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Viral Possibilities: Media, the Body, and the Phenomenon of Infection

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Graduate Program in Theory and Criticism
A thesis submitted in partial fulfillment of the requirements for the degree in Master of Arts
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VIRAL POSSIBILITIES: MEDIA, THE BODY, AND THE PHENOMENON OF
INFECTION

A Monograph

by

Daniel McFadden

Graduate Program in the Centre for the Study of Theory and Criticism

A thesis submitted in partial fulfillment
of the requirements for the degree of
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Abstract

This thesis examines how the concept of virality is articulated in popular culture, and the connection that this articulation shares with notions of the virus in philosophical thought. The first chapter traces the emergence of a new wave of virus media following the geopolitical changes following the end of the Cold War, and the further shifts that have occurred in how the virus is culturally considered. The second chapter examines the politics of a phenomenological encounter with media depicting viruses. The third and final chapter discusses how understandings of the virus shape the notion of community as both a material and metaphysical construct.

Keywords

Viruses, outbreak, biopolitics, film phenomenology, community, immunity, media studies, Baudrillard, Derrida, Sobchack

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Introduction

I would like to begin this investigation with a quote from an interview with Jacques Derrida entitled “The Rhetoric of Drugs”:

There may be natural poisons and indeed naturally lethal poisons, but they are not as such ‘drugs.’ As with addiction, the concept of drugs supposes an instituted and an institutional definition: a history is required, and a culture, conventions, evaluations, norms, an entire network of intertwined discourses, a rhetoric, whether explicit or elliptical. We will surely come back to this rhetorical dimension. There is not in the case of drugs any objective, scientific, physical (physicalistic), or ‘naturalistic’ definition (or rather there is: this definition could be ‘naturalistic,’ if by this we understand that it attempts to naturalize that which defies any natural definition or any definition of natural reality). One can claim to define the nature of a toxin; however, not all toxins are drugs, nor are they considered as such. Already one must conclude that the concept of drugs is not a scientific concept, but is rather instituted on the basis of moral or political evaluations: it carries in itself both norm and prohibition, allowing no possibility of description or certification—it is a decree, a buzzword (mot d'ordre).

Although Derrida here is discussing the concept of drugs, there is a parallel to be made between how drugs are conceived, in this sense, and with how we culturally treat the notion of the virus. True that unlike drugs the virus has a defined biological category; the definition of this category is, however, contested and precarious. The being of the virus is one fraught

with uncertainty. Overlapping discourses and metaphors¹ are so prominent in thinking about the virus that the biological thing that we call virus threatens being obscured or emptied by the metaphors of contagion that the virus inculcates. Even empirically, there is continued debate as to whether the virus constitutes life or something else: despite its seeming conceptual stability, the virus remains in many ways undecided. Another important analog between drugs and the virus is the shared feature of each concept deriving culturally from the convergence of several discourses, alongside the utilization of these concept in the governance of our societies. This thesis will investigate the complexities of one of the facets of this matrix that drives our understanding of the virus: the relationship between the virus and the media that portrays infection and outbreak. As the web of meaning for this concept is dense, looking into this one facet reveals shapes of the others. My argument here will be that the virus depicted in media shapes our understanding of our bodies, both individual and communal, and that this understanding is borne out of a politically charged history and laced with ideological posturing.

The virus and drugs also happen to share an etymology: in the original Latin, the word *virus* connotes something toxic. As Derrida points out, there is significant work done in turning a toxic object into the concept of drugs, and likewise the transformation of the pseudo-organism of the virus into a diverse metaphor for contagion and danger requires a creative interpretation of our world, an interpretation and iteration that in turn alters the world in reaction to its image. Viruses, like drugs, today play an instrumental role in

¹ The use of metaphor in this thesis will include both its standard meaning, “a figure of speech in which a name or descriptive word or phrase is transferred to an object or action different from, but analogous to, that to which it is literally applicable; an instance of this, a metaphorical expression” (Oxford English Dictionary), as well as the further notion that these figures influence perspective, “George Lakoff and Mark Johnson have proposed that metaphors are much more than rhetorical devices for conveying complex ideas. As we form the associations they invite us to make, we do not just learn how to speak and write—we learn how to think” (Otis 3).

governance: both national and international policies surrounding these things affect people, borders and perspectives as much as do the things that bear these names. I would like to end the comparison between drugs and the virus for the time being, but I would also like to keep in mind that these are amongst a wide set of highly intensified, diversified and flexible concepts that are mobilized in the exercise of power today.

The overarching method of this paper will be addressing the instrumentality of the virus, and coming to a conceptual understanding of virality via its employment in contemporary culture. For the individual body, the virus works in a system of discipline for biopolitical motivation: thus the ideas of Michel Foucault will be used to examine the types of subjectivity that are forged in the concept of the virus. The discipline required for the actuation of this biopolitics is accomplished through the experience of the virus on screen, and I will turn to film phenomenology to clarify this connection. For the communal body, virality and immunity work in defining the limits of the community's body through its constitution of an immune system. The necessity of considering virality in the founding of community will be analysed by comparing two perspectives on the concept of community: both a material understanding and a metaphysical one.

One of the goals I intend in this thesis is to arrive at a more rigorous definition of the virus, one beyond a strictly biological or metaphorical sense. Viruses are certainly an important and formative part of our world, and arriving at a more complete and inclusive understanding of the virus is important in understanding the role that the virus plays in our lives and in our world. Due to the mutable nature of the virus in our world, this task is already impossible; however, this attempt will uncover certain elements of the virus's mechanics, and will be useful when analysing analogous concepts utilized in the constitution and control of ourselves and our communities. In a nod to Derrida, then, this is perhaps an

attempt at the rhetoric of the virus, albeit necessarily partial and ephemeral.

Defining Viral Culture

Before beginning my analysis, I feel it necessary to delimit my object of study, as the number of media which feature viruses is vast and far beyond the scope of this thesis to cover. For my purposes, what I term “virus media” are fictional or non-fictional media that deal with viruses as a central actor, and where the main conflict is concerned with the treatment of the virus. There are many instances where viruses appear as a narrative device that is the causative factor in a radical transformation (the rage virus of *28 Days Later* being one example amongst many), but where the bulk of the story is concerned with the after effects that the virus has had (i.e. that zombies now exist and pose a risk to the individual and society). Elements of the outbreak narrative subsist in these forms that borrow from it, but they are rather an appropriation of a well-trod commonplace than a form explicitly concerned with viruses, where the diegetic world mirrors our own and the viruses are based off of real-world experiences that human culture has had with pathological entities.

It is worthwhile to note that there is a relationship between zombie films and virus films as they both use the virus as the something-through-which an individual undergoes a radical transformation and becomes other than itself. Whereas the zombie film makes this transformation a horrible fantasy, the virus film instead chooses to contemplate the reality of illness (or, maybe its extremity), and thus the horror that these films produce are operating on different levels. In the zombie film, the narrative construction of identification with the non-infected and the spectator's emotional investment with their survival in a perilous world differs from the virus film; the main characters are rarely infected and transformed, and thus these tales are ones of mechanical immunity in an already transformed world, the

conservative maintenance of one type of being at a moment of extreme change.

Another important moment that must be addressed is HIV and AIDS. Although this virus and illness were instrumental in giving shape to many figures in the contemporary virus narrative, there are several facets of its emergence and cultural connotations which differentiate it from the period and virus narratives that I wish to focus on. Firstly, the sexual and subcultural qualities of its popular image mark it as a special case amongst viruses; no other virus is as closely affiliated with specific groups of people, which alters the character of the threat it poses to society at large. Since awareness of the disease precedes the period I am discussing, the threatening idea that AIDS poses—that a deadly infection could spread and effect a large percentage of the global population—provides a ground for the threat of the less specific viral fears that follow in the 1990s. Also, HIV's route of transmission changes the moment of infection from being an ever-present threat to only occurring under particular circumstances of contact. Due to these facts, and limitations of space, AIDS and HIV will largely be excluded from this conversation. Another reason for this decision is the large body of work and theory that already exists on AIDS, compared the less intensively studied position of the virus-in-general in popular culture.

Anatomy of a Thesis

This thesis contains three chapters concerning the relationship between the body, the concept of the virus, and the role of media in coordinating the interrelationship between these two figures.

The first chapter will outline my object of study from two perspectives: from a recent history of the virus in narrative, alongside the emergence of this narrative from the post-Cold War era. In her text *Contagious*, Priscilla Wald traces the origin of the “outbreak narrative” to

turn of the century forensic styles. Building off of this history, I will show that changing geopolitical circumstances created the possibility for the virus narrative to emerge as it has, and locate how certain Cold War tropes and ideologies enter into the virus narrative. When this type of narrative finds popularity in the 1990's, it operates under certain aspects that heighten the affect of this media by portraying centrally the suffering bodies of individuals. This later changes as our culture's perspective towards viruses shifts following several perceived threats (SARS, Swine Flu). We find that more contemporary portrayals of the virus are less concerned with the struggles of individuals and more preoccupied with national borders and community safety. These two paradigms within the virus narrative (i.e. the focus on either the individual body or the communal body) guide the final two chapters of the thesis.

Chapter two examines the phenomenological relationship between the consumer of virus media and the infection depicted in the text. Although the virus does offer a real threat to our bodies, the depictions of infection in popular media are imbricated in a biopolitics which utilizes the vulnerability of the body to the virus as a space for ideological manipulation. This is largely achieved through an affectual structure of identification that becomes threatened when the virus assaults and transforms the bodies of the characters in media. This interaction is elucidated through Vivian Sobchack's theories on film phenomenology, and the ideological dimensions of this interaction are also addressed.

The third and final chapter deals with the role of the virus in constituting community. Notions of immunity are central to community both in metaphysical (in the work of Roberto Esposito) and material theories (herd immunity). This chapter analyses the stakes of both positions in how the virus relates to the structure of community, and joins these theories with examples from popular media (news sources, the films *Contagion* and *Antiviral*). What is

revealed is that thinking community in relation to the virus is complex and contradictory; a structural incoherence that is necessary for grounding the stable organs of community.

The conclusion explores this necessary incoherence and threat of the virus. It also offers some theoretical insight into why this concept operates so, and as to why it is such a popular conceit both in the media and as metaphor.

Chapter 1 : Etiology

A Recent History of the Virus

To begin my analysis of the virus, it will first be necessary to briefly establish the modern context from which our understanding of this concept is wrought. Cultural representation of the virus is central to our understanding of this concept; for most, the virus is something experienced only through its symptoms and effects. Virus media plays with these effects, and through its use of (pseudo)science, disseminates an empirical framework which we use to understand the phenomenon. The notion that there are contagious particles that infect, and that infection produces more particles to further this spread, is hard to imagine without the intervention of a narrative; the only element of this process that is immediately perceptible is the experience of being sick. Thus, there is something revelatory about having this process depicted in media. The depiction of these processes, however, are far from benign; several aspects of the contemporary virus narrative emerge from older, politically motivated styles, and the virus likewise gets caught up in the discourse of politics. This chapter, then, will trace the emergence of the modern virus narrative, and offer two paradigms which focus these narratives: the human body and the national body. The first of these paradigms concerns how the depiction of suffering bodies supports and maintains a perspective towards viruses that feeds into biopolitical control. The second paradigm reacts to the limits of the first, and of the necessity in securing an impermeable border for the national body when virality assails the stability of internal biopolitics.

To expedite my description of this history, I will draw on Priscila Wald's *Contagious: Cultures, Carriers and the Outbreak Narrative* (2008). In this work, Wald identifies and elucidates the history of what she terms the "outbreak narrative," a specific genre of discourse that has formed around the media of viruses. Wald's work will serve as an important touchstone for my investigation of the contemporary developments in virus culture that this chapter will seek to define. The outbreak narrative is a lucid concept, and Wald's investigation the key media leading to the emergence of these types of narratives in the 1990s will help me to quickly define this important paradigm of virus culture. This chapter is not intended to disagree with Wald's work, but to both continue it and put her literary analysis in conversation with the philosophical thoughts surrounding contagion and virality.

This chapter will address two concerns. First, I would like to trace how the paradigm of the early outbreak narrative, largely concerned with the symptomatic horror of Ebola and Ebola-like viruses, has shifted to now focus on the large scale social effects of viruses, such as SARS, Swine Flu, and the current (2014) West African Ebola outbreak. This change in popular focus (i.e. from pathology to epidemiology) indicates a shift in the relationships between culture and the viruses that both support and threaten it. Secondly, I will examine the philosophical thoughts surrounding virality, and attempt to use this philosophy to further develop an understanding of how viruses operate in our world, both socially and individually. As I am concerned with how viruses are treated in the media, the arguments of this chapter will be elucidated through two films: *Outbreak* (1995) and *Contagion* (2011). I have chosen these two films as they are among the most

popular depictions of viruses, as well as being paradigmatic of the instantiations of the virus narrative(s) that I wish to discuss.

Emergence

In the early 1990's, after the fall of the Soviet Union and the intensification of globalization, a new found awareness of viruses emerged, one that was deeply concerned with the possibilities of infection opened up by the speed of travel as well as the new permeability of international borders. The emergence of both HIV and the Ebola virus from Africa reinvigorated the notion that disease and danger are associated with foreignness, only a small revision from the Cold War trope of the Soviets-as-other and ideologically dangerous (the fear of Americans becoming seduced and infected by communist thought is a phenomenon present in several American Cold War films). The loss of the obvious structures and cultural divisions of the Cold War necessitated a displacement of the fear that had become so central to Western culture onto a different figure: the virus. The notion of the 'Third World', a notion that Wald argues has its roots in Cold War health discourse, became the new location for global fear, a fear highlighted by the new possibilities of transmission brought about by technology and globalization:

The politics of the Cold War, which strongly influenced the conventions of viral representation, also produced the idea of the 'Third World' as well as the patterns and conditions of development that have become synonymous with the term.

During the Cold War, 'health' was a conspicuously invoked index of 'civilization' and of the distinction between 'developed' and 'developing' as well as a justification for intervention by the First or Second Worlds in the designated

Third World. Summoned as a threat posed to and by particular regions, communicable disease was used to generate the geographical idea of the Third World. (46)

We can see that the end of the Cold War did not signal an end to the structure of global health that was forged in the enmity of that era; rather, with the loss of the ideological and militaristic threat of the Second World, the Third World became the new other politically and culturally utilized as a source of fear. Wald outlines the rhetoric of this replacement:

Such formulations implicitly constitute disease outbreaks as the incarnation of a timeless and diseased 'Third World' leaking, through the microbes, into the metropolises of the 'First World'. Cultural analysts have noted the anxieties about globalization expressed in these accounts in which diseases almost invariably emerge from Africa, occasionally from Asia or South America. Charting the one-way course of such diseases, accounts of emerging infections turn space into time, threatening to transform a contemporary 'us' into a primitive 'them.' This rhetoric stigmatizes impoverished places as it obscures the sources of poverty and of the 'uneven development' that characterizes globalization. (45)

This mechanism, whereby the Cold War dichotomy was replaced by different, global others, was aided by the notion of the virus as a stigmatizing, signifying font of difference. Several thinkers (Baudrillard, Shukin, Osther) have also located the emergence of viral culture as a product of souring opinions towards globalization. Here, Wald uses the language of a broken machine (“leaking”) to communicate the contagious relationship between the First and Third Worlds; alongside the danger that Third World

viruses present, they cooperate in a system that has become suspicious of itself, fearful of contact and interaction. The symbolic levelling of the Berlin Wall had the unintended consequence of destroying the cultural machine of fear and belonging that was the center of Cold War identity, but it also set free the possibility of discovering (or, rather, crafting) new others chosen under a different rubric. Thus we see the kernel of a fear structure based on militarism and ideological² contact turn towards biology and physical contact.

Although both Cold War and post-Cold War virus films play with a similar notion of fearful otherness, the modulation of that fear differs; there is a change in the trauma involved with the different types of infection involved in each genre. In Cold War films, the infection is political and ideological: it turns the American into an unthinking, homogenized automaton (see *Invasion of the Body Snatchers*, *Invasion USA*, etc.). The loss of self in these films is metaphorical; they imply that one's being is entirely continuous with the ideology that one subscribes to, and that a change in philosophical perspective is a radical effacement. Contrarily, the transformation in virus media, and this is especially true in the early virus media, is horrific and truly lethal. The goal of these films was not to immunize against a different ideology, but rather to ground otherness in materiality and show the danger of physically communicating with the other, thus constituting belonging by biological nationality rather than ideological similarity. Virus media of this initial, post-Soviet era is intentionally provocative—affect through horror

² For the sake of this thesis, I will be using a definition of ideology that is similar to Karl Marx's: "Consciousness can never be anything else than conscious existence, and the existence of men is their actual life-process. If in all ideology men and their circumstances appear upside-down as in a *camera obscura*, this phenomenon arises just as much from their historical life-process as the inversion of objects on the retina does from their physical life-process." (154) Ideology is that which distorts (or inverts) a subject's relationship with the concrete facts of their world.

and sorrow seems to be its most obvious intention, occluding an ideological fear of otherness beneath the suffering of infected individuals. The main trope of the virus-signifying-otherness is maintained in all contemporary virus media, although aspects of its presentation have changed to reflect how the virus is biopolitically mobilized.

Richard Preston's 1995 non-fictional best-seller *The Hot Zone* was key in establishing the paradigm of contemporary virus culture. The importance of this work is attested to in its frequent identification in the literature surrounding cultural-virus studies (Wald, Shukin, Roach). Although many popular reviews noted the novelty of Preston's work (Entertainment Weekly describes it as a "stunning wake-up call"), many aspects of its art can be seen as a culmination of a style that had been slowly percolating since the early twentieth century. The genealogy of the outbreak narrative that Wald gives in *Contagious* has many similarities with story elements of *The Hot Zone*. Turn of the century concerns about contagion in an increasingly industrial world are mirrored in Preston's fear-inducing tale about the history of the Ebola virus and, in particular, the outbreak that occurred in Reston, Virginia, which becomes the central figure of vulnerability in Preston's work.

What differentiates Preston's text is not its popularity, but rather, the palpable underlying anxiety that accounts for that popularity. At this time there occurred a conceptual shrinking of the world, where the imaginary borders of history were being erased by new technology and new behaviours. Along with the dissolution of the once looming threat of mutually assured nuclear destruction, the end of the era of enmity was at once a victory and a loss. Although Western ideology had seemingly triumphed over

its Eastern “other”, it had also been deprived of its primary source of negativity that it used in its process of self-identification and reproduction.

This historical moment is one that Wald pinpoints as the one from which the outbreak narrative truly starts to become realized. One of *Contagious*'s main goals is to historically investigate the moments and thoughts that contribute to the contemporary, generic outbreak narrative. Roughly, Wald outlines how procedural investigation narrative (like detective novels) and American xenophobia laid the foundation for how we tell the story of the virus today. Wald places at the heart of the outbreak narrative a conflict between human and virus, “the outbreak narrative pits human being against microbe.” (39) When one opens a copy of *The Hot Zone*, one is confronted by two images: a picture of a virus cell superimposed over a cave with a person in bioprotective clothing standing before its opening. Text overlaid on the image reads, “From deep in the rainforest, a killer virus stalks the human race.”

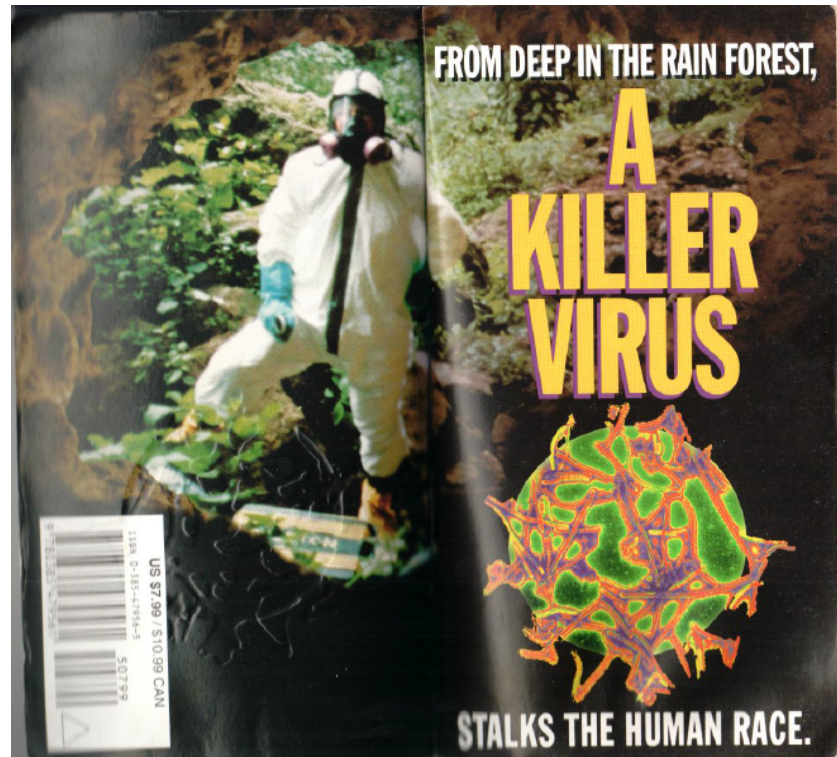


Plate 1: Opening pages of *The Hot Zone*

This conflict, this struggle between humanity and the virus, remains the central tension in both paradigms of virus media. Although the perspective and the language used to conceptually address virality changes, it always remains a threat, an almost villainous presence.

Wald summarizes the story of the early outbreak narrative as such:

The earliest wave of fictional outbreak scenarios in the 1990s did not embrace a change in worldview. Although they often espoused an ecological perspective, they dramatized the human irresponsibility that caused outbreaks in a series of violations that ranged from the theft of an imported monkey from a primate-

quarantine facility and its illicit sale to a California pet store owner (*Outbreak*) to biowarfare. The cast of characters in these works included indifferent bureaucrats and unscrupulous, profit-motivated corporate executives, arrogant scientists, and well-meaning humanitarians. The plots underscored the logic of regulations and the importance of obedience to avoid outbreak or to contain its spread. *Outbreak* even affirmed the difficult decision military personnel must make to shoot their countrymen who attempt to violate the quarantine established to contain the outbreak in an infected California town. Neither the analysis of the problem nor the imagined solutions entailed a radical shift in perspective. (41)

The perspective that has not shifted is that of the Cold War paradigm; the film maintains a rigid distinction between the virus-as-other threatening America, and the solution to that threat is militaristic (either military force or military technology). Eventually, in later virus narratives, the association between viruses and cultural otherness begins to become more firmly established, and comparisons in culturally divergent behaviours towards viruses (and specifically the relationship between the foreign other, animals, and the virus) becomes a major component of the narrative. We can also see in this brief definition of early virus culture the seeds of what become the later concern of virus media: how national bodies must respond to viruses. What Wald does not describe in this moment is the focus the early phase of this discourse places on the personal, bodily suffering of infection.

Jean Baudrillard theorizes that virulence itself can be considered an oppositional force placed contra to the globalizing effects of the post-Soviet era, to notions of global capitalism, liberalism and democracy:

Still, there is an ambiguity in this very virulence.... The current is to be interrupted, the flow stopped. But this runs counter to all the commandments of modernity, according to which sex, money and information must circulate freely.

Everything is supposed to be fluid, everything should accelerate inexorably. (65)

The modernity which Baudrillard speaks of here defines our world in terms of flow, language not unlike the leaking machine that Wald uses to define post-Cold War international relations. The effect of this figure is manifold: the globe itself is conceptually redrawn to resemble a circulatory system. The ideologies of the Cold War may persist in formulating cultural moments of negativity (via the Third World), but the split figure of the Cold War no longer materially remained: Western capitalism flourished, itself operating not unlike a virus, spreading and recoding global otherness according to its own logic. It is in fact only a cooperation of these models that can account for the manifestation of virus narrative: without the tradition of fear and alterity that was forged and reified in the Cold War, culture might not instinctively turn towards finding new sources of otherness, locating them geographically in the Third World, and imagining a new threat in the possibility of pandemic outbreak. The possibility of pandemic, however, only exists because of the growing fluidity of global movement: the loosening of borders, the homogenizing of political systems (i.e. democracy), and the accomplishments of technology makes it possible for the infected others of the Third World to easily board a plane, travel, and infect the First World. Thus both models cooperate on complementary registers that condition the virus narrative: as the flows of material bodies become less inhibited, culture substitutes symbolic codes to protect the sovereignty of the imaginary community and police membership in that community. The

bodies of community members are biopolitically trained through visual media to understand the threat of foreign bodies and the importance of compliant behaviour.

Visualizing Virality

Visual media serves an important role in how virality is conceived. In her book *Cinematic Prophylaxis*, Kirsten Ostherr argues that the largest challenge that public health authorities face in dealing with the virus is an inability to visually realise it:

This anxious search for imagery of contagion has often troubled the proponents of public health education... the field of public health has a long history of associating visual representation of disease with successful prevention of the spread of that disease. For this reason, audiovisual media have played a crucial role in information campaigns aimed at containing outbreaks of communicable disease. However... the representation of other biological threats have also failed at documenting the moment of contagion; the invisibility of the process of contamination always requires a displacement of the bacterium (or virus) onto its more tangible, and thus more visually representable vectors. (79-80)

The problem of visualizing the virus restricts what can be made visual in virus media to figures of the body. Although the virus is invisible, its symptoms can be made visible both in the human and in the social body. Ostherr, in a different article, argues that visual manifestations of contagion are ideologically loaded:

Rather than creeping undetected across geopolitical and subjective boundaries, the imagined invaders announced their presence everywhere, through audiovisual representations of the ideology of world health. In this discourse, bodily invasion

is collapsed with geopolitical invasion, and both are conceptualized as processes of contagion. By promoting international border surveillance as the solution to the global flow of (contaminated) bodies, information and commerce that characterizes postwar globalization, the discourse of world health espouses an impossible task: to represent visually the invisible paths of transnational contagion. (“Invisible Invaders” 299-300)

The collapsing of virological invasion with cultural invasion gives rise to the illusion that the source of viruses is cultural rather than ecological. Although it is hard to dispute that cultural attitudes and behaviours towards pathogens effect the probability of outbreak and spread, in media depictions cultural attitude comes to displace the biological novelty of outbreak. Ultimately, it is the coordination of multiple narratives of otherness that contribute to the association between outbreak and foreign cultures. The conclusion of *Contagion* can help us understand this orchestration: we are shown that the pig, which was the initial source of the film’s virus, came into contact with bat virus DNA at a farm where the bats had been displaced by clear cutting of their forest habitat for development. Ironically, the index case of the virus also works for this development company; thus part of the blame is also ecocritically placed on capitalism. This folds into the wariness that the virus narrative shows towards global expansion. Although the cultural practice of the other is dangerous (the pig's virus infects the index case because a Chinese chef fails to wash his hands), there is something inherently dangerous in the space of the other, the nature of their world. In this space of dangerous otherness, even capitalist methods cannot avoid infection; they are places of fear, best not disturbed. This doubling of the otherness as both nature and culture intensifies the otherness of the outbreak narrative:

not only are foreign people harbingers of unenlightened attitudes, but even the land that they occupy, that they come from, is always already dangerous.

The emergence of noteworthy diseases from Africa and Asia becomes associated with the otherness of these cultures instead of their being coincidental sites of these viruses. The association between cultural practice and the treatment of viruses in the media can be demonstrated by looking at news sources. During the SARS outbreak, news sources pointed to a dangerous proximity between human and animal habitation that implies that this was the source of the outbreak (Wald 7), and the current West African Ebola outbreak has been discursively typified by reports of African cultural practice allegedly inflaming the problem to a level of international concern:

Similarly, incorrect beliefs about the threat of Ebola – that it is a conspiracy theory or a hoax — or the riskiness of unsafe burial practices must be realigned to promote protective behaviours and reduce the sorts of behaviours that spread the virus. Luckily beliefs and hence behaviours can be changed during an epidemic. In a study of the 2009 H1N1 flu pandemic in Montreal, my co-authors and I found that commonly held beliefs about the transmission and prevention of H1N1 converged towards practices that were heavily promoted by the Public Health Agency of Canada: the public health message was seemingly effective in forming a consistent set of beliefs. (Laszlo “Medicine and military alone will not save world from Ebola”)

This article from *The Toronto Star* not only indicts how West Africa culturally treats Ebola, but implies that the infection could be stopped if the affected countries modelled themselves directly on the public health apparatus of Canada. Whether this suggestion

holds any scientific validity is beside the point; what this suggestion gestures towards is a situation of simultaneous control: in this narrative, a national healthcare apparatus is first imagined to be capable of stopping outbreak (as though “beliefs” may inoculate against the material reality of epidemic). Secondly, this belief system is projected onto global others, whose struggle is then placed in their “backwards” non-conformance rather than in the difficulty of grappling with outbreak. The totalizing gesture that this piece motions towards, i.e. that a world governed by a Western style health care institution would be better, is a motion towards homogeneity, at least in health care practice. This kind of homogeneity is precisely where Baudrillard locates the source of virality itself.

Baudrillard conceives of the virus as arising from systems that are wary of heterogeneity, and which attempt to efface alterity through sterilization:

In a hyperprotected space the body loses all its defences. So sterile are operating rooms that no germ or bacterium can survive there. Yet this is the very place where mysterious, anomalous viral diseases make their appearance. The fact is that viruses proliferate as soon as they find a free space. A world purged of the old forms of infection, a world 'ideal' from the clinical point of view offers a perfect field of operations for the impalpable and implacable pathology which arises from sterilization itself. (62)

Baudrillard's structural understanding of how the virality emerges aligns with the historical context discussed earlier in this paper. The disappearance of the Soviet Union (and its identifiable otherness) made possible the ideological “sterilization” of the global village—the unifying (homogenizing) project of global democracy, human rights, and governance. The loss of the dichotomous relationship displaced what had been the

common figure of difference for decades, and the collapse instantly made the world less rigid and structurally heterogeneous. Baudrillard later discusses the tension between homogenous and heterogeneous systems,

He who lives by the same shall die by the same. The absence of otherness secretes another, intangible otherness: the absolute other of the virus... In every compulsion to resemblance, every extradition of difference, in all contiguity of things and their own image, all conflation of beings and their own code, lies the threat of an incestuous virulence, a diabolical otherness boding the breakdown of all this humming machinery. (65)

The figures of heterogeneous and homogenous systems becomes a major space in discussing one of the key bywords in the virus narrative: immunity. If the Cold War had established these terms ideologically (capitalism is not communism, capitalism cannot be communism, and vice-versa), then a postwar restructuring of that principle seemed necessary to maintain some aspects of a continuous American identity. The concept of the American notion, here, encounters difficulty. Although part of its cultural landscape in the Cold War was the eradication of threat, that threat made the illusion of an internal consistency easy. The Soviet Union was obvious, large, and militaristic, an entity of a similar scale that was palpably other. With the loss of this national and cultural construction, the quality of global heterogeneity transformed. Although not explicit, Baudrillard here implies that homogeneity is an impossible state: it is when a system believes it is reaching homogeneity that it is confronted with radical otherness, precisely because of its previous elimination of negativity. Hence, when the Eastern Bloc falls, and, in some sense, Western capitalism becomes the new global order, the internal

heterogeneity of America comes to the fore. The ease of an internal dream of continuity is troubled when the border between external and internal is obscured; without a point to nationally agree upon as other, the differences within America and the vast number of smaller global others overwhelms the previous structures. There are certainly many events that occurred in the early 1990's that seem to give voice to this theory: the internal conflicts between the American government and small, divergent communities (i.e. the Waco siege in 1993); small international groups presenting an asymmetrical threat to American power (terrorist activity such as the 1993 bombing of the World Trade Center). Although Baudrillard's position is somewhat salient, it is certainly limited: the extent to which a system believes itself to be homogenized is hard to quantify. During the Cold War, the red scare and McCarthyism gave the impression that a threat can always be lurking internally as well as abroad. Perhaps what is most challenging about Baudrillard's writing on virality is the ambiguity of what he means by the virus itself. The logic of virality emerging in reaction to a homogenous system has appeal, but what that emergence could possibly mean and how it could affect the sterilizing system remains untheorized. Is the absolute other a virus in the traditional sense, or is it simply a metaphor for unthinkable apocalypse? If that is the case, then how can we be certain that this otherness is a reaction to us... If it is an *absolute* otherness, then does it not, by necessity, have nothing to do with the system to begin with? Here is where one might want to be wary regarding Baudrillard's claims: although they open a certain possibility for thinking the virus, that thinking is also riddled with pitfalls. Trying to preserve a thinking in this vein without turning to hyperbolic figures like the "absolute other," can

lead to thinking through the relationships between immunity and community, and this will be the topic of the third chapter.

Offering a maybe more tempered understanding of Baudrillard's claims, we are required to think the virus in relation to structural systems and the understanding that those systems have of themselves. In contemporary culture, there is perhaps an echo that mirrors Baudrillard's anxiety towards a homogenized perspective and society. This anxiety can be witnessed in the popularity of apocalyptic media. The cultural imperialism of the post-Soviet era has not been met with utopian depictions in the media; disaster movies, zombie movies, and several other popular genres attest to the prominence of eschatological fantasy in the cultural imagination. Perhaps the creation of these filmic fantasies acts as a prophylaxis itself against celebrating homogeneity. By keeping the possibility of destruction always at hand, a preparedness for the otherness of disaster is always considered. Baudrillard claims that systems that give rise to viral others are incapable of dealing with them precisely because it is the nature of the system itself that accounts for the existence of such entities. In attempting to deal with the extreme otherness of global catastrophe onscreen, culture can give itself the illusion that it has gained some level of knowledge through its fictional experience. This attempt works to both protect against the virus through biopolitical structures, but also exposes a great threat, both literally and philosophically, should reality threaten to unfurl these fantasies by presenting society with an instance of *actual* otherness, with a real pandemic or catastrophe.

There is a distortion that seems to occur between the diegesis of the film world and our world. In the popular virus narrative, humanity always manages to overcome the

threat of the virus: they (we) always survive. This turns the very real threat of destruction via catastrophe into a fantasy exercise. Re-enacting an attitude that has already been virtually “proven” to be effective (without every actually being attempted) gives the illusion that this phenomenon has been encountered and overcome (even if that encounter was the reading of a fictional text). The scale and qualities of the outbreaks shown in *Outbreak* and *Contagion* are fictional; in these worlds, certain institutions and individuals are authorized to correct the situation and save the day. These actors and their ideologies then come to stand as a virtual inoculation against the threat of epidemic: the problem of outbreak has already been solved on the big screen, so there is the illusion that the offscreen cure is analogous and attainable. Since, as previously mentioned, the process of infection and outbreak is primarily invisible, the work accomplished in visualizing that threat in media becomes the most familiar way to understand this phenomenon. As these depictions are always linked to ideologies, we come to associate a set of beliefs and practices with the possibility of curing the virus. Going back to Baudrillard, perhaps this popular type of understanding constitutes a homogenous and sterilized perspective: the structure that these beliefs are borne from might well be annihilated by the an entity, like the virus, that it pretends mastery over but whose presence is yet to come.

First Paradigm: The Human Body and *Outbreak*

Having outlined the historical contexts from which virus arises, it is now time to examine the two films I have chosen as representative visualizations of virality. *Outbreak* was released by Warner Bros. in 1995, opening at number one in the box office (Natale, “Outbreak's' Success Only Goes So Far”). Although the film does not officially credit

The Hot Zone as its basis, it has been critically attributed as its clear inspiration (Roach 78). What is central to the visual landscape of *Outbreak* from the beginning is the horror that the virus can visit upon the human body. Mary Roach, in her article “Virus the Movie,” mentions two key descriptive moments that capture the film's obsession with the trauma of the infected individual. She first quotes the film, invoking a passage where being infected with Ebola is likened to the violence of an explosive device: “It looks like they—they swallowed a bomb. Livers, kidneys, spleen—all the organs are liquified” (78). Later, she questions the entertainment value of such visceral depictions, “Does Jane Q. Public want to see necrogenic concavities and desquamating skin lesions in Technicolor on a 50-foot screen?” (78) The popularity of the film seems to attest to the fact that people do in fact want to see such images, but the question remains: why? I will now attempt to answer that question, at least partially, by placing *Outbreak* within the historical and philosophical contexts outlined earlier.

This early phase of the outbreak narrative places the experience of infection at its centre. To effectively communicate the horror of infection, the affect of those who consume viral media must be visually modulated through depictions of abject suffering. This is widely accomplished with a strong focus on how viruses effect the human body. The stills below, one from *Outbreak* and one from *Contagion* show the contrast with how media treats the sick body. In *Outbreak*, the viral transformation makes Kevin Spacey's body nightmarish, almost inhuman. Here the sick body is abject in a Kristevan mode: at once something recognizable and identifiable as the character we know in the movie, but also simultaneously something radically beyond human and identifiable. The abject tension between identification, repulsion and fear is how these types of images affect the

viewer. The natural reaction to the telling of the virus narrative in this way is an incitement to avoid such a fate by following the expert advice of cultural institutions, such as those represented by the heroic virologists in the film. This obedience has explicit biopolitical ramifications: by visually affecting the audience, they come to view the real world virus as similar to the cinematic one, and oblige public health edicts so as to break free of the lethal endings that the films show as punishment for breaking cultural codes surrounding health. This biopolitical exercise extends further: complying with these behaviours and attitudes adds another dimension of belonging to the imaginary community. Sharing a conception of the virus, a set of behaviours about how to treat it, and a healthcare apparatus that supports these ideas becomes entangled with social belonging, and can only be made possible through these horrifying images. *Outbreak*, then, replaces the political-ideological divisions of the Cold War with ideologies surrounding health.



Plate 2 : Kevin Spacey in *Outbreak*



Plate 3: Gwyneth Paltrow in *Contagion*

Second Paradigm: The Social Body and *Contagion*

Comparing how infection is presented in *Outbreak* to how it is later shown in *Contagion* is startling: there is an absence of the explicitly abject images that typify the early virus narrative. In the above still from *Contagion*, the only signifier of Gwyneth Paltrow's suffering is her exaggerated expression. If it were not for the medical mise-en-scene, one might not be able to deduce that a virus is causing this panic. Herein lies the major difference between the early virus narrative and its later transformations; the latter replaces the suffering of the human body with a crisis in the social body. Rather than showing the traumatic effects of a virus on a human individual, *Contagion* depicts the widescale social unrest and collapse caused by the virus. Fear is still the invoked affect, but how it is crafted is radically different. What is frightful in *Contagion* and later virus media is the social chaos that it causes, replacing the world as we know it with a different order. Figures of community and belonging play heavily into this narrative; only by being a responsible global citizen can one avert pandemic. This global citizen, however, is

constructed via the health ideology of the Western world. The origin of the virus in *Contagion* is shown to be neglect of basic hygiene (the cook does not wash his hands after dealing with the dead pig), a central part of the public health discourse in the West. The failure of global others to align with the health ideologies of the West creates a system of difference that reifies the need for trenchant borders and exclusive communities.

To further discuss *Contagion*, it will be necessary to provide some more information as to the relationship that human-animal relations play in viral narrative, and how this becomes associated with the global relationships which are the main focus of the later virus narrative. Nicole Shukin, in her book *Animal Capital*, outlines the concept of biomobility:

With biomobility, the 'rapid movement of affect' constituting the spiritualistic currency of telemobility discourse shows its obverse face in the biological threat of zoonosis, or species leaping disease. If telemobility traffics in the promise of a 'painless transmission' of affect through seemingly ethereal global networks, with biomobility the *substance* of virtual communication reappears in the pandemic potential of communicable disease. Biomobility names, in other words, the threat of telecommunications' pathological double, the potential of infectious disease to rapidly travel through the social flesh of a globally connected world. (182)

The idea of biomobility is useful for beginning to think through how the virus narrative revises itself. The discursive association between the animal, the other, and the virus has become a central trope in the virus narrative, as the necessity for graphic images of human suffering becomes de-emphasized. As the globe experienced different kinds of

outbreaks (SARS, Swine Flu), what became central shifted. These viruses did not have the extreme effects on the body nor the lethality that Ebola does, and so different figures needed to operate in their stories to create the fear necessary for biopolitical exercise. This fear operates through an intensification in the depiction of global others and their practices as threatening. Shukin explains how traditional communities are threatened by the modernity which allows for the possibility of pandemic, “those dominant countries, classes, and populations once able to secure relative immunity from the pressure of the biological are suddenly confronted with the fact that their historical immunity may have expired as disease threatens to irrupt out of or exceed those techniques that managed to contain it.” (183) The biopolitical techniques utilized by the early virus narrative cannot effectively guard against how contemporary viruses spread. A public health apparatus can only ensure that populations that fall under the control of that apparatus heed its normative commands. The other always presents a radical difference that is beyond the jurisdiction of this apparatus and is therefore inherently threatening. This loss of control, the inability to affect the foreign other into biopolitical adherence, shifts the focus of virus media. Rather than intense depictions of individual suffering, virus media instead comes to focus on figures of communal difference. This is the central point of evolution in the modern virus narrative: when the infected body of the civilian loses its relevance in a globalized world, the communal body must instead fortify itself against the possibility of the foreign encounter that disrupts biopolitical capability. Thus, our two paradigms: the individual body and the national body.

One of the most outstanding images of cultural difference is the relationship with animals. The link between animals and infection is one of the constant tropes between

early and late virus narrative. The veracity of the link between animals and disease is not something that I wish to dispute, but rather how the infectious animal associates with otherness in the virus narrative. According to Shukin:

After all, pandemic discourse pathologizes those members of the global village who live in 'unhygienic' intimacy with other species and with one another, positioning them as needing to be enlightened about the new sanitary standards of global citizenship that alone hold hope of averting the leap of disease across species lines. (187)

In both *Outbreak* and *Contagion*, the source of the virus is ultimately shown to be an interaction between animals (the monkey in *Outbreak*, the pig and bats in *Contagion*) and humans. In both cases, these interactions are grounded in geographical sites of otherness. This, alongside the notion that it is culturally unsafe practices and proximities that allow for these viruses to emerge in human populations, serves as a major site of discursive alterity. The association between global others and animals serves to animalize and thus posit the Third world as less advanced and knowledgeable than the First world.

Technology and knowledge serve as important differentiators of global relationships; ironically, it is these very technologies which validate the Western health ideologies that also makes possible the transmission of global pathogens. The origin of pandemic lies less in the heart of the dangerous and strange foreign other, but rather in the possibilities that advanced technology opens up for the movement of viruses. It is concern about this movement of biological entities that represent different spaces, cultures, and ideologies in a striated global village that is the focus of the late virus narrative.

The Viral Pharmacy

In Derrida's famous "Plato's Pharmacy" essay, he contemplates the Greek word *pharmakon*, a word meaning both poison and cure. The simultaneity of being that this concept embodies, the *pharmakon* as both the poison and the cure, serves as a very applicable figure for the existence of the virus. The virus is at once an instrument of social regulation, and yet also threatens the very apparatuses that utilize it to maintain biopolitical power. Therefore, the virus must be examined in its duality, in its simultaneity. This form guides the structure of the last two chapters of this thesis; the intensity of the phenomenological experience of the individual with the virus, which is the topic of chapter two, is what allows for the virus and contagion to become useful as an apparatus for biopolitics, as a regulator of the definitions of the social body, which is the topic of the third chapter. The dependency of these forms upon one another is not linear, but rather always already supporting one another. Being-with in society is what introduces the semiotic coding of virality as fearful and opens up the possibility of infection from co-habitation. Likewise, an imaginary community needs to exist before superstructural biopolitics can regulate it. The being of the virus will always be dealt with in its multiplicity. The Foucauldian biopolitical power that is exercised must be examined with regards to the subjectivity that is necessarily crafted through the images that make the exercise of this power possible. This ordered structure must also be examined in relation to how the existence of the virus opens up the possibility of utterly destroying these structures, through the literal death of the community and the transformation and destruction of the subject through the "extreme phenomenon" of infection.

Chapter 2 : The Phenomenology of Infection

“NOTHING SPREADS LIKE FEAR” – Tagline for the film *Contagion*

The first theoretical paradigm of the outbreak narrative that must be elucidated is that of the relationship between the virus and the body of the individual. Undoubtedly, this relationship, as with all relationships involving the virus, belongs to a larger complex. For the purposes of this section, the most important of these interrelationships will be between the virtual ontology of the virus as an object of media portrayal, and the relationship of the phenomenological experience of these media to how this experience operates within a national biopolitical schema. The individual-viral relationship can be seen as being a site of affectual modulation, a personal experience, but an experience that feeds into the authority of the healthcare ideologies of our world. The employment of this form of the virus in media typifies the early Post-Soviet pandemic era.

As I have previously argued, the modern virus narrative can be roughly split into one of two overarching concerns; either with the individual's body or the national body (although never exclusively either). In this first paradigm, which, following Foucault's theory of discipline, I will label the discipline of the infected body, we see depictions of human suffering that instantiate an assumed phenomenological reaction in the viewer. The outcome of this interaction is an alteration of behaviour and perspective that aligns the body with the ideology that underlies these media (i.e., the creation of a subjectivity that is docile to biopolitical control). Virus media of this type consider the outbreak as a

primarily national issue. Although the patient zero or infected animal that begins the outbreak originates abroad, the problem is only addressed in its manifestation in a unified community (in this case, a nation) and focuses on the suffering of the individuals of that community. This manner of storytelling is personal; there is an invested focus on the individuals involved, and the community at risk resembles our own social contexts. This personalization of infection opens the media to several levels of identification in the viewer. Later, contemporary virus media focuses considerably less on the individual and more on the conflict between the fluid, dynamic movement of bodies (and information) and the rigid borders which serve as the psychological containers for communities. Since the health care apparatuses of individual nations struggle to have effective domain beyond their borders, the discipline of the infected body loses its biopolitical purchase. Instead, the media focus changes from forensic problem solving to a discourse that becomes centred on national strategies for dealing with incoming foreign bodies, both human and viral. Of course, this “evolution” in the manner of the virus's depiction is illusory; the instantiation of a truly powerful international health care system would oscillate the narrative form back to techniques of controlling the subject. This modulation between controlling subjects and breaking down the barriers that guard and exclude the other from the dominant ideology serve as the central tension between the exercise of power and the relationship to otherness both on an individual and national level.

This chapter will first outline the phenomenological process at work in the encounter of the viewer and the virus media. This relationship is of utmost importance as it is in the virtual space between eye and screen where subjects sensitive to the narrative idea of the virus are born. This chapter will investigate this relationship via

phenomenology. Primarily, I will draw on the work of film theorist Vivian Sobchack, whose own thought is greatly influenced by Maurice Merleau-Ponty. Other film phenomenologists, such as Steven Shaviro, will also be consulted in explicating the relationship between the spectator and the spectacle that is cinema.

Steven Shaviro, in *The Cinematic Body*, draws attention to the need for an embodied approach to film studies,

the cinematic body is then neither phenomenologically given nor fantasmatically constructed. It stands at the limits of both of these categories and undoes them.

This body is a necessary condition and support of the cinematic process: it makes that process possible, but also continually interrupts it, unlacing its sutures and swallowing up its meanings. Film theory should be less a theory of fantasy (psychoanalytic or otherwise) than a theory of the affects and transformations of the body. (Shaviro 257)

The primacy that Shaviro gives to the experience of the body in the cinematic relationship will be shared by my analysis. This is necessary due to the nature of this paradigm of virus media (i.e. media whose focus is viral outbreak); the focus of this media is on the most atrocious symptoms an infected person can undergo. Its sensationalization of the trauma and suffering of individuals (both real and fictional) marks the virus narrative as one that is always perceived through and with the body; the body is the medium of the story, the substrate which gives it its impact and affectual currency. One important difference between virus media and other horror genres is the modicum of reality that the virus narrative relies upon: since the virus is invisible, it is only able to be depicted through the symptoms of an infected person. Anyone who has

been sick can relate to this experience of infection, and thus there is an element of personal history folded into the experience of virus media. As Shaviro suggests, the relationship between virus media and its spectator falls somewhere between and beyond either strict phenomenology or fantasy. The cinematic is phenomenally encountered, to be sure, but fantasy is necessary to connect (or disconnect) the body of the viewer with the image of the infected and troubled body. That virus media exists and is successful attests to the success of this dense phenomenal/fantastical moment. As these films are considered as horrors, terror and fear must be produced, and the site of this production is either through the imagining of one's self undergoing such a trauma (identification) and/or the desire to avoid every having such an radical experience (disidentification). To further investigate this relationship, I will turn to film phenomenology to better clarify the transformative moment that is the encounter with the imaginary virus.

The Infected Phenomenon

To reiterate succinctly, the paradigm of the first type of biopolitical mobilization of virus media is visually and textually oriented towards the suffering and trauma of the human body. The virus par excellence, whose symptoms are almost always appropriated as the most horrifying in virus media, is Ebola. Arguably, one of the most important moments in the cultural life of Ebola was the publication of Richard Preston's book *The Hot Zone* in 1995. Not only did this best-seller likely introduce many in North America to what once was a rare and obscure virus, but it framed the experience of this virus in the most horrible descriptions possible:

He leaned down until his face was a few inches away from Monet's face...He

pushed the scope into the hole, peering into the instrument. Monet suddenly jerked and thrashed. Monet vomited. The black vomit blew up around the scope and out of Monet's mouth. Black-and-red fluid spewed into the air, showering down over Dr. Musoke. It struck him in the eyes. It splattered over his white coat and down his chest, marking him with strings of red slime dappled with dark flecks. It landed in his mouth. (Preston 26-27)

Preston was not alone in describing the experience of infection through an almost visceral poetry. Another example of this type of description, from Laurie Garrett's *The Coming Plague*:

On September 5 Antoine returned to the mission critically ill. He was vomiting and had acute diarrhea, leaving him so dehydrated that he had 'ghost eyes,' as the missionaries called them: deeply recessed, dark, glazed eyes surrounded by pale, parchmentlike skin stretched tightly over pronounced facial bones. His chest hurt, he had a terrible headache, fevers continued, he was deeply agitated and confused. And he was bleeding. His nose bled, his gums bled, and there was blood in his diarrhea and vomitus. (102)

These descriptions of the infected experience surpass mere symptom description: each (and many more like them beyond these examples) enhances the drama and the horror of these viral moments through subjective descriptions of the body; the "red slime dappled with dark flecks" or "parchmentlike skin" extends the objective basis of the educational/science-oriented aim of these works and makes the experience of infection a subjective affect for the reader of these texts. This style and the horror that it produces contain the origins of what would become the phenomenological experience in virus

films.

The popularity of Preston's book resulted in the production of a film unofficially based on the text: Wolfgang Petersen's *Outbreak* (1995), which will serve as one of our key examples of virus media of this era. Briefly, the plot of the film follows a military virologist, Sam Daniels, who travels to a small town in California, Cedar Creek, which has become infected with "Motaba" virus (a rather transparent attempt to fictionalize Ebola—the photos used of the virus are pictures of Ebola). The town is decimated by the virus, as are Sam's colleagues. Eventually, we learn that a military colonel has decided that the town poses too great a risk to the nation, and plans on destroying it. Sam discovers this, foils the plot, and produces a cure for the virus, resolving the conflict of the story.

There are three key scenes from the film that I will analyse in relation to their phenomenological affectivity. The first is the scene where the virus is spread through a cough at a movie theater. The second is the scene where Major Casey Schuler ruptures his biocontainment suit, opening him to the virus and infection. The final scene that I will analyse is Casey's later suffering from the resultant infection. Although we only see the truly horrific body in the last of these sequences, all three cooperate in contributing to a narrative which finds its completion in the infected body. These other moments become especially important when we consider how they interface with the discourse of public health and biopolitics that underlies these interactions of image, affect and docile subjectivity.

Film Phenomenology and the Virus

Vivian Sobchack's work on the film experience in *The Address of the Eye* and, later, *Carnal Thoughts* will be essential in this section for giving us a framework and a vocabulary for describing the relationship between the body of the film and the body of the spectator. Operating against considering film as a mere visual spectacle that one coolly observes, Sobchack posits a chiasmatic structure of cooperative affect that occurs between the film and the viewer in the film experience,

Experiencing a movie, not ever merely 'seeing' it, my lived body enacts this reversibility in perception and subverts the very notion of *onscreen* and *offscreen* as mutually exclusive sites or subject positions. Indeed, much of the 'pleasure of the text' emerges from this carnal subversion of fixed subject positions, from the body as a 'third' term that both exceeds and yet is within discrete representation.

(*Carnal Thoughts* 66-67)

Sobchack is right to point to the transgressive pleasure produced in the cinematic moment; the cinema takes one's perception beyond one's self, and in introducing this other perspective confronts the perspective of the I/eye with a new vantage. In virus media, this pleasure is inherently coupled to displeasure; the landscape of the virus film is a dystopian space filled with infected bodies and abject material. The source of pleasure, then, can be located in several locations; in the pleasure of transgression itself, in seeing a world that differs from our reality, or perhaps in the knowledge that our world is presently unlike the film's diegesis (i.e. we are not suffering an epidemic). Although the pleasure of imaginary possibilities is not to be discounted, it is the latter relationship, that our world is capable of escaping such a possibility, that is important for describing this moment of virality and *Outbreak*.

The first scene that I would like to examine in *Outbreak* is the one in which the Motaba virus is transmitted in a movie theater in Cedar Creek. Firstly, I would like to quote Sobchack at length to provide a frame with which to analyse the complexity of this scene:

the film experience is a system of communication based on bodily perception as a vehicle of conscious expression. It entails the visible, audible, kinetic aspects of sensible experience to make sense visibly, audibly and haptically. The film experience not only represents and reflects upon the prior direct perceptual experience of the filmmaker by means of the modes and structures of direct and reflective perceptual experience, but also presents the direct and reflective experience of a perceptual and expressive existence as the film. In its presence and activity of perception and expression, the film transcends the filmmaker to constitute and locate its own address, its own perceptual and expressive experience of being and becoming. As well, the film experience includes the perceptive and expressive viewer who must interpret and signify the film as experience, doing so through the very same structures and relations of perception and expression that inform the indirect representational address of the filmmaker and the direct presentational address of the film. (Sobchack *The Address of the Eye* 9)

The complex, embodied relationship between the viewer and the virus film is heightened in this scene in *Outbreak*, as it takes place at the cinema. This *mise-en-scene* is important not merely for its self-reflexive value, but as a moment which explicitly joins infection with the cinematic experience. The site of infection in this scene parallels the space of the

viewer of the film; even if not in a proper theater, the watcher of *Outbreak* finds herself in an analogous position to the filmgoers in Cedar Creek. The boisterousness of the crowds in the theater is hyperbolic, but not lacking symbolic value; it is through the laughter at and enjoyment of the film within the film that the virus spreads. After the infected character coughs, viral particles float through the air and we see them enter an anonymous mouth, open and waiting in the moment of an exaggerated laugh. This moment, silently, subtly, reveals the relationship of the ideology of the virus narrative: that the cinematic experience and its narrative pleasure creates an openness which exposes one to the possibility of (ideological) infection and transformation. The viewers of *Outbreak*, in their enjoyment of the film as entertainment, mirror this relationship; while the consumption of and entanglement with this ideologically charged text may be pleasurable, the complex situation of the viewer to the film and the film maker masks the potential for disciplinary education to be accomplished through the horror of this popular commodity. Thus, cinematic experience becomes exchangeable with the moment of viral infection in the film. Although *Outbreak* makes this moment of pleasure and infection explicit, it is always implicit in this type of virus media; the phenomenological experience of reading about or seeing a body being radically transformed overlaps with an imaginary moment where the self's body is used to perform an imaginary act of infection,

Reciprocating the figurally literal representations of bodies and worldly things in the cinema, the spectator's lived body in the film experience engages in a form of *sensual catachresis*. That is, it fills in the gap in its sensual grasp of the figural world onscreen by turning back on itself to reciprocally (albeit not sufficiently)

‘flesh it out’ into literally physicalized sense. (*Carnal Thoughts* 82)

This moment, this semi-sensible experience, challenges the viewer and requires a reaction, either a pleasure or a displeasure at this possibility. Sobchack points to a collapsing of boundaries between film maker, audience and the embodied situation in her description. In *Outbreak*, this moment of collapse transcends author/reader relationships; the text of *Outbreak* is not wholly original—it is both generic and an adaptation. Thus, the history and culture of the virus narrative (with all of its political dimensions) enters the shared space of the cinematic experience and incorporates itself into the shared perceptual realm of the viewer-film relationship. In Sobchack’s later work, she pushes her theory further by developing the concept of the cinesthetic subject (a portmanteau of synesthesia and cinema), central to which is the notion that the body can be affected by the cinematic without the intervention of conscious interpretation. Whereas this exceptional scene in *Outbreak* plays with the techniques that define the *modus operandi* of virus media, the other scenes I wish to discuss have more in common with the gut reaction, the disgust and the fear of the body as it is assailed on screen.

To analyse my second sequence, where Major Casey Schuler’s containment suit becomes breached because of his inattentiveness due to fatigue, I would like to further discuss the cinesthetic subject and how she relates to film. Sobchack defines the cinesthetic subject thusly, “In sum, the cinesthetic subject names the film viewer (and, for that matter, the filmmaker) who, through an embodied vision in-formed by the knowledge of other senses, ‘makes sense’ of what it is to ‘see’ a movie—both ‘in the flesh’ and as it ‘matters.’” (*Carnal Thoughts* 70-71) In the cinesthetic subject, then, there is a clash of two components; an embodied experience of watching and the projected

experience of adopting the perspective of the film as one's own, in-corporating one's body into the body of the film. Despite the theoretical separation of these two experiences, all reception and interpretation still must occur within the lived body of the spectator,

I want... to consider the ambivalence and confusion of our sense at movies having both a 'real' (or literal) sensual experience and an 'as-if-real' (or figural) sensual experience. I also want to argue that this ambivalence has a precise phenomenological structure that is grounded in the nonhierarchical *reciprocity* and figure-ground *reversibility* of 'having sense' and 'making sense'—meaning thus constituted as both a *carnal matter* and a *conscious meaning* that emerge *simultaneously* (if in various ratios) from the *single system of flesh and consciousness that is the lived body*. (Sobchack *Carnal Thoughts* 73)

In the ambivalent confusion of the cinematic experience, the spectator must make sense of the film, either consciously or carnally, with the body. Although Sobchack is speaking strictly about film, these ideas can be brought to bear on several types of media: print news, novels, video games, etc. can all immerse the body of the reader (although with an array of different effects). For the moment, I would like to use Sobchack strictly for interpreting film. The scene of Casey's breach lacks dialogue; the experience is nothing but noise, music, and image. In the first shot, Casey, wearing a biosafety suit, examines something under a microscope. As he is working, we see him nodding off to sleep; he is exhausted from working on the outbreak. As he walks away from his microscope, he fails to notice that his oxygen line has caught on his workbench. He walks away and his suit tears open, causing a moment of panic and shock. (Plate 4)

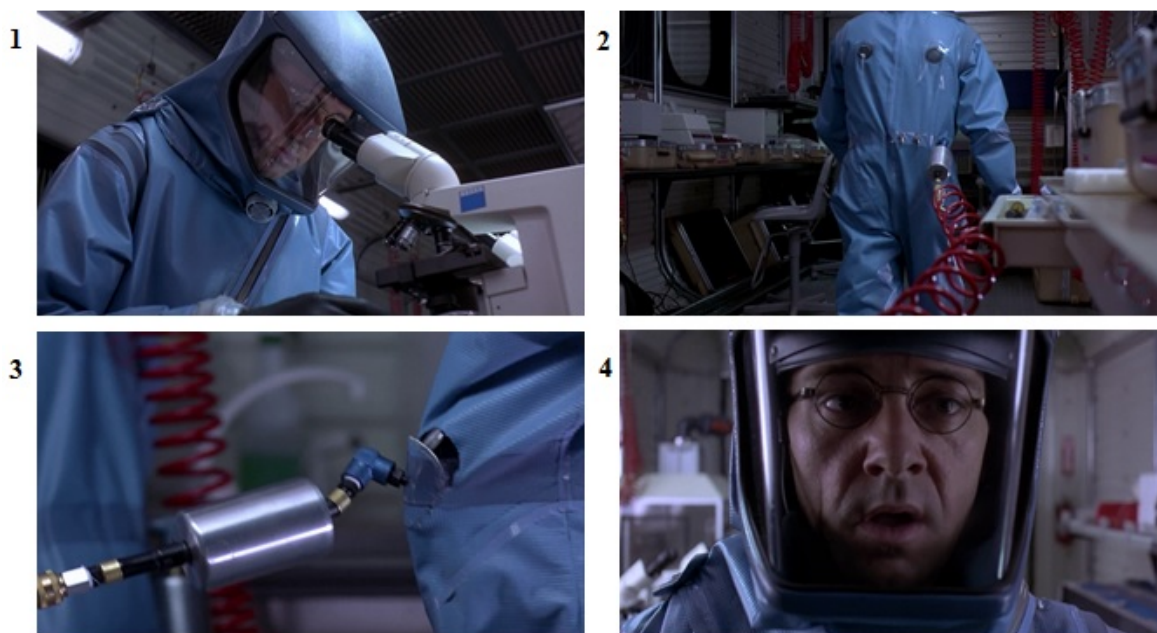


Plate 4: Stills from *Outbreak*: Casey's moment of infection

The fatigue we see in Casey starts the scene off with a foregrounding of the body; this scene is explicitly about the interplay of the conscious I and the body. The neglect of Casey's consciousness to his material surroundings result in a moment which *necessitates a caring for/about the body*: the moment of infection. The crescendo of the score at the moment of rupture highlights this importance, aurally mimics the condition of Casey's perception. Silent, tired, and then overwhelming music, an awakening of the body, and of the possibility that the body has been made vulnerable. The viewer is likewise coaxed into this awakening, forced as a cinesthetic subject to cross the chiasma into an ersatz self understanding of this moment. Moments like this, compounded by the formal intensity that cinema can employ, can come to overpower our comfort as a viewing subject:

The cinesthetic subject feels his or her literal body as only one side of *an irreducible and dynamic relational structure of reversibility and reciprocity* that has as its other side the figural objects of bodily provocation on the screen. This relational structure can, of course, be refused or broken—and, indeed, it often is when the sensual experience becomes too intense or unpleasurable. However, leaving the theater because one has become literally sickened or covering one's eyes is hardly ever the outcome of a thought. It is a reflexive, protective action that attests to the literal body's reciprocal and reversible relation to the figures on the screen, to its sense of actual investment in a dense, albeit also diffuse, experience that is carnally as well as consciously meaningful (*Carnal Thoughts* 79)

Even if carnal reaction occurs reflectively, we must make sense of that reaction consciously. In the viewer's position, likely watching the film on a screen in a theater or at home, do they not share in the seeming barrier (immunity) that Casey is offered by his suit? For the spectator, the screen (or the page) serves as the suit between the horror and reality; the spectator-to-art relationship provides the immunity which allows distance between diegesis and embodied space. The moment of rupture, then, affronts the body of the viewer, bursts through the immunity of the screen and forces the spectator to incorporate the fear and panic of the (now doomed) characters. This sequence with Casey is hardly unique in this sense; later in the film, the same moment occurs when Dr. Roberta Keough accidentally punctures herself with a dirty needle while treating Casey. This moment is in fact a central affective site in all virus media of this era; in the earlier excerpt from *The Hot Zone*, do we not cringe when we are told that the bloody vomit

“landed in his mouth”? This dramatic moment of infection, then, serves as a key moment in the specific operation of virus narrative. The spectator must commensurate their carnal reaction with their understanding of the film as art. In this space between the disgusted reaction of the body and the conscious necessity to interpret and understand the narrative, a space of possibility is opened, and it is within this space of (ir)reconciliation that the virus media makes its more complex ideological, biopolitical manoeuvres.

The final scene that I would like to discuss is the later suffering of Casey Schuler. Before he dies (offscreen), Casey is shown lying in a hospital bed, obviously suffering extensive haemorrhaging from his infection (Plate 5).



Plate 5: Still from *Outbreak*: Casey's infected body

Although Sobchack insists on the chiasmic structure for the embodied film experience, this scene perhaps troubles the possibilities of the rigid distinction necessary for a chiasma. Here, Shaviro's understanding of the destabilizing potential for cinema is useful:

Film, however, ignores such dialectics: it brings me compulsively, convulsively face to face with an Otherness that I can neither incorporate nor expel. It stimulates and affects my own body, even as it abolishes the distances between my own and other bodies. Boundaries and outlines dissolve; representation gives way to a violently affective, more-than-immediate, and nonconceptualizable contact. Cinema allows me and forces me to see what I can not assimilate or grasp. It assaults the eye and ear, it touches and it wounds. It foregrounds the body, apart from the comforting representations that I use to keep it at a distance. (259-260)

This moment, the visual realization of the worst possible outcome on the virus narrative, is a moment of excessive failure. The identification that we felt with Casey in the prior scene, the moment of infection, is obliterated in the ghastly image of his transformed face. Rather than being presented with a space in which I can imagine a replacement of myself with the film body and fill this imaginary non/presence with the my own semi-sensible recreation, this image disallows that kind of projection. The experience of extreme haemorrhage and virus is beyond the wildest exaggerations of my own phenomenal experiences, too other to even conjure the same anxious gut reaction as the moment of infection. Rather than a virtual continuity between the touch of the film body and the experience of my own body, the grossly infected body destroys the possibility for

that contact. This moment represents a transformation of identification into a moment of pity and fear: a catharsis, but one that is only experienced by once again erecting the immunitary barrier of the screen between my body and the film's. The transformation to repulsion and sympathy (rather than empathy) is of great import. This conclusion to the infected body serves as a phenomenological cautionary tale—there is a limit to comprehensible film experience, and once that limit is surpassed, identification becomes spectacle once again. I have included Casey's dialogue in my stills from the film, as is revelatory of this shift towards repulsion. Casey's fear, his being scared is mirrored in the audience, but it is not the same fear; Casey fears for his life, is scared of dying from the virus. What we are scared of is being like Casey. Thus, when he requests the touch, the continuity that we once felt with him, the virtual access to his diegetic phenomenological experience has already been dissolved. We are distinctly opposite him, and moreover, his touch is sick, disgusting: a touch of evil. Of course, this destruction of the ability to identify with a major character in the narrative as well as the disjuncture of a comfortable embodied film experience plays an important role in the ideological dimension of this narrative. The point of loss instructs us that there is a beyond of the imaginary experience, a beyond that is inaccessible (in the theater at least) and that we further do not want to access; this desire to avoid a certain fate is an important desire, and one that becomes central as the motivation for the biopolitical subject crafted by the virus narrative.

The Discipline of the Infected Body

I have at multiple points argued that the phenomenal relationship between

spectator and virus media is biopolitical. It is now time to elucidate that concept in light of this specific relationship, and how this ideological artform manifests itself alongside a concrete biopolitical apparatus. In *The Cinematic Body*, Shaviro claims that embodied affect is a site of political contestation,

Film is a vivid medium, and it is important to talk about how it arouses corporeal reactions of desire and fear, pleasure and disgust, fascination and shame... I also argue that such affective experiences directly and urgently involve a politics.

Power works in the depths and on the surfaces of the body, and not just in the disembodied realm of 'representation' or of 'discourse.' It is in the flesh that first of all, far more than on some level of supposed ideological reflection, that the political is personal, and the personal political. (viii)

In considering how the body of the spectator becomes politicized through the act of watching, it will be necessary to marry the phenomenology of the film experience with a thinking of how the political, and more specifically, the biopolitical, cooperates with this experience. For this task, we will need to look at Michel Foucault's notions of discipline, biopolitics and the docile body as underlying the political motivations of the informational/entertainment paradigms of virus media.

Accepting Sobchack's theories surrounding the film experience, we can begin to envision how the film experience with the virus and infection is able to feedback into biopolitics and subjectivity. In *Discipline and Punish*, Michel Foucault describes what he labels a docile body, one that has been prepared to willingly accept what is requested of it, "a body is docile that may be subjected, used, transformed and improved." (136) Although Foucault is discussing the development of the prison in the 18th century, his

description of the type of subjectivity sought in that institution is analogous with the docility that is viewed as optimal from the perspective of public healthcare.

Foucault elaborates the notion of the docile body with the concept of discipline, the manner by which the body becomes docile:

in every society, the body was in the grip of very strict powers, which imposed on it constraints, prohibitions or obligations. However, there were several new things in these techniques. To begin with, there was the scale of the control; it was a question not of treating the body, *en masse*, 'wholesale', as if it were an indissociable unity, but of working it 'retail', individually; of exercising upon it a subtle coercion, of obtaining holds upon it at the level of the mechanism itself—movements, gestures, attitudes, rapidity; an infinitesimal power over the body... These methods, which made possible the meticulous control of the operations of the body, which assured the constant subjection of its forces and imposed upon them a relation of docility-utility, might be called 'disciplines'. (*Discipline and Punish* 136-137)

We can see both aspects of discipline at work in the virus narrative. The relationship between individual behaviour and the collective welfare is always epitomized in the index case of the virus. In *Outbreak*, it is the illegal importation of an infected monkey that starts the infection. In *Contagion*, the chef in Macau fails to wash his hands after dealing with a pig's corpse. In the outbreak narrative, the individual is always a facet in either the greater spreading or containment of virus; thus, to achieve a large scale control over a community, the erratic nature of the individual must first be tempered. This is especially the case in a neo-liberal culture that upholds the tenets of individual choice and

freedom; somehow, the individual must choose to forfeit some of that “freedom” in order to maintain a base level of social homeostasis.

In the virus narrative, the ‘subtle coercion’ necessary for discipline happens in the space of the cinema. In certain moments of a cinematic experience, the embodied spectator becomes radically and phenomenologically continuous with the text; in the creation of a semi-sensible experience of the film’s perspective, the viewer sees and feels as the film does. Although this continuity is an imaginary machination, it is an experience nonetheless. Thus, when Casey falls asleep, when we feel Casey fall asleep, when we draw on our own historical, embodied, experience of that sensation, we are also projecting ourselves into him, into the world we which are receiving through the film. Even Casey’s mistake is identifiable—but, because of the contrivance of the film’s narrative, this mistake has lethal implications. Rather than be allowed to continue in identification, we are shunted away by the horror of the infected body. There is a pedagogical aspect to this narrative; by being shown Casey’s mistakes, we can avoid them ourselves. Now, when dealing with the virus, we know that any laxity in our rigour is equivalent to death; in our world, this may translate into the ever-present beseechment to wash one’s hands to avoid infection, to maintain proper distance from the sick. Even in the state of illness, one is effected by this narrative; going in public places when ill, or failing to cover one’s mouth while coughing is intended to be a site of cultural guilt. These type of behaviours have a direct connection to the virus narrative, but these effects and affectations ripple outwards and caress the borders of other ideologies. Casey’s fatigue is also a moment of infidelity to his work; the implication is that one must always be dutiful in their job for society to maintain function. This is also the case for the chef in

Contagion. These kind of subtle, behavioural aspects that issue forth from the experience of the virus narrative constitute a discipline in the proper sense of Foucault's definition: the "movements, gestures, attitudes" that are modulated and attained are coordinated according to the maxims of public health epistemology. Thus, the phenomenal encounter with virus media enacts its own discipline, one that radiates from the intensity of its bodily experience: the discipline of the infected body.

According to Foucault, the internalization of these imperatives produces the docile body:

What was then being formed was a policy of coercions that act upon the body, a calculated manipulation of its elements, its gestures, its behaviour. The human body was entering a machinery of power that explores it, breaks it down and rearranges it. A 'political anatomy', which was also a 'mechanics of power', was being born; it defined how one may have a hold over others' bodies, not only so that they may do what one wishes, but so that they may operate as one wishes, with the techniques, the speed and the efficiency that one determines. Thus discipline produces subjected and practised bodies, 'docile' bodies. (*Discipline and Punish* 138)

For Foucault, an important facet of discipline is not only that a subject acts as one wishes, but that it *operates* as one wishes. What does he mean here? What is the difference between acting and operating? Acting, by one aspect of its definition, refers to the idea of a performance, of the conscious production to appear as something other than oneself. The operation is integral, not only metaphysically, but also in the notion of a surgical operation. Thus, to attain a truly docile body, power must alter how the subject conceives

of themselves, alter their interior structure, and, perhaps, alter *how they experience themselves carnally*. The body undergoes an operation; it experiences shock and awe, experiences these things through the body and through consciousness. The semi-sensible experiences that the body creates for itself in its lack of direct access to the film's diegesis then serves as the tool for auto-operation; through our own imaginations, modulated by exterior phenomenon, we arrive at a novel ontology. That this new ground is inflected by the ideological messages of the narrative that effected it into being demonstrates the ability of virus media to serve as a tool for creating docile bodies, and in a larger frame, operating for biopolitics.

The Discipline Required for Biopolitics

To begin to talk about biopolitics, I would like to turn to two sources: Foucault himself, and Catherine Malabou. In Malabou's understanding of Foucault, biopolitics is constituted by both a concern for individual discipline and a larger concern for the society, "The intersection of the discipline of the body and the control of the population is constitutive of what Foucault calls, for the first time in 1974, 'biopolitics.'" (Malabou, "The King's Two (Biopolitical) Bodies" 99) For Foucault, the biopolitical is differentiated from discipline; while discipline operates on the body of the individual, biopolitics addresses a different facet of self, one that belongs to a greater term,

Unlike discipline, which is addressed to bodies, the new nondisciplinary power is applied not to man-as-body but to the living man, to man-as-living-being; ultimately, if you like, to man-as-species. To be more specific, I would say that discipline tries to rule a multiplicity of men to the extent that their multiplicity can

and must be dissolved into individual bodies that can be kept under surveillance, trained, used, and, if need be, punished. And that the new technology that is being established is addressed to a multiplicity of men, not to the extent that they are nothing more than their individual bodies, but to the extent that they form, on the contrary, a global mass that is affected by overall processes characteristic of birth, death, production, illness and so on. So after a first seizure of power over the body in an individualizing mode, we have a second seizure of power that is not individualizing but, if you like, massifying, that is directed not at man-as-body but at man-as-species. After the anatomo-politics of the human body established in the course of the eighteenth century, we have, at the end of that century, the emergence of something that is no longer an anatomo-politics of the human body, but what I would call a 'biopolitics' of the human race. (*Society Must Be Defended* 243)

The interplay between these two terms, discipline and biopolitics, is necessary for understanding the relation of the individual's cinematic experience to political concerns about vital elements of a population. In the virus narrative, individuals' behaviour and public health operate in tandem; certain activities open the possibility of infection for the individual and communal body, while others reduce this possibility. To maintain a power over life, biopolitics must master aspects of that which threatens life—the virus being a key example. Thus, discipline over the individual is simultaneously a biopolitical imperative for the mass species of man; the body must behave, be monitored and be healthy to ensure that it remains a homogenous, indistinguishable piece of the biopolitical mass. Infection individualizes; the mass becomes differentiated, separated, a matter to be

disciplined. To achieve the biopolitical, discipline must be mastered. One of the methods for improving adherence to this discipline is the affect of the film experience. There is, undoubtedly, pleasure to be found in the cinematic experience, which people voluntarily elect to consume for entertainment or artistic satisfaction. The willing submission to the affective economics of the virus narrative realises discipline through an embodied reaction; even if we understand the film to be a fiction, we can still imagine our bodies undergoing similar traumas. This imaginary moment is necessarily embodied; we can feel the itch at the back of our throats, think we might feel a fever coming on... The narrative of these films always teaches us about transmission and prevention. That the preventative measures utilized in the films are the same as our world (cautious hand-washing, quarantine and distance from the infected, etc.) supports the notion that the behaviours that the heroic virus fighters, representing the institutions of public healthcare or the military, should be heeded. And why not? These measures are materially effective at stanching outbreak, so adherence is logical. What is necessary to remember is the contested, imaginary space where this disciplinary/biopolitical adherence is naturalized, and to be aware of the difference between ignorant docility and informed practice.

Conclusion

I would like to end this chapter by returning to the epigraph, the tagline for the film *Contagion* which tells us that “nothing spreads like fear.” This tagline itself makes explicit the critique of this chapter: what is important in the virus narrative is not the material reality of struggle against biological pathogen, but rather the affectual engagement between the spectator and the media which opens the space for biopolitical

manipulation. Almost verging on parody, the “nothing spreads like fear” shows the viral nature of virus media itself; the virtual phenomenon of infection is disseminated via media like *Outbreak*, reproducing itself through its constant re-creation of the fear of infection, transforming the body and subjectivity into a docility anticipated by power. Although seemingly banal, this generic media relies on an implication that the failure of its characters (those who becomes infected) is likely to be mirrored in our world by those who lack care. This threat, that the failed behaviours of the fictional characters can become our own, is accomplished by a certain level of realism sought between the diegesis of virus media and our own; the worlds of these media are posited as a possibility for our own. When certain behaviours lead to disastrous consequences, the embodied spectator, aware of the body horror of the infected phenomenon, can choose to abide rather than transgress. In the logic of this media, abidance parallels biopolitical public health practice, and refusal means a conscious decision towards infection. That this media conjures a truly visceral horror through its depiction of infection selects a bias toward adherence, towards the notion that metanarrative apparatuses such as government and healthcare objectively know best, and that thinking outside of submission is not only revolutionary, but that which is the possibility of death itself.

Chapter 3 : Community and Immunity

Being With the Virus

“The use of disease to imagine as well as regulate communities powerfully enacts the most anxious dimensions of national relatedness. The inextricability of disease and national belonging shapes the experiences of both; disease assumes a political significance, while national belonging becomes nothing less than a matter of health.”
Priscilla Wald, *Contagious*

Introduction

In *The New Wounded*, Catherine Malabou outlines a system which points to a biological, materialist source for phenomenon that are traditionally considered metaphysically: “I continue to defend the thesis that the only valid philosophical path today lies in the elaboration of a new materialism that would precisely refuse to envisage the least separation, not only between the brain and thought but also between the brain and the unconscious.” (211-212) Taking inspiration from Malabou’s project, one wonders whether not only the individual consciousness and body has this structure, but perhaps the social, political body too. Moving beyond the paradigm of national biopolitics and the effect of virus media on the individual, this chapter will instead investigate the relationship between the metaphysical concept of a community and the material, biological facts that may be the constitutive ground of this community: contagion and immunity. The tension between the imaginary community and the biological community is played out through a central figure in today’s world, and that is the virus. Contemporary virus media seems particularly interested in foregrounding the concerns that the being of the virus has on national bodies, and with how these bodies form and

organize around the virus. The notion of community will be interrogated both through theoretical concepts of community and how these concepts work with popular depictions of communities in their dealing with viruses. Theoretically, the concepts of community and immunity posited by Roberto Esposito will be juxtaposed against the idea of herd immunity, and the concept of autoimmunity in the writings of Jacques Derrida and Jean Baudrillard. The films *Contagion* (2011) and *Antiviral* (2012) will be used as concrete examples of how these theories play out in fictional understandings of community, and I will also investigate the current West African Ebola epidemic as a further example.

This cacophony of media and theory serves to illustrate the mutable figure of the virus in contemporary discourse. Is immunity the constitutive moment of community? Or is immunity rather an exception from community? What remains unthought across this body of work is the surprising conclusion that the virus is dualistic in nature, and it is through its complex duality that it is able to fluidly play an essential role in all of these structures. This multiplicity of the virus's identity is attested to in a variety of ways: its tenuous ontology as a being that is considered both living and non-living by empirical science; the interior/exterior position it plays in theories of community; and, finally, both the fear and pleasure that is elicited through the virus as both abject but also an actor in our entertainment media. These complicated indistinctions allow us to look at the virus as an example of Julia Kristeva's concept of the abject, "It is thus not lack of cleanliness or health that causes abjection but what disturbs identity, system, order. What does not respect borders, positions, rules. The in-between, the ambiguous, the composite" (4). Approaching the virus through the structure of abjection opens a possible interpretation that better describes how this concept is utilized in our world, and I will draw on

Kristeva's thought to address the complexity of the virus. One of the major tensions underlying the conflicting viewpoints of the virus in these accounts recall Malabou's interest in the relationship between materiality and metaphysics: are the virus, infection and immunity merely a physical phenomenon? Or is there is a complex interplay between these physical beings and the social attitudes that they forge?

The type of community that I will primarily address in this chapter is the nation. For this purpose, I will begin with Benedict Anderson's famous definition of the nation as an imaginary community, as several facets of his description come into play when discussing the virus. Anderson:

I propose the following definition of the nation: it is an imagined political community – and imagined as both inherently limited and sovereign. It is *imagined* because the members of even the smallest nation will never know most of their fellow-members, meet them, or even hear of them, yet in the minds of each lives the image of their communion... The nation is imagined as *limited* because even the largest of them, encompassing perhaps a billion living human beings, has finite, if elastic, boundaries, beyond which lie other nations. No nation imagines itself coterminous with mankind... Finally, it is imagined as a *community*, because, regardless of the actual inequality and exploitation that may prevail in each, the nation is always conceived as a deep, horizontal comradeship. Ultimately it is this fraternity that makes it possible, over the past two centuries, for so many millions of people, not so much to kill, as willingly to die for such limited imaginings. (5-7)

This notion, that the nation is a construct, an imaginary thing which its citizens are both constituted by and constitute, appears metaphysical. As Anderson posits, there is no shared material relationship between the members of a nation; the fraternity is rather an abstraction, a relationship based on an immaterial idea of absent belonging and invisible borders, but nonetheless a very potent abstraction. To try and explicate the complexities of nationalism is beyond the scope of this essay, but for our purposes what is important is the perspective that the community is *imaginary* in nature. What is also important is the connection between mortality and the nation. In this excerpt, Anderson mentions the willingness of a citizen to die for their nation, but I would like to approach the opposite construction in looking at community and immunity: what does it mean for a citizen to live for her country? What happens when a nation (along with its populace and health care apparatus) is confronted with an extranational agent (either a virus or a potentially infected foreign national)? It is in this site of contestation, in the threat of contagion, that the explicit structures of belonging and exclusion are revealed, and where we can start to illuminate the transparent ties that bind the dream of the imaginary community.

Models of Immunity

Investigating the relationship between community and immunity, we encounter two opposing models. Esposito posits first the community as a shared duty between its members, with immunity being an exception from that duty. By contrast, Priscilla Wald's work on the cultural history of contagion claims that immunity is hypothesized as the source of community: the material reality of community is shaped by immunity. Members of the community who are not immune die, and thus those who survive a

pathogenic event share a common immunity that binds them. In this model, the basis of community is hypothesized as emerging from a material, biological circumstance. The distinction between these two models can be seen as arising from two very different perspectives: Esposito explicates the community in abstracted, theoretical terms, without relying on material considerations for his theories. The theory of biological co-immunity as formative of community acknowledges that community must be the product of material circumstance, but lacks theoretical elaboration as to how these circumstances come to transform into metaphysical actors in the constitution of the idea of community.

Priscilla Wald, in *Contagious*, drawing on the work of historian William McNeill, explains how the concepts of herd immunity and germ theory provide an account of how communities are shaped:

Herd immunity is an epidemiological concept that focuses on the biology of a population rather than of an individual or disease... Communicable disease, in these accounts, shaped populations and civilizations. Infections sailed along trade routes, marched with soldiers, and migrated with refugees from oppression or with farmers in search of fertile land, and they blazed through populations with devastating effects. But gradually these diseases burned out. Populations, like individuals, adjust to disease. 'When a given disease returned at intervals of a decade or so,' McNeill explains, following a Darwinian logic, 'only those who had survived exposure to that particular infection could have children. This quickly created human populations with heightened resistances': plagues sweeping through populations etched communal affiliations in the genetic resistances of their survivors... Through such adjustments, communities formed

that could effectively be defined by their shared immunities. For germ theorists, in other words, these diseases offer material evidence of routinized human interactions as well as of established settlements (evidence, that is, of civilization), and their spread constitutes populations with herd immunity. Those who do not perish in the epidemic might have a genetic predisposition to resist the disease, which they pass on to their offspring. Or they develop immunities from having survived it that prevent its recurrence. (48-49)

We can see in the concept of the herd immunity a structure of negative community formation. Rather than the sharing of duty, as Esposito imagines, community here is defined by those who are immune, the remainder, survivors. While community seems to necessarily include the notion of exclusion (a border; a not-us), the exclusion here is not chosen based on ideology or aesthetics, but rather is forced by the circumstances of biology and ecology. It is not my contention to say that Wald believes that all community is solely the product of infection and epidemic, but I would rather like to suggest that this is but one example of how the formation of community can be considered beyond shared beliefs and ideas. Further, this biological-immune paradigm for community can be used as a model for considering other circumstances under which community may arise: it would be hard to deny that material facts and events (hunger, disaster, fertility, etc.) would not have been formative in the ordering of some bodies with others. It could also be argued that encounters with these communally formative phenomena produced the circumstances necessary for retroactively philosophizing an abstract notion of community.

The second model I will investigate is that of Roberto Esposito, who has published widely on community and immunity. For Esposito, the community is formed through a social bond,

If the members of the *communitas* are bound by the same law, by the same duty, or gift to give (the meanings of *munus*), *immunis* is he or she who is exempt or exonerated from these. *Immunis* is he or she who has no obligations toward the other and can therefore conserve his or her own essence in tact as a subject and owner of himself of herself. (39)

Immunity, in this scenario, is an exception from community, a way to be contrary to the shared *munus*. For Esposito, therefore, community and immunity are metaphysical constructs: the communal concept is the binding force of both community and that which makes identity possible, immunity. Since community is that which is totally communal, and thus not proper to any individual member of a community, immunity is that which grants individuality as an exception to the homogeneity of the community, “one need only to open a dictionary to learn that *common* is the exact contrary to *one’s own*: common is what is *not* one’s own, or what is unable to be appropriated by someone. It is what belongs to all or at least to many, and it therefore refers not to the same but to the other” (48). Immunity is an exceptional state, but one still posed in relation to the *munus*—necessarily in opposition to its inherent lack of the individual. Immunity from the community is thus what makes individuality possible for Esposito: the community is the negative ground against which the individual is borne via her immunity from the adifferentiation of community. In thinking community, Esposito finds modern democracy to be anti-communal: “modern democracy speaks a language that is opposed to that of

community insofar as it always has introjected into it an immunitary imperative” (39). Thus Esposito’s notion of the community is one that is highly theoretical and speculative: if contemporary nation states operate against his notion of community, then what is community for Esposito? Does the total realization of community entail the absolute destruction of all identities that are not the shared, singular, homogenous identity of the community? And, if so, then from where is this community identity posited (or, what is the negative against which it comes into being)? Esposito seems to leave these very difficult questions unanswered, leaving a space for the injection of materialist notions of community formation.

Concrete examples would tell us that both models are functional. Take the contemporary debate on vaccination in North America as an example of Wald’s position: there is both a social and institutional backlash against those people who refuse to vaccinate themselves or their children, a reaction that borders on exclusion from the community (I will talk about this in depth later). These stories validate biological immunity as being a basis for the community narrative that binds people together. On the other hand, concepts such as diplomatic or legal immunity reinforce Esposito’s view that immunity is an escape or exception from the social. To address this confusion, we must look further into that agent where these distinctions fail, the virus. The virus as biological agent hardly requires elaboration: it is the cause of illness, and the negative of immunity—it is that which one becomes immune from. But the virus also has immunity; it is that which is nothing but immunity, in Esposito’s terms, that which is not bound by any community rules and boundaries. Obversely, and paradoxically, the virus is also proper to community itself: nation states operate public healthcare apparatuses, and the

treatment and policing of viruses is considered the problem of the community more so than any one member. We return then to the central problem of the virus, its polyvalency, its necessary role in seemingly opposed structures. Before trying to elaborate further the complexity of the virus through concrete media examples, I feel it is necessary to look at the theorization that has occurred at the level above the concept of immunity: autoimmunity.

Autoimmunity

Both Jacques Derrida and Jean Baudrillard indicate a crisis in the thinking of community and immunity. For these thinkers, the immunitary model threatens itself specifically through its own apparatuses of immunization, its own homeostatic control, its immune system, its autoimmunity. I would first like to look at Jean Baudrillard's realisation of this concept, before comparing it with Derrida's.

In Baudrillard's early thought on the virus and immunity, structural autoimmunity works in a manner analogous to its biological counterpart: the defensive system of a body becomes so efficient and developed that it attacks itself. Baudrillard posits that this signals a deadly interior condition that arises from an increasingly homogenous system,

At an early stage the evil genie of otherness takes the form of accident, breakdown, failure. Only later does the viral, epidemic form make its appearance: a virulence that ravages the entire system, and against which the system is defenceless precisely because its very integrity paradoxically engenders this alteration. (63)

For Baudrillard, the emergence of virality is not part of the constitution of a social order, but rather the operative of its destruction. In Baudrillard's structure of the concept of virality, a society constantly practicing prophylaxis by eliminating otherness opens itself up to the threat of virality. Thus, the logic of the virus for Baudrillard is a reaction against a sterilized, homogenous state: "Under the reign of the virus you are destroyed by your own antibodies. This is the leukaemia of an organism devouring its own defences, precisely because all threat, all adversity has disappeared. Total prophylaxis is evil." (64)

Rather than the virus working symbolically as an agent of otherness (or, more precisely, abjection, but more on that later), the virus and autoimmunity is a reaction to the elimination of otherness, a next level otherness beyond sublation which only seems capable of total destruction. Baudrillard's theory conflates virality with autoimmunity, implying that virality arises from the interior rather than the exterior, and it is this manoeuvre which differentiates Baudrillard's thinking from others.

Contrary to this, Derrida imagines social autoimmunity as that which opens the possibility of transformation through an encounter with otherness:

Community as *com-mon auto-immunity*: no community <is possible> that would not cultivate its own auto-immunity, a principle of sacrificial self-destruction ruining the principle of self-protection (that of maintaining its self-integrity intact), and this in view of some sort of invisible and spectral sur-vival. This self-contesting attestation keeps the auto-immune community alive, which is to say, open to something other and more than itself: the other, the future, death, freedom, the coming or the love of the other, the space and time of a spectralizing messianicity beyond all messianism. (87)

Rather than being the signifier that knells the social body's end, in the Derridian model autoimmunity is necessary for the vitality of a community. While for Baudrillard the autoimmune is that extreme otherness that a body opens itself to through homogenization (i.e., the effacement of otherness), for Derrida the autoimmune is the structure that disallows a community from falling into this trap of deadly calcification. The autoimmune moment, the necessary weakness in the defense system (a weakness that this system creates for itself) opens the space and possibility of transformation, of shifting the system to include or exclude anew. Thus, for Derrida, this function would seem to be essential to the functioning of a dynamic community, or at the least a community or body that does not seek the total destruction of alterity.

Once again we return to the two oppositional structures necessary in talking about the virus: fluidity and rigidity. Or, perhaps from a different perspective, interior and exterior (the seemingly organized vs. the wild without). That these two concepts contradict one another demonstrates the complexity of the concept of the virus once again. Dualistically, the virus seemingly has the capacity to play both of these roles, depending on one's relative structural position. The commonality shared between the functions of both of these models is the virus's capability to disturb rigid structures, which it seemingly does with its own structural fluidity. Baudrillard assumes a hyperbolically rigid structure (can we imagine a state of total prophylaxis?) which is immediately collapsed by the reintroduction of otherness, or rather, becomes other to itself (autoimmune) and collapses. Derrida, working from a more moderate perspective, envisages the community and the body as a more dynamic construct, and points to the

virus and autoimmunity as offering a teleological possibility for the social organization that has current regime.

Derrida's vision of autoimmunity corresponds well with one of Esposito's speculative claims about community and immunity:

What if we tried to rethink community beginning by completing the process of immunization? After all, a world without an outside—that is, a world completely immunized—is by definition without an inside. At its most successful, immunization may also be propelled to immunize itself from itself in order to reopen the breach, or the time, of community. (Esposito 46)

Does this autoimmune moment open the system up to a new inclusion that threatens the rigid national body, with its inscribed definition of its own being (i.e., constitutional documents, etc.) to a new state where the immune system is rendered vestigial by fact that what was once other becomes inside? And while this model for inclusion and transformation works on a theoretical, metaphysical level, how does it interface with the hypothesis of a material, biological grounds for community? We could look to the concept of vaccination, of letting in a form of contagion into the system so that its threat may be learned and remembered as a prototype, and while that works on the level of the human body, how would its translation into the social body appear?

What if, instead, we consider with more import the material circumstances which govern the limits of existent communities? The theoretical discussion of community and immunity in Esposito (and elsewhere) is posited as an us-them dichotomy: there is an inside and an outside to the community. Not only does the reality of international identity contest such a simplistic model (there appear to be varying degrees of removal from

identification with one nation's imagined identity), but it fails to consider the role that geographical boundaries, historical contact, etc. have in formation and maintenance of this boundary. Further, many communities extend beyond the border of one nation, and overlapping communal identifications (i.e., one can be a Canadian citizen while being a member of a diaspora, a church, a hobby community, etc.) make placing the line between the *munus* and the *immunus* all the more complicated. Esposito's theory seems to rely on the existence of a singular grounding notion of community, but how we are to imagine this ur-community's manifestation in the world is more troubled. Turning back to herd immunity, it gives us a sense of why the multiplicity of communities has formed as such, as well as a governing logic that sustains this notion of community (they share an immunological profile that grants them similar protection as well as shared biological vulnerability from those non-community members who may be lethally infectious). Herd immunity, along with other material circumstances (the geographical features which separate communities) give rise to an understanding of community that places these material circumstances as formative before an immaterial concept like the *munus* can arise.

Also worth questioning is the liberating rhetoric that both Derrida and Esposito give the notion of autoimmunity. For both, the autoimmune is the space of system self-failure that allows for the inclusion of otherness and thus for a transformation. Yet, what is excluded in their discussions, and this is a problem, is how this autoimmune inclusion differs from assimilation, a homogenizing assimilation. If, by at least Esposito's logic, the community is a singular shared identity which stands contrary to individuality and serves as its negative moment, then what becomes part of the community merely transforms it

by broadening the non-individual pseudo-identity of the community: “What is community if not a kind of progressive interiorization of exteriority? If community is our ‘outside’, the outside-of-us, immunization is what brings us back within ourselves by severing all contact with the outside” (41). Do the fluid, inclusive receptacles opened by autoimmunity become sites of loss through their processing of otherness into “community”? If this is the case, then perhaps we have to consider pejoratively this function of autoimmunity as recapitulating a colonialist logic. If this type of logic is the one underlying these philosophies (and possibly our world), then maybe the chaos of the virus hides within itself the ability to open the national body to otherness, otherness that it can interiorize, and thus render as part of its own identity.

Contagion, Ebola and Anti-vaccination

Having outlined the complex and unresolved relationship between community, immunity, and the virus, I will now turn to how viruses are treated in contemporary media in order to clarify and expound how these notions play out beyond the pages of theoretical texts, in how national bodies represent their relationship to viruses, both real and virtual.

Observing the history of narrative surrounding infection (and the virus in particular), there is a noticeable surge of interest in the topic at the end of the Cold War. Earlier, I argued that the changing geopolitical landscape, alongside technological improvements in transportation and communication, coincident with the emergence of high profile lethal viruses such as HIV and Ebola (or, rather, the popularization of this once obscure virus) contributed to the creation of a potent genre of virus media that has

since been utilized as a tool for biopolitical control. I have also argued that there has been a major evolution in virus media since this initial surge; further changes to the global landscaped altered our concerns about the virus from communities ideologically policing the bodies of its citizens to nations concerned with improving the impermeability of their national bodies to the foreign other. The story of this transformation can be traced by comparing the treatment of the Ebola virus in news media from the 1990s and today.

Initial accounts of Ebola focus heavily on the symptomatic features of the virus: vivid descriptions of suffering serve as the cautionary signifier for the threat that the virus poses to the modern world. Take, for example this example from *Time*:

his internal organs were hemorrhaging so badly that life was quickly draining from his body. Soon after Kimfumu died, the five medical workers who treated him, including an Italian nun who assisted in the operations, began coming down with their own symptoms: headache and fever, diarrhea, massive bleeding from every body orifice and, within a few days, death. (Lemonick 62)

Or this excerpt from Richard Preston's *The Hot Zone*:

He becomes dizzy and utterly weak, and his spine goes limp and nerveless and he loses all sense of balance. The room is turning around and around. He is going into shock. He leans over, head on his knees, and brings up an incredible quantity of blood from his stomach and spills it onto the floor with a gasping groan. He loses consciousness and pitches forward on the floor. The only sound is a choking in his throat as he continues to vomit blood and black matter while unconscious. Then comes a sound like a bedsheet being torn in half, which is the sound of his

bowels opening and venting blood from the anus. The blood is mixed with intestinal lining. He has sloughed his gut. (23-24)

If we are to use our models of immunity and community to interpret this representation of the virus, we should first of all see this is a moment of exclusion in both. For Esposito, the focus on what concerns the individual is an exemption from that which belongs to the community. Perhaps what can be located as the source of fear here is the point where infection might transcend its status of immunity and becomes a communal trait: if and when the virus becomes proper to the community itself and not just to a specific member. The horror of this becoming-proper can be seen as belonging to the more recent realizations of virus in media. For the model of herd immunity, infection is equivalent to exclusion as it is the moment of failure of immunity. Thus, the image of the infected carries the connotation of transgression and danger, as this depicts the failure of both the individual's immune system, and, in extension, the larger system of immunity that underlies the community. For this biological model, these moments of infection are also the sites of communal revision: every new pathogen or biological event transforms the community by preserving or destroying its members. The threat of epidemic therefore challenges both the ideological system of the community (or the community's concept of what it is), and the configuration of material bodies that constitute the community.

Looking at Steven Soderberg's 2011 film *Contagion*, we can see that contemporary media has become more sensitive to the effects of the virus on notions of community. Compared to *Outbreak*, both the scope and narrative style of *Contagion* envision a more complicated relationship between the virus and the community. *Outbreak* is concerned primarily with contemplating the internal state of the community;

the international aspects are minor and the interrelationships between communities are hardly addressed. This is in stark contrast to *Contagion*, where the interrelationships between communities and the viruses destabilizing power come to the fore. *Contagion*'s narrative is considerably more disjointed and diffuse: we are treated to several elliptical stories that are joined only by the common presence of the virus and the problems that it presents. Unlike *Outbreak*, the focus on human suffering is minimal. Whereas *Outbreak* chooses to depict the tragedy and horror of viral death with hyperbolic visual symptoms, *Contagion* is much more subdued, presenting the infected and the dead with almost no disfigurement. For *Contagion* the suffering of the individual is secondary; although the encounter between a person and a virus may be traumatic, what is much more horrifying is the large scale impact that the proliferation of these encounters can have on the structure of communities. Thus the primary difference between *Contagion* and *Outbreak* is one of scale. *Outbreak* and media of that era tend to care about the immediate site of the virus, the "hot zone," and less on the speculative consequences that a full scale pandemic would have on our world. *Contagion* is very careful to specify the stakes of this pandemic. As the virus spreads around the globe, every city that it reaches is named with overlaid text, and the population given. The fictional MEV virus of the film presents itself as an affront to communities everywhere, and emphasizes the necessary coordination between different organizations to accomplish its defeat. Although seemingly open to the notion of a coordinated global effort, and thus some semblance of a global community, upon closer inspection the film is still constrained by national limits. Although several stories take place outside of America, almost all of the important work

being done on the virus is done by Americans, and the social breakdown of America is the only one that the film chooses to depict.

If *Contagion* represents a contemporary, popular thinking of community, immunity and virality, then how does it complicate or support the models that we have been working with? In the key turning point of the film, a virologist discovers a vaccine for the virus. At this point in the story, the regular structures of American society (consumerism, work, socializing, policing etc.) have been suspended and the characters are shown living fearfully isolated in their homes, under what is implied to be some sort of quarantine (who polices this? the community themselves?). The quantities of vaccine needed to immunize the populous are too vast to produce quickly, so a lottery is established for determining who will receive the vaccine over its staggered inoculation campaign. Those who have received the vaccine are given a bracelet with a barcode, a barcode that is scanned and which allows re-entry into public spaces. In a moment that will be important for us, one of the characters (Mitch Emhoff, played by Matt Damon), who has been proven to be immune, uses his immunity bracelet to enter a shopping mall, where a single department store has been reopened. This is the moment that signifies the return of normalcy and the reestablishment of American ideology. In Esposito's thought, immunity is that which exempts one from community. Yet, in this film this idea is not so simple. While his biological immunity allows Mitch the exemption from quarantine, allows him to pass the limits that the community has imposed upon itself, his immunity moment takes him back into another moment of community, right into the symbolic heart of American consumerism: the shopping mall. This paradoxical immunity as community poses a poignant question for Esposito's model: is immunity truly an exemption from

community, or just a return or arrival to a differentiated space within the idea of community? Although Eposito's thought implies that community is homogenous (i.e., not individual), perhaps it is more accurate to consider community as improper, but with heterogeneity and dynamic possibilities within that non-individual notion.

The biological theory of immunity and community seems to describe this moment of the film more accurately. The breakdown of the community coincides with the breakdown of its immunity; the apparatuses of control can no longer be exercised as biological safety, the most basic necessity of the community, is threatened. Thus, the institutional forms of being-with fall away and the characters retreat into their homes and adopt survivalist perspectives. It is only through the re-establishment of immunity that community starts to re-emerge: once the biological safety of the social encounter is ensured, Mitch can go back to the mall and his daughter can celebrate prom. It is community-as-immunity that serves as the more fundamental structure to the more abstract behaviours and ideologies that follow it, and this is the greatness in the film: that it dares show that the entire concept of America, the entire imaginary community, can quickly collapse if the material circumstances which allow it to exist modulate.

Returning to Ebola, and specifically the ongoing (2014-current) West African outbreak, we can see that the focus in media representation attests to the concerns of community over that of the individual. Newspaper articles covering the outbreak focus on several problems perceived to be central to the epidemic: the insufficient healthcare system and culture of West Africa which impedes its solution (De Vries, "Unsafe Burials Perpetuate Ebola in Sierra Leone"); lackluster international aid (Westcott, "Doctors Without Borders Slams Slow International Response to Ebola"); and, finally, the

preparations and quarantines put in place in countries outside of the hot zone (Gollom, “Ebola outbreak: How prepared are Canadian hospitals?”). All of these foci concern communities, and primarily intercommunal interaction. Gone are the vivid descriptions of hemorrhage, the suffering of the ill. Instead, we are treated to what amounts to a narrative of borders, difference and transgression. In this narrative, both the metaphysical and biological models of community/immunity come into play. On the side of Esposito’s thought, there is a conflict in deciding what the limit of community means today: should the international community transcend national borders and remain permeable to the otherness represented by the African nations? In Canada, many decried the decision to restrict to travel based on having been from or going to the affected nations. This outcry was based on the conflict of two ideas of community: does the community open itself up to include otherness, to extend the *munus* to nations beyond ours? Or, do we remain a discrete community by limiting the borders and keeping the otherness other? Obviously, Canada chose to maintain itself as itself and intensify border security, but what might be its motivations? Is it that it did not want to challenge its idea of community, to open itself to revision by extending its duty to include the body of the other? Although this philosophical notion is logical, it is hard to say whether the choice issues from this logic. The more obvious motivation was the safety of the interior of the nation, keeping the virus outside. This once again returns us to the biological-immunological model, where what is dangerous and to be avoided is that which threatens the biological health and continuity of the community. Both the metaphysical and biological models collude in one of the central stories of the outbreak. Several news articles detailed how the treatment of the dead according to African custom was actually spreading the disease and helping to

sustain the outbreak. In this moment the threat of otherness is both cultural and biological. In this narrative, the culture of West Africa is partially responsible for its continued strife, and thus its cultural otherness manifests a threat to the biological community. What is toxic and viral is therefore not only the virus itself, but the culture that does not adhere to Western standards of corpse disposal and respect of science. Thus the decision to exclude is easy; not only is the otherness of that community seemingly incommensurable with our own, but the facts that make it incommensurable also make the community immunologically vulnerable. Latent within this perspective seems to be a fear manifesting as veiled racism, which is worth noting as a less visible motivation that is present within the virus narrative.

Perhaps the most obvious site of immunity/community contestation today lies in the debate about vaccination. This is perhaps also the moment where the biological, material aspects of immunity come to the fore as being primary. The debate, briefly, is as follows: should people be free to choose to not be vaccinated, even if this increases the risk of infection for themselves and others in the community? It is in this debate where the two opposing models are placed in direct confrontation. Either the metaphysical ideal of liberty is more essential to community, and it is permissible to allow the forfeiture of biological immunity to maintain that notion, or we recognise that being part of a community means an adherence to the *munus*, a responsibility to the biological ground of community, and thus those who willingly forfeit immunity are beyond the gift of freedom, outside of belonging to the community. Although this debate is hardly settled, the biological community seems to be winning out: there are examples of unvaccinated people being systematically excluded from being-with,

In the United States, some doctors have begun closing their practices to unvaccinated children. They rightly don't want to put other patients — especially the immunocompromised and babies who are too young to be vaccinated — in harm's way. Ontario should take the same approach, whether parents seek exemptions for religious or moral grounds. Religious freedom should not include the freedom to expose others to potentially deadly disease. (Urback)

Proponents of the anti-vaccination side are labelled as unscientific and thus flawed, other—a depiction that they share with the Africans. Thus it becomes clear that the material aspects of community may hold sway over their immaterial counterparts: the community does not consciously choose autoimmunity, does not willingly let its ideals unravel the physical circumstances that produce it, and cannot let itself destroy itself. Of course, when dealing with the virus, the distinction between self and other is rarely simple, and I would now like to turn to the concept of the abject to further theorize virality.

The Virus as Abject

In her essay *The Powers of Horror*, Julia Kristeva elaborates the concept of the abject as a repugnant and foundational structuring position that troubles the distinction between self and other. In its simplest reduction, the thinking of contagion and immunity is a thinking of the relationship between inside and outside, and of the threat that the outside poses to the illusion of interiority. Individually, the virus challenges our phenomenological understanding of the world, both our experience of it (i.e., the strange intoxication of being infected), and how media that sensationalizes the otherness of

infection alters our perspectives and behaviours as social beings. As I have already demonstrated, the position of the virus for the communal body is highly complicated. Operating as both the invasive actor of exteriority, as well as serving an interior position in the structuring of community, the concept of the virus eludes the simplicity of an interior/exterior binary. Considering the abject as a more complex understanding of the constitution of interiority and exteriority, and of the virus as an example of the abject that makes this interiority possible (not only for the individual, but also for the national, social body), we can see that the ambiguity, or rather, the polyvalency of the concept of the virus is crucial to both its function as a concept, and to our world, which requires such a concept to sustain it. Here, Kristeva elaborates this tripartite structure of subject/abject/object:

These bodily fluids, this defilement, this shit are what life withstands, hardly and with difficulty, on the part of death. There, I am at the border of my condition as a living being. My body extricates itself, as being alive, from that border. Such wastes drop so that I might live, until, from loss to loss, nothing remains in me and my entire body falls beyond the limit—*cadere*, cadaver. If dung signifies the other side of the border, the place where I am not and which permits me to be, the corpse, the most sickening of wastes, is a border that has encroached upon everything. It is no longer I who expel, 'I' is expelled. The border has become an object. (Kristeva 3-4)

This importance of the border state is necessary for thinking the virus. Rather than being a wholly exterior phenomenon, and lacking the inclusion to become proper to a body (individual or national), the virus likewise occupies a position on the border—a position

that makes interiority and exteriority possible. As abject, the virus is that which we cannot exclude in thinking about ourselves, but which we can include without incurring a radical transformation (or destruction) of self. Without the virus (or things similarly threatening), the logic of the biological community becomes illogic, its structuring principles shattered. Even if a body must conceptualise the virus as an exterior and threat in order to sustain the illusion of interiority, then the virus is constitutive not only of otherness, but as the negative form through which identity is posited. How the body considers the virus (and contagion), then, is necessarily fractious and contradictory: we realise the concept of the virus as something exterior, something to be defended against. Yet, that concept and our defensive reaction to it structures the ground of our social being, gives form to both the biological and metaphysical concepts of community. Without its circular logic, always already outside, and by dint of that, always already inside, the virus would fail to be such a flexible concept, would be unable to support the structures that surrounds its idea. Without abjection, the virus could merely be considered as something exterior, something to be defeated, sublated or effaced. That this idea seems impossible attests to the virus's troubled interiority. I would now like to look at one more piece of media that treats the virus, not as an exterior threat, but as an interior pleasure.

Antiviral

Perhaps the most interesting text to confront the complexity of immunity and community is Brandon Cronenberg's 2012 film *Antiviral*. Unlike the other films mentioned, *Antiviral* is deeply concerned with a more complicated understanding of the virus in social relations, a fictional understanding that elucidates the abject functions of

the virus. In the world of the film, viruses have become imbricated into an economy of celebrity fetish: people go to special clinics and elect to be infected with viruses drawn from popular figures, ostensibly to share in their phenomenal experience of the illness, a “biological communion... from her body to your body, from her cells to your cells.” The virus thus becomes the moment of community in this world: the virus is no longer the experience of the individual, but the elected experience of the community, that which draws individuals together. This fiction transgresses all the models of community mentioned in this chapter: in undertaking a biologically identical experience, the members of the community are not only held together by their imagination, but they also share a material basis for community, albeit a materiality that has been inflected by the desires of the community. For herd immunity, this displacement of shared immunity for a shared virality is troublesome: although the community still has a shared material base, that base is no longer invested in defense, but some sort of quasi-religious transcendence via the virus (I will talk more about this momentarily). Esposito’s model is once again confronted with the problem of immunity retreating into community: the individual agents of this film willingly choose to become infected, forfeit their individuality through a biological becoming-other. This is the question that always haunts Esposito’s thought: is not every moment of individuality, every immunity, just a learned behaviour that issues from community in the first place? The notion that identity is constructed is hardly new, but Esposito seems to cling to some notion of the individual that is not a creation of the social.

Antiviral is unique in its melding of virus imagery; like the first post-Soviet wave of virus media, it indulges in grotesque and hyperbolic imagery of the infected body.

Unlike those texts, however, the horror of these moments is replaced by their pleasure and transcendental experience towards community. Thus it becomes doubly horrifying, abject; the character's bodies are rendered disgusting by the viruses that infect them, enter into what is considered repulsive to our world. However, in the world of the film this same experience is seen as intimate and beautiful: that these characters take pleasure in infection places the virus on the border to us. Instead of pure exteriority, the virus becomes a possibility for interiority, a new interiority that extends beyond the limits of the self and includes all who share in the experience of the virus. Identity and community become one and the same through the virus. This overall concern with community aligns the film thematically with the virus media of the 21st century; that it does not avoid depicting the community as a visceral and material experience shows a different perspective than the nationalist paradigms of the other films mentioned.

In *Antiviral*, it is through the virus that a more material philosophy of the community is imagined and actualized. Near the beginning of the film, we are introduced to the character of Arvid, a butcher and black market virus dealer. The product of his butcher shop, however, is a wholly unique and abject (for the viewer, at least) product: steaks made from the cloned cells of celebrity's muscles. In the fan culture of the film, the population literally consumes their celebrity idols by eating their flesh. When the protagonist, Syd, questions why this practice is not considered cannibalism, Arvid tells him that society does not locate "self in the material," but rather holds a "religious idea" of selfhood (implying that how the body is conceived of is via a dualism between matter and spirit). Throughout the course of the film, we can see that the virological culture is

pressing against that metaphysical notion, seeking a new materialism that is not unlike Malabou's, but one that is grounded via infection as community.

The climax of the film is its most abject moment, and also its most powerful commentary on virality and community. Throughout the film, the primary celebrity that is adored is a character named Hannah Geist. Over the course of the film, we learn that she has been infected with a lethal engineered virus. The protagonist, Syd, is also infected with this virus. At the film's climax we learn that Syd has bartered Hannah's body to receive a cure for the virus. At first this seems like a betrayal of the celebrity whom Syd has idealized since the beginning of the film, but as this revelatory sequence goes on, we learn that Hannah's body has been repurposed as an ecosystem for virality. In a sales pitch, the president of the company who now own Hannah's body explains:

From the perspective of the virus, the human being is irrelevant. What matters is the system that allows it to function. Skin cells, nerve cells, the right home for the right disease. Within our afterlife capsule the system that is Hannah Geist's body has been perpetuated. Even expanded beyond what existed in her lifetime. Make no mistake, however, this is not some glorified cell steak. Everything inside this housing is either part of the original body, or has been grown directly from it, as a result of our patented cell garden technology.

This conclusion offers a challenging virality in several aspects. Not only has the liberal humanist subject been willingly sacrificed to explore virality as ontology (Hannah's body becomes the system for the virus), but this once human site now becomes the ground ("cell garden") from which a new community can arise. This new community seems to imagine a posthuman symbiosis between the human body and the virus that requires it,

and offers some utopian promise of a new idea of community yet to be realised. Beyond the speculative nature of this film, what is most important is the new set of ideas that it gives us for considering the material aspects of community. The fetishization and willing interiorization of the virus gives us an unsettling approach to community, one that troubles the structure of the abject and points to a new permeability and flexibility in the rigid boundaries that designate interior “self” and exterior “contagion.”



Plate 6: Still from *Antiviral*: Hannah's body become cell garden

The utopianism of *Antiviral* is tempered by its capitalist dimensions. The shared viral experience has been monetized in the film, and ostensibly operates under capitalist logic. Although the speculative moment at the film's conclusion perhaps offers a glimpse at a transgressive new way to imagine the world, most of the film is concerned with the market of viral exchange. In fact, besides the theme of virus and community, capitalist culture has the largest presence in the film. What is the meaning of this? Not having time

enough to fully explore this idea, I merely wish to posit that there may be a co-constitutive relationship between our concept of the virus and capitalism. In some way, the social organization of our world makes the virus, not as a material thing, but as the polyvalent concept, necessary and possible. *Antiviral* needs to maintain a capitalist system in order to have the virus make sense as a facet of community. All other aspects of our world may fall away, but the virus and capitalism must remain.

Conclusion

In this chapter I have set out to accomplish two things: first, to demonstrate that community cannot be thought without taking into consideration the material circumstances which allow it to be in the first place. Secondly, I wished to demonstrate that how we think of the virus today has shifted to a framework that is concerned with notions of community. For a moment in history, viruses seemed to be thought of as the horrific experience of an individual. These moments of horror worked in a feedback loop to craft docile citizens who understood the stakes of infection and thus behaved according to the communal rules, the public health care edicts, and thus operated in a biopolitical frame. In the contemporary world, this frame is broken; the fluidity and rapidity of travel make it impossible to believe in a semblance of control over the people inside of a nation. Although the old imaginary community still exists, it is always in direct material contact, sharing the same space, with people who are not members of that community and who are not under the influence of national health care apparatuses. This is the limit and failure of national biopolitics; the system cannot guarantee prophylaxis when rogue bodies permeate its material space. Thus, the virus narrative transitions to a new locus,

where the permeability of these borders becomes the focus, alongside communal inclusion and exclusion. For the sake of this chapter, I used the concepts of herd immunity in Wald and the theories of Esposito as two examples of general ways of considering the virus, immunity and community: as metaphysical constructs or the products of material circumstances. These are hardly the only theories of community, but in placing these two examples in conflict surrounding examples of cultural thought about immunity and virality, I have attempted to elucidate the necessity of considering the material conditions of community as primary. This introjection of materialism into metaphysical concepts is especially necessary when dealing with thought surrounding the virus, as this concept seems to represent one of the abject borders that give form the social body as we know it.

Conclusion

As this thesis began with a quote from Derrida, it seems fitting to close it with another:

The virus is in part a parasite that destroys, that introduces disorder into communication. Even from the biological standpoint, this is what happens with a virus; it derails a mechanism of the communicational type, its coding and decoding. On the other hand, it is something that is neither living nor nonliving; the virus is not a microbe. And if you follow these two threads, that of a parasite which disrupts destination from the communicative point of view – disrupting writing, inscription, and the coding and decoding of inscription – and which on the other hand is neither alive nor dead, you have the matrix of all that I have done since I began writing. (Derrida in Brunette and Willis 12)

This assertion of Derrida's, that the virus is that which disrupts, theoretically holds to an extent. Biologically, the virus does disrupt the normal homeostasis of the cell; but it is not pure disruption. Rather, the virus commandeers structures of the cell to produce more virus; in a sense, it takes control of the system's possibility for communication and uses it for its own ends (reproduction). It is therefore a replacement. This facet of the virus, being able to act as a language, is what will concern my closing remarks.

In the end, the virus is nothing more than a strand of DNA or RNA, a code, a biochemical syntax. The ramifications of the virus's material simplicity bear deeper interpretation; if the virus is truly one of the most threatening phenomena in our world,

then what does it mean that it resembles language itself? This analogy between language and virus is one that has been played out in a number of texts (*Pontypool* (2009), Neal Stephenson's *Snow Crash*, the literature of William S. Burroughs), but the philosophical stakes of such an analogy remain unclear. Perhaps, in light of our discussion on community, immunity and the virus, we can point to an abject moment in the notion of a truly destructive language. If, as Judith Butler claims (*Bodies That Matter* 2), the materiality of bodies is indissociable from the social matrices (and thus language) that governs them, then maybe the virus is a horrifying moment of the uncanny. Something that resembles language, that which gives us our form, comes back to us. The virus's form is imperceptible, but it is able to interface with our biological language, our cells and genes, in a way beyond the control of the individual, but still operating in the material entity that gives rise to that very individual. This bifurcation of the self into its cognitive linguistic system (identity, consciousness, etc.) is continuous, coexistent with and dependent upon the biological system, which has its own language, but a language that is not directly accessible to consciousness (i.e. our understanding of it is always mediated). In the moment of infection, we thus become other to ourselves, become the harbor for some clandestine code that evades our mastery. This moment of horror extends to ontology: in this moment, the material of our being proves to us that we are not masters of language and being, but rather always subjected, always subjects of language, symbolic systems that create and destroy meaning. Thus, communities are perhaps right to imbue the notion of the virus with a fearful reverence—whether consciously or unconsciously, this figure works as both a signifier of something threateningly other, but yet may play a role in our internal logic.

That the virus resembles the basic texture of our conscious being, language, presents a threat beyond biological infection. The logic of the virus, as that which is similar enough to invade and coopt, but different enough to be considered separate, provokes the possibility of ontological rupture through (mis)identification with this other-self. Baudrillard describes the closeness of viruses and humanity:

One cannot say that the microbe is other to man: the two are never opposed in their essential natures, and they do not confront one another in any real sense; they are linked together, however, and this interlinking is, as it were, predestined: no one (neither men nor bacilli) can imagine things being any other way. Nor is there a clear line of demarcation, because this link is reproduced over and over *ad infinitum*. So perhaps after all we shall have to conclude that otherness is located here: that the absolute Other is indeed the microbe in its radical non-humanness—a being of which we know nothing, and which cannot even be deemed *different* from us. The microbe as the hidden form which alters everything—and with which no negotiation or reconciliation is possible. (Baudrillard, *The Transparency of Evil*, 162-163)

This supports the function that underlies cultural understanding of the virus, as something that provides an eternal, external threat, but a threat that seems necessary to define borders and constitute communities and bodies. Although Baudrillard ascribes an inaccessibility to the possibility that virality holds, I do not feel that this is the case: it is rather that there are different and conflicting registers which make understanding the virus as a concrete entity necessarily impossible. The border between human and virus

becomes structurally unclear under scrutiny, and I would like to point towards a new concept for understanding the operation of the virus's necessary structural ambiguity.

The virus is one amongst a set of operating signifiers in our world that I contend are "ambiguous signifiers". I would like to take a moment to discuss this concept. The ambiguity of an ambiguous signifier lies not in a problem of semantic understanding, but rather in its position within the larger cultural-linguistic system. The definition of a virus is relatively clear—it has a definite, material form and a defining set of characteristics. What is exceptional about the virus is how this thing is able to transgress limits and occupy opposed positions simultaneously. Ambiguous signifiers can be seen as necessary moments of obscurity that bring clarity and structure to other organizations: without the chaotic incoherence that the virus represents, the exterior threat that adumbrates community (i.e. its moment of negativity) would be lost. (Relatively) static concepts lack the dynamism to introduce the incoherence necessary for the system to ground its own coherence: the virus is only one example of several analogous concepts that circulate in our world and media (others being terrorism, drugs, extremism etc.). Institutions grapple with these threatening ideas, and, in turn, this constitutive threat becomes actualized as a rationale or reason for an intensification of discipline and observation. The notion that these types of concepts are the things that make other things reasonable or rational is the moment of falter; the plasticity of these concepts evades specificity, and thus their use within a rational system demonstrates the artificiality of that system. Rather than serving as the excuse or motivation, the ambiguous signifier, through its very ambiguity, harbours the potential for creating a novel understanding, for pressing against the rigid concepts and opening onto something new. In their interpretation of Derrida, Maria-Daniella Dick

and Julian Wolfreys point to the possibility for the concept of the virus to exceed current structures,

Given that the drive of the corpus, the Derridean virology, is to move beyond the oppositional forces of life and death that contain within their conceptualization and opposition the whole of metaphysics, that the virus is 'neither living nor nonliving' situates it not outside but beyond life and death. The system contains its own deconstruction in that, exceeding the twin oppositions of living or nonliving, it is itself beyond its structuration. (308)

Although I cautiously agree with the optimism of Dick and Wolfreys, this assertion violates a Derridean fundamental: is there a beyond structuration? An “outside text”? Would not the virus rather, in its becoming beyond, or in its exceeding of current structures, rather institute a new set of structures that grant it (as well as the other terms that cooperate in its constitution) a new ontology, a new conception and thinking of the virus? If the virus holds any possibility as a concept useful in realizing a different cultural structure, it is through this contestation between rigid concepts and institutions and the impossibility of making an ambiguous signifier play nicely with that rigid manner of signification. Any idea as to what new structures could be borne out of this conflict would be conjecture. What I have attempted here is merely a more thorough way of thinking through the concept of the virus, and provided a space for a thinking of the possibility that virality might give.

Bibliography

- Anderson, Benedict. *Imagined Communities*. Revised Edition. London and New York: Verso, 2006. Print.
- Antiviral*. Dir. Brandon Cronenberg. Alliance Films, 2012. Film.
- Baudrillard, Jean. *The Transparency of Evil: Essays on Extreme Phenomenon*. Trans. James Benedict. London and New York: Verso, 1993. Print.
- Brunette, Peter and David Wills. "The Spatial Arts: An Interview with Jacques Derrida". *Deconstruction and the Visual Arts: Art, Media, Architecture*. Ed. Peter Brunette and David Wills. Cambridge: Cambridge University Press, 1994. Print.
- Butler, Judith. *Bodies That Matter*. New York and London: Routledge, 1993. Print.
- Contagion*. Dir. Steven Soderbergh. Warner Bros. Pictures, 2011. Film.
- De Vries, Nina. "Unsafe Burials Perpetuate Ebola in Sierra Leone." *Voice of America* 25 March 2015. Web
- Dick, Maria-Daniella and Julian Wolfreys. *The Derrida Wordbook*. Edinburgh: Edinburgh University Press, 2013. Print
- Derrida, Jacques. *Acts of Religion*. Ed. and Trans. Gil Anidjar. New York and London: Routledge, 2002. Print.
- Derrida, Jacques and Michael Israel. "The Rhetoric of Drugs: An Interview." *Differences* 5.1 (1993): 1. Print.
- Esposito, Roberto. *Terms of the Political: Community, Immunity, Biopolitics*. Trans. Rhiannon Noel Welch. New York: Fordham University Press, 2013. Print.
- Foucault, Michel. *Discipline and Punish: The Birth of the Prison*. Trans. Alan Sheridan.

- New York: Vintage Books, 1991. Print.
- . "*Society Must Be Defended*". Trans. David Macey. Ed. Mauro Bertani and Alessandro Fontana. New York: Picador, 2003. Print.
- Garrett, Laurie. *The Coming Plague*. New York: Penguin Books, 1995. Print.
- Gollom, Mark. "Ebola outbreak: How prepared are Canadian hospitals?" *CBC News* 15 October 2014. Web.
- Kristeva, Julia. *The Powers of Horror: An Essay on Abjection*. Trans. Leon S. Roudiez. New York: Columbia University Press, 1982. Print.
- Laszlo, Sonia. "Medicine and military alone will not save world." *The Toronto Star* 01 September 2014. Web.
- Lemonick, Michael D. "Return to the Hot Zone." *Time* 22 May 1995: 62-63. Print.
- Malabou, Catherine. *The New Wounded: From Neurosis to Brain Damage*. Trans. Steven Miller. New York: Fordham University Press, 2012. Print.
- . "The King's Two (Biopolitical) Bodies." *Representations* 127.1 (Summer 2014): 98-106. Print.
- Marx, Karl and Friedrich Engels. *The Marx-Engels Reader*. 2nd Ed. Ed. Robert C. Tucker. New York and London: W.W. Norton & Company, 1978. Print.
- "metaphor, n." *OED Online*. Oxford University Press, June 2015. Web. 14 August 2015.
- Natale, Richard. "'Outbreak's' Success Only Goes So Far: Movies: Thriller leads the weekend box office with an estimated \$13 million, but it's a steep drop to 'Man' in second." *Los Angeles Times* 13 March 1995. Web. 13 September 2014.
- Ostherr, Kirsten. *Cinematic Prophylaxis: Globalization and Contagion in the Discourse of World Health*. Durham and London: Duke University Press, 2005. Print.

- Ostherr, Kirsten. "Invisible Invaders: The Global Body in Public Health Films." *Cultural Sutures: Medicine and Media*. Ed. Lester D. Friedman. Durham and London: Duke University Press, 2004. 299-314. Print.
- Otis, Laura. *Networking: Communicating with Bodies and Machines in the Nineteenth Century*. Ann Arbor: The University of Michigan Press, 2001. Print.
- Outbreak*. Dir. Wolfgang Petersen. Warner Bros, 1995. Film.
- Preston, Richard. *The Hot Zone*. New York: Anchor Books, 1995. Print.
- Roach, Mary. "Virus the Movie". *Health* 9.3 (1995): 78-84. Print.
- Shaviro, Steven. *The Cinematic Body*. Minneapolis and London: University of Minnesota Press, 1993. Print.
- Shukin, Nicole. *Animal Capital: Rendering Life in Biopolitical Times*. Minneapolis and London: University of Minnesota Press, 2009. Print.
- Sobchack, Vivian. *The Address of the Eye: A Phenomenology of Film Experience*. Princeton: Princeton University Press, 1992. Print.
- . *Carnal Thoughts: Embodiment and Moving Image Culture*. Berkeley, Los Angeles and London: University of California Press, 2004. Print.
- Urback, Robyn. "Robyn Urback: Don't want to vaccinate your kids? Fine. Find another school." *National Post* 3 February 2015. Web.
- Wald, Priscilla. *Contagious: Cultures, Carriers and the Outbreak Narrative*. Durham and London: Duke University Press, 2008. Print.
- Westcott, Lucy. "Doctors Without Borders Slams Slow International Response to Ebola." *Newsweek* 23 March 2015. Web.

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