of the Power, Discourse, and Knowledge Triad

Power

One of the main foci of Foucault's work is reworking the concept of power. Typically, power is understood as something that individuals and institutions possess and wield over each other. Some people have it, others do not, and we are continuously in struggles over possession of it. Thus, power is generally assumed to be something to be achieved or owned so that one might realize individual and/or group potential. At the same time, it is also often considered to be both oppressive and repressive, i.e. something to be fought against so that these individual/group potentials might flourish and our/their rights might
be protected. These are the general understandings of power, but Foucault calls for a
different ‘orientation’ when analysing it (1990, 102). He shifts his focus from trying to
understand what power is, to an analysis of how power operates.

According to this shift of orientation, power is no longer to be viewed as coming
from inside individuals or institutions; it is not owned, held, taken from others, or even
shared (1990, 94). In other words, power is not done to people (an individual or an
institution does not have power to force someone to do something) and neither is power
‘done’ by people (it does not arise from their personal/group choices or decisions).
Instead, Foucault recognizes power as something that is always circulating, but that also
takes the form of a chain, in such a way that power is ‘employed and exercised through a
net-like organisation’ (1980, 98; see also 1990, 92-3). Thus, unlike the type of organised
power we often assume resides in one centralized source (such as the state, or the church,
etc.), power, as Foucault conceptualizes it, is always in the state of linking up into
networks. Moreover, these networks are not over and above our relationships, but are
actually ‘immanent’ to all of them. Indeed, Foucault argues that power has a ‘strictly
relational character’ (1990, 95), that there are no relations ‘exterior’ to power (1990, 94).

Given this, the linkage of power networks actually takes place through our
relations. For Foucault, power is, in fact, both the effect of the ‘divisions, inequalities,
and disequilibriums’ that take shape within relations and also the very condition for these
differentiations (1990, 94). In other words, power is exercised through the inequalities
and differences in relations, while it is also involved in providing the possibilities of these
relations of inequality and difference. The particular systems of rules, or as he puts it, the
'regimes of rationality' (2003c, 251) that shape and produce these various inequalities and differences are what Foucault calls discourses.

**Discourse**

As with power, Foucault does not conceptualize the 'regimes of rationality' of discourses as rules in the ideological sense; discourses are never unified or permanent, as this understanding of rules entails. He, likewise, does not view discourses as either being accepted or excluded, or as either dominant or marginalized (1990, 100). Put another way, the rules of one discourse do not conflict with that of another one in any kind of permanent and binary ruler-versus-ruled relationship. Instead, Foucault conceptualizes discourse as an ever-changing space in which particular rules are formed, and transformed, and in which the ways of thinking and acting, provided for by these rules, are called forth.

A Foucaultian discourse, more specifically, consists of particular statements, language, practices, behaviours, etc. that together form a set of rules which 'make possible the appearance' (2002, 36) of that which they 'speak' (Carabine 2004, 268). A discourse, therefore, actually brings the object-subject of its 'speech' into being because it makes that object-subject recognizable as that which the discourse 'says' it is. In this way, discourse is not only a space of emergence and transformation of rules of being (i.e. thinking and acting), but even more importantly, a space continuously caught up in constituting the rules governing the very being that it 'speaks of.'

The specificity of a discourse vis-à-vis its subject-object, however, does not preclude discourses from interacting with, and informing, each other. Rather, the multiple

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7 In the next section, on governmentality, I explain further what Foucault means by the term government. Briefly stated, governing involves the production of particular possibilities of thinking and acting, thereby indirectly, but more importantly, productively, limiting how we can be in this world.
discourses in existence at any given time all depend upon, interlock, and limit one another in various ways (Foucault 2002, 38). As Carabine explains, discourses are ‘fluid and opportunistic, at one and the same time, drawing upon existing discourses… whilst utilizing, interacting with, and being mediated by, other… discourses (2004, 269). In this way, Foucault’s assertion that discourses are both unstable and yet productive, both instruments of power and a hindrance to it, makes sense because not only do discourses provide the rules by which power is exercised in a relation, they also provide rules by which it might be thwarted in other relations of power (1990, 101).

**Knowledge**

So far, I have established that Foucault views power as relational, both moving through and shaping the very networks in which it is practiced. I have also explained that Foucault conceptualizes discourse as that which informs power relations (thereby, also providing for, and limiting, the exercise of power) according to both the ‘regimes of rationality’ that define each discourse and to the interplay of discourses upon each other. This leaves one further concept, belonging to what has been called Foucault’s ‘interconnected triad’ of concepts (Carabine 2004, 267), that still needs to be explained; namely, the concept of knowledge.

Knowledge, according to Foucault, is not something one might acquire or accumulate through a progression of learning. Neither is it unchanging and ever-present; it cannot be sought after as though it exists as stable *connaissances* (Foucault 2002, 16 n. 3). Knowledge is, rather, that which is produced as a regime of the true and real within discourse. That is, knowledge is that which discourse makes knowable as the way to know of what discourse ‘speaks.’ At the same time, discourse is itself constituted by
knowledges because of how knowledges, in having this truth status, come to shape how discourse (trans)forms a subject-object. As Carabine explains, ‘knowledge both constitutes and is consisted through discourse’ (Carabine 2004, 275).

Power and knowledge also have a relationship in which each informs the other as they link up to discourse in the ways I have described above. These two connect with each other because power is only ever exercised through the production of truth (1980, 93). Its exercise, therefore, necessitates the formation of knowledge. At the same time, however, given that it is only in this way that power can exist, knowledge also shapes power in that power only ever flows and connects up in a network according to the truths of knowledge(s) through which it can move.

**Governmentality**

Related to Foucault’s problematization and reworking of general understandings of power, discourse, and knowledge, is his overall reconceptualization of government. For Foucault, government is not an institution – or, more specifically, not ‘a juridical edifice of sovereignty’. Nor is it the set of ideologies and state apparatuses that would belong to this institution (1980, 102). It does not consist of a sovereign power, ‘the doctrine of the prince’ (1991, 91) or the ‘monstre froid’ (1991, 103) ruling over and above everyone from a position of exteriority. Instead, government is bound up in strategies and techniques of governance practiced in everyday relations.

These governmental relations emerged around the sixteenth century, according to Foucault, because this was when the ‘problem’ of government ‘exploded’ (1991, 87). It was at this time that questions such as ‘[h]ow to govern oneself, how to be governed, how to govern others, by whom people will accept being governed, [and] how to become the
best possible governor” (1991, 87) became important terms of debate. The ‘government’ at issue in these debates was concerned, therefore, not with imposing laws on people, but with ‘employing tactics’ of governance so as ‘to arrange things in such a way that, through a certain number of means, such and such ends may be achieved’ (1991, 95). In Rose’s words, this new ‘art of government,’ or what Foucault termed ‘governmentality,’ refers to particular ‘mentalities of rule, where rule becomes a matter of calculated management of the affairs of each and all in order to achieve certain desirable objectives’ (Rose 2000, 315).

More specifically, governmentality is both the activities and ‘mentalities’ that aim at shaping, guiding and affecting ‘the conduct of conduct’ of persons as individuals and groups (Gordon 1991, 2). It involves ‘all those multitudinous programs, proposals, and policies that have attempted to shape the conduct of individuals’ and that, in turn, have them shaping each other’s conduct, wherein ‘any legitimate attempt to act upon conduct has to embody some way of understanding, classifying, [and] calculating’ (Rose 1996, 12). Thus, governmentality involves the shaping of people’s behaviour, and how they are implicated in directing each other’s behaviour, according to particular ways of understanding who people are, and the objectives that these understandings serve. Foucault recognizes two particular targets (and objectives) of governmentality that, through its activities, are achieved as legitimate ways of understanding who people are: populations and individual selves.

Population
In order to understand how population is an achievement of governmentality, a population must not be viewed as existing prior to definitions of it, or interventions upon
it. It must be understood, instead, as something that is isolated (and, therefore, targeted) as ‘a sector of reality’ through governmentality’s dependence on the knowledge that comes from 1) identifying certain characteristics and processes as proper to a population, 2) making a population’s ‘features’ notable, speakable, and writable, and 3) making these ‘features’ of population explicable according to particular ‘explanatory schemes’ (Rose 1991, 6). In this way, a Foucaultian understanding of population is one in which populations are viewed as coming into being through these processes of isolating it as something that can be known, and through knowing it according to the specific ways it is isolated. A population, therefore, is not an ever-present reality, because it is actually made into a reality through these activities involved in making it so.

Governmental realization of a population not only involves isolating a population; it also involves inscribing it. In the governmentality of population, inscription is a process conterminous with isolation because, while isolation realizes population as something that can be recognized as such, inscription materializes this reality so that these processes, together, render populations knowable and manageable. The inscription process itself, involves what Rose describes as the ‘translat[ion of] the world into material traces’, such as written reports and statistics; and through the creation of this ‘very physical form’ of knowledge of a population, ‘the unruly population …[is, thereby, rendered] into a form in which it [can] be used in political arguments’ (Rose 1991, 6).

These political arguments, of course, do not originate from rulers over the (isolated and inscribed) population trying to extend their power over people. Rather, Foucault argues that they are part of governing population for the purpose of ‘improving its conditions’ because the population’s ‘welfare’ is the raison d’ être of governmentality,
not the act of government itself. Given this focus, populations are not groups of people ruled by any type of over-arching government, but, instead are both 'the subject of needs, of aspirations' meant to improve their conditions, and 'object[s] in the hands of... government, aware, vis-à-vis... government, of what [they] want' (1991, 100). Thus, a population, according to Foucault, is formed as a 'real' subject-object with needs for and rights to improvement, because it is through adhering to the goal of improving the conditions of (an) isolated and inscribed population(s) that governmentality functions.

_selves, Subjects, and Subjectification_

According to the perspective of governmentality, achieving the objective of 'improving' the population's conditions also necessarily involves the shaping of subjective capacities (Rose 1991, 2). Thus, subjectivity is historically contingent upon the objectives of the various techniques of governmentality, and upon the possibilities for conducting oneself (and others) that they include. More specifically, Foucault dismisses both the general assumption that government ignores the individual selves we are because it is only interested in the totality of citizens (2003a, 131), and the perception that individuals' actions originate from within themselves –from such interior places as psyches, souls, personalities, characters etc. because, instead, he argues that subjectivity is formed by techniques of government, wherein these techniques involved in forming ourselves⁸ 'do not come ready made, [but] have to be invented, refined and stabilized[;] they have to be disseminated and implanted in different ways in different practices' (Rose 2000, 312) according to the objectives they are to achieve. These processes and practices of subjectification, the means by which humans come to relate to themselves and others

⁸ Here I use 'ourselves' to mean the multiple selves that make up each person such as daughter, partner, mother, student, etc.
as particular types of subjects, are heterogeneous and continuously structure and restructure the possibilities of our conduct as the selves they make available.

Foucault gives two meanings to the processes and practices involved in subjectification or, what he called assujetissement. The first meaning is one in which a person is ‘subject to someone else by control and dependence’ (2003a, 130). In other words, individuals are subjects of others in the sense that they are controlled by and dependent upon what is expected, demanded, and/or induced of them by others. This subjectification is part of living with others because ‘to live in society is... to live in such a way that [we] act on the actions of others’ (2003a 140).

The second meaning of assujetissement is that of tying a ‘subject’ to his/her ‘own identity by a conscience or self-knowledge’ (2003a, 130). As Rose explains, human beings are located within particular ‘regimes of the person’ (2000, 312) through which they come to ‘experience, understand, judge and conduct themselves’ (2000, 315 – emphasis added). They relate to themselves according to, recognize themselves in, and participate as, the selves available to them from the particular ‘regimes of the person’ at a given time and within a specific context. Individuals are therefore, ‘tied’ to themselves in that they may only ‘be’ according to these ‘regimes of person’ and how ‘being offers itself to be’ thought and practiced within them (Foucault 1985, 11).

Both of these meanings of assujetissement demonstrate how the governmentality of subjectivity is ‘a form of power that subjugates and makes subject to’ (2003a, 130). It acts on individuals as subjects and activates them to be particular subjects such that it involves the combination of ‘both the becoming of the subject and the process of subjection’ (Butler 1997, 83). More specifically, assujetissement takes place through
restricting who people might be by only providing particular possibilities as subjects, and
by inciting them to recognize themselves as the subjects these restrictions allow and
make possible in such a way that 'the subject produced and the subject regulated or
subordinated are one' (Butler 1997, 84).

The produced and regulated subject, however, is never absolutely established or
fixed upon an individual. Instead, it emerges within 'a spatialization of being' (Rose
2000, 321) wherein various spaces activate particular 'repertoires of conduct' that are
neither bounded by the material boundaries of the body nor exist in a fixed or stable form
within individuals' minds. Rather, they exist as 'webs of tension across a space that
accord human beings capacities and powers to the extent that they catch them up in
hybrid assemblages of knowledges, instruments, vocabularies, systems of judgement and
technical artefacts' (Rose 2000, 322). In this way, the subject-selves created in these
spaces are not 'fixed in place' as a result of being created from them, but, actually emerge
from these 'webs of tension' as 'the occasion for a further making' because
assujetissement involves continuous reiteration and/or rearticulation of oneself as a
subject (Butler 1997, 99).

**Pastoral Power**

This perpetual reiteration and/or rearticulation of the self is part of a particular form of
power Foucault recognises as being prevalent in governmentality: pastoral power.
According to him, the emergence of pastoral power originated as a Christian 'function'
(2003a, 131) that works both through analysing oneself, thereby 'know[ing] exactly as
possible who [one] is, [and through the need] to tell [who one is] as explicitly as possible
to some other people,' which historically took place through Christian confession (1993,
Despite these changes, pastoral power continues to inform the realization of the objectives of promoting and assuring the wellbeing of both individuals and the collective. This guidance is not forced on individuals or groups, but is offered as the appropriate way to achieve their goals.

Pastoral power remains pastoral despite these changes, because expert guidance continues to inform the realization of the objectives of promoting and assuring the wellbeing of both individuals and the collective. This guidance is not forced on individuals or groups, but is offered as the appropriate way to achieve their goals.
achieve wellbeing in the form of compelling ‘normative judgement[s] of what we are and could become’ which incite individuals/groups ‘to overcome this discrepancy by following the advice of [these] experts’ (Rose 1991, 11).

Of particular importance to the workings of pastoral power, therefore, is the way individuals are construed as ‘a natural locus of beliefs and desires, with inherent capabilities [and] the self-evident origin of actions and decision’ (Rose 1996, 22) such that the techniques and practices of knowing oneself and acting as a responsible self (towards oneself and others) are ‘practices of freedom’ (Foucault 2003b, 26). Freedom here does not mean liberation, but, rather, is part of what Rose describes as ‘a regime of subjectification in which subjects are not merely “free to choose,” but obliged to be free’ (Rose 1996, 17 – his emphasis); or, put another way, they are part of a ‘regime of the active, autonomous, choosing self’ in which ‘individuals are free to the extent that they choose a life of responsible selfhood’ (Rose 1996, 168). In other words, given that the individual is construed as a subject who exercises choice, and that it is according to this assumption that pastoral guidance is provided to individuals (so as to promote and assure the wellbeing of individuals and their groups⁹), the guidance available through pastoral power incites people to aspire to make particular choices that locate them as being both responsible and self-determined subjects. In this way, ‘free’ individuals are ‘subjects simultaneously of liberty and responsibility’ (Rose 1996, 12) because ‘practices of freedom’ in pastoral power are both individualizing and oblative (Foucault 2003a, 132) in that the choices made by individuals as choice-making subjects are informed by notions of care of the self and care of the others in the groups to which they belong (2003b, 30).

⁹ These groups are the ‘populations’ that are constituted as subject-objects of governmentality through techniques of inscription and isolation as explained above.
Biopower

Intertwined with this concern for the wellbeing of individuals and the groups to which they belong (as this wellbeing\textsuperscript{10} is now sought after according to 'worldly aims' [2003a, 132]) is how power has become 'situated and exercised at the level of life' (2003a, 137). According to Foucault this form of power (another power of governmentality) came into being in the nineteenth century when power 'took possession of life under its care' (2003d, 253) in such a way that life became both its object and its objective (2003d, 254); life became that which power targeted as something to foster, administer, regulate, discipline, and control. More precisely, 'biopower', the term Foucault uses to denote this particular form of power, came into being through the superimposition (2003d, 249) of two kinds of technologies of power that together, but at different levels (2003d, 250), took 'control of life in general' (2003d, 253), resulting in life becoming the centre of humanity's political existence (1990, 143).

The first of biopower's two poles to come into being, in the seventeenth and eighteenth centuries, involved techniques that centred on the individual body (2003d, 242). These techniques of power, which involve training and surveillance that aim to increase both the usefulness and docility of the body, take the body as a machine whose abilities are to be realized through optimization, discipline, and extortion (1990, 139). This pole of biopower, what Foucault calls an 'anatomo-politics of the human body' (1990, 139), therefore, involves administering bodies through techniques of power that individualize the body as 'an organism endowed with capacities' (2003d, 249); capacities which are simultaneously demanded and expected of individual bodies.

\textsuperscript{10}This wellbeing could also be called 'improvement' as I have used that term in the above section on governmentality.
The other pole of biopower, one that Foucault recognizes as having emerged later in the eighteenth century, is what he calls ‘a biopolitics of the population’ (1990, 139). The techniques of power it involves are not disciplinary, but instead are regulatory; and they do not regulate at the level of individual bodies but, rather, regulate the ‘species body’ and its ‘biological processes’ (1990, 139). The regulatory technologies involved at this pole consist of interventions on a population that seek to control any random events that can occur in it as a ‘living mass’ and also seek to make predictions about these events so as to modify the population to compensate for the effects these events may have. More generally stated, these regulatory technologies aim to ‘establish a sort of homeostasis... by achieving an overall equilibrium that protects the security of the whole [population] from [its] internal dangers’ (2003d, 249). Thus, the techniques of power at this level take bodies as together making up a particular population and, according to this postulation, as the location at which the ‘mechanics of life’ (1990, 139) (such as propagation of a population, its births, mortality, level of health, life expectancy, and longevity) can be regulated.

When these two technologies of power centring on life eventually link up into a ‘great bipolar technology’ (1990, 139) in the nineteenth century, Foucault views this connection as resulting in life becoming ‘the issue of political struggles’ (1990, 145-emphasis added). That is, life became an issue of rights. These rights, however, are not rights whose basis is that of legitimacy, because, instead, they involve particular methods of subjugation – of individuals and populations - which as rights, they instigate (1980, 96). In this way, struggles for the ‘right to life’ - both as individuals (the right to have

11 I understand Foucault’s use of ‘internal’ here according to his explanation of how populations are realized through the isolation of their particular ‘features’ which results in these features being ‘immanent’ to a population (1991, 100).
their needs met and to be all that their bodies can be) and as populations (the right to
defend their biological existence) – are not struggles of rights over life. Rather, they are
struggles of and about life, i.e. of living, as individuals and groups, according to how life
is ‘invest[ed]… through and through’ as an issue of right (1990, 139).

Biomedical citizenship

According to a Foucaultian perspective, (bio)medicine\textsuperscript{12} is one of the key sites of these
struggles of life. Not a repressive discipline monopolized by the state, scientific
researchers, and/or doctors, nor ‘some ancient space of communion between the medical
personage wishing only to cure and the sufferer wishing only to be cured’ (Rose 1994,
57), (bio)medicine is what Foucault calls ‘a political intervention-technique’ (2003d,
252). It is made up of thoughts, practices, and various ‘languages of health and illness’
(Rose 1994, 49), all of which participate in the political ‘right to life’ struggle. More
specifically, biomedicine emerged as part of the greater control over death and sickness
that came into being in the nineteenth century (Foucault 1990, 142), which led not only to
the perception of control over life as increasingly possible, but also to the biopolitical
imperative, and, therefore responsibility, to seek greater control over death and disease in
one’s own, and one’s ‘populations’’ life. In other words, it led to the emergence of
discourses of ‘biomedical citizenship’ in which biomedical knowledge about life - most
specifically knowledge about threats to life, such as disease, and means of preventing
these threats – entailed both the possibility to ‘proactively’ seek to protect and secure
one’s own and one’s ‘populations’’ life, and the normative responsibility to do so.

This concept of biomedical citizenship borrows from and builds on recent

\textsuperscript{12} In the following section, I write (bio)medicine with the parentheses to indicate that some of the authors I
cite have used the word ‘medicine,’ and others ‘biomedicine’ to describe the techniques used to ensure or
restore health, and, therefore, life.
scholarship that extends Foucault's work on biopower through exploring the relationship between 'citizenship projects' (Rose 2007, 131) (the way members of a particular society are defined and allowed to participate in that society) in liberal, 'inclusive' societies and developments in biomedicine. Like Epstein's use of the term 'biopolitical citizenship,' for example, I use 'biomedical citizenship' to explore how individuals and groups are incorporated 'fully or partially into the national polity through the articulations of notions of [biomedical] rights and responsibilities'; that is, this concept denotes a biomedically-informed definition of membership in a society, and explores 'the varying degrees to which different people or groups actually are able to lay claim to the full rights and prerogatives of [that] citizenship' (2007, 20). This concept, therefore, is used to investigate the ways in which biomedical developments have 'shaped conceptions of what it means to be a citizen, and underpinned distinctions between actual, potential, troublesome, and impossible citizens' (Rose 2007, 132).

I have chosen to use the term biomedical citizenship rather than the terms biological citizenship (Rose 2007), biopolitical citizenship (Epstein 2007), or the terms of other scholars who have undertaken analyses of the relationship between citizenship and biology, science, genetics and/or biomedicine,¹³ because my analysis specifically focuses upon the ways in which biomedical knowledge about threats to life and about means to prevent those threats inform the kind of citizenship possible in a particular society not only in the contemporary context, but since the beginnings of biomedicine. To date, most of the analyses made about relationships between citizenship and these various forms of knowledge about life have focused solely on the contemporary forms of this knowledge,

¹³ Other terms that have been used include Heath, Rapp and Taussig’s ‘genetic citizenship’ (2004), Irwin’s ‘scientific citizen’ (2001), and Nguyen’s ‘therapeutic citizenship’ (2005).
and therefore have not offered a historical exploration of these relationships. Given that biomedicine has had a long relationship with notions of citizenship that cannot be explored using these contemporary-focused concepts, I have chosen the concept of biomedical citizenship to try to overcome this, as it would put a limitation on my analysis.

I have also chosen biomedical citizenship over Rose’s term biological citizenship, which does, in fact, offer a more historically informed analysis of the relationship between citizenship and various forms of knowledge about life. This is because he focuses specifically on biological knowledge about individuals and groups, and argues that there is a difference between the ‘determinism’, ‘essentialism’ and closed nature of biological citizenship of the past to that of the present biological citizenship, which he characterizes as ‘probabilistic,’ ‘open,’ and as entailing actively seeking after ‘possibilities of intervention and transformation’ (2007, 161). I am, however, interested in the ways that biomedical developments have always been based upon the possibility of preventing harm to life, meaning that these developments (at least, in liberal, ‘inclusive’ societies) inevitably entail prescriptions for ‘proactive’ and ‘responsible’ action on the part of all those who may become sick; that is, all of those who are potentially included within the category of biomedical citizens. Thus, the biomedical developments of the past are not regarded as having only ever been involved in underpinning assumptions about biological divisions between racial groups, but, just as in the contemporary context (in liberal, ‘inclusive’ societies), are recognized, in this analysis, as being caught up in a process that both divides and unifies people according to the normative imperatives embedded in biomedical knowledge.
Extending the Concepts to the Project

This theoretical concept of biomedical citizenship is used in the following analyses of two particular negotiations of Jewish identity that have taken place during the time period Foucault has characterized as being shaped by biopower. Within both contexts of nineteenth and early twentieth century England, and twentieth century and contemporary United States, the power in circulation was and is of a pastoral, ‘inclusive’ character given that these societies govern/ed through inciting their potential members, ‘including’ Jews, to practice particular kinds of citizenship, and it is/was this pastoral character of power that informs/informed the discourses of biomedical citizenship embedded in the developments in biomedicine that emerged within them. Thus, the negotiations of Jewish identity and belonging as citizens, within both time periods and countries, are analysed as taking place under the particular kinds of limitations and constraints that this form of power, and the forms of citizenship it produced, entail. Through conducting the analysis of these negotiations in this way, it renders evident how the Jews in these two societies tenuously belong/ed to two ‘populations’ according to the kinds of citizens of those societies they can/could and can/could not be.

These analyses of discourses of biomedical citizenship and their relationship to Jewish identity negotiation, therefore, are based upon my recognition that Jewish identity was and remains vulnerable to the normative imperatives of biomedical citizenship in pastorally governed, ‘inclusive’ societies. These analyses, however, are not only pertinent for understanding this groups’ relationship to biomedical citizenship, but also that of other groups who are currently becoming increasingly ‘eligible’ for biomedical citizenship in contemporary liberal, ‘inclusive’ societies such as the United States (see
Recognizing what kind of biomedical citizenship is offered to these groups of ‘Others,’ in terms of the particular expectations and constraints it entails, is important if we want to open up space for questioning the too-readily accepted ‘biomedical responsibilities’ these groups are expected to conform to for their ‘democratic’ participation in the biomedicine of liberal, ‘inclusive’ societies, which then also allows for a rethinking of our understandings of ourselves and each other outside of these particular constraints.

On the Question of My ‘Method’\textsuperscript{14}

This project follows a similar type of ‘method’ to that which Foucault used wherein one ‘proceeds by [a] progressive, necessarily incomplete saturation’ (2003c, 249) of the materials available for the realization of one’s analysis. Accordingly, the materials for this project were not collected in a manner in which every potentially pertinent material was acquired, but rather, were collected and analysed until the point at which a compelling theory about the implications of biomedical developments on the relationship between Jews and two of the liberal societies in which Jews have been ‘included’ could be proposed. The materials which, together, provided this possibility included: secondary accounts of Anglo-Jewish and English relations in nineteenth and twentieth century England; secondary accounts of American Jew and American relations in twentieth and contemporary America; the sources repeatedly referred to within these secondary accounts and those which were particularly relevant;\textsuperscript{15} primary sources such as

\textsuperscript{14} This is a paraphrase of the title of an interview with Foucault entitled ‘Questions of Method’ (see Foucault 2003c).

\textsuperscript{15} In the set of secondary accounts of Anglo-Jewish and English relations in nineteenth and twentieth century England this included the work of Roth (1964), Black (1988), Endelman (1990), Gartner (1987), and Lipman (1959 and 1990), and in the set of secondary accounts of American Jew and American relations in twentieth century and contemporary America this included the work of Cohen (1988), Handlin (1961), Herberg (1960), and Kallen (1915).
newspaper, medical and journal articles from both times and places; as well as materials that undertook similar kinds of analyses of the relationship between Jewish identity and citizenship negotiation and biomedical developments (e.g. Harris 1997 and 1999; Hart 2007; Marks 1994; and Wailloo and Pemberton 2006).

In following this 'method', these materials were not simply used as references, but were also viewed as sources offering specific renderings that were not the way to understand the relationships they described, but were up for scrutiny and analysis themselves. That is, these materials were used to both acquire a broad knowledge of the two contexts and the significance of the biomedical developments that emerged within them, and to 'find questions where others had located answers' by remaining critical of these "official" accounts of how [things] came to be the way they are' (Dean 1994, 4). What I ultimately sought to achieve in using these accounts in this manner, therefore, was to 'open up a space of research' (Foucault 2003c, 246) by asking new questions about the particular relationships existing in these two contexts that had not yet been subjected to analysis. Thus, I have used 'history as a practice, as a particular set of actions brought to bear on a particular material' (Dean 1994, 15) because the histories presented have been interpreted according to a sociological theory that provides an understanding of these histories and our present reality that had not previously been imagined, and therefore, allows for a new recollection of these histories in terms of their significance today (Hacking 1999, 130).

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CHAPTER 3. ANGLO-JEWRY’S ‘SUCCESSFUL’ CITIZENSHIP

The relationship between Anglo-Jews and the English of early and mid-nineteenth century has, in general, been considered one that was either quite positive, or at least relatively benign in character in comparison to the way Jews were treated in other European countries. One of the main evaluations of this relationship comes from historians of Anglo-Jewry following Cecil Roth’s tradition (for example, Roth 1964; see also Endelman 1990; and Rubinstein 1996) in viewing Jews as having, in Cesarani’s words, ‘advanced steadily towards civil and political equality as British society shrugged off medieval habits of thought and embarked on the road of progress towards creating a modern, liberal, democratic nation’ (1999, 34). The other, somewhat less optimistic, view of their interactions with English society that has been traditionally offered is the argument that Anglo-Jews were rather content with their social and political status, and therefore, not very interested in pursuing changes to their circumstances (Gilam 1982, 8). Some recent (and some less recent) accounts of the history of Anglo-Jewry, however, provide a great challenge to both of these ideas.

Rather than approve of the ‘progressive’ relationship between Jews and the English of this period, or view changes to it as having been unimportant or unnecessary for Anglo-Jews, contemporary analysts have tended, instead, to focus on the various terms of Jewish inclusion or exclusion from English society that were articulated at this time, especially in relation to the debates over Jewish emancipation that began around the 1820s. Some of the key insights that these analysts provide are recognition of how the uncertainty of British polity and national identity informed debates over Jewish emancipation (see Cesarani 1999; and Feldman 1994), and how the possibility of
inclusion as English citizens was not necessarily an inherently positive development for Anglo-Jews. What these reinterpretations of the changes in Jews’ relationship to English society have not yet fully considered, however, is how specifically knowing what it meant to be Jewish and who could know this had become important concerns and obligations at this time, both for the Jewish community and for English society more generally.

**Jewish Emancipation: Not a Good or Bad Issue**

There is no denying that Jewish emancipation unfolded on the ‘shirt-tails’ (Feldman 1994, 30) of the emancipation of other religious groups. The Catholics, Quakers, Moravians and Socinians were emancipated in England in 1829, 1833, 1837 and 1838, respectively (Gilam 1982, 1). Thus one could very easily regard the Jewish emancipation of 1858 as having been a foreseeable event in the linear advancement towards a more progressive, religiously liberal England. Yet, while emancipation certainly addressed the issue of religion, such that, in some ways, ‘it was as a religious community that the Jews were presented as worthy of the full rights of citizenship’ (Finestein 1992, 39), Jewish emancipation must be contextualized as having emerged at a time when this groups’ religiosity was widely viewed as rather undesirable.

First, the idea that Christianity was a ‘touchstone of [British] national identity’ (Cesarani 1999, 38) was still rather prominent. As a result, debates over Jewish emancipation were used by those promoting this view as ‘occasions to affirm [their] vision of England as an hierarchical and Christian nation’ (Feldman 1994, 34). At the same time, however, these debates over Jewish emancipation emerged at a time when - in contrast to the above reason for exclusion, but equally problematic for the status of
Judaism in England - the role of religion in the affairs of the State was becoming increasingly questionable (Feldman 1994, 32-33). The emergence of the potential for Jews to be included as citizens of England, therefore, was by no means an inevitable development.

Or was it? Deliberations over Jewish emancipation began to take place at a time when the boundaries and characteristics of the English nation had become a central political issue, with various, often contradictory (as the two above examples demonstrate), prescriptions for normative English citizenship abounding (Feldman 1994, 11). In other words, Jewish inclusion (or exclusion) in English society was caught up in the contemporary concern over 'the nature of the collectivity which united the government and the people' of England (Feldman 1994, 45). According to those holding more universalistic versions of their English citizenship, Jews belonged within the nation as fellow citizens sharing common human rights and/or as a group to be enlightened by and converted to Christianity. Others, however, promoted visions of English citizenship that positioned this group as one that did not belong because of their religion and/or their separate nationhood. Debates over Jewish emancipation, therefore, were caught up in the great contemporary concern over the possible meanings of English citizenship, such that whether or not the Jews could be included as citizens - as they were imagined by those taking part in these debates (e.g. fellow citizens needing and deserving liberation, eventual converts, or religious and/or national 'Others') - became an important issue as well.

Further complicating a 'progressive,' linear understanding of the emergence of the possibility of Jews' English citizenship is the fact that a new socio-political
relationship between Jews and their English neighbours was not exactly something that most Jews in England were interested in promoting publicly. This was not because Jews were indifferent to making changes, however, but because Jews were very apprehensive about pushing for their social and political equality in England (Gilam 1982, 2). Over the course of the eighteenth century, their status in England had become fairly ambiguous due to the generally lax approach to the laws that had been set up to impose disabilities on them; these laws were, in fact, often ignored by the courts or simply not applied (1982, 8). Given this, their ambiguity, while at times carrying a dear price, was not something members of the Jewish community simply desired to trade in for a very conspicuous ‘fight for their rights.’ Anglo-Jews were, in fact, generally in consensus that emancipation was not to be pursued with fervour but to be ‘dealt with delicately’ (1982, 2) and with great caution.

In addition to the insecurity of their somewhat improved circumstances not providing for intense agitation among Anglo-Jews for equal social and political rights, this group also regarded their emancipation with trepidation because they had more at stake in being emancipated than the removal of these disabilities. Many analysts of Anglo-Jewish history have not recognized these stakes, however, because they have regarded Jewish emancipation with what Baron has called ‘excessive optimism’ (1960, 57) – as though emancipation was the absolute solution to end discrimination towards this group. His work demonstrates that, instead, we must be critical of stories depicting Jews’ pre-emancipation circumstances ‘in darkest colors, against which the new era of emancipation shone the more brightly’ (1960, 57), so that we might take under consideration how emancipation presupposed Jews ‘giv[ing] up much of their autonomy.
and... participat[ing] actively in most areas of public life' (1960, 69). These were actions
Anglo-Jewry did not simply view as inherently good for their people, such that
emancipation, and all that it entailed, was not something they wanted to pursue
unconditionally.

This is not to claim, however, that Anglo-Jewry were uninterested in making
some changes to their practices, and to their lives more generally, so that they might
establish Jewish inclusion as English citizens. Nor is it to claim that the changes that did
take place were forced on them, destroying Jewish culture/religion under ‘the pressure of
the dominant liberal culture’ of England, as Cesarani argues (1999, 34). Instead, I take
the view that, at this time, ‘Jewish communities and culture changed rather than
degenerated’ (Feldman 1994, 5) because of the development of a new ‘emphasis on how
Jews were to be regulated and in what ways their differences would be defined’ (Cesarani
1999, 54) both within and outside Anglo-Jewry. It is significant that ‘[w]hich sorts of
Jewish identification were legitimate and which should be discouraged was a recurrent
point of debate’ (Feldman 1994, 5) between Jews, and among Jews and non-Jews, in
early and mid-nineteenth century England because it is this development that changed
[and some would argue (see Gilam 1982, iii and 38), sustained the existence of] Anglo-
Jewry.

The Necessity of a ‘Within but Without’ Jewish Citizenship in England

The changes that Jewishness underwent in England at this time were ultimately caused by
the question ‘who are Jews?’ having been, to borrow from Foucault, ‘driven out of hiding
and constrained to lead a discursive existence’ (1990, 33). That is, whereas previously the
Jews living in England had a rather ambiguous status and were not, in fact, specifically
governed 'as a body' (Gartner 1987, 73) nor very organized among themselves (1987, 77), Jewishness was now being taken 'both as an object of analysis and as a target of intervention' (Foucault 1990, 26). More specifically, it was now imperative to have knowledge, in the Foucaultian sense, of what being Jewish meant, and to establish knowers/experts of this knowledge, because the uncertainty of the meaning of 'being Jewish' had become a threat both to those who considered themselves members of this group, and to those deliberating over whether or not, and how, Jews should be included as English citizens (some of those in the second group, of course, belonging to the first as well). Ultimately, Anglo-Jews had to become identifiable and (at least seem to be) more unified so that the meaning of Jewish difference could be rendered evident and acceptable, or justified as unacceptable, to both themselves and to their wider society. They could not be specifically included within and/or remain separate from English citizens unless they became a more clearly defined, distinct, and knowable group.

The changes that early and mid-nineteenth century Anglo-Jewry had to undergo to achieve this status were not readily or easily made. Anglo-Jews were divided along many, often interconnecting, lines including religious practice, social class, politics, and interaction and participation in non-Jewish society (Gilam 1982, 7). In addition to this, the one central institution of this group that had been established in 1760, the Jewish Board of Deputies, had long been 'moribund' (Gartner 1987, 77), and Solomon Hirschell, the Chief Rabbi at the time, was a rather 'remote religious authority... exert[ing] limited influence' on this community (1987, 88). Jewish affiliation had, in fact, become largely voluntary in early Victorian Britain leaving the viability of Judaism and the possibility of a coherent Jewish community rather uncertain (Feldman 1994, 24).
Yet, Jewish identity in England was not to simply fade away in its uncertainty, because Jews' inclusion as English citizens, albeit ironically, depended on Jews' distinction. Indeed, a new desire to know Jewish identity emerged at this time that was informed by the reality that, for both non-Jews and Anglo-Jews, Jewish participation in English society had become a possibility that required deliberation over what exactly defined Jewish difference. Moreover, for the majority of Anglo-Jews, this prospect of, at least some kind of, inclusion was desirable. While there, of course, remained some Anglo-Jews for whom emancipation and social acceptance could only ever represent a secularizing 'interference with the will of Providence... [and with their] primary loyalties to Judaism' (Gilam 1982, 38), for most '[t]he old concept of the Jews, as a people in exile among the Gentiles with little interest in the world outside of their own community, was no longer satisfactory' (Singer 1985, 181-2). Anglo-Jews were, in fact, looking for a way to be both Jews and citizens of their broader nation; and as their socio-political acceptance and participation in English society became increasingly possible, they were compelled to discuss and put forth views of what it meant and how to be this 'new kind' of 'still' Jewish people.

**Negotiating Religious Jewishness**

In many ways, the assertions and debates within the community about how to be this 'new kind' of Anglo-Jewish English citizen revolved around Judaism proper. Indeed, even though synagogue attendance was 'thin’ (Feldman 1994, 49), this period cannot simply be regarded as one in which ‘religious attachments declined’ (Gilam 1982, 6) because religious procedure, as the very ‘content of Judaism’ (Feldman 1994, 48), was an

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important issue for the whole community. For one thing, the nationality and culture of Anglo-Jewry’s religious leaders became a great concern; whereas prior to this time officiants were exclusively ‘foreign-born and foreign-trained’, there was now interest in educating and training ‘the rising generation of the Jews’ born in England, so that religious services would no longer be nationally/culturally ‘exotic’ to Anglo-Jews. In addition to this, suggestions for other changes including ‘the abbreviation of the liturgy, a more convenient hour of service, sermons in the English language, the introduction of a choir, and the abolition of the observance of the second days of the holydays’ were put forward, and it was also proposed that the Sephardic and Ashkenazic liturgical distinctions, ‘reflecting their distinct background and history,’ be abandoned (Roth n.d.). The desire for these changes, as Gartner explains, significantly ‘touched on the religious definition of the community as a whole’ (1987, 99), and in 1842, when ‘the men of “wealth and influence” in London Jewry’ (Feldman 1994, 52) became rather dissatisfied with the kind of Jew defined and required by what, up to that time, had been well-established Judaic practice, the West London Synagogue was formed to provide for the ‘new kind’ of religious Jew they envisioned.

The division over Judaic procedure among Anglo-Jewry was not, however, as sharp and chasmal as this event would suggest because changes to Judaic procedure were considered desirable by most Anglo-Jews (Feldman 1994, 52). In fact, reforms to the religious practice within the older established synagogues, such as providing English ‘pulpit instruction’ (Roth n.d.), were being put in place at this time, a process that was eventually catalysed by the passing of Chief Rabbi Solomon Hirschell in 1845. Perhaps most emblematic of the broad struggle among Anglo-Jewry to define the ‘new kind’ of
religious Jew was the 1847 brochure on ‘Laws and Regulations for all the Synagogues in
the British Empire’ issued by Nathan Marcus Adler, the elected successor to the Chief
Rabbi (Gartner 1987, 100). Not only did it provide for quite a few of the reforms
demanded by those who had come to form the West London Synagogue, (see Feldman
1994, 52-3; Gartner 1987, 102; and Roth n.d.), thereby demonstrating Anglo-Jewry’s
more general desire for change to some of the practices, and requirements, of religious
Jewishness, but it also helped establish a normative standard for Judaic practice, and in
this way, provided a strong presentation of the unification of religious Jewishness to both

These changes to religious practice, therefore, despite having been more overtly
promoted by a group of Anglo-Jews ‘immersed in English culture, possessing substantial
wealth and political connections’ (Gartner 1987, 90) were not a simple matter of
Anglicisation or assimilation. While the propositions advanced were, indeed, informed by
aspirations for political equality as English citizens (Feldman 1994, 51), they were not
merely a response to ‘the needs of the day’ to Anglicize (Finestein 1992, 40-1), or
demonstrative of ‘a high degree of proud and articulate assimilation’ among this group
(1992, 39). The push for religious change must not be viewed as the direct result of any
of these factors, but rather, as part of a lengthy negotiation concerning how to adapt both
Judaism and English citizenship to each other so as to provide a space for the possibility
of a religious grounding for a Jewish identity that belonged within Anglo-Jewry’s
increasingly ‘inclusive’ social world. Establishing some distinct terms of this negotiation
was, indeed, necessary for the ‘isolation’ (Rose 1991, 6) of Anglo-Jewry as a particular,
yet not completely independent, group of English citizens.
Negotiating Jewish Nationality

The articulation of a ‘new kind’ of religious Jewishness, through changes to Judaic procedure, was not the only challenge involved in these negotiations over Jewish identity. The interrelated issue of Jews’ nationality was also a key concern. This was not simply due to the fact that questioning Jew’s ‘capacity for “patriotism”’ was a particularly useful tool for anti-emancipationists (Feldman 1994, 39), however, because anti-emancipationists were not alone in their espousal of the idea of Jewish nationhood. Instead, this was a rather ‘widespread belief’ also held by non-Jews who did not use it as a ‘pejorative formulation,’ and, most importantly, a belief that was also ‘shared by Jews’ (Finestein 1992, 44).

Alongside, and informed by the teachings of their religion, Anglo-Jews shared a strong sense of common history and held the conviction that the Jewish people would be restored one day which together combined to form their national conception of themselves (Feldman 1994, 70). This nationhood was not something they felt they had to absolutely give up to become English citizens, because, as Feldman explains, ‘many Jews in England continued to regard themselves as part of a Jewish nation as well as the English nation’ (1994, 69). Adapting their communal nationhood and new sense of belonging to English society to each other was, however, rather complicated, because joining their two ‘nationalities’17 so as to allow for the Jewish one to remain/become legitimate and acceptable to both the Jews and non-Jews of England, was not readily

17 Whereas Feldman views the two conceptions of nationhood as located on different plains - the British one being political, and the Jewish one being cultural – and given this, not subject to direct conflict, but rather, allowing for a space in which a particular ideal of Jewish nationality could conform to British nationality without difficulty (1994, 70-1), I take a broader view of the idea of nationality as that which always incorporates both political and cultural norms, and therefore, view these two visions of nationhood as having more stakes in common, and as such, much less readily amenable to compromise than he argues.
achievable. Indeed, despite assertions that there was 'no conflict between their nationality as Jews and their claims for political equality' (1994, 70), work had to be done to try to make this assertion a reality, i.e. to 'make up' (Hacking 1999) that 'new kind' of dually-national Jewish citizen of England.

One of the most significant struggles involved was that they had to work out exactly how they were to be governed, and how to govern themselves, as a people belonging to two nations. The lack of consensus over who represented Anglo-Jewish concerns was at the heart of this problem, because at this time, quite a few Jews attempted to advance what they perceived as what their people needed and deserved as Jewish members of English society.¹⁸ In other words, quite a few were attempting to be the 'pastors' or normative 'experts' of national Jewish identity. This was so even though the Jewish Board of Deputies had begun to reclaim their organisation’s ‘authority over [Jewish] secular matters’ in the mid 1830s (Feldman 1994, 24), because the rest of the community did not readily accept the authority of their ‘Jewish expertise.’ Ultimately, however, the JBD was able to put itself in a position to be accepted as a particular kind of Jewish representatives to the English government because the General Register Office’s granted this body the authority to license Jewish marriage (Black 1988, 38) thereby giving them ‘statutory recognition’ (Gilam 1982, 86). In fact, when an attempt was made to try to overturn the JBD’s ‘representative’ position in 1845, by putting this issue of marriage registration before the Prime Minister, Goldsmid was turned away because in

¹⁸ See Gilam (1982, 42) for an account of the two very different deputations of ‘Jewish representatives’ that went to meet with the Prime Minister, Robert Peel, and Gilam (1982, 86) for the tensions between David Salomans appeal to court as a Jew and the JBD who protested against his appeal as the ‘authorized organ’ of Anglo-Jewry. See also Liberles (1976, 125) for an account of the letter sent to the Great Synagogue by Isaac Lyon Goldsmid which protested the JBD’s declaration that they were ‘the only official medium of communication with Government in matters concerning the political interests of the British Jews.’
vesting the JBD with this task, the government had framed it as ‘a matter strictly internal to Anglo-Jewry’ (Gilam 1982, 43).

This development is significant because it demonstrates how the more explicitly Jewish group was the one who received more governmental support than those individual Jews who, in Gilam’s words ‘were ready to pay a price for their emancipation by making concessions at the expense of their Jewishness’ (1982, 42). That is, those interested in maintaining a stronger form of specifically Jewish identity that, at the same time, allowed for their acceptance as English citizens, prevailed as Jewish authorities and representatives because of the understanding that Jews were somehow their own ‘nation.’

This is not to argue, however, that this outcome was simply the result of a ‘long-standing convention’ of Jewish distinction (Finestein 1992, 39) because it had to be worked out. It was not inevitable, but contingent on the fact that England was beginning to develop statistical forms of governance (see Cullen 1975; and Hacking 1991), and only those connected to the religious leaders performing marriages (who were also in charge of registering Jewish births and deaths) could provide the statistics required. Moreover, this was at least somewhat informed by what Markell has observed of the paradoxical imperatives of German Jewish emancipation: ‘that the state must see at all times that each Jew has ceased to be Jewish’ (2003, 146 – author’s emphasis) and come under the rules of citizenship of the nation. Those seeking English citizenship by doing away with any form of separate Jewish status did not allow the state to ‘see’ how they were Jews, whereas the JBD ‘played a pivotal role not only in representing the rights of Jews to the state [but also] in aiding the state to monitor and control the Jewish community’ (Marks 1994, 31).
This development, therefore, demonstrates, in Feldman’s words, how ‘the potency of communal authority greatly depended upon the state’ (Feldman 1994, 66 n. 75). Indeed, despite the fact that, Anglo-Jews were not expressly ‘called upon by public events to declare the precise principles of their creed’ (Finestein 1992, 41) as they were in Napoleonic France, this did not mean that the state was not involved in legitimating Anglo-Jewry’s separate but ‘included’ citizenship, or that ‘structures of communal authority and cohesion [were] manufactured entirely by Jews themselves’ (Feldman 1994, 23). Rather, the necessity of uniting this community in an acceptable form for both Anglo-Jews and the non-Jewish English ‘depended on the existence of institutions which could plausibly claim to represent it and were able to marginalize challenges to that position’ (Feldman 1994, 66), and it was ultimately the JBD and the Chief Rabbi (see Feldman 1994, 66 n. 75), who were to achieve this both among the Anglo-Jews, and with the English government. Indeed, these Jewish ‘experts’ were rendered such, during this period, through a process that absolutely required English governmental support.

In sum, it was not the potential for civil and political emancipation alone that compelled the Jewish community to define its identity, as Gilam suggests (1982, 38), but the correspondence and association between this newly emerged possibility of a English citizenship for Anglo-Jews, with a renewed desire among this community to remain Jewish in spite of, and perhaps also caused by, Anglo-Jews recently developed sense of belonging to English society. The conflicting definitions of Jewish religion, in terms of the protocol and decorum of Judaic practice, and the equally inconsistent presentations of Jewish nationhood, in terms of who could legitimately present themselves as the authorities on ‘secular’ Jewishness and Jews’ needs, and, therefore, represent the Jews to
broader society, demonstrate the thorny tensions Anglo-Jewry faced as they tried to accommodate their often contradicting group belongings to each other. And while Anglo-Jewry was officially emancipated in 1858, and developed a rather well-established communal structure by 1870 (Gartner 1987, 107), seeming to indicate that the ‘who is a Jew?’ question was no longer a central concern because the conflicts between these identities had been ‘dealt with,’ the process of ‘making up’ Anglo-Jews as a specific, acceptable (to both Jews and non-Jews), ‘new kind’ of Jewish English citizen was, in fact, far from over.

The New Duties and Responsibilities of Biomedical Knowledge

Before exploring specific ways in which this process continued, it is necessary to elaborate further upon the context within which both Jews and non-Jews were living in nineteenth century England. As explained above, this was a period in which the definition of English citizenship was an important issue because questions about just who constituted the members of English society were up for debate. The kinds of tensions over English citizenship outlined above were not the only significant part of these debates, however, because at the same time, the duties and responsibilities of the members of English society were also a source of intense deliberation. One particularly significant issue in these deliberations over English citizenship that arose around mid-century was that resulting from the advances in the potential for control and prevention of epidemics and contagious diseases. These developments led to a biomedical reshaping of the citizenship available and acceptable for potential members of English society.

Governing the Health of English Citizens

*For the first time in history, no doubt, biological existence was reflected in political existence; the fact of living was no longer an inaccessible substrate that only emerged*
from time to time, amid the randomness of death and its fatality; part of it passed into knowledge's field of control and power's sphere of intervention (Foucault 1990, 142).

Although some forms of control over health, life, and death were not completely unknown in England prior to the nineteenth century, it was during this period that significant advances were made in understanding disease etiology allowing for greater disease prevention and/or control. These advances included both specific discoveries about the spread of contagious diseases, such as cholera, smallpox and, tuberculosis, and their means of prevention (see Porter 1999; and Warren 2000), and the creation of particular kinds of knowledge about the ‘population’ of English citizens through the collection of statistics on sickness and death of its members (see Cullen 1975; and Hacking 1991). Together these developments in the production of biomedical knowledge came to define a new meaning of citizenship in England because they informed the popular practice of ‘educating the public in the “laws of health’” (Porter 1999, 408) so that the ‘public’ might know how to be, and therefore, practice being, healthy English citizens. This new kind of biomedical citizenship, therefore, was not forced on potential members of that category through public health laws, but instead, was a discourse circulating through the networks of pastoral governmentality at work in nineteenth century England.

The pastoral circulation of the normative imperatives embedded in the newly emerged definition of biomedical citizenship is most evident in the ways local charities and philanthropic institutions provided ‘care’ for both the sick and the poor (who, just as

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19 When Edwin Chadwick, one of the most prominent promoters of improving the health of the English people, attempted to take a more authoritarian approach to enforcing the prevention of disease among them through public health laws, many took his approach as being ‘bullied into health’ (quoted in Porter 1999, 412) against their ‘free will,’ and the General Board of Health, of which he was the head, was discontinued in 1854 because its tactics were perceived as ‘dictatorial’ in ‘matters of local and personal concern’ (Warren 2000).
in the contemporary context, were often the same group of people) during this period. While these organizations often had roots in religion and religious obligations, the pastorship they practiced ‘was not a legacy of early-modern history’ (Goodlad 2003, 20), but rather, is particularly demonstrative of the governmentality at work in England throughout the nineteenth century which ‘encourag[ed] self-help, philanthropy, [and] voluntarism’ (Goodlad 2003, 14). In particular, these charitable organisations and their ‘pastors’ used their visits with the sick to teach them to ‘help themselves’ to be healthy according to the belief not only that ‘much could be done by their own efforts’ (Eyler 1979, 26), but that much should be done by their own efforts. In this way, these ‘pastors,’ and the organizations with which they were affiliated, helped to fulfill Herbert Spencer’s broad call for ‘a diffusion of the belief that the preservation of health is a duty… that all breaches of the laws of health are physical sins’ (quoted in Haley 1978, 17). Indeed, as a result of these pastoral efforts to ‘educate’ potential biomedical citizens and other similar ‘educational’ efforts, ‘[b]odily health [came to be] considered a sign of a more general personal health and therefore a direct means of personal evaluation’ (1978, 255) in mid-nineteenth century English society.

Hacking’s observation that the ‘erosion of determinism’ of nature (e.g. control over the spread of disease) that had taken place throughout Europe during the nineteenth century did not ‘introduce a new liberty’, but provided for ‘more possibilities for constraint’ (1991, 194), therefore, characterizes the developments that took place in England as biomedical knowledge about disease and its prevention was produced at this time. The normative imperatives embedded in the discourses informed by this biomedical

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20 In fact, Goodlad has demonstrated that religion was an important site through which English pastoral governance moved (see Goodlad 2003, 20).
knowledge newly compelled members of English society to perform the ‘healthy practices’ about which they were ‘educated’ and at the same time, rendered all these potential biomedical citizens judicable vis-à-vis their conformity to the practices this ‘education’ called forth. Thus, a new ‘health gaze’ that incited and regulated the healthy practices a responsible biomedical citizen should perform came into being in England at this time that put both limitations and expectations on those who might be included in English society as proper biomedical citizens.

**Negotiating Jewish, yet English, Biomedical Citizenship**

Among the many pastoral charitable organisations proliferating in the Victorian age, the Jewish Board of Guardians (JBG) formed in 1859. This board was established to ‘contain’ ‘foreign’ (recently immigrated) Jews (Feldman 1994, 320) through a reform of the charitable relief provided to them, which, at that time, was considered to be ‘a very real and a very dangerous evil’ (Magnus 1909, 12) if left as it was. Informed by the pastoral model for charitable relief popular at this time, therefore, the newly established JBG’s concerns were ‘not only in the direct relief of charity, but even more in the moral lessons’ (1909, 12) they felt the need to provide to those who did not measure up to their ‘moral’ criteria, because they were very concerned that ‘the moral problem had been left practically untouched’ (1909, 14) by those offering aid to these immigrants. Following a pastoral approach to ‘educating’ these foreign Jews in ‘morality,’ then, the JBG used its ‘investigations and visitations’ (Black 1988, 78) to educate their ‘foreign’ group members how to act responsibly vis-à-vis their health (and as Jewish, yet English, citizens more generally), according to the self-reliance and self-help imperatives governing the terms of biomedical citizenship of nineteenth century England. In this way, the JBG was even

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21 I use this term to invoke the meaning of ‘gaze’ Foucault uses in *The Birth of the Clinic* (1973).
more than a body through which biomedical moral ‘education’ was propagated among foreign Jews, because through that very practice it was caught up in negotiating a Jewish, yet English, biomedical citizenship.

The urgency of this negotiation then became more acute in the 1870s because of the great number of Jewish refugees that began to flee to England at this time (see Gainer 1972). Arriving often desperately poor and in large numbers, and settling in East London, an area ‘already noted for its extreme social and economic deprivation’ (Marks 1994, 9), this group stirred great concern during a period when the arrival of immigrants ‘was often equated with the unwelcome arrival of disease’, and the neighbourhoods in which they settled were ‘often seen as places where disease flourished’ (Maglen 2005, 80). The immigrant Jews settling in East London were, unquestionably, subjected to these assumptions, and therefore posed a great threat to the public image and acceptance of a Jewish, yet English, biomedical citizenship. As the following quote from the *Jewish Chronicle* Aug. 12, 1881 demonstrates, action had to be taken so as to counter the possible repercussions of this threat for the possibility of Jewish, yet English, citizenship:

‘Our fair fame is bound up with theirs; the outside world is not capable of making minute discrimination between Jew and Jew, and forms its opinions of Jews in general as much, if not more, from them than from the Anglicised portion of the Community… By improving their dwellings, attracting them to our synagogues, breaking down their isolation in all directions and educating their children in an English fashion, we can do much to change our foreign poor into brethren, who shall not only be Jews but English Jews’ (quoted in Lebzelter 1981, 90).
At the forefront of this effort to render these immigrants ‘English Jews,’ and thereby promote the positive image of the Jewish, yet English, citizen, was the JBG who, by this time, had developed experience in encouraging and educating the foreign Jewish poor as to how to keep their houses and other dwellings22 sanitary.23 In 1861, two years after this board had originally formed, the JBG organized a Visiting Committee to be educators of the strange poor in the ‘regulat[ion of] their home-life in accordance with hygienic requirements’ (Magnus 1909, 14), and having, therefore, established the JBG’s visitors as the pastoral agents of strange, poor Jews’ hygiene education, this organization was, in Lipman’s words, ‘capable of meeting [this] challenge... when it came’ (1959, 75). Indeed, even though sanitary visitations of the JBG had been somewhat inconsistent throughout the1870s (Lipman 1959, 65), the arrival of the wave of Jewish refugees in the late nineteenth century quickly led to the JBG’s renewed effort in ‘discovering defects in the homes of the Jewish poor, and on insisting upon their reform’ (Magnus 1909, 122). Thus, the earlier efforts aimed at educating and guiding ‘foreign’ Jews to ‘help themselves’24 follow ‘healthy practices’ of sanitation, returned with force when the large number of foreign Jews entering the country began to threaten the possibility of a Jewish, yet English citizenship.

The JBG, in fact, participated in quite a few efforts to control the image of strange Jews’ hygiene, given that the more ‘established’ Anglo-Jewry ‘understood that few areas...
posed a greater threat to the communal image’ (Black 1988, 84). Spurred to action by a
damning report published in 1884 by the British Medical Association’s Journal, the
Lancet, claiming ‘the presence in our midst of this numerous colony of foreign Jews
gives rise to a sanitary problem of a most complicated nature’ (Report of the Lancet
1884, 318), and by the increasing number of newspaper articles criticizing the sanitary
conditions of Jewish dwellings (Magnus 1909, 121), and the decision in 1884 to set up a
Royal Commission to investigate the dwellings of the Jewish East End (Black 1988, 88),
the JBG quickly worked to re-assert itself as the experts and pastors of the sanitary
conditions of its ‘own’ poor. To do so, it re-appointed its Sanitary Committee with
inspectors to examine and register the details of all those who applied for help from the
JBG (Black 1988, 87; and Lipman 1959, 126) and distributed sanitary education leaflets
among the Jewish inhabitants of the East End (Marks 1994, 65). In addition to this, the
JBG also revamped its Visiting Committees in the early 1890s so as to play a more
effective role in ‘curative’ work (see Lipman 1959, 113-6), set up an extensive
prevention effort for tuberculosis among the Jewish poor in the late 1890s (1959, 130-5),
and, following the release of a Sanitary Report in 1898, requested the statistics of causes
of death among the Jewish population from the Registrar General so as ‘to take such
means as was within their power to prevent diseases shown to prevail among the Jewish
poor’ (Black 1987, 72). In this way, the Board attempted to better manage the image of
the strange Jewish poor, and, thereby, make possible the acceptance of Jews as
biomedical citizens in England.

25 According to Marks, between 1898 and 1903, the Sanitary Committee of the JBG averaged 2899 sanitary
inspection/education visits per year (1994, 65 n. 42).
Asserting their expertise in, and right to, on some level, manage the Jewish people's health was a rather complicated task for the JBG, however. This was because the board did not want Jews to be viewed as complete 'outsiders' in terms of the allocation of responsibility for the health of Jewish poor, an issue which more broadly concerned Jews' belonging within English society. During this period following the mass migration, therefore, Anglo-Jewry deliberated intensely over what constituted the medical and/or health concerns that the Jewish community should provide for, and what should be left for the broader public to take care of.\textsuperscript{26} Arguments often revolved around claims that there was nothing 'specially Jewish in the dispensing of medical aid' (Magnus 1909, 123), and the JBG, indeed, actively encouraged the Jewish poor to join public dispensaries (Black 1988, 88).\textsuperscript{27} However, this encouragement was rather carefully arranged so that the JBG would continue to have some control over the management of the sick, strange Jews\textsuperscript{28} because they needed to address and respond to the health norms prevalent at the time in such a way that the Jewish people would not and could not be separated out as an 'unsanitary' people. This kind of compromise required constant re-evaluation and negotiation because of the possibility of the JBG being accused of undermining the position of the public health officials (see Black 1987, 64), which would

\textsuperscript{26} See Black (1987, 251-320) for a detailed explanation of the debates over creating a separate Jewish hospital versus having specific Jewish services offered within existing hospitals.

\textsuperscript{27} While these debates were, no doubt, informed by financial considerations, they were also a means of asserting all Jews' right to public medical and health provision, and therefore, their place within English society at a time when establishing a public health system was becoming an increasingly popular idea. This system was first begun in May 1911 with the introduction of a health insurance scheme to the House of Commons (See Feldman 1994, 370).

\textsuperscript{28} Anglo-Jewry had positioned themselves in such a way that they were forwarding sanitation-related complaints to local authorities, and directly to landlords (see Marks 1994, 65) – an effort that was rather successful in preventing non-Jews from conducting inspections of these people's dwellings and 'their' diseases, thereby enabling Anglo-Jewry to control the image of Jewry in England. This control system was particularly evident when tuberculosis became the focus of the JBG's sanitary efforts later in the 1890s. See Lipman for a description of the tuberculosis referral network the JBG set up in cooperation with other charitable organisations and public health officials to this end (Lipman 1959, 132).
threaten their claims to belonging within English society, and because of their own desire to address and respond to the health norms of sanitation, so as to ensure that all Jews living in England (were viewed as having) conformed to them.

At the time the Royal Commission on Alien Immigration (1902-1903) began deliberating over immigration policy, focusing explicitly on the issue of Jewish immigrant health (see Harris 1997; and Maglen 2005), the work that the JBG had done to control the image of ‘their’ poors’ health became very apparent. Indeed, even though the consultation of this board and its recommendations for immigration legislation were not ultimately adopted (Magnus 1909, 107), the idea that the poor, foreign Jews were a sanitary group of people, and even ‘often healthier than the rest of the population in which they lived’ was just as, if not more, popular than anti-alienists’ claims that Jewish immigrants came from ‘the most unhealthy sections of the eastern European population’ (Harris 1997, 10). And while, at times, both sides of these arguments over Jewish health were based in assumptions about Jews’ inherent racial characteristics (whether inferior or superior²⁹), the evolutionary theory prominent in England during this period was more behaviour based when it came to evaluations of Jews’ health. That is, those of both pro-alien and anti-alien camps, for the most part, ‘believed that differences between the health of Jews and non-Jews owed more to differences of culture and behaviour than to any innate “racial” differences’ (Harris 1999, 208)³⁰, and as a result, ‘racial theories were not systematically applied to the question of Jewish immigration, nor used as a pseudo-scientific argument in the contemporary political debate’ (Lebzelter 1981, 92).

²⁹ Hart points out that ‘[i]t is not the case... that every racialization of the Jews took place within a negative framework’ (2007, 48) during this period. See Hart (2000 and 2007) and Stepan and Gilman (1993) for descriptions of how this racialization could be used to construct a positive image of Jews during this period.

³⁰ In fact, the term ‘race’ was, as Himmelfarb points out, ‘an ethnic rather than a biological term’ (Himmelfarb 1995, 173), for most Victorians.
This understanding of behaviour and culture as the forces producing health and healthy (or unhealthy) practices was, indeed, useful for promoting a positive image of Jewish health. It underpinned the behaviour-oriented sanitation interventions of the JBG, which made it possible for poor, strange Jews to be ‘brought up’ to the sanitation standards of their new society because strange Jews were not taken as inherently unsanitary, but as needing to change unsanitary behaviours to sanitary ones. At the same time, and somewhat in contradiction to this idea of readily changing behaviour, this version of a cultural determinism of behaviour provided for the location of health practices within the Jewish (but also English) culture itself. Thus, at this time, healthy behaviour and practices could come to be viewed as among the defining characteristics of being an English and Jewish citizen.

The New Tradition of Jewish Health

The JBG was not alone in working to promote the positive acceptance of Jews as biomedical citizens of England. While its activities certainly involved the most explicit attempts to make sure that the strange poor Jews were not viewed as unsanitary, during the late nineteenth and early twentieth centuries, a broad reinterpretation of Jewish history developed in such a way that all Jews were newly defined as a group of people possessing an established tradition of healthy, sanitary practices. While those promoting the idea that Jews were dirty and/or diseased did not accept this reinterpretation, it had

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31 While it is true, as Hart points out, that the idea ‘[t]hat wisdom and science originate with the Jews [was]... a very old and well-established trope, appearing in ancient, medieval, and early modern Jewish literature’ (2007, 34) much before the period I am describing, he also points out that the late nineteenth and early twentieth century is remarkable for the reinterpretation of Jewish laws and traditions as being a ‘hygienic code’ (2007, 47), thereby establishing a more positive evaluation of Jews’ place within Western civilization at a time when developments in sanitation and the prevention of disease had become a critical political issue. I will be drawing heavily from his book, The Healthy Jew, in the following section.

32 A few examples of those promoting this idea are found in Harris (1997) and include politicians such as Major William Evans Gordon, Arthur Balfour (the Prime Minister), Aretas Akers-Douglas (the Home
many adherents and was undeniably an influential understanding of Jews’ relationship to health. The biopolitics of sanitary health responsibilization developing over the course of the nineteenth century had made this relationship between disease and the Jewish citizen of England one that necessitated a specific characterization; and given this, it had elicited a positive valuation of Jews’ health and sanitary habits by Anglo-Jews concerned with establishing both their people’s place within, and their own specific contribution to,\(^3\) the efforts to improve the health of England. More specifically this idea of ‘Jewish sanitation’ did not challenge the broader promotion of sanitary living, and the prevention and control of disease taking place in England at this time, but facilitated it; and in this way, it was able to converge with, and reinforce, in a symbiotic relationship, the broad sanitary and disease prevention efforts in England (see Hart 2007 93-6).

Given that Jewish history and tradition were located within Judaism, it was largely a reinterpretation of Judaic texts, rules and practices, and of the actions of religious leaders, that constituted Anglo-Jewry’s rendering of Judaism as a ‘this-worldly’ (Foucault 2003a, 132-3) religion that adhered to biomedical norms. For instance, the Chief Rabbi Hermann Adler, during his 1893 public talk entitled ‘Sanitation and the Mosaic Law’, credited Moses as a sanitarian ‘well ahead of his time’ and argued further ‘that the Jewish “tradition” – i.e., the two parts of the Talmud – supplemented or even

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3\(^3\) Although Jews were certainly not the only group promoting the idea that their people had a particular tradition of sanitary living - Christians and non-Jewish doctors and scientists also promoted this idea, as Hart (2007) demonstrates - it is arguable that the latter group expressed more of an acceptance of an idea that was put forward by Anglo-Jews attempting to abate the instability of their tenuous position as a Jewish, yet English, citizens, than that they came to this conclusion in complete separation from Anglo-Jewry’s concern with this issue.
surpassed the teachings of Moses in this respect’ (quoted in Hart 2007, 78). A few years later, in 1896, the Anglo-Jewish physician, John Snowman, similarly described Judaism as ‘a religion which holds forth immunity from disease as one of the rewards of a faithful adherence to its tenets’ and held that the Mosaic laws were ‘calculated to preserve the national health’ (quoted in Hart 2007, 100). Snowman went as far as claiming that Jews should, in fact, serve as an example for contemporary British society, promoting a ‘rabbinical control’ of public health according to his reinterpretation of ancient rabbis as health authorities (Hart 2007, 100-1). Thus, these reinterpretations of Judaism provided for a strong counter-discourse to any illusions to Jews being diseased or unclean and, perhaps even more significantly, equated Judaism as almost synonymous with health itself.

These reinterpretations of Judaism, however, were not without their challenges because they produced two, somewhat conflicting, characterizations of ‘who the Jews are’ vis-à-vis health. While both positioned Jews as healthy, one of them did so by emphasizing the idea that healthy rules and practices originated within Judaism and therefore, were, in fact, proper to this people, whereas the other made Judaic practice and teaching that which all people can benefit from. This first move was used to validate and celebrate Jews and Judaism through ‘developing collective identity around the notion of special knowledge or wisdom’ and through ‘emphasizing the origins of this special knowledge,… [, thereby, making it so that] the community becomes its guardian’ (2007, 97 - author’s emphasis). This translation of Judaism undoubtedly worked to valorize Jews and Judaism because, through it, the hygienic knowledge and practices that had become important for all living in England were rendered Jewish, thus providing a positive
affirmation of Jewish difference to Jews and non-Jews. An understanding (among both Jews and non-Jews) that Jews were different was something ‘everyone could agree upon’ at this time, but given that ‘just what that difference signified remained open to debate’ (2007, 83), positive evaluations of Jewish difference were imperative for those seeking to affirm their Jewish identity, albeit as English citizens.

At the same time, it was imperative that this people ‘establish Judaism’s potential relevance, not only for Jews but also non-Jews’ (2007, 57) because of the continued threat produced by the idea that Jews remained a ‘nation within a nation,’ ‘fail[ing] to identify themselves with the general interest of the community’ (Feldman 1994, 358).

So in addition to needing to demonstrate their belonging as biomedical citizens through ensuring that the Jewish ‘strange’ poor were recognized as conforming to sanitary health norms (as discussed above), it was also necessary to demonstrate that their (newly established) tradition of Jewish hygiene was appropriate and readily available for application and practice in all of England. Simply put, they had to show that ‘Jewish hygiene’ was not only for Jews. Snowman’s suggestion that Judaism should be a model for England was among the strategies that accomplished this delicate task, as were the public talks made by Jewish communal representatives like the Chief Rabbi. Another way this was achieved was through Jews publishing articles on ‘Jewish sanitation’ in general medical journals (rather than in self-identified Jewish journals), which, through

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34 Feldman explains that in the late nineteenth and early twentieth century, England was developing further into a collectivist state, wherein interests perceived as particular to Jews were increasingly viewed as conflicting with ‘the common (English) good’ mentality underpinning these developments (1994, 358). The new government policies promoting English commonality, therefore, shaped and limited the possibilities of how Jews could maintain their difference (1994, 359).

35 Hart recognizes these publications as taking place within a forum where ‘[t]he potential audience would be different, and the transmission of a particular sort of knowledge different in its reception’ (2007, 91). I would add, however, that while a non-Jewish audience would respond “differently” to these claims than a Jewish one, this audience would be more interested in reflecting on and/or pursuing these “Jewish

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in an indirect manner, demonstrated Jews' willingness to share 'their' knowledge with their broader society. Through this work of showing what Jews could offer to promote England's health, this group was able to demonstrate its belonging and sense of community with the rest of England, and therefore, protect itself from claims that it was not concerned with contributing to the 'common (English) good.'

'Successful' Biomedical Citizenship?

Following from the above analysis, it is clear that the late nineteenth and early twentieth century can be characterized as a period in which Jews living in England struggled to demonstrate that they were responsible 'biomedical citizens'—both as Jews and as members of their broader society. In trying to negotiate their claims to both belonging to, and being different from, the people among which they lived, the increasing control over life that had lead to the development of biomedical citizenship discourses prescribing particular 'healthy' practices posed both a great threat to Jews' acceptance, and a powerful means to ensure it. In the end, however, it cannot be claimed that the Jews were either ultimately successful or unsuccessful in these negotiations because, as Hart points out, both 'epistemologically and culturally the investment in such arguments and debates... has not vanished' (2007, 199) in the contemporary context. The negotiation of Jews' membership as citizens of the contemporary Western societies that 'include' 'Others' continues to take place, as questions concerning Jews' relationship to health and disease prevention, specifically in regards to genetic research and testing, have become increasingly prevalent in recent years, most particularly in the United States – another techniques of health” than in debating their origins, given that ensuring health was such a compelling normative imperative for all the people of England, and given that this origin story did not threaten the place of England, and the English people, in the history of medical and scientific practices because no one viewed medicine and/or sanitation as having its historical origins in England.
country whose ‘inclusion’ of Jewry has been generally regarded as ‘successful.’ It is to this contemporary context, within this specific country, that my analysis shall now turn.
CHAPTER 4.  AMERICAN JEWRY’S ‘SUCCESSFUL’ CITIZENSHIP

Similar to the positive renderings of Anglo-Jew/English relations in the nineteenth century, the twentieth century relationship between American Jewry and their ‘host society’ has generally been regarded as a kind of ‘success story.’ In it, the history of American Jew/American relations is viewed as having been largely without problems due to American Jews’ creative adaptation and synthesis of their Jewish tradition with American culture (Michels 2000, 525; see also Endelman 1991) and/or to the ‘free, open society’ of United States having provided the proper democratic conditions for Jews to ‘fully... exercise their rights as citizens and, at the same time, [to] freely... observe their religion, sustain their traditions, and perpetuate their culture’ (Dawidowicz 1982, 162; see also Goren 1999; and Whitfield 1986). This positive view is particularly characteristic of evaluations of American Jew/American relations from World War II on, given that during that time there was a prominent sense of support for American Jews’ place within American society (for example, Nazism was repeatedly cast as anti-American) and because of the elimination of such things as anti-Jewish quotas during this period. There are, in fact, many examples that might be called upon to demonstrate American Jewry’s ‘successful’ citizenship in America... but success is a relative term, and given this, and the recently recognized challenges and frustrations associated with this ‘success’ raised by contemporary scholars of Jewish identity (see, for example, Dershowitz 1997), characterizations of American Jewry as having achieved ‘successful’ citizenship require the questioning of how this ‘success’ has been defined and negotiated by American Jews within the broader context of the possibilities shaping their American citizenship.
The ‘Problem’ of the Jews in Early Twentieth America

The early decades of twentieth century America were coloured by extreme apprehension over developments in urbanization and industrialization, and over the mass migration of immigrants and refugees from eastern and southern Europe beginning in 1880 and finally ending in 1929 due to the enactment of the Immigration Act of 1924 (Dawidowicz 1982, 89). Uncertain whether or not these changes to America’s structure and composition were positive or negative developments, the people who were rather specifically concentrated in cities, heavily involved in trade and commerce, and made up a large portion of these immigrants, came to be perceived as a ‘problem’ for American society. As Goldstein puts it, ‘[m]ore than any other distinguishable group in American society, Jews served as a symbol of the processes transforming the nation’ (Goldstein 2006, 36) because they seemed to be undeniably linked to all of these processes of change. The result of this increasingly prominent perception that Jews were a threat to American society was that the early decades of the twentieth century saw Jewish group status put under intense scrutiny, and Jewish participation in various elements of American society extremely limited. In other words, the possibility for Jews to be American citizens became increasingly questioned and questionable.

While the promotion of blatant anti-Semitic propaganda certainly shaped the (im)possibility of Jews’ acceptance as American citizens during this time, the ‘problem’ that Jews were perceived to pose was also often viewed as involving their assimilation into American society; and given this, there was a lot of interest in finding ways to

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eliminate, rather than emphasize, differences between Jews and non-Jews in early twentieth century America. For example, prominent public figures, such as Nathanial Shaler, the dean of Harvard’s Lawrence Scientific School, and American presidents, Theodore Roosevelt and William Howard Taft, all supported the idea that Jews could and should ‘blend in such a measure as will make a safe common element of population’ through ‘training’ Jews to be proper Americans and ensuring their ‘physical intermixture’ with the rest of the American people (Shaler quoted in Goldstein 2001, 405). In a more explicitly assimilationist manner, the quotas put in place on Jewish enrollment by Harvard University’s president, Lawrence Lowell, were made with the goal of doing away with ‘Old World’ notions of difference between Jews and non-Jews, according to the idea that a smaller number of Jews would more readily assimilate in American society (Lowell Tells Jews 1922). Thus, despite the fact that the aim of assimilationists was, like that of anti-Semites, to ‘overcome’ the ‘Jewish problem’ in America, the ‘inclusion’ of Jews through assimilation opened up, albeit in a very limited way, the possibility for negotiating a Jewish, yet American, citizenship.

**Jewish Citizenship Negotiations in Early Twentieth Century America**

American Jews were not oblivious to these attempts to address the ‘Jewish problem’ in America – anti-Semitic or assimilationist in origin - and therefore felt an acute sense of urgency to define their Jewishness in a way that would not be perceived as undesirable or threatening to American society, or preclude their place within it. In fact, in addition to having come to be viewed as a ‘problem’ in America at this time, however ironically, the growing numbers of second generation Jews had also begun to increasingly identify themselves as Americans (Dawidowicz 1982, 101), such that
resolving their status was rather pressing for them during this period. Jews themselves began taking a close look at their people, therefore, as they tried to figure out how their Jewishness could be(come) both acceptable to themselves and to their broader, American society. Pushed by both outside scrutiny and their increasing sense of belonging to the United States, the negotiation of a Jewish, yet American citizenship, became imperative.

**A Race?**

During the early years of twentieth century America, the most salient framework members of the Jewish community worked within to express their sense of grouphood, and in which their grouphood was understood by many non-Jewish Americans, was that of race. At this time, race was broadly conceived of as an inborn quality that determined groups' behaviours (Gleason 1981, 486) and given this, it provided the most legitimate and acceptable means through which Jews could understand and explain their grouphood. This framework for categorizing differences among groups of people was by no means without problems for Jews, however, because the 'white race' was conceived of as the ideal and defining race of American citizens, and Jews' belonging within that race, and therefore as American citizens, was questionable both to other Americans and to Jews themselves. Within this context of racial group understanding, therefore, Jews had to explicitly address their racial group belonging, and to try to find means through which they could belong to both racial groups – white and Jew.

Among those who attempted to negotiate the American citizenship status of the Jews by placing them within the 'white race' was Maurice Fishberg, a prominent

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37 While the idea that Jews are a race ‘has usually been treated by modern Jewish historians as the province of antisemites,’ Goldstein explains that ‘racial language also served as an attractive form of self-definition for Jews’ (2006, 11). In this section, I will be drawing heavily from his book *The Price of Whiteness: Jews, Race, and American Identity*. 

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researcher in Jewish physical anthropology at the turn of the century. While initially reluctant to part with the idea that Jews were a distinct race in his early skull measurement research, Fishberg was not fully satisfied with the conclusions he initially came to because they did not directly refute the widely-held idea that there existed a link between Semites and Africa (the 'black race' was at the bottom of the racial hierarchy of this period), nor did they position Jews safely within 'white America.' In his efforts to address these two issues, Fishberg turned to the arguments of William Z. Ripley, which suggested Jews were not a pure 'race' but a product of extensive racial intermixture, so as to argue that European Jews and non-Jews were not physically different and that any differences that did exist were minor and of environmental origin. Yet, while denying any racial distinctiveness of Jews provided a scientific basis for claims that Jews were the right/best kind of American citizen, Fishberg’s arguments (see Fishberg 1911) ultimately ‘failed at satisfying the contradictory needs of American Jews, most of whom ultimately wanted to be accepted in white America without giving up their own distinctive racial identity’ (Goldstein 2006, 114).

Given this general discomfort with a wholesale rejection of the understanding of Jews as a racial group, the more prominent strategy American Jews advanced in the negotiations over a Jewish, yet American citizenship, was a transvaluation of race that positioned Jews as a race that contributed more than adequately to American society. During these early years of the twentieth century, therefore, a common practice among the majority of American Jews was to emphasize and celebrate the accomplishments of those belonging to the ‘Jewish race.’ Goldstein explains that this kind of strategy was, indeed, ‘a virtual cottage industry among American Jews’ of this period (2006, 172), with
whole books dedicated to advancing these claims (e.g. They All Are Jews: From Moses to Einstein [Davis 1937]) and prominent Jews, such as the New York composer, Saleski, making statements in 1928 like ‘the bloodstream of the Jews courses through the spiritual veins of every major art that modern civilization has risen to honor’ (quoted in Goldstein 2006, 172). In addition to these kinds of Jewish racial promotion, there was also a particularly strong effort put forward to portray Jewish men as athletic, sportsman-like and physically strong (to counter the popular anti-Semitic image of the Jews as a physically weak people), while the ‘Jewish genius’ was touted as an asset of their race (Goldstein 2006, 173). In all of these various ways, then, early twentieth century American Jews attempted to demonstrate how those of the Jewish ‘race’ were more than adequate American, but still Jewish, citizens.

In addition to rendering Jewish ‘racial difference’ a positive contribution to American society so as to try to establish an American, yet Jewish, citizenship for themselves, this Jewish ‘racial difference’ was also distinguished from that of other groups so as to consist of benign differences to the ‘white American race,’ according to that same goal. Recognizing that their acceptance would be hindered if they did not distance their ‘Jewish racial difference’ from that of the lowest ranking group in the racial hierarchy, the ‘black race,’ the idea that Jews’ ‘racial difference’ was psychological, rather than biological, was also advanced at this time. This transvaluation of the concept of race, therefore, entailed claims that Jews were a race because they possessed a ‘specific Jewish “personality”’ (Semitism 1924, 277), which was just ‘as striking and expressive as [was] biologically the raciosity of the colored man’ (quoted in Goldstein 2006, 175), yet, because its basis was not in biology, it was a non-threatening difference
that did not position Jews as lower than, or even absolutely outside of, the ‘white race’ of American citizens (Goldstein 2006, 175). Ultimately, however, this characterization of a psychologically-racial Jewish peoplehood and all the efforts of the Jewish race celebrationists were unsuccessful in establishing an acceptable racial status for Jews as American citizens because the concept of race was tied to the idea of immutable differences between groups, and those ‘white-raced,’ non-Jewish Americans willing to ‘include’ Jews in their version of American citizens were only willing to accept them if they could somehow, or would at least eventually, no longer be Jews.

An Ethnicity/Culture?

During this same time period in America, a few Jewish scholars began advancing the idea that Jews were not a race of people, but instead, had a distinct cultural heritage. They recognized the liability of defining Jewish peoplehood as having a racial basis for establishing a Jewish, yet American citizenship, and sought to locate Jewish group status in something less volatile for their status as American citizens, yet still compelling and significant so as to be acceptable to themselves as Jews. According to the definition of Jewish grouphood they advanced, Jews were not a group with shared biological/racial origins, but one whose basis was a shared ethnic identity based on history and tradition.

The move towards an ethnic/cultural definition of Jewish peoplehood was not a quick and easy transition from the racial understanding of Jews, however, and in some cases, at least at first, it followed very similar lines of argument to those advanced by the Jewish race protagonists described above. For instance, academics like Horace Kallen, the pioneer of the concept of ‘cultural pluralism,’ initially claimed that the Jewish people possessed ‘hereditary instincts’ and were racially endowed with the capacity for
‘Hebraism’ (quoted in Goldstein 2006, 179) when he began addressing the issue of Jew’s
grouphood vis-à-vis their belonging in American society; and much like those promoting
a psychological understanding of Jews race, he contradictorily positioned Jews both
within and outside the ‘white race’ when explaining Jews’ racial status (see, for example,
Kallen 1906 and 1924). Kallen proved to be much more interested in establishing an
acceptable Jewish, yet American, citizenship than he was attached to a specifically racial
meaning of Jewish grouphood, however, so he eventually moved towards an
understanding of Jews as sharing a ‘historical culture’ because he saw the potential for
reaching this acceptable American, yet Jewish, citizenship through this particular
reframing of Jewish grouphood.

This switch to culture/ethnicity was to provide a means through which Jews could
be positioned as American citizens that belonged to the ‘white race,’ yet continued to be
socially distinct; and it was promoted by Kallen and other Jewish scholars, such as Isaac
Berkson and Julius Draschler, through two complementary assertions. On the one hand,
this shift in defining Jewish grouphood as cultural entailed putting great emphasis on the
vast differences between biology and culture wherein, different biology (which ultimately
translated to non-white skin colour) was threatening to American society, but different
culture rendered it ‘wider and richer and more beautiful’ (Kallen 1915). This position
helped justify continued Jewish communal life in America because it made the idea that
Jews needed to biologically merge, i.e. intermarry, with other American citizens become
unnecessary (Goldstein 2006, 180), while at the same time it promoted the newly defined
Jewish culture as a positive enrichment to American society. In this way, the aim of this
new framing of Jews as a cultural people, according to Berkson, one its key promoters,
was to provide ‘a way of retaining loyalty both to the cultural life of the ethnic group and to the life of the total group in all its aspects’ (quoted in Goldstein 2006, 181).

This reworking of Jewish grouphood into a cultural understanding also involved positioning the Jews as one of many white immigrant groups, thereby making the so-called ‘Jewish problem’ into a broader issue so that ‘Jews were... not unique, but one among many groups which retained their cultural identity while politically unified’ (Handlin 1961, 150). Following this strategy, these Jewish academics put forward new definitions of what it meant to be an American citizen that called both for recognition of the immigrant roots of all American citizens, and that expressed American democracy as based upon these groups’ continued existence. For example, Kallen’s article, Democracy Versus the Melting Pot (1915), posited that America should strive for ‘the perfection of the cooperative harmonies of “European civilization,”... a multiplicity in a unity, an orchestration of mankind’ in which this ‘symphony of civilization’ consisted of each ethnic group being a specific type of instrument with ‘its appropriate theme and melody in the whole symphony.’ This version of America was not readily accepted outside Jewish academia, however, because in addition to the Jewish community’s overall continued tie to a racial group understanding at this time, the idea held by liberal Americans that full national assimilation was necessary in order to truly be an American citizen was not to be changed. In fact, the very advantage of framing their group as an ethnicity/culture was dependent upon the assumption, and its underlying imperative, that these ethnic differences between ‘whites’ would eventually and inevitably disappear. In other words, it was dependent upon making Jewish difference something that was changeable and mutable, unlike the conception of Jews as a race.
Jews as an *American Religious(-ethnic) Group*

The idea that Jews made up an ethnic group was never rejected wholesale by the broad American Jewish community, however, because soon after this idea was first put forward, American Jews became increasingly aware of the potentially terrible liabilities of a racial understanding of their group difference, as evidenced by the development of the racially anti-Semitic Nuremberg Laws in Germany (Goldstein 2006, 202). Indeed, expressing Jewish group identity in ethnic/cultural terms finally began gaining popularity in the 1930s when it was recognized that ‘racial nationalism’ could have an ‘effect as a boomerang, as a weapon which may in turn be used with deadly effect against the Jew’ as it had in Germany (Morgenstern 1934, 419), so American Jews began turning more towards expressing their grouphood through the language of ethnicity, culture, community, etc. as it was much safer for them to do so in their negotiations over Jewish American citizenship. This did not entail simply taking up an ethnic definition of their grouphood at the cost of sacrificing the stability of the particularity and separation of Jewish peoplehood that had been guaranteed through racial groupings, however, but was a framing of their difference in a manner more or less acceptable to the rest of America through a somewhat modified understanding of ethnic and cultural grouphood to the one that had previously existed. In fact, the new definition of Jewish difference that began to (re)emerge during the 1930s, in which a cultural/ethnic conception of Jews was incorporated, had a long history and had never quite disappeared even throughout the period in early twentieth century America during which Jews were largely defined as a race.

The definition of Jewish difference referred to is of course, that of religion. This
aspect of Jewish grouphood had been pushed into the background during the early twentieth century due to the more general ‘religious depression’ taking place during that time\textsuperscript{38} and to the contemporary popularity of understanding group difference as being racial in character. Moreover, a solely religious definition of their grouphood had never been fully satisfactory for the Jews in America, because they had never only understood themselves as a religious community.\textsuperscript{39} It had, however, been the only framework in which they could more or less comfortably claim a Jewish difference while still being accepted as American citizens, given that one of the founding Bill of Rights of the Constitution had prohibited the formal or legal establishment of a single religion (Lippy 2002, 4) such that it had become a ‘patriotic obligation’ in America to maintain one’s religion; indeed, doing so ‘was bearing witness to America as a land of freedom and opportunity’ (Karp 1985, 363).\textsuperscript{40} When the language of race gained prominence in the late nineteenth and early twentieth century, it had provided a new means through which Jews could express the aspects of their group’s difference for which they had not been able within the American religious group framework, but as demonstrated above, this did not allow for their acceptance as American citizens.

In the 1930s, when defining Jewish grouphood as cultural/ethnic came to be

\textsuperscript{38} See Davidowicz (1982) and Handy (1960) for a general description of the ‘religious depression’ during the 1920s and see Herberg (1961, 184-6) for more specific details of the unfolding of this ‘religious depression’ among American Jewry.

\textsuperscript{39} The Reform movement that had emerged during the nineteenth century had adopted a “publicly-American, privately of Jewish religion” identity that fit within the American separation of religion and the state through denominational religious groupings (see Handlin 1961, 133-8, and Elazar 1976, 99-104), yet this division had never gained overall acceptance in the Jewish community because not everyone was willing to give up a Jewish identity that existed beyond religious practice, and this division became even more problematic when the mass migration of Eastern European Jews began taking place in the late nineteenth and early twentieth centuries as these Jewish immigrants were also attached to a more than religious definition of Jewish peoplehood.

\textsuperscript{40} See Herberg (1961, especially 27-45) for a further explanation of how retaining one’s religion was an obligation put on immigrants in order for them to become Americans, whereas, in contrast to this, they were to absolutely rid themselves of their ethnicity.
recognized by the broader Jewish community as a much less threatening definition of their group difference than race vis-à-vis their acceptance as American citizens, but, at the same time, was not enough by itself to provide for their groups’ continued viability, or to capture the full sense of Jewish identity, a kind of merge took place between religious and ethnic/cultural understandings of Jewishness. Given that the religious definition of this group had never quite disappeared, but had, in fact, undergone a kind of ‘reconstruction’ throughout this time period when Jews were largely conceived of as a race - a reconstruction whose most significant aspect was probably the transformation of synagogues ‘from “houses of worship” to “synagogue centers”’ (Karp 1985, 368) that were ‘built around Jewish worship, but include[ed] all facets of Jewish existence – social, educational, and cultural’ (Elazar 1976, 108) – the coming together of both of these definitions of Jewish grouphood took place quite readily among the American Jewish community of the 1930s and by 1945 Judaism and Jewishness had, in fact, become more or less ‘identical’ (Goren 1999, 195). To put it simply, Jews came to be defined as one of America’s religious groups once again during this time, because not only did this

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41 I use the word ‘reconstruction’ because it is the term used to describe the movement within Conservative Judaism that Mordecai M. Kaplan began promoting in 1908 which, though not alone in promoting a greater union between religious and cultural/ethnic definitions of Judaism, was at the forefront of this effort (see Gurock 1986, 193-210; Karp 1985, 368-70; and Elazar 1976, 107-9). In fact, Kaplan’s book Judaism as a Civilization (1935), a concerted effort to meld Jewish religion and ethnicity into a more adequate definition of Jewish grouphood, was generally very well received by the American Jewish community.

42 This reconstruction of Jewish religion had been slowly forming in the early years of the century mainly through the development of the Conservative movement, for it both ‘most closely identified with the ideology of peoplehood, thereby attracting more than its share of Zionists, Jewish educators, and others whose concern with Jewish life was intense, rather than simply moderate or residual’ and also provided for religious worship that was ‘more in tune with the times than the Orthodoxy [many Jews] knew from childhood,’ but was not ‘alien’ to the large number of East European Jews for whom Reform practices were (Elazar 1976, 107). Then, between the late 1930s and the end of the war, several Jewish community leaders, most of whom were rabbis from both the Conservative and Reform streams of Judaism, ‘began to forward a new cultural or “ethnic” brand of Jewishness similar to that first suggested by Jewish scholars in the 1920s and early 1930s’ but ‘written in a popular style and intended for broad circulation’ (Goldstein 2006, 202) such that it was Jewish religious leaders who had largely taken up and popularized the ethnic understanding of Jewish peoplehood couched within a religious framework.
safely (re)establish Jewish group existence as a 'patriotic obligation,' but the scope and meaning of this ‘religion’ had been broadened so as to include many of the other aspects of their grouphood that had not been available to Jews prior to this redefinition. These were not the only ways in which Jewish ‘religiosity’ was reshaped for American, yet Jewish, citizenship during the early years of the twentieth century, however.

As a result of many Jews’ newly developed attachment to an American citizenship, among both those who felt they were already living as American citizens, and among the newly arrived Eastern European Jews who wanted to become American citizens, the reshaping of the meaning of Jewish religion during the early years of the twentieth century involved more than the developments described above; it also entailed the production of a specifically American brand of Judaism, a minhag America (Elazar 1976, 99). While this desire to ‘Americanize’ Judaism had informed the Reform branch of Judaic practice from its very beginnings in the mid-nineteenth century with its founder, Isaac M. Wise, having taken up this movement so as to reconcile ‘the spirit of Judaism with the spirit of American democracy’ (Handlin 1961, 133), the scope of this desire had become much more widespread among American Jews in the twentieth century. Indeed, not only did it inform the work of Mordecai Kaplan in his efforts to 'reconstruct American Jewish life in light of what he perceived to be the realities of the American

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43 This played an important role in protecting American Jews from the persecution their counterparts faced in Germany by leading to their position as one of the founding religious groups of America’s ‘Judeo-Christian religious heritage’ during both WWII and in the postwar religious revival period. See Dash Moore (1998), Mart (2004), and Silk (1984) for a description of the formation of the idea of a Judeo-Christian heritage during these periods in the United States and the implications it had for American Jewry.

44 This redefinition of Jewish religion as ethno-religious took place largely within the community itself and did not have a direct influence on how the wider American society perceived Jewish religiosity because of the special status of religion in America, and the lack thereof for ethnicity (see Karp 1985, 370-1).

45 Elazar suggests that this commonality was actually the basis of any cooperation between Reform Jews and the newly arrived Jews from Eastern Europe stating that ‘[e]ven though [Eastern European Jews] laughed at the Reform patterns of Jewishness, they accepted guidance towards americanization’ from Reform Jews because ‘the immigrants did want to become americanized as rapidly as possible’ (1976, 103).
environment and the principles of modern thought' (Elazar 1976, 107-8; see also Gurock 1986, 201), but it also underpinned the claims of Orthodoxy’s Rabbi Herbert Goldstein in 1915 when he posited that ‘the Judaism of the future’ was to be found in the teachings of university-trained Orthodox Rabbis ‘reared on American soil, who have breathed the ideals of American democracy, who have been born and bred like other Americans’ (quoted in Gurock 1986, 202). What this meant for the newly defined Jewish ‘religion’ emerging in the 1930s, therefore, was that at the same time that it was grounded in a kind of Jewish difference (both cultural and religious) from the rest of America, it was also overwhelmingly contradicting this separation through these efforts to make it more American. In fact, Herberg argues that these efforts were so strong so as to make ‘whatever difference still remained [between the various branches] altogether secondary’ by the postwar period, because they had all become ‘more and more like each other’ (1961, 193) in these efforts to establish a Jewish, yet American religious citizenship.

One of the most significant outcomes of these negotiation over an acceptable American, yet Jewish, religious citizenship was that during World War II and continuing on afterwards an ‘enhancement of the rabbi’s role’ (Elazar 1976, 117) took place. More specifically, rabbis became both representatives of the Jewish community in America and experts on what it actually meant to be Jewish because this change in the rabbi’s role and function both ensured the survival of Jewish grouphood and felt more appropriate to most Jews who were increasingly interested in a ‘religion’ that ‘did not demand rigorous devotion and daily attention’ (Sklare quoted in Herberg 1961, 192) as they did not want it to interfere with their lives as American citizens but still wanted to retain Jewish identity/affiliation. As a result, among all branches of Judaism ‘there developed a curious
form of vicarious observance by the rabbi, who was expected to live up more or less to the traditional standards which were no longer operative among the members of his congregation’ (Herberg 1961, 192). These changes also entailed putting rabbis in a pastoral role in relation to their congregations because of their newly acquired expert status, which made it ‘far more difficult for someone who is not a rabbi to function authoritatively in the Jewish sphere’ (Elazar 1976, 119).

While framing Jewish grouphood as ‘religious’ through these means has not been without its challenges since the postwar period, both because the pre-eminence of religion in this definition of Jewish grouphood remains somewhat incongruent with Jews’ understanding of the ties that bind them, and because there remain those for whom Judaism ‘depend[s] upon the acceptance and the authority of an Immanent God who had prescribed holiness as a way of life for his chosen people’ (Handlin 1961, 157), Jews continue to be largely defined, both by themselves and by their broader American society, as a religious group. Indeed, ‘[p]ractical viability has been given higher priority than ideological consistency’ when defining Jewish group difference in America (Karp 1985, 372) because it would not have been ‘allowed’ to be sustained had it been more overtly ethnic as this would have been ‘a sign of incomplete integration’ (Herberg 1961, 37) and therefore, would not have offered any possibility of American, yet Jewish, citizenship. This remains the case today, even though America has become a country officially more accepting of differences, because Jews continue to experience problems when trying to have their grouphood recognized as other than religious by American

See Elazar (1976, 119-21) for a more detailed description of the ways in which the role of the rabbi changed in all the branches of Judaism so as to become that of a representative of, and expert on, ‘Jewishness’ and see Herberg (1961, 206 n. 52) for some specific examples of this development among Conservative and Orthodox Jewry.
society (see Goldstein 2005). The difficult negotiations between their acceptance in America as citizens, and their desire to maintain their particular meaning of Jewish difference, therefore, continue to be a challenge that American Jewry faces today.

The Biomedical Citizenship of the ‘New Genetics’

Before going into the details of one of the contemporary situations in which these negotiations over an American, yet Jewish, citizenship continue to be worked through by American Jewry, an explanation of the development of the new health responsibility norm that is caught up in these negotiations must be given. This norm, which belongs to Western biopolitics more broadly, but which finds rather explicit expression within the United States, concerns the discoveries and developments in control and prevention of heritable diseases that have been made post-World War II and that continue to be the basis of much biomedical research today. It consists of the responsibilization of individuals and groups to actively seek to control and prevent ‘their’ heritable diseases because in contemporary America, and in the West more generally, this kind of action has come to define the actively responsible biomedical citizen.

While an understanding that some diseases are heritable, and the consequent actions taken based upon that understanding, have probably been around for centuries, and certainly received a lot of scientific and public attention during the eugenic period of the late nineteenth and early twentieth century, it was not until after World War II that two major changes informed the emergence of the new kind of normative imperative informing contemporary biomedical citizenship in America (and the West more generally). The first change involved rendering the responsibilization of individuals’

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47 In the United States, responsibilization for one’s health is more prominent than in other Western countries as indicated by the lack of a universal healthcare service provided to American citizens.
and/or groups' hereditary 'faults' more technologically tenable than during the eugenics era through the new capacity to screen for hereditary diseases. The second involved a move towards a pastoral approach for invoking this responsibility through providing 'information' according to a 'right to know and freely act' discourse that emerged in the postwar period. In the following I will explain how these two changes came to inform the emergence of a new discourse for biomedical citizenship in America beginning in the post-World War II period and which continues on in the present.

**The 'Freedom' of the 'Molecular Gaze'**

Over the second half of the twentieth century, numerous developments took place within science such that biological explanations and knowledge of life were newly 'molecularized.' These new technological developments included such things as electrophoresis, amniocentesis and various subcellular, and later more specifically genetic, discoveries providing for the capacity to test for hereditary diseases. Given that these technologies provided for a 'molecular gaze' (Rose 2007, 108) into the body, not only making that which was previously invisible visible, but also rendering these newly molecular characteristics empirically attributable to particular individuals and groups, the 'molecularization of biology' was, as Rose describes it, 'an irreversible epistemological event' (Rose 2001, 14). This is because it changed how life was known and understood and, more importantly, it rendered 'the living body... intrinsically linked to interventions that transformed those living bodies' (2001, 14).

This capacity to find molecular, and soon after, genetic, links to hereditary disease within bodies made it so that bodies were both objects to which the 'predictive power'

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48 During that time, the means through which hereditary disease was traced was through genealogical family trees that did not provide the exacting technological means to assign 'guilty genes' (Reuter, pers. comm.) to individuals and/or groups as has become possible within the contemporary context.
(Duster 1990, viii) of molecular technologies could be applied and, in that same move, rendered those living in these newly molecularized bodies obligated to act 'in relation to the potential futures' (Novas & Rose 2000, 486) that these technologies made known. Indeed, hereditary illness and/or risk thereof came to be a 'redundant' burden because testing for it meant that 'the possibility exists of pursuing other paths' (Petersen & Bunton 2002, 51). What this indicated was that a change had taken place regarding health and the rights and duties caught up in ensuring it because this new technological ability to locate hereditary/genetic problems was more than simply a tool for finding the molecular and/or genetic culprits for disease. The very existence of these technologies involved the compelling expectation that once one knew one's possibilities to develop or pass on hereditary disease, one would take the 'necessary steps' to minimize and manage this so as to advance health and wellbeing for oneself and those who could or do share one's molecular and/or genetic biology.

These technologies, to be more specific, came into being at a time when 'old' eugenic policies of state intervention on hereditary disease were regarded as coercive and dangerous (most particularly due to the events that had taken place in Nazi Germany), such that one's potential to develop or pass on hereditary disease came to be framed as a 'right to know and act freely upon that knowledge' issue. Within this way of understanding these new technologies, and the ways of understanding and acting on life they allowed for, a kind of 'information' and 'choice' rhetoric came to inform notions of 'right to life.' These developments repositioned scientific and medical experts as 'pastors of the soma' who were to simply 'inform' people of their molecular/genetic risks in a non-directive way that allowed for 'voluntary' action and choice (Rose 2001, 9), but most
importantly, they interpellated individuals into enacting their freedom through seeking after ‘their’ molecular/genetic knowledge (2001, 6).

In sum, the new biomedical citizenship that emerged in the second half of the twentieth century in America (and in the West, more generally) was one informed both by the new technological capacities to find molecular/genetic ‘defects’ within bodies and by the rhetoric of ‘choice’ and ‘information’ that characterized the postwar/post-eugenic era. Given this, the only ‘freedom’ it offered was the freedom to engage in molecularly/genetically ‘responsible’ actions. In this way, this new health imperatives of the biomedical citizenship of genetics is similar to that which developed during the nineteenth century because rather than providing more possibilities for being healthy, it actually limited the ways in which a ‘healthy,’ biomedically responsible citizen is defined.

American Jewry and the ‘New Genetics’

One of the major diseases rendered ‘molecularly visible’ through the prism of the new health norm defining contemporary biomedical citizenship in the United States was Tay-Sachs disease. While this disease had been recognized as having a hereditary element in the late nineteenth century by neurologist Bernard Sachs (Reuter 2006, 297), it was not until the mid-1960s that researchers isolated the subcellular lysosomal particles associated with the accumulation of lipids that characterized the disease (see Svennerholm 1962 and 1964; see also Ledeen & Salsman 1965), and then in 1969 that the enzyme responsible for the normal breakdown of lipids was found to be missing in those who developed Tay-Sachs disease (Okada & O’Brien 1969). Given that the heredity of this disease from almost its very first clinical assessments was recognized as
having a specific link to the (Ashkenazi) Jewish community (Reuter 2006, 299), and that ever since this discovery more and more diseases and genes have been molecularly recognized as ‘being Jewish,’ this new molecular vision of Jews and the health norms attached to it have had important implications for this group and its possibilities for biomedical citizenship in America.

**The Biopolitics Shaping the Genetic Testing of Jews**

In 1971, two years after the missing enzyme leading to the development of Tay-Sachs disease was found, Michael Kaback, a genetic researcher at John Hopkins University, initiated a screening program for this disease. This program was not mandated or legislated, as this would have evoked associations with the Nazi and/or eugenic practices that were strongly rejected in the postwar era, but rather, following a ‘freedom’-based, ‘right to know’ framework, was underpinned by the idea that it was simply providing information and education to the Jewish community that they would then voluntarily act upon. As Kaback, Zeiger, Reynolds, and Sonneborn described the program in 1974, ‘[o]nce informed, [Jews] could immediately get tested if they so chose’ (1974, 107). In this way, genetic screening on Jews, from its beginnings, conformed to the ‘right to know and act freely upon that knowledge’ way of portraying genetic testing that was becoming the normative standard at this time.

In addition to, and further strengthening, this kind of framing of the genetic testing on Jews, a concerted effort was made by Kaback and his colleagues to give ‘the community involved a sense of program identity’ (Kaback et al. 1974, 109). This was to

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49 Although programs for sickle-cell screening of African-Americans were brought under state legislation during this period, this group rejected them along these lines; that is, African-Americans rejected these programs according to the understanding that their community was being controlled from the outside, or as Ted Veal, a representative of the People’s Health Council of New York put it, these legislated programs were viewed as ‘genocidal health practices’ of the white establishment (quoted in Markel 1997, 164).
be achieved through creating a ‘partnership’ between Jewish communal leaders, most especially rabbis, and the medical professionals involved in promoting the testing (Markel 1997, 166; see also Wailoo and Pemberton 2006, 14-60) and played out in such a way that what was considered ‘community consent’ for genetic testing was attained (see Wailoo and Pemberton 2006, 16-7, 40). To be more specific, ‘a series of productive meetings and discussion forums were held between physicians, ethicists, rabbis and other members of the particular Jewish religious communities’ (Markel 1997, 166) before the genetic screening program was put in place so as to secure ‘the support of lay, and more importantly, religious leaders’ (Edelson 1997, 126) when it was actually implemented. The ‘success’ of this genetic screening program on American Jews, and of the genetic research on them that followed which was also deemed ‘a model for community consultation’ (Ostrer 1998), however, rested on more than these efforts to work with the community ‘side by side’ to ‘educate’ them so as to ensure they knew their ‘options.’

American Jews offer ‘Community Consent’

One of the reasons genetic screening and research on Jews has been perceived as so ‘successful’ in the United States over the past forty years is because of the fact that this community has individuals who can claim to be its leaders and representatives, thereby allowing for the establishment of ‘community consent.’ Reardon explains that this kind of consent rests on a number of assumptions including the idea that ‘an authoritative voice exists that can give consent’ (2005, 100) for the community and whereas establishing this authoritative voice in other genetic screening and research programs has entailed great difficulties for other groups of people (see Reardon 2005, 98-125), this

50 See Jewkes and Murcott (1998) for a discussion of the problems posed by the ‘community consent’ model for establishing ethical genetic research.
has not been a challenge for the involvement of American Jews in genetics as biomedical citizens. Rabbis were involved in the establishment of Jewish ‘communal consent’ from the very beginning of genetic research and screening on ‘their people’\textsuperscript{51} and continue to be the ‘Jewish leaders’ to be ‘consulted’ when seeking to conduct research and testing on this group (see Wadman 1998).\textsuperscript{52} Indeed, the recent research for breast cancer susceptibility genes among American Jews used the ‘Tay-Sachs screening programs… [as] a model for recruiting Ashkenazi Jews’ (Brandt-Rauf et al. 2006, 1981) which included forming a committee with rabbis so as to ‘consult’ with them about the research (see Stolberg 1998).

\textit{Biological Grouphood: Protects Jewry from Another ‘Holocaust’?}

Another significant reason why this research has allowed for American Jewry to be evaluated as ‘successful’ biomedical citizens is because a biological understanding of their grouphood, which undeniably underpinned the Nazi ‘racial cleansing’ of Jews (Colen 1996), is not, despite this fact, inherently dangerous to this group. In fact, as will be explained below, it supports the narratives of Jewish peoplehood that have become very significant for defining and ‘preserving’ this group in the post-World War II period.

Beginning in the mid-1960s, American Jewry became increasingly preoccupied with establishing ‘greater Jewish distinctiveness in American life’ (Goldstein 2006, 212). After the war was over, this group had become quite dispersed in suburbs and was rather ‘successfully’ integrated into American society making ‘the danger that Jews as a people might disappear’ (Brodkin 1998, 160; see also Hertzberg 1983) a real possibility if no

\textsuperscript{51} This is often alongside the appropriate Jewish volunteer organization, such as Haddassah in the case of breast cancer genetic research (see Lehrman 1997; Nelson 1998; and Wadman 1998), but the mainstay representatives of the Jewish community are rabbis.

\textsuperscript{52} Given that Jewish rabbis belong to the various branches of Judaism and do not consist of a homogeneous group, rabbis from ‘ultra-liberal to Orthodox’ are included in these ‘consultations’ (Wadman 1998).
action was taken. In reaction to this, great efforts were put forth to try to ensure Jewish group survival by both attempting to ward off that which was perceived as a threat to it, and by emphasizing and (re)establishing Jewish difference and/or particularities (see, for example, Freedman 2000, 344). Caught up in these efforts, and providing a particular kind of foundational grounding for them, was the genetic research and testing on Jews that had begun to take place during this same period.

One important nexus around which the concern for Jewish survival and genetic testing/research on this group converges is over intermarriage. Genetic testing/research was and continues to be premised upon the assumption that the Ashkenazi Jews of America consist of 'a defined population' (Kaback et al. 1974, 105) with a specific 'genetic heritage' (Colen 1996) resulting from a commitment to endogamy throughout this community’s long history (see Nelson 1998; and Wadman 1998). Yet, this narrative of Jewish history is very problematic because, as Brandt-Rauf et al. point out, this group engaged in intermarriage at numerous points in its history such that it could never have become a 'genetically unique population' (2006, 1983).\(^{53}\) Despite the inaccuracies of this narrative, however, the idea that Jews have been a 'historically endogamous population' (Schubert et al. 1997, 1031) has come to be the accepted understanding of Jewish history for genetic researchers, and, more importantly, has positioned endogamous marriage as a key characteristic defining Jews as a group when this is increasingly not the case. Indeed, the growing rates of intermarriage between Jews and non-Jews have been the subject of much of the survival anxiety among American Jewry in the postwar period (see Brodkin

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\(^{53}\) These authors refer to the works of Baron (1993), Foa (2000) and Stampfer (2003) when making this argument, and in addition to this, they further explain that Ashkenazi Jews were also never geographically isolated, nor were they ever few enough in number to produce a core ‘Ashkenazi genome’ from which contemporary ‘Ashkenazi Jewish genetics’ could be based. For a detailed discussion of the scientific theories underpinning genetic research on Jews see Motulsky (1995).
1998, 159; Cohen 1988; and Hart 2000, 1) - with some even referring to it as the ‘Silent Holocaust’ of our time (Freedman 2000, 74) - such that the move towards this interpretation of the history of American Jews must be regarded as contributing to the (re)establishment of Jewish difference as being, at least partially, rooted in Jewish endogamy. The obligations of Jews to participate in genetic research and testing as American biomedical citizens is, therefore, in a symbiotic relationship to Jewish concerns for group survival, because it legitimates a narrative of Jewish history that works to differentiate this group in such a way that the difference claimed ‘survives’ and is not problematic, but rather allows for conformity to this biomedical citizenship.

*Another New Healthy Jewish Tradition*

This is not the only way in which the two support each other, however, because this symbiosis is also realized through a reinterpretation of the normative imperatives to participate in genetic research and testing as being always-already Jewish. Thus, in a marked parallel to the reinterpretation of Jewish history as including an established tradition of sanitary practices at a time when this had become a great normative preoccupation (as described in the previous chapter), Jewish participation in genetic research and testing provides a new positive defining characteristic of Jewry which can both work to unite it at this time when the groups’ sense of community appears to be fading, and reinforce its belonging as biomedical citizens.

One of the ways in which this reinterpretation is made is through a religious hermeneutics of participation in genetics. For example, Rabbi Dorff has posited that the Jewish tradition calls for participation in genetic research and screening because this is part of ‘the way [Jews] fulfill our obligation as God’s partners in the ongoing act of
creation. In all cases of illness, no matter what their origin, Jews have an obligation to try to prevent or treat them’ (Colen 1996). In a similar manner, Rosner argues that the Jewish ‘biblical mandate to heal’ includes ‘genetic screening, gene therapy and other applications of genetic engineering... when used for the treatment, cure, or prevention of disease’ (1998, 233), while Rabbi J. David Bleich claims that genetics studies should ‘be enthusiastically welcomed even if they yield no therapeutic benefit whatsoever for the simple reason that their contribution to understanding hokhmat ha-Shem [the wisdom of god] is incontrovertible’ (2000, 64) for Jews. Thus while there have been some hesitations for the inclusion of recent developments in susceptibility screening under this new religiously sanctioned ‘Jewish obligation’ to participate in genetics because in some cases it only provides for knowledge about a potential danger to life (see Mosenkis 1997), the biomedical citizen’s obligation to advance genetic knowledge about ‘their people’ has largely become a new traditional Jewish ‘mitzvah,’ ‘an act of mutual responsibility that all Jews share for the welfare of the group’ (Goldstein 2006, 229; see also Rothenberg & Rutkin 1998, 150).

Jews’ ‘responsible’ involvement in genetic screening and research has not only been explained according to these religious reinterpretation of ‘Jewish obligations,’ but has also included a secular hermeneutics of Jewry, wherein this group is characterized as ‘medically sophisticated’ (Plon, Peterson, Friedman & Richards 2000, 310), ‘capable to interpret its genetic and medical implications’ (Rothenberg & Rutkin 1998, 148), and ‘well-informed’ (Goldgar & Reilly 1995) and therefore, possessing a great ‘understanding’ of the ‘benefits’ of being involved in genetics. Indeed, Jews are repeatedly characterized as ‘pro-science’ (Stolberg 1998), ‘well informed health-care
consumers’ and ‘motivated individuals’ (Goldgar & Reilly 1995) possessing ‘an awareness of the potential medical benefits to themselves’ (Lehrman 1997) in descriptions of their involvement in genetic screening and research. Risch, a population geneticist, has even gone as far as to claim that ‘Jews have taken charge of the information about disease more common in Ashkenazis (i.e., Eastern European)... because they have ‘accepted its usefulness’ (quoted in Wade 2003), a statement which represents Jews’ participation in genetic testing and research as the ‘right’ thing to do, while Francis Collins, the director of the National Human Genome Research Institute, has depicted Jewish participation in genetic research as having the ‘silver lining’ of providing this group the advantage of being ‘the first to benefit’ from genetic research and testing (Wadman 1998).

Yet, while these claims about Jews’ knowledge of, and interest in, genetics can certainly not be described as false, the explanations provided for these developments - both religious and secular - have not, to date, included any acknowledgement of the fact that American Jewry’s participation in genetics has unfolded at a time when this group has great interest in (re)establishing Jewish difference. In addition to this, these explanations have not accounted for the fact that normative imperatives of American society do not exist outside of American Jewish people’s understandings of themselves because these identities are not so neatly separable in contemporary society; that is, America’s normative imperatives for biomedical citizenship are also those of American Jewry. Moreover, this ‘Jewish’ difference is, therefore, one that is quite readily viewed as positive, which allows this group to claim it as their own without the apprehension a

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54 Jews participation in genetics has been expressly pointed out by Reilly in his statement that ‘much of the research concerning genetically influenced diseases among Ashkenazi Jews is both conducted by Jewish scientists and supported by Jewish organizations’ (1998, 684).
more negative ‘difference’ might incur. The most significant aspect of this ‘Jewish participation’ that is not yet explored in these explanations, however - though one of its aspects has been raised quite often - is that, despite being generally regarded as positive, this groups’ participation in genetics is not without risk for the general acceptance of Jews as American citizens.

**Jews as ‘Genetic Misfits’**

The one issue concerning the public perception of Jews that has been raised regarding their participation in genetics is that it can create an association between this group and genetic mutations. This ‘Jewish difference’ therefore, has its drawbacks because it can lead to the perception that Jews have ‘high-risk gene pools’ (Grodin quoted in Wen 2000), and certainly has in some cases (see Rothenberg & Rutkin 1998, 150). Given this, a concerted effort has been put forth to ensure that this perception is not propagated which has entailed the inclusion of the fact that ‘[t]here is no evidence that the burden of genetic flaws is greater for one population than another’ (Nelson 1998, 884) in many of the discussion concerning genetic research and testing on this group (see, for example Rothenberg & Rutkin 1998, 151; Stolberg 1998; Wadman 1998; Wen 2000).

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55 This characterization of the implications of genetic research and testing on Jews comes from Stolberg (1998).

56 These authors cite articles in the media with titles such as, ‘Breast Cancer Strikes Jewish Women More Often than Others’ and ‘Ashkenazi Jews Weather News of Another Gene Flaw’ as contributing to this perception, but there were also quite a few scientific articles that promoted this idea including Egan (1996), Friedman et al. (1995), Laken et al. (1997) and Struwing et al. (1995). Interesting to note here is that while this perception of Jews having a greater genetic burden has been supported in both general and Jewish media, as Rothenberg and Rutkin point out, it has, however, been particularly prominent in Jewish media (see Nelson 1998, 884; and Donnelle et al. 2005, 192) which, I would argue, is part of the reinforcement of Jewish difference, because despite the fact that genetic defects are negative, this provides for something Jews can come together on and address as Jews.

57 On top of giving this group a negative public image, it could also cause more intermarriage, and therefore, greater group disintegration, a threat recognized and countered by Rabbi Bleich according to the same argument that ‘it is unlikely that any particular ethnic group of significant size carries a greater genetic burden than any other group.’ Although, he hopes that ‘other ethnic groups will consider Jews to be undesirable as marriage partners’ because for him this would be ‘an undisguised and unmitigated blessing’ (2000, 65).
Yet while this negative view of Jewry has been strongly countered through this effort to demonstrate that ‘Ashkenazim [is] not alone’ (Keoun 1997), it, nonetheless, remains a negative way in which ‘Jewish participation’ in genetics can, and has in some cases, been perceived.

‘Jewish’ Dogmatism and Coercion

Another problem that the ‘difference’ of ‘Jewish participation’ in genetics poses for public perceptions of this community, and therefore their acceptance and belonging as American citizens, is that their participation is not always viewed positively, but has at times been characterized as the result of a negative kind of ‘Jewish’ dogmatic belief and/or coercion. For instance, in describing Jewish women’s interest in participating in breast cancer genetic research, Geller et al. wrote that ‘[i]n contrast to the other groups, this group did not lose interest in testing after receiving information’ about its limitations and, accordingly, warned that obtaining consent from Jewish women was problematic because of the “slippery slope” from perceived social responsibility to coercion’ (1995) in this community. More negative than this view is how the Tay-Sachs screening program has been explained as a Jewish ‘cultural practice’ that ‘limit[s] rights for their members and [has] different conceptions of rational decision making about health and wellbeing’ from those of the ‘original rationales’ for genetic testing, making it a ‘serious problem about the usages of genetic technology’ (Condit 1999, 197). Collins also put forward this view, in his statement that pressure within this community for its members to undergo genetic testing ‘is a miniature but significant version of Big Brother... a moderate nightmare’ (Kolata 1993). Thus ‘Jewish participation’ in genetics has, in some cases, been regarded as something ‘wrong’ with this community.
**Progressive Medical Trailblazers for All or Only Beneficial for Jews?**

One last threat to a positive rendering of ‘Jewish participation’ in genetics - though somewhat less prominent than those mentioned above because ‘caring’ for one’s ‘own’ group has become more acceptable and is, in fact, often encouraged in contemporary medicine in America⁵⁸ - is the fact that this participation has not really been ‘beneficial’ for other groups/public health. While Jews’ participation in genetics has been framed as part of a Jewish ‘commitment to public service’ (Lehrman 1997), wherein the research on this community would help a general ‘launch of population-based studies’ (Keoun 1997) because ‘the Jewish community [could be] a starting point’ for researchers in their ‘work to discover genetic links to diseases and traits on every piece of human DNA’ (Rothenberg & Rutkin 1998, 151), this ‘public benefit’ for other groups has not been realized⁵⁹ and the genetic research on Jews is also, and more often, framed as helping this community with ‘their illnesses’ (as explained above). One particularly salient example of how this genetic research has not been ‘beneficial’ to groups other than Jews is demonstrated by Brandt-Rauf et al.’s discussion of the great difference in cost for breast cancer screening panels for American Ashkenazi Jews and non-Ashkenazi Jews. For the former, these tests cost $415, whereas the latter can be charged up to $2975 for this genetic test (2006, 1987). Jewish participation in genetics, therefore, carries with it the risk that Jews will be regarded as only interested in helping themselves, which, could again fuel claims about this group being a ‘nation within a nation’ uninterested in helping out their broader community of American citizens.

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⁵⁸ See Epstein (2007, 190) for an explanation of medical researchers’ ‘recruitmentology’ which is a means to try to nurture and shape individual’s attachment to their ethno-racial identity so that these researchers might perform their research on minority groups.

⁵⁹ Genetic research on other groups has ‘failed’ to a large degree. The reasons for this are explored briefly in the concluding chapter.
‘Not... Everything is Bad...Everything is Dangerous’\textsuperscript{60}

In sum, Jews’ participation in genetic research is not without its risks to the broader public perceptions of this community. Caught up in the continued negotiation of American Jewry’s American, yet Jewish, citizenship, this participation in genetics has both helped to reinstate and promulgate a specific basis of ‘Jewish difference’ for American Jews at a time when this difference feels threatened, and has generally been regarded as ‘successful’ because it adheres to the normative imperatives informing biomedical citizenship in the United States, but there are quite a few reasons for this group to be wary of genetic research and testing. Biological understandings of Jewish difference, which are inevitably a kind of essentialization of Jewishness, have been historically problematic for this group in nations wherein Jewish difference was expected to fade in time. This was a problem for this group in America, just as it was in Germany, a country which prior to the rise of Nazism was not considered to be a context where something like that could take place (see Goldstein 2006, 185). Thus, though the (re)establishment of a Jewish biological difference may not seem like it would have the negative repercussions today that it has had in the past, we must not claim that ‘it is a dishonest use of history to fail to recognize the differences between racist Nazi eugenics and [the contemporary] responsible scientific research to relieve human suffering’ (Waldman 1998), but instead engage in what Foucault has called ‘a hyper-and pessimistic activism’ (1994a, 256) so as to recognize that this ‘difference’ can be dangerous today as well.

This is particularly so for those diasporic (Ashkenazi) Jews who do not live in countries where having their group difference rooted in biology has much of a potential

\textsuperscript{60} This quote is taken from Foucault (1994a, 256).
for a positive public view of their group. While diasporic Ashkenazi Jews in other
'inclusive' societies such as Canada and Australia have participated in genetics (though
to a lesser degree than America Jews) under similar versions of biomedical citizenship to
that at work in the United States, anti-Semitic feelings still run high in many countries in
the world where diasporic Jewry reside. An essentialized difference that has the potential
to be harmful for these groups is something that must be considered as a great potential
danger resulting from American Jewish participation in genetics because, despite the fact
that taking this into consideration would probably render 'community consent'
impossible for geneticists to establish, these other Jews are under the threat of much more
immediate harm than a genetic probability.

In a similar manner, American Jewry's participation in genetics is 'dangerous' for
non-Jews because it has helped to legitimate the genetic redefinition of all groups, albeit
indirectly, and has supported the norm that this participation is 'good,' both of which
have been rather problematic for most other groups. As Reardon's research on the failure
of the Human Genome Diversity Project demonstrates, attempts to biologically define
Aboriginal groups were met with great resistance because this kind of research
challenged and relegated the legitimacy of these groups' own definitions of their people,
while it also would have developed powerful forms of knowledge about them that
Aboriginals were not involved in creating, that did not reflect their communities'
interests, and that they would have no control over (2005, 126-56). This rejection of
genetic research and testing, which has been the case for more groups than Aboriginals,

Genetic research has also largely failed to procure support and participation from African Americans, a
very difficult group to recruit for any kind of medical research because of their suspicion of being used as
'guinea pigs' like they were for the Tuskegee Syphilis Study (see Epstein 2007, 193-4). Interestingly, and
has been repeatedly characterized as stemming from the ignorance/lack of education about genetics among these groups.\textsuperscript{62} Thus, American Jewry’s support of the ‘goodness’ of genetics and the ‘rightness’ of groups participating in it, has, though unintentionally, rendered the rejection of it by these other groups a matter of ‘their ignorance,’ which does not allow recognition of all the stakes involved in the creation of genetic knowledge of these groups or of American Jewry, because the implications of the biomedical citizenship available to these groups is left unquestioned in these evaluations.

The Negotiations Will Continue

As the above analysis demonstrates, negotiations between American and Jewish identities have been and continue to be at the forefront of American Jewry’s concerns for establishing an American, yet Jewish, citizenship. This group seems to have been rather ‘successful’ in these negotiations, even as they came to incorporate new biomedical health norms, but this evaluation is a great oversimplification. As elaborated above, this recent negotiation has not been without its risks for this group, for other Jewry in the world, and for other groups for whom genetic research and the knowledge it creates is threatening. As these negotiations continue on, therefore, it is important that these risks be recognized and taken into consideration. Given that it is not possible that a final version of an American, yet Jewish, citizenship ever be rendered ‘acceptable’ indeterminately, and that these negotiations have implications much broader than only for

\textsuperscript{62} For example, the response of the Franco-American Catholics in New Hampshire to the prevalence of Tay-Sachs among their group was ‘portrayed in media accounts not as a model for the local fight against genetic disease but as a persistent enclave of ignorance’ (Wailoo and Pemberton 2006, 19) which, in this way, stigmatized the community’s response to this disease. This notion of ‘community ignorance’ has also been used to explain why Aboriginals did not participate in the Human Genome Diversity Project (Reardon 2005, 146-9) and has been depicted as one of the obstacles that must be overcome to increase African American participation in medical research and testing more generally (Branson, Davis & Butler 2007).
this specific group itself, they must continue to be subjected to scrutiny.
CHAPTER 5. CONCLUSION

Over the past two decades there have been intense academic and public debates over whether there is an appropriate way to study the biological particularities of ethno-racial groups, or whether this new trend in genetic research is eerily reminiscent of the racial/racist science that was conducted in the late nineteenth and early twentieth century and finally discredited after the atrocities of World War II. In the following, I summarize some of the positions taken on this debate by various sociologists (and other scholars) so as to situate my research vis-à-vis these arguments both in terms of the assumption made within them and the questions they raise. It is with these debates in mind that the preceding analyses have been conducted, because they are offered up in an effort to continue the conversations and debates about biomedical developments and their implications for understanding ethno-racial group difference that these other scholars have engaged in. I outline their positions, therefore, to clarify my own rendering of the issues involved, and in hopes that what I have offered might extend these debates in directions that have not yet been explored.

‘Race’ is wrong!

For a number of those engaged in these debates, the possibility of genetic research underpinning a revival of scientifically sanctioned racism is all too threatening, and, perhaps more importantly, the term race itself is unscientific because group differences can and should only ever be understood as social. Following closely in the footsteps of their predecessor Franz Boas, who attacked the ‘racial craze’ of the 1930s by ‘undermin[ing] its alleged scientific basis’ (quoted in Barkan 1992, 283), and by promoting the idea of cultural difference in replacement for racial understandings of
group difference, therefore, their arguments are founded upon pitting their version of 'good, morally-sound science' against that which they have deemed to be methodologically-flawed, irresponsible science. Thus, this position is informed by the general condemnation of the idea that biological distinctions are the basis of group differences, which has been around since the events of World War II were responded to by the creation of UNESCO's Statement on Race.

Quite a few scholars have taken this approach to analyzing genetic research performed on ethno-racial groups, including Azoulay (2006), Happe (2006), Neulander (2006), Soo-jin Lee, Mountain & Koenig (2001). These authors claim that when scientific research uses racial categories this leaves 'serious doubt on its scientific legitimacy' (Happe 2006, 479) because it suffers from a 'lack of precision' (Soo-jin Lee et al. 2001, 54) due to the 'muddling of science and ideology' (Azoulay 2006, 359) that the use of these categories entails. According to them what is needed is recognition of the distinction between socio-cultural factors and those of biology because group differences are based on social phenomena and using the 'social vocabulary of race... so casually and carelessly in medical research,' as Azoulay puts it (2006, 360 – emphasis added), leads scientists to 'naively confla[e] biology and culture' (Soo-jin Lee et al. 2001, 54). In order for science to be purged of 'the popular recycling of colonial folk taxonomies' (Neulander 2006, 382) in which these racial group differences were 'linked to the maintenance of rigid, hierarchical boundaries rooted in unequal access to resources and opportunities' (Soo-jin Lee et al. 2001, 69), therefore, scientists are to use what these

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63 Neulander takes a somewhat different approach to this as she is not specifically interested in the term 'race' per se. However, she ultimately shares the common goals of this group of scholars in trying to 'ensure results [from genetic research] that are both scientifically accurate and socially responsible' through avoiding 'drawing biological boundaries around... cultural characteristics' (2006, 381-2).
scholars consider to be ‘neutral words’ that situate the basis of group difference in the
social, such as ‘ancestry’ (2001, 57) and ‘ethno-cultural groups’ (2001, 68). The
engagement of these scholars with genetic research on ethno-racial groups, therefore,
positions biological understandings of group difference as only ever problematic, and the
ultimate and only basis of historical ethno-racial group discrimination, while it also
locates social understandings of difference as providing for an appropriate scientific
approach to genetic research. Simply put, they argue that using the term race is not
scientific and leads to racism, and that group difference is the province of social
scientists.

The Social is not Scientific

Not everyone engaged in these debates takes this position, however, because some of its
contributors have a very different understanding of how group differences should be
understood in scientific and medical research. For instance, the scientific validity of the
term ‘ethnicity’ is questioned by Brandt-Rauf et al. in their analysis of the breast cancer
 genetic research performed on American Jews given that ethnicity is largely based on
self-identification, which they argue gives it an ‘instability’ and ‘unreliability’ that
compromises the ‘quality’ of genetic research (2006, 1985). Along similar lines, Dyson
found using ethnicity in research on sickle-cell disease problematic because, he considers
it an ‘internal construct, an identifier that people feel entitled to interpret and represent
themselves through flexible and contingent ways[, whereas] genetic ancestry is an
external construct’ (2005, 51) and, as such, ‘the true marker of risk’ (2005, 179) for
sickle cell disease. According to these scholars, therefore, ethnicity is not scientifically
accurate and we need to develop and adopt ways to capture the biological – more
specifically, genetic – difference between groups so as to separate them from personal/social meanings of group belonging.

**Race is Always Social and Biological**

While the two groups of scholars above suggest the appropriate means to conducting genetic research on ethno-racial groups is through making a clearer separation between the social and the biological - albeit for different reasons - there are also those engaged in these debates who argue that what is needed is, in fact, a deeper recognition of the interplay between the two. This is the position Duster advances stating that it is ‘impossible to disentangle the biological from the social’ (2003, 262) because ‘social fact has biological consequences, which in turn has social consequences’ (2003, 260). Thus, he recognizes that categorizing people into different social groups has implications for the health of these groups, which, in turn, reinforces the social differences between them. According to this observation, he concludes that rather than purging science of race, we ‘should try to advance our understanding of how race is always going to be a complex interplay of social and biological realities with ideology and myth’ (2003, 259).

Montoya’s analysis of the ‘bioethnic conscription’ of the Mexicana/o ethnic identity ‘onto’ genetic explanations of diabetes echoes Duster’s argument. Briefly stated, he finds the ‘slippage’ between the two modes of ‘bioethnic conscription’ he identifies - description (the pragmatic method scientists use) and attribution (the qualities attributed to a group that modify the group referred to) (2007, 95) - is inevitably part of the production of scientific knowledge. For Montoya, just as for Duster, therefore, the ‘race-no race debate’ is moot because both the social and the biological are always co-produced in the creation of scientific knowledge; this is part of what creating this knowledge
entails. The role of social analysts, therefore, is to ‘examine the conditions that make the slippage between description and attribution possible’ so that we might ‘understand[] how slippage actually happens, and consequently, how “race” operates... in the sciences’ (2007, 95).

The Significance of the Issue

Not seeking to solve this issue, through either separating the social from the biological, or attempting to trace the influence of biological and social understandings of difference on each other, are scholars such as Epstein (2007), and Skinner (2006). For them, these debates are, themselves, in need of analysis and even more so, in need of being situated within their broader socio-political context. Locating these debates in this way, they argue, allows for recognition of why the meanings of biological/racial difference have the particular significance they have in our contemporary society and thereby provides for a better understanding of what the current meanings of biological difference entail or could potentially entail. The questions guiding their work, therefore, are not ‘Can, or how can, racial/biological understandings of difference be rendered scientifically and ethically acceptable?’ but instead, ‘Why is this an important issue in contemporary society?’

Epstein’s research on the recent move towards an ‘inclusion’ approach in medical research is particularly relevant to situating these debates over the place (or lack thereof) of race and/or biological difference in medical research within the context of the affirmative action type policies in the United States. His work reveals how the ‘inclusion’ mandated in recent health research policy (e.g. the National Institution of Health’s Revitalization Act of 1993 and their Healthy People 2010) is, indeed, an attempt to rectify past wrongs of racism in science/medicine, and in society more generally, which
is fundamentally caught up in the fact that recognizing biological difference can only ever be a double-edged sword that is nonetheless necessary in order to adequately address the particular health needs of different groups. Thus, while he points out that the pursuit of understanding biological differences between groups is not, in and of itself, enough to eliminate health disparities between those who have been historically discriminated against and those who have not (2007, 3) - and, indeed, can lead to such practices as racial profiling (2007, 203-32) if these differences are oversimplified and naturalized as fixed and immutable which could then lend legitimacy to both the social and medical discrimination of specific ethno-racial groups – he emphasizes the fact that in order to address health disparities between ethno-racial groups at all effectively, their biology as a group absolutely must be considered alongside their social characteristics.

Offering a somewhat different but not contradictory explanation of the significance of biological understandings of grouphood is Skinner’s assertion that racial/biological categorization is ‘highly politicized’ (2006, 477) in contemporary Western society, which he attributes to the development of a new relationship between ‘the public’ and scientific knowledge production (2006, 483). He recognizes that what is at issue in these debates is not so much whether or not groups have their own biological particularities, but instead how biological differences are/can be put to work in defining ethno-racial groups in particular ways. Moreover, Skinner points out that often times, biological definition of grouphood in the contemporary context can include the ‘active involvement of lay members of minorities in the developing public discourse on science, race and ethnicity’ (2006, 478). This is because ‘the science of DNA is becoming a
powerful resource for exploring and validating claims to identity\(^{64}\) (2006, 460), at a time when a politics of distinct group belonging has emerged as an important means to making political demands (see Prewitt 1987). Ultimately, therefore, ‘biology... has become an object of negotiation and struggle’ (2006, 476) that is being sorted out both within and beyond the realm of medicine proper because of its intense political significance.

**‘Newness’ and Possibilities**

Although true that struggles over group identity and democracy have become increasingly evident in the realm of biomedicine in recent years, these struggles have a long history because they have been around since the beginnings of what Foucault has called the ‘era of biopower’ (1990; 2003d); that is, since the possibility for controlling life, death and disease has provided for the emergence of ‘right to life’ politics in liberal societies. Through the analysis provided by this project, I hope to have demonstrated that despite the seeming ‘newness’ of contemporary biomedical knowledge of genetics and the discourses of genetic biomedical citizenship through which this knowledge interpellates its potential members (in liberal, ‘inclusive’ societies), developments in biomedicine have always been caught up in defining normative imperatives about health responsibilities and healthy actions that shape the possibilities for particular groups to lay claim to ‘rights to life’ and, at the same time, render these groups judicable vis-à-vis these imperatives of biomedical citizenship. Given that ‘included Others’ will continue to be subjected to and made subjects of the imperatives of this citizenship through future

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\(^{64}\) While Skinner sees this identity as also, and perhaps most prominently, caught up in ‘contemporary norms of self-actualization and individuality’ arguing that ‘genetic knowledge is largely used as a resource by individuals as part of a strategy for establishing their own social location and personal identification’ (2006, 481), I would argue that this view exaggerates the possibilities available to individuals for shaping their biological selves. Moreover, while genetic research, and other recent medical developments certainly offer challenges to any fixed identity, group or otherwise, these challenges have not eclipsed the significance of collective historical memories and materials that are also inevitably put to work in shaping group identities, and which are never solely the collective outcome of distinct individual wills.
biomedical developments, it seems appropriate to trace the relations between various
groups of ‘Others’ and biomedical renderings of responsibility and difference. In doing
so not only are the limits imposed by biomedical knowledge and its discourses of
citizenship exposed, but also ‘an experiment with the possibility of going beyond them’
becomes available (Foucault 1984, 108).
REFERENCES


Schubert E., Lee, M., Mefford, H., Argonza, R., Morrow, J., Hull, J., et al. (1997). BRCA2 in American families with four or more cases of breast or ovarian cancer: recurrent and novel mutations, variable expression, penetrance, and the possibility of families whose cancer is not attributable to BRCA1 or BRCA2. *American Journal of Human Genetics* 60 (5), 1031-40.


