

The underbelly of *Homo Plasticus*

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Alvaro Jarrín^(a)

<ajarrin@holycross.edu> 

^(a) College of the Holy Cross.
1 College St, Worcester,
MA 01610. Worcester,
Massachusetts, Estados
Unidos.

Chiara Pussetti's text carries with it a clear warning: within the context of late capitalism, we remake our bodies at our own risk. Even though the subtitle of Chiara Pussetti's essay describes our post-human present as moving towards "freedom," she does not portray freedom as a liberation from want or from inequality. Quite the contrary. *Homo plasticus* is a consumer *par excellence*, "free" to purchase myriad technologies of self-improvement as long as they have the money and the privilege to access those technologies. In our very unequal world, this means that a wide swath of humanity is largely excluded from these technologies of self-improvement, as the more desirable technologies become branded as luxury items limited to those with access to the best health care systems or with the purchasing power to buy the ideal body. Euro-American standards of self-improvement have largely become globalized, even if they do acquire regional "flavors" as they travel across borders, and local elites utilize those standards to reassert their power by imposing national bodily norms that reflect their values and their own appearance.

Self-improvement is also defined very narrowly, in a manner that often (but not always) reasserts the light-skinned, thin, young, able-bodied and cisgender ideal. As Pussetti¹ points out, the “body-norm” becomes a morality tale that blames those outside the norm for their condition, portraying them as “lazy, unruly or negligent” (p. 10) for having bodies that do not measure up. There is very little freedom, therefore, within a neoliberal context that promotes consuming different biotechnologies to create a more perfect human. Freedom is a fiction created by liberal rights discourse and by late capitalism, a fiction that portrays individuals as consumers driven simply by rational choice. In reality, what makes self-improvement technologies desirable is the ways in which they intersect with preexisting structural inequalities, including those based on race, class, gender, sexuality, disability and age. Our apparently free choices are constrained and shaped by embodied forms of inequality that push us to see ourselves as imperfect, and to see technologies as a solution to those imperfections. It becomes very hard to say “no” when technological interventions become the norm, even when they have detrimental health effects. For example, even though C-sections increase infant mortality rates, they are immensely popular in countries like Brazil because they are associated with modernity and with higher quality medical care². New technologies are not always net benefits for humanity at a larger scale.

Yes, humans have always used culture and technology to shape their surroundings, and we should not romanticize an imaginary “natural” body free of technological intervention. And yes, humans have long been interested in bodily aesthetics and have used sartorial choices or technologies like tattoos and scarification to mark their bodies and create social distinctions. Nonetheless, Pussetti is correct when she states that *homo plasticus* takes these technologies of the self one step further, and thus becomes a

[...] subject who embraces being inherently involved in a process of transformation, projection and transition [...] constantly adapting to the demands and desires of the public [...] simultaneously a consumer and an object to be consumed¹. (p. 11)

The contemporary human embraces plasticity for the main purpose of being admired, desired and consumed by others, in a drastic competition for “likes” and “follows” that demands a domesticated, unblemished body always ready for the camera. While those few who are most successful in crafting this docile body might indeed feel temporarily “freed” by technologies of the self, most others actually experience these technologies as a prison and learn to hate the imperfections of their own flesh. *Homo plasticus* is much more likely to suffer from low self-esteem, from body dysmorphia, from eating disorders, and from anxiety – a veritable epidemic of mental health issues tied to our obsession with appearance. As my interlocutors in Brazil described it, the pressure to conform felt at times like a “dictatorship of beauty”³, a particularly powerful phrase in a country that suffered for more than twenty years under a brutal dictatorship that disappeared thousands of people.

I am not arguing that we are now a more superficial people. In fact, there is nothing superficial about appearance or embodiment, and that’s why they matter. The body carries with it a dense history of meanings regarding race, class, gender, sexuality, disability and age. The technologies of self-improvement in our contemporary era



are, using Donna Haraway's⁴ words, "knowledge-power processes that inscribe and materialize the world in some forms rather than others" (p. 7). Knowledge-power processes, particularly those developed under the legacy of colonialism, have historically enabled strong biases about which bodies matter and which bodies are in need of improvement or correction. Thus, we cannot expect that the long history of medical racism, the longstanding biases of male-centric medicine, the normalizing biopolitical discourses that have pathologized disabilities and non-normative genders and sexualities, will simply disappear with the passage of time. To the contrary, these knowledge-power processes enact into being or reinforce the body-norms that end up excluding the most vulnerable people in society. We have only barely begun the process of decolonizing our Western epistemologies, and the industries that profit from technologies of self-improvement have little incentive to challenge the way the world is built for the privileged few. In fact, late capitalism encourages these industries to monetize our inequalities even further, thriving on what makes us different rather than on our common humanity.

My biggest concern is the way that eugenics and racism rear up their ugly head through technologies of self-improvement. People with dwarfism, for example, express a deep concern about their disappearance once new prenatal technologies make it easier to detect dwarfism, promoting a "flexible eugenics" that is mandated by neoliberal choice rather than by state regulations⁵. Cochlear implants have similarly opened the path for hearing parents to eliminate deafness in their children, posing a real threat to deaf culture and reinforcing what Eli Claire⁶ calls an "ideology of cure" that portrays differently-abled bodies as abnormal or deficient. In Ecuador, assisted reproduction clinics strongly favor using eggs and sperm from lighter-skinned donors, with the aim of whitening the nation through in vitro fertilization⁷. In my own research in Brazil, I found that plastic surgeons have inherited a Neo-Lamarckian eugenics framework that understands beauty as a measure of national improvement, establishing their medical profession as uniquely positioned to fix "excessive racial mixture" and thus produce a more homogeneous body politic³. Chiara Pussetti's research on the use of skin lighteners in Portugal demonstrates that African immigrants who consume these products are hoping to gain a more European and cosmopolitan body that does not mark them as outsiders⁸. In all these examples, we get the sense that human difference is flattened or eliminated by technology, even if each context has its own complex sociocultural dynamics that shape what counts as different and why certain human differences are devalued over others.

Even technologies that we can be very optimistic about and seem to open up possibilities for valuing one's difference, such as gender-affirming surgeries for transgender individuals, can still have problematic consequences. For example, Eric Plemons's work on facial feminization surgeries demonstrates that these surgeries can frequently reinforce Eurocentric standards of feminine beauty⁹. Many technologies of self-improvement can be simultaneously empowering and disempowering, on the one hand providing us with real fulfillment, while on the other hand reinscribing biopolitical norms that prop up rather than undo bodily inequalities. These technologies have power over us because they have deep affective value, making us feel in certain ways and allowing us to acquire bodily capital in society – a form of abstract value that I term "affective capital"³. These technologies can also alienate us from our own bodies,



particularly when we are denied access to them, or when they do not go as planned, and they negatively affect our bodies or our health. The plastic surgery patients I talked to who were victims of medical malpractice, and who ended up with bodies they liked even less than before, were usually suffering from profound depression and had a hard time coping with the weight of that burden. Risk is not distributed equally among those of us vying for technologies of self-improvement, as we usually ask the most vulnerable to become experimental subjects for new technologies.

Riffing on Marx's famous quote, we could argue that members of *homo plasticus* can remake their own body but they cannot remake it as they please, operating under circumstances determined by history. When our own bodies become a form of capital to be consumed, we easily lose ourselves in the process of improving ourselves, attempting to buy happiness through technologies of self-improvement but forgetting how fleeting our bodies ultimately are. What would it take to create a context where we can all simply thrive being ourselves, with all our imperfections and all our particularities?

Conflict of interest

The author has no conflict of interest to declare.

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