

**Blood / Money**

*Strong, Thomas. Critical Matrix.* Princeton: Dec 31, 1997. Vol.11, Iss.1; pg. 60

**Abstract (Summary)**

Marilyn Strathern has argued that "nature" in Euro-American culture has appeared as constraint; it has figured the givens of existence on which human artifice is seen to construct "society" or "culture."(5) Among those givens is the notion that human beings are naturally individuals. And blood, too, images individuality: "The very thought of blood, individual blood, touches the deepest feelings in man about life and death" ([Richard Titmuss] 16.) Transfusion medicine, then, draws on a series of images with which Western culture is replete -- nature, society, the individual. But if it extends these images, transfusion medicine also refigures them. As Paul Rabinow has written, "it is not quite true...that it is the 'newness' of contemporary technology that leaves us culturally unprepared. It is also the effacement of the 'oldness' of so many of the background assumptions and practices that lurk unexamined at the edges..."(6) Thus, if persons in the West are individuals, transfusion imagery also makes them "dividuals," of sorts; transfusion practices divide persons.(7) Our understanding of the splitting and splicing of persons in transfusion medicine draws on notions of interchangeable humanity and on notions of unique individuality.

That Titmuss posed "altruistic gifts of life" against self-interested, "dangerous" market transactions is not surprising. What is interesting is a commonality with market formulations which Titmuss would ostensibly disavow. For the altruistic donor and the greedy "ooze for booze" seller have something in common: they both behave in an individualistic manner, though that may not be obvious on the part of the "donor." As Titmuss defines it, the concepts of "Altruism" and "donation" only make sense when the individual is conceptualized as discrete and separate from society. He writes: "There are no personal, predictable penalties for not giving, no socially enforced sanctions of remorse, shame or guilt" (74). No necessary moral relationship is entailed in the decision to donate, which then appears as a "choice" on the part of the donor. A pamphlet published by the American Association of Blood Banks reads: "In the usual circumstance, a donor will have no need to be in contact with the blood center...so that a direct relationship is not established."(16) The gift of blood flows not from moral or social obligations (relationships) but from goodwill and sentiments. Strathern notes that "Euro-American gift-giving really only works as a sign of personal commitment if it is also a sign of benign feeling" (Reproducing the Future 131).

Blood, much as it once stood for human life, today can be seen to stand for profit. Several industrial democracies have seen political controversy surround blood institutions which, for commercial reasons, failed to protect unwitting recipients from HIV infection. "L'affaire du sang" in France, and similar scandals in Germany, Japan and the United States, have made visible the proprietary interests which lurk behind many gifts of life.(37) In extending a previous idea (blood is life) into a new domain (blood is an economic resource) the images examined here exemplify one strand of contemporary ideas about human life. "Artificial," "chosen," "preferred" -- human life is no longer a background assumption in human affairs, no longer the natural base on which society is constructed. As a zone of representation and intervention, blood and "life" are also zones of consumer choice.(38) In the late 1980s, articles began to appear in publications like *Vogue*, *Seventeen*, and *Glamour*, encouraging readers to

preserve their own blood for future transfusions to avoid the danger represented by the anonymity of a community blood supply. "Autologous transfusion" was presented as having a certain cachet. *Town and Country* magazine wrote: "It's called autologous donation, and it's the safest form of transfusion. According to one source, the Pope does it, former President Reagan does it, Michael Jackson does it, and autologous donation may soon be the latest mark of medical sophistication."(39)

## **Full Text**

**6919 words**

Copyright Princeton University, Program in the Study of Women and Gender Dec 31, 1997

## **Blood / Money**

The first question that comes to the mind of anyone in connection with blood preservation is: Where does one get the blood? (Dr. Bernard Fantus, 1937)

Giving blood is nothing compared to what else there is out there. There are so many people in need. It's like the lottery --people need the money. (Blood donor, 1992)

One could hardly exhaust the meanings of blood. As Arlette Farge writes, "Voilà le sang, indispensable fluide, champignon de l'aventure humaine dans toutes ses dimensions, physique, idéologique et même spirituelle."(1) If blood has embodied multiple aspects of "the human adventure" -- from kinship and violence to nationality and race to life -- I want to draw attention to a general feature of these domains: relationship.(2) Used variously to exclude or restrict relationship (as in kinship and racial ideologies), blood has also been seen as that which is most human without respect to divisions:

There is a bond that links all men and women in the world so closely and intimately that every difference of colour, religious belief and cultural heritage is insignificant beside it. Never varying in temperature more than five or six degrees, composed of 55 percent water, the life stream of blood that runs in the veins of every member of the human race proves that the family of man is a reality.(3)

"The family of man is a reality": it is a bodily reality. Humanity runs through the veins, and humanity takes the form of a family, of an initiate relatedness. Closely tied to blood's evocation of humanity is its evocation of "life:"

Blood has always been associated with life and strength. Among primitive man's earliest experiences is the observation that life flows out of the body with the streaming of blood. We are told that even the apes stuff leaves and moss into bleeding wounds to stanch the flow and preserve life. How natural, therefore, to attempt to restore life and youth and strength by the administration of healthy blood.(4)

This passage introduces a third domain. Blood is "humanity" and "life," and these are natural forms. Dr. L. M. Zimmerman wrote the passage in 1942 in an article on the emergence of blood transfusion as a medical practice. His reference to "nature" can be seen as a strategy for legitimizing a nascent institution -- transfusion medicine. Nature is imaged in two ways: first, in the physiology of the body itself, which is understood as a container for blood, itself understood as the substance of "life;" second, in the practice of preserving life by resealing skin, plugging up holes, maintaining the boundary of the body. Writing in the *American Journal of Surgery*, Dr. Zimmerman draws on the image of the bounded body to naturalize the "administration" of blood. The premise (transfusion is natural) is completed in Zimmerman's choice of a title: "The Evolution of Blood Banking." Perhaps transfusion was naturally selected.

Marilyn Strathern has argued that "nature" in Euro-American culture has appeared as constraint; it has figured the givens of existence on which human artifice is seen to construct "society" or "culture."<sup>(5)</sup> Among those givens is the notion that human beings are naturally individuals. And blood, too, images individuality: "The very thought of blood, individual blood, touches the deepest feelings in man about life and death" (Titmuss 16.) Transfusion medicine, then, draws on a series of images with which Western culture is replete -- nature, society, the individual. But if it extends these images, transfusion medicine also refigures them. As Paul Rabinow has written, "it is not quite true...that it is the 'newness' of contemporary technology that leaves us culturally unprepared. It is also the effacement of the 'oldness' of so many of the background assumptions and practices that lurk unexamined at the edges...."<sup>(6)</sup> Thus, if persons in the West are individuals, transfusion imagery also makes them "dividuals," of sorts; transfusion practices divide persons.<sup>(7)</sup> Our understanding of the splitting and splicing of persons in transfusion medicine draws on notions of interchangeable humanity and on notions of unique individuality.

In contemporary Euro-American culture, technological innovations are challenging (and extending) old manners of thinking about persons and relationships and bodies.<sup>(8)</sup> One can make a long list of the proliferating mechanisms of transfusion medicine which divide bodies and persons to promote "life" -- plasmapheresis, phlebotomy, cytapheresis, hemagglutination, low-ionic polycation testing, hemapheresis, counterflow elutriation, whole blood donation. I hypothesize that these processes provide a postmodern imagery for social relationships -- or the lack thereof. They highlight dissolution. While the fragmentation of the body in these biotechnological enterprises might have extended a previous imagery of partition -- for example, the modernist obsession with the wound -- current endeavors instead have displaced a previous imagery of wholeness:<sup>(9)</sup> The integrity of persons and bodies is called into question. Rabinow writes:

The approach to "the body" found in contemporary biotechnology and genetics fragments it into a potentially discrete, knowable, and exploitable reservoir of molecular and biochemical products and events. By reason of its commitment to fragmentation, there is literally no conception of the person as a whole underlying these particular technological practices. ("Severing the Ties" 186)<sup>(10)</sup>

In the imagery disclosed by transfusion medicine, persons appear both singular (bounded) and general (Substitutable, transfusable) -- at once unitary and fragmented. Singularity and generality are given form in the practices and images of blood

procurement, some of which I try to capture in this essay. Red Cross campaigns designed to elicit compassion and generosity, health interviews at the site of donation, testing of blood for possible contaminants, bureaucratic practices of tracking and recording donations -- all in one way or another contain assumptions about what constitutes a person or individual. This paper investigates one mode of procurement, the paradoxical "gift of life."<sup>11</sup> My analysis pertains exclusively to blood procurement systems which rely on free gifts to anonymous others -- systems like the ones administered by the Red Cross. I exclude discussion of the reception of transfusion at my own peril; but for purposes of this essay, I choose to highlight only the social ramifications of donation per se. Donation is an institution in its own right -- talking to donors and administrators may or may not involve talking about who actually receives a transfusion. Indeed, the abstraction of gifts of blood between specific persons into gifts of blood from "individuals" to "society," a figuration of donation analyzed in this paper, would seem to indicate that, for many, exactly where the blood ends up is a moot point.

Both gift and commodity, unique and common, individual and social, the "gift of life" straddles domains normally held distinct: the intimacy of bodily relationship and the anonymity of market transaction. The paradox is made evident in a startling analogy for the exchangeability of blood: money. As we will see, "money" has been one image associated with blood donation virtually from its inception.

### Giving Blood

When you donate blood at a blood mobile, the atmosphere is convivial and amiable. People staffing the site wear festive paraphernalia, like a button picturing Dracula with the words "I'm hungry for your blood." One donor might wear a gold plated drop with a Red Cross on its that says "One Gallon Donor," equaling eight donations at one pint each. You are greeted at the entry to the donation center by a large banner: "Give another chance. Give blood." You might also encounter a large red stop sign that reads: "STOP. Stop and think. Healthy Donors are the Cornerstone of a Safe Blood Supply. Are you eligible to donate blood? If you're not sure, take and read the information." Below that, a small box with cards. Rules for eligibility; information on anonymous HIV testing.

Upon entering the room where the actual donation takes place, you are given an "American Red Cross Blood Donation Record." A senior citizen or two might staff a table where you fill out the information on this form. They assign you to a nurse who conducts a health interview. The interview is called a "health check." Information on the Blood Donation Record is reviewed and your finger is pricked. The blood is tested instantly for iron to identify possible anemia. You are issued a card that identifies your blood type, and how many times you have given blood. First-time donors receive the card in the mail two to four weeks after donation. After screening, you are assigned a blood pack. You next wait for the "phlebotomist" to conduct the actual draining of blood out of your body. You lie down, perhaps in a reclining lawn-chair types seat, in preparation for the drawing of blood.

A phlebotomist confirms your ID before proceeding with the donation by checking your ID number and that indicated on the blood pack. The phlebotomist, who probably wears a red tag with a name and a "Donor Services" logo, gives a red ball-

ring to you. You are told to squeeze on it every four seconds during the donation. The phlebotomist may say to you: "I have to check both arms for tracks. We're checking arms to make sure illicit drugs have not been used intravenously." A vein suitable for drawing blood is located and marked with a pen. The blood pack is put next to your arm on a small apparatus. Around you, other donors, and their blood, are visible at various stages of the donation process.

Your arm is disinfected with an "iodine solution, which destroys all the surface bacteria; this kills gangrene, bacteria, and other germs," your phlebotomist tells you as your arm is cleaned. The phlebotomist is wearing blue gloves, vivid against the bright yellow stain of disinfectant. You might be told a story while this happens, perhaps a story about "some lawyer back East" who got a paper cut, did not wash it immediately. He left the city for the weekend, and got very ill at his cabin, running a 105 degree temperature. By the end of the weekend, he was taken to a hospital emergency room. He "lost" part of his nose and his fingers. "It was a type of virulent bacteria," you might be told.

You might subsequently notice that everything around you is plastic -- wrapped in plastic, made of plastic, handled with plastic gloves. There are several trash baskets around the room with special florescent orange "biohazard" bags bearing the "biohazard" icon. The colors marking the scene -- yellows, oranges, the red of blood - alert your attention to the dangers of infection.(12)

The phlebotomist inserts the needle connected by a clear tube to the blood pack. "It should sting." The needle is silver metal, presumably stainless steel. You watch as your red blood snakes through the plastic tube and begins to fill up the blood pack. The initial sting "feels just like an itch."

You are told, "After you give blood, you should drink an extra four glasses of non-alcoholic liquids. Use caution if you plan to do anything that could put others at risk. For the next five hours, keep the bandage on, don't do any heavy work. If you get dizzy, lie down. If the needle site starts to bleed, raise your arm straight up and press on the site until the bleeding stops." The needle is withdrawn. You are handed a small card that says: "Post Donation Call Back. Call 503-280-0203 (collect), if you feel your blood should NOT be transfused to another person. The information you provide will be kept confidential."

The phlebotomist cuts off the flow of the blood by pressing on your arm. After donation, seventeen different tests are conducted on each unit of blood, you are told. Handling your blood pack, the phlebotomist might comment: "It's amazing that the human body can deliver that volume from that tiny spot. You did superb." Finally, you are directed by a volunteer to the rest and relaxation area where you might have some juice and cookies.

When asked to interpret this experience, or to describe their motivations for donating blood, most donors are unreflective and have little to say about a self-evidently admirable act of altruism. For example, one donor said to me that he gives blood "...because people need it. Because of the warm, fuzzy feeling it gives me." Another said: "If someone's been hurt they need to blood. You used to get persuaded to give blood by making a direct connection with someone you know." Drawing on an

analogy, another said: "Giving blood is nothing compared to what else there is out there. There are so many people in need. It's like the lottery -- people need the money."

The blood professionals at donation sites have more to say. One registered nurse who screens health histories told me, "we want the donor to be healthy, to tolerate donation. Usually information is readily given. But you can never tell if they're lying." When asked to describe motivations for donating blood, she said, "It makes people feel like they're doing a service to the community. Everyone wants to do something, but they don't have the time to do it. It's a fast way of doing community service. It's anonymous. You're giving of yourself, but no one knows who you really are."

### Gift and Commodity

In 1971, Richard Titmuss, a British sociologist, published a scathing critique of the U.S. blood procurement system, *The Gift Relationship*. The book was the subject of a great deal of controversy.<sup>(13)</sup> A comparative study of Britain and the U.S., *The Gift Relationship* argued that the over-commercialization of U.S. culture, epitomized by the selling of blood or "life," represented a manifest danger to the public health. Commercial blood banking, Titmuss claimed, attracted the very worst segments of society to blood collection centers: "ooze for booze" donors, coaxed to lie about their health status to make money for drugs or alcohol. Titmuss argued that commercialized blood procurement enticed low-income persons to contribute, but drove away middle- and upper-class persons.

[T]he trend appears to be markedly in the direction of the increasing commercialization of blood and donor relationships. Concomitantly, we find that proportionately more blood is being supplied by the poor, the unskilled, the unemployed, Negroes and other low income groups and, with the rise of plasmapheresis, a new class is emerging of an exploited human population of high blood yielders. (119)

Certain areas of social life should be restricted from commercial intrusion, Titmuss felt, particularly those concerned with the maintenance of human life. He thus advocated a moral economy,<sup>(14)</sup> whereby certain kinds of things and services would be held beyond market transactions. And since Titmuss first published these arguments in the late 60s and early 70s, the U.S. blood system has overwhelmingly moved toward the kind of gift model that Titmuss advocated.<sup>(15)</sup>

That Titmuss posed "altruistic gifts of life" against self-interested, "dangerous" market transactions is not surprising. What is interesting is a commonality with market formulations which Titmuss would ostensibly disavow. For the altruistic donor and the greedy "ooze for booze" seller have something in common: they both behave in an individualistic manner, though that may not be obvious on the part of the "donor." As Titmuss defines it, the concepts of "Altruism" and "donation" only make sense when the individual is conceptualized as discrete and separate from society. He writes: "There are no personal, predictable penalties for not giving, no socially enforced sanctions of remorse, shame or guilt" (74). No necessary moral relationship is entailed in the decision to donate, which then appears as a "choice" on the part of the donor. A pamphlet published by the American Association of Blood Banks reads: "In the usual

circumstance, a donor will have no need to be in contact with the blood center...so that a direct relationship is not established."(16) The gift of blood flows not from moral or social obligations (relationships) but from goodwill and sentiments. Strathern notes that "Euro-American gift-giving really only works as a sign of personal commitment if it is also a sign of benign feeling" (Reproducing the Future 131).

Donors would appear to agree. They will say that they donate for the good of society, for the sake of the community, and because it makes them feel good to do so.(17) The Red Cross, for its part, works to elicit these emotions: the Gallon Pin is worn with pride. Goodwill, in Euro-American thinking, does not necessarily entail a personal relationship. Instead, donors draw on an image of society as an undifferentiated, anonymous entity, and they pose themselves against it. They say that giving blood is good for "the community." Donors conceptualize the goodness of donation as self-evident; it is goodness born of sociable feelings flowing outward from the person to "society." Strathern writes:

Donation...may simply involve an act of bodily emission intended for an anonymous recipient; on the other hand it may involve a relationship between donors and recipients as partners in a single enterprise. This corresponds to the double conceptualization of sociality in consumer culture, as much a matter of an individual's relationship to society in the abstract as of interaction between concrete persons. (Reproducing the Future 130)

Anthropological theories of the gift have been helpful here. Indeed, Titmuss drew inspiration from Marcel Mauss's famous essay on the gift.(18) Mauss argues that "archaic" gift-exchange works to solidify social relationships and inscribe moral obligation because in many non-Western societies a gift carries the identity of its giver. A product embodies its maker so that upon exchange, the thing (or person) in question does not appear as a free-standing "object" in the eyes of subjects, it is instead constitutive of a social relationship, it is "personified."(19) No commodity fetishism here: the "archaic" gift draws attention to its source of production and to its manner of transaction -- it symbolizes relationships. The fact that the gift contains the giver bonds the recipient within a relationship and a return gift is compelled. Jonathan Parry writes, "The gift contains some part of the spiritual essence of the donor, and this constrains the recipient to make a return."(20)

Gift economies do not differentiate "society" from "the market," or social relations from economic ones.(21) In contrast, Euro-American ideas about disinterested "free gifts" are only meaningful in a social system that cordons off a domain of purely self-interested social action -- the market. Parry writes:

The ideology of a disinterested gift emerges in parallel with an ideology of a purely interested exchange...Those who make free and unconstrained contracts in the market also make free and unconstrained gifts outside it. But these gifts are defined as what market relations are not -- altruistic, moral and loaded with emotion. (458,456)

This is what Strathern has highlighted in her analysis of the "altruism" of donations of bodily materials. "Altruism" is seen through analogy with commodity exchange. The "pure gift" or "donation" of bodily material (e.g., blood) shares the same premises as

self-interested market transactions -- the autonomy of individuals and the separation of things from persons (relations).

Thus, Titmuss misappropriated Maussian ideas about gift-exchange to analyze what is in fact a different sort of transaction-altruistic donation. What distinguishes "modern donations" from "archaic gifts" is not just their opposition to self-interested market transactions (since gift-exchange will not admit a distinction between self-interest and moral obligation or between society and economy), but also their alienability. Donations are divorcable from the person who makes them -- this is the meaning of altruism, of a self-less gift to others. And this is a commodity formulation: things in exchange are alienable (separate) from the transactors. It is also the enabling premise of body part procurement for a general social supply. Strathern writes:

"Gifts" (presents) are free-standing entities just like commodities.... Indeed the person who purchases a present to give to a friend simply puts in reverse the same process which makes it possible for him/her to donate body substance to a blood bank, cadaver to science. An anonymously produced object becomes part of a store on which others draw. (Reproducing the Future 130)

Strathern here draws a continuity not between the "archaic gift" and the modern "present," but between the present and the commodity. Her context is her work on Melanesian gift exchange.(22) If by giving gifts Euro-Americans create relationships, then the Melanesian premise is that the relationships are already there, they just need to be made visible or to be elicited.(23) Sociality -- connectedness -- is a background assumption in "gift economies." By contrast, in the individualistic, market-oriented West, persons act purposively to make "society" -- they may act kindly to make society civil.(24) If social relations are a focus of people's practices, then the form which those relations take (individual + society) reflects a cultural premise: the ontological separation of the person from society or social relations.(25)

Beyond the basic issue of reciprocity -- injunctions to give, receive, and return -- the question of altruism thus turns on notions of personhood and the cultural form which relations between persons and things take. In his genealogy of modern Western individualism, Louis Dumont locates the origin of modern ideas about property in modern ideas about personhood (i.e., that persons are individuals). John Locke's theories of the origin of property in labor give Dumont a starting point. To base property in labor, according to Dumont, is to derive a title to external things from what most evidently belongs to the individual, his body and effort. It "...is equivalent to deriving a juridical relation between man and things not from the necessities of the social order, but from an intrinsic property of man as an individual" (52). Dumont sees this idea as connected to later formulations of the social contract, which put individuals as logically prior to society. Ideas about donation echo Dumont's account of emerging individualism: "to be independent, not to be included in anyone, and to be guaranteed against the attacks or encroachments of anyone, is to be able to dispose of oneself without interference from the outside, that is to say, indifferently, to be free or to be the proprietor of oneself, body, labor, and all" (53). And no one is forced to donate blood, there are no obligations to donate, one may "dispose of oneself without interference from the outside."(26)



Of course, the gift of blood raises special problems. The alienability of things is one thing, the alienability of the body quite another. For if what is exchanged in transfusion is ostensibly a person -- blood or body -- then what can be said of the integrity of the "individual" in the first place? The identity of donor and blood does not surprise; what does surprise is their disconnection.

"Blood banking": the Singular (personal) and the General (anonymous)

Transfusion medicine captures the social anonymity of "donations" through an analogy with money.(27) The analogy readily presented itself to Dr. Bernard Fantus when he opened the world's first blood collection center in Chicago in 1937. Traditionally, blood had been transfused directly from donor to recipient. Anti-coagulation technologies developed between 1914 and 1916 enabled the storage of blood for periods of time.(28) Donors could give blood which would later be transfused into other persons. Dr. Fantus called his new center, located in the Cook County Hospital, a "blood bank." Blood, it seems, was like money. It could be saved and spent; intake and outflow could be matched. The blood bank became a depository for individual "savings accounts": "Just as one cannot draw money from a bank unless one has deposited some, so the blood preservation department cannot supply blood unless as much comes in as goes out. The term 'blood bank' is not a mere metaphor."(29) Since one could not withdraw without depositing, individual deposits were tracked to maintain a record of credits and debits: "The blood will be drawn into the flask in the usual manner and taken immediately to the Solutions Laboratory. The date, the name of the donor, his address, his color, the name of the intern and his service should accompany the flask" (Fantus 129).(30)

Here, blood had to be individualized in order to keep a quantitative record -- blood does not present itself as singular, it has to be made singular. If money is a generalized measure of value, then identity is attached to it rather than carried by it.(31) This is a relation of ownership. The analogy with blood is evident: blood itself does not carry identity, much less relationship. Neither the body nor the person nor money is seen integrally to imply relations. This allows ideas about blood to include the notion that it is a generic substance, simply human.

This generality of blood exemplifies an attitude toward the body widely shared in Euro-American culture: the body is potentially alienable. In this configuration of ideas, bodies and persons are somehow discrete. A dualism of body and mind appears, an ideational separation common in Euro-American medicine and biotechnology.(32) Contemporary blood banks, as much as contemporary commercial plasma centers, trade on this dualism. The relationship between person and body is one of ownership; what one owns one might sell -- or donate. However, if Euro-Americans think of themselves as individuals, they also think of themselves as self-alienable: one may partition oneself for an other, regardless of whether or not a relationship with that other pertains. "It's anonymous. You're giving of yourself, but no one knows who you really are," one nurse told me.

However, imaginary relationships are created. As much as I have tried to emphasize the "anonymity" of donation, one might easily draw attention to the multiple ways in which the "gift of life" is thought to personalize the donor. Blood may in fact be singularized under the identity of the donor: this is how blood banks track deposits,

and how one individual can imagine him or herself saving the life of another individual. One donor said, "I donate blood because I have AB type. My plasma is universal. Having worked in a hospital, seeing people turn around from dying inspires you." Red Cross promotional materials create these "fictitious" connections. On a sign-up sheet for use at donation sites, a small, blonde girl tells the prospective donor: "Thank you, you saved my life." Titmuss and others have tried to contrast this sort of donation with impersonal commercial relationships.(33)

But commodification (commercialization) itself does not necessarily entail anonymity. Conversely, in its gift form blood may be thought of anonymously. There is thus a contradiction in the commodification of blood: making blood a commodity does not in fact make it generic. This is in part an effect of the complexity of blood banking as an institution. Whether or not donors think they are making a free gift to society, the Red Cross (and other blood banking organizations) eventually recover the costs incurred in procuring blood by charging hospitals (who charge patients) a price for blood. But even in commodifying it, the Red Cross does not thereby make it anonymous. The blood is marked with the donor's identity so that it may be traced back to the original donor should a problem occur in transfusion. This technique is a result of the HIV epidemic; it was developed in the mid-1980s. Screening for HIV defines a community of humans who are interchangeable by excluding certain persons (those deemed "at risk") from donating. Singularizing blood-packs individuates body, even as it is transfused into another's body, as a means for protecting (and defining) the community.

Hence, singularization serves both commodification and altruistic donation. The singularity of blood is called on as a device for protection, as an apparatus of purification. The community blood bank singularizes blood to insure traceability and the prevention of further infestation. Individuals singularize blood also as a means of protecting themselves from other individuals, of gaining retribution for a wrong committed by the community (as when it is negligent in purifying the blood supply), or to imagine connecting to another individual. There may be a further complication here. I have argued that altruistic donation does not entail lasting social relationships. But "reciprocity" -- the obligation to return a gift -- may in fact be present in blood donations. When asked, donors repeatedly say that they are giving something "back to the community." Thus, they are already in a state of obligation as members of society. Reciprocity here takes the form of interaction between an individual and "the community" (society) understood in the abstract. The mode of giving back suggests that what is originally given by the community is life itself.(34) The community as a whole is imagined as the progenitor of life, and it is the community which thereby binds its members in a state of obligation. This may explain the "naturalness" (nature, again) of the inclination to donate blood recorded by social scientists.

For donors who see blood donation as a natural and obvious activity where the value of the gift exceeds the costs of any discomfort associated with it, the pursuit of more detailed reasons for blood donation may be without meaning.

All our own experiences lead us to believe that participation in the whole-blood supply is the natural, unforced response of a great many people once they are exposed to a mild degree of personal solicitation and some convenient donation opportunities. (Drake et al. 97, 99)

But what then does one make of the fact that no person is obligated to give blood -- neither legally nor socially? The act of donation makes social connection (individual + society) voluntary since not every person donates, and not every person feels obligated to donate, far from it. It is thus a matter of choice to identify with the community as a whole, if not humanity. For are those who donate "more" human? Are those who are prohibited from donating (e.g., gay men and IV drug users) "less"? Who gets to choose to contribute?(35) "Choice," finally, is the proper idiom of sociality in a consumer culture composed of individuals, where life itself may be a matter of choice.(36)

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Blood, much as it once stood for human life, today can be seen to stand for profit. Several industrial democracies have seen political controversy surround blood institutions which, for commercial reasons, failed to protect unwitting recipients from HIV infection. "L'affaire du sang" in France, and similar scandals in Germany, Japan and the United States, have made visible the proprietary interests which lurk behind many gifts of life.(37) In extending a previous idea (blood is life) into a new domain (blood is an economic resource) the images examined here exemplify one strand of contemporary ideas about human life. "Artificial," "chosen," "preferred" -- human life is no longer a background assumption in human affairs, no longer the natural base on which society is constructed. As a zone of representation and intervention, blood and "life" are also zones of consumer choice.(38) In the late 1980s, articles began to appear in publications like *Vogue*, *Seventeen*, and *Glamour*, encouraging readers to preserve their own blood for future transfusions to avoid the danger represented by the anonymity of a community blood supply. "Autologous transfusion" was presented as having a certain cachet. *Town and Country* magazine wrote: "It's called autologous donation, and it's the safest form of transfusion. According to one source, the Pope does it, former President Reagan does it, Michael Jackson does it, and autologous donation may soon be the latest mark of medical sophistication."(39)

In a world of sophisticated medicine, one might imagine the gift of blood to be a last vestige of human goodwill and social solidarity. Blood banking might be seen to ameliorate the ills of a society that is too differentiated, too atomized, lacking common feeling. But if the gift of life evokes common feeling, it also reinscribes the premises of commodity culture. Like commodities, persons who give blood are seen as free-standing, discrete; they do not imply relationships within them. When giving or receiving blood is conceptualized on the model of winning the lottery (as in the epigraph of this essay), what is being thought about the moral commitment of persons to each other? All of the notional investment of blood banking with "humanity" and a "natural" inclination to give only highlights what is lacking: anonymous donations do not create social relations.

## NOTES

I wish to thank Gail Kelly, Vincanne Adams, Rena Lederman, Diana Fuss, my "body parts" colleagues, and the editors of *Critical Matrix* for incredibly thoughtful criticisms, some of which, they will notice, remain unaddressed in this final product.

(1). From the introduction to an excellent collection of exegeses of blood symbolism, Arlette Farge, ed., *Affaires de Sang* (Paris: Editions Imago, 1988) 13. Her title echoes and provides an historical context for "L'Affaire du Sang," the French HIV and blood supply scandal of the late 80s and early 90s, mentioned below.

(2). On kinship see David Schneider, *American Kinship: A Cultural Account* (Chicago: U of Chicago P, 1980), *Critique of the Study of Kinship* (Ann Arbor: U of Michigan P, 1984) 174; Jean-Louis Flandrin, *Families in Former Times* (Cambridge: Cambridge UP, 1979) 19; Georges Duby, *The knight, the lady, and the priest* (New York: Pantheon, 1983) 37. On violence, see especially Uli Linke, "Blood as metaphor in Indo-European," *Journal of Indo-European Studies* 13 (1985): 333-76. On blood and kings, see Michel Foucault, *The History of Sexuality*, vol. 1: *An Introduction* (New York: Pantheon, 1978). On nationality and race, see Michael Herzfeld, *The Social Production of Indifference* (Chicago: U of Chicago P, 1992).

(3). Richard Titmuss, *The Gift Relationship: From Human Blood to Social Policy* (New York: Vintage Books, 1971) 15.

(4). L.M. Zimmerman, "The Evolution of Blood Transfusion," *American Journal of Surgery* 55 (1942): 613.

(5). See *After Nature: English Kinship at the End of the Twentieth Century* (Cambridge: Cambridge UP, 1992), a difficult quasi-ethnographic, quasi-philosophical contemplation of the social ramifications of new reproductive technologies, Thatcher/Reaganite "enterprise culture," and the supercession of nature. See also *Reproducing the Future* (London: Routledge, 1992).

(6). "Severing the Ties: Fragmentation and Dignity in late Modernity," *Knowledge and Society* 9 (1992): 169.

(7). See Marilyn Strathern, *The Gender of the Gift* (Berkeley, CA: U of California P, 1988); McKim Marriott, "Hindu Transactions: Diversity Without Dualism," in *Transaction and Meaning*, ed. Bruce Kapferer (Philadelphia: Inst. for the Study of Human Values, 1976). Compare Alexandra Ourroussoff, "Illusions of Rationality: False Premises of the Liberal Tradition," *Man* 28 (1993): 281-298.

(8). I have worked out some of these ideas before in my essay, "Plastic Heart, Black Box, Iron Cage: Instrumental Reason and the Artificial Heart Experiment," *DisClosure* 5 (1996): 29-53. See also: Paul Rabinow, "Severing the Ties," and "Artificiality and enlightenment: from sociobiology to biosociality," in *Incorporations*, ed. Jonathan Crary (New York: Zone Books, 1992); Emily Martin, "Toward an anthropology of immunology: the body as nationstate," *Medical Anthropology Quarterly* 4 (1990): 410-26, and "The End of the Body?" *American Ethnologist* 19 (1992): 120-38; Rosi Braidotti, "Organs Without Bodies," in *Nomadic Subjects* (New York: Columbia UP, 1994).

(9). See Rosalind Krauss, *The Optical Unconscious* (New York: MIT Press, 1993); Georges Bataille, "Sacrificial mutilation and the severed ear of Vincent Van Gogh," in *Visions of Excess*, ed. Allan Stockl (Minneapolis: U of Minnesota P, 1985); and Linda Nochlin, *The Body in Pieces* (California: U of California P, 1994). Some

readers have questioned this symbolic opposition -- "the wound" versus the fragmentation of the whole person -- arguing that the wound itself challenges the integrity of persons. My point is that the wound, while certainly violating in some sense the boundaries of persons, ultimately reinscribes those boundaries insofar as it is conceptualized as a "violation" or an "injury." Current biotechnological enterprises instead pose the interchangeability and fragmentation of persons as a kind of "everyday" affair.

(10). See also Braidotti 48.

(11). The paper is based on a year and a half of field research conducted in Portland, Oregon in 1993-1994. Interviews were conducted with donors, administrators, volunteers, and staff. I also communicated with a lawyer involved in a civil suit against the Red Cross. Short investigations were carried out in Paris and Amsterdam in 1995. The Mellon Foundation is gratefully acknowledged for travel and research funding.

(12) Indeed, if the donation scene is a heavily semiotic environment, its messages of danger warrant special attention. Here, risk of infection symbolizes social risk: donation discourse is a morality tale about the danger to society presented by homosexuals and IV-drug users. As Mary Douglas has shown "natural" dangers are never not politically-inflected; see her *Purity and Danger* (London: Routledge, 1966).

(13). See Alvin Drake, Stan Finkelstein, and Harvey Sapolsky, *The American Blood Supply* (Cambridge: MIT Press, 1982).

(14). See Igor Kopytoff, "The Cultural Biography of Things," in *The Social Life of Things*, ed. Arjun Appadurai (Chicago: U of Chicago P, 1986).

(15). See especially Drake et al.

(16). Dennis Smith and Katherine Carlson, eds., *Current Scientific/Ethical Dilemmas in Blood Banking* (Arlington, VA: American Association of Blood Banks, 1987) 31.

(17). See Jane Allyn Piliavin and Peter Callero, *Giving Blood: The Development of an Altruistic Identity* (Baltimore: Johns Hopkins UP, 1991).

(18). Marcel Mauss, *The Gift* (New York: Norton, 1990).

(19). See C. A. Gregory, *Gifts and Commodities* (Cambridge: Cambridge UP, 1980).

(20). "The gift, the Indian gift, and the `Indian Gift,'" *Man* 21 (1986): 456.

(21). See Louis Dumont, *From Mandeville to Marx: the Genesis and Triumph of Economic Ideology* (Chicago: U of Chicago P, 1976).

(22) See Strathern's *The Gender of the Gift*.

(23). This is a generalization of some very complicated arguments. For a little more detail, see Roy Wagner, "Are There Social Groups in the New Guinea Highlands," in

Frontiers of Anthropology, ed. Murray Leaf (New York: Van Nostrand, 1974) 95-122; and Asiwinarong (Princeton, NJ: Princeton UP, 1991).

(24). Whatever the theoretical usefulness of the society-individual dyad for decoding other cultures' symbolic systems (cf. Strathern, *The Gender of the Gift*), that particular formation is an explicit trope of Euro-American figurations.

(25). See especially Kenneth Read's wonderful essay, "Morality and the concept of the person among the Gahuku-Gama," *Oceania* 25 (1955): 233-82. See also Dumont's *From Mandeville to Marx*.

(26). The conceptual difficulties of blood donation are precisely those of interpersonal inclusions; the same is true for organ transplantation to an even greater extent; see Lesley Sharp, "Organ Transplantation as Transformative Experience: Anthropological Insights into the Restructuring of Self," *Medical Anthropology Quarterly* 3 (1995): 357-389. My question is whether or not those conceptual paradoxes -- the body of "one individual" containing another individual's body parts; the pooling of persons in the formation of blood compounds -- would pertain were it not for the resolute individualism of Euro-American culture. See, for example, Emiko Ohnuki-Tierney, "Brain Death and Organ Transplantation: Cultural Bases of Medical Technology," *Current Anthropology* 35 (1994): 233-254.

(27). Parry (in "...the Indian Gift...") argues that monetary and altruistic symbols are divergent in our culture. But as this paper charts, blood and money are analogized not infrequently. If the meanings are different, at least the symbolism is analogous, perhaps even parallel.

(28). See C. S. Wood, "A Short History of Blood Transfusion," *Transfusion* 7 (1967): 299-320.

(29). Bernard Fantus, "Therapy of Cook County Hospital: Blood Preservation," *Journal of the American Medical Association* 109 (1937): 128-133.

(30). This system, where individual donations are recorded and matched against individual withdrawals, is substantially different from that which the Red Cross endorses. The anonymous donations analyzed in this paper dominate blood collection in the United States and elsewhere. On the segregation of the blood supply, see L.K. Diamond, "History of Blood Banking in the United States," *Journal of the American Medical Association* 193 (1965): 35-70.

(31). Jonathan Parry and Maurice Bloch, eds., *Money and the Morality of Exchange* (Cambridge: Cambridge UP, 1989).

32. See Nancy Scheper-Hughes and Margaret Lock, "The Mindful Body: A Prolegomenon to Future Work in Medical Anthropology," *Medical Anthropology Quarterly* 1 (1987): 6-41.

(33). See Thomas Murray, "The Poisoned Gift: AIDS and blood," *The Millbank Quarterly* 68 (1987): 205-225.

(34). Talcott Parsons, Renee C. Fox, and Victor M. Lidz, "The 'Gift of Life' and its reciprocation," *Social Research* 39 (1972): 367-415.

(35). This paper does not analyze the practices and images which figure homosexual men and IV drug users as unmitigated dangers to the blood supply-to do so would take a great deal of space. For now, suffice it to say that as much as the blood supply symbolizes human goodwill, as much as it represents a "gift of life," it also partakes of a demonizing politics of purity. See especially Murray "The Poisoned Gift"; Mary Douglas, *Risk and Blame* (New York: Routledge, 1992); Harvey M. Sapolsky, "AIDS, blood banking, and the bonds of community," *Daedalus* 118 (1989): 145-170; Lawrence K. Altman, "AIDS and the importance of donated blood," *New York Times Magazine* (November 18, 1984) 136; Rajinder S. Bhopal et al., "Perceptions about blood donation, transfusion and the risk of HIV infection: implications for the blood transfusion service," *AIDS Care* 4 (1992): 42-52; Theresa Crenshaw, "Transfusions: it's a bloody shame," *Humanist* 49 (1989): 16-20.

(36). See Strathern, *Reproducing the Future* 1-60.

(37). See especially Jane Kramer, "Bad Blood," *The New Yorker* (October 11, 1993) 74-95; Mark Hunter, "Blood Money," *Discover* (August 1993) 70-78; Dennis Breo, "Blood, money, and hemophiliacs -- the total story of France's AIDSgate," *Journal of the American Medical Association* 266 (1991): 3477-3485. See also Edmund-Luc Henry, *De L'Hémophile en général et du Crime en particulier* (Paris: Le Pré aux Clercs, 1992), a polemic on the scandal.

(38). "Representation and intervention" are twin tropes deployed by Rabinow, "Fragmentation," after Ian Hacking's introduction to the philosophy of science, *Representing and Intervening* (Cambridge: Cambridge UP, 1983).

(39). Herbert Burkholz, "Bad Blood?" *Town and Country* 146 (1992): 98-105.