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Handle with Care

What was so special about this song? Well the thing was, I didn’t used to listen properly to the words; I just waited for that bit that went: ‘Baby, baby, never let me go...’

Restating the gap of empathy, the problems of understanding the qualitative how of the way someone feels in the language and techniques of the quantitative, Emily Dickinson opens her poem: “I measure every grief I meet/With narrow probing eyes/I wonder if it weighs like mine/or has an easier size.” I begin with some numbers, some comparative measurements—about which I wonder no less. The findings of an AARP/Metlife study report on the sharp escalation in the cost of the unpaid health care provided by caregivers in the United States grabbed headlines in 2008. The Wall Street Journal reported that 34 million caregivers provided unpaid health care valued at approximately $375 billion to family and friends in 2007, an increase, the AARP and MetLife calculated, from $350 billion only the year before.1 These statistics have given way in the headlines to debt numbers and the costs to the state of various forms of what might be called “care” for its citizens, or what Lauren Berlant so effectively condensed at the Public Feelings Salon as: “all over the world the public has become too expensive for its own State.” We are now, it would seem, too expensive for our lives.2

But it is also that, meanwhile, the numbers mount in the margins. The report “Caregiving in the U.S. in 2009,” issued by the National Alliance for Caregiving, puts the number of unpaid caregivers at 43.5 million.3 Besides the question of how these numbers are derived, there also remains the problem of what they mean. Using the language of increased burden (e.g., the Metlife Study of 2006 estimated that full-time employees with...
care-giving responsibilities cost employers $33.6 billion), and risk (caregivers, for example, are at greater risk of becoming patients themselves), the numbers signaled “crisis” in 2008. But, as Lauren Berlant so strikingly cautions in “Slow Death (Sovereignty, Obesity, Lateral Agency),” “strong data, florid prose, and sensational spectacles” fail to capture the scene of “slow death,” the banal condition of being worn out and worn away by the activity of reproducing life. Instead, the construction and management of “crisis,” Berlant maintains, “produces dramas that obscure the motives and temporalities of these aspects of living,” the just “getting by,” “living on,” and dying slowly. But, then, if not the framing language of crisis, what does give meaning to those numbers, what makes them matter, and why should we care?

I first came to these questions somewhat by surprise in October of 2008 while writing a response to literary scholar Franco Moretti’s Graph, Maps, and Trees: Abstract Models for a Literary History, but not at my desk. I was in what is called a “hospice care center” at the bedside of my centenarian grandmother who, not quite a year after she came to live near me, made the decision to die. She had outlived her sisters, husband, and daughter, as well as the statistics governing life expectancy. It was easy to fantasize that she would live forever, that she would never let me go, that, if I cared, I might never have to let her go. Indeed, I remain attached to this scene at the hospice care center in ways conveyed less by “grandmother” or “granddaughter” than by the etymology of the word “care.” I had always thought care derived from the Latin cura and curare, that care was a matter of cure and curation. But, as it became painfully clear in the hospice care center, care derives, according to the Oxford English Dictionary, from the common Germanic and Old English caru for trouble and grief, as well as the Old Norse kör for “bed of trouble.” Beyond the basic fact of mortality, my grandmother was not in any other sense “terminal.” And this made for a bed of trouble indeed. Hospice care and hospice care facilities that coordinate and administer palliative care are designed to ease the transition to death, but in only in cases in which that end has been measured by disease prognosis and determined to be inevitably near.

I have learned from feminist bioethics that the construction of the “right-to-die exception” sustains an impossible and even lethal fantasy of an isolated sovereign individual and that, at the same time, as Margaret Wardlaw passionately and persuasively argues, such focus on an individual right to die has set the terms for bioethical discourse by stealing the spotlight from the scene of the provision of care. But consideration of the scene
of care appears incompatible with the ethical debate on the “right to die” because we have not really probed the question and problem of the right to die beyond the artificial ethical limit frame of the “terminal.” Only two states in the United States (Oregon and Washington) have legalized physician aid-in-dying (PAD), a reconceptualization with the Oregon Death With Dignity Act of 1996 of physician-assisted suicide (PAS) that allows a physician to prescribe a lethal dose of medication to a patient with a terminal illness. By turning from “suicide” to “death with dignity,” the ethical and legal discourse endeavors to clear the way for “rational choice” by removing the stigma of mental illness and the notion that only those with compromised judgment elect death. But, among the paradoxes here, it is the very insistence on death as terminus, as only the negative limit or end of life that prolongs the suffering and turns the good life into a version of slow death. Under the guise of the affirmation of life, the terminal terms of the right to die make no room in which to envision a scene of care in which death is desired as something more than a negative fantasy of an ending to fear or suffering.

If there is any heroic sovereignty in the drama of an end-of-life decision or, rather, end-to-life decision (and perhaps particularly for a Holocaust survivor like my grandmother), it dissolved in the literality of the ice chips, chocolate milk (my grandmother was lactose intolerant), and water through a straw administered to “palliate” (but also sustain the barest of life) against my grandmother’s express wishes in the bed of trouble that was the hospice care center. The spare fact that it took 37 days from the date of my grandmother’s decision to end all supportive treatment (or what would be called “palliative care” in cases of terminal illness) and refuse food to the date of her actual death transformed the scene of what was supposed to be care into the realm of a different kind of agonizingly slow death. If slow death is opposed by Berlant to the good life or flourishing—even as she is insistent on revaluing the less agential means such as the space of food (and eating to excess) by which those worn down by life nonetheless find some ballast but also pleasurable dissipation—I wonder what kinds of care it will take to turn the bed of trouble into the support for a good death. The slow, embattled, and unnecessarily painfully protracted one I witnessed (though undergone in what one might say were the best conditions that private pay hospice facilities can provide) strained and ultimately went beyond the bounds of what the current legal and ethical framing of “hospice care,” state medical care, and private insurance will support. But this bed of trouble was also made by these constraints. In a rather devastating twist on the old adage about responsibility, one...
might say that the biomedical and legal complex now says to us: "We’ve made your bed, now lie it."

In thinking what sort of care could turn this bed of trouble into the support for a good death, I cannot help but return to my grandmother’s way of enlisting my care and support in carrying out her decision over the long haul of so many days: "You, with all your education, you don’t know how to value life." I take my grandmother’s negative challenge to me as a variant on the exhortation in Freud’s “Our Attitude Towards Death:” “Life becomes impoverished and loses its interest when life itself, the highest stake in the game of living, must not be risked.” But, if, as the lessons of psychoanalysis I relearned from my grandmother in the hospice center would have it, a good life depends on preparing for and risking death, what is a good death? And I do not mean here a death that can be mourned, but the process of dying itself. Thinking the process of dying means broadening our understanding of the biopolitics of life and death to encompass the vast, unpaid and often unseen economy of private care-giving that is supposed to take the burden and responsibility off the state and make the difference between a good death (one with care in all its senses) and bad. But this thinking about and with the process of dying also entails the unthinkable regarding care, that is, consideration of the kinds of care that might promise to make a death “good” by hastening that end.

Reading Moretti’s *Graphs, Maps, and Trees*, I was struck by the call for a more “rational, abstract literary history,” one that replaces the randomness of “close reading” with “distant reading” based on the systematic, quantitative processing of large data sets. Both of my grandparents were statisticians and committed to finding a more rational approach to the contingencies of life in the wake of the Holocaust. My grandfather prefaced the 1953 introduction to his book on statistical inference (that he wrote with statistics pioneer Helen Walker, the first woman president of the American Statistical Association) with a redemptive claim for the capacities of statistics to help us emerge from the traumatic sink of “single events:”

Statistical method is one of the devices by which men try to understand the generality of life. Out of the welter of single events, human beings seek endlessly for general trends; out of the vast and confusing variety of individual characters, they continually search for underlying group characters, for some picture of the group to which the individual belongs. Since my coming out as a lesbian garnered no reaction whatsoever from them (perfectly logical within a system of variations, particularly after the publication in 1948 of Alfred Kinsey’s *Sexual Behavior in the Human Male*, which became the source of the dubious but
highly cathetted statistic—the 10 percent around which homosexual movements have been organized), it took my becoming an art historian and visual studies scholar—or, a lover of qualitative approaches—to rebel.

While art historians going back to Warburg’s "Mnemosyne" project have constructed their analytic worlds of large data sets, I cannot let go of close reading. I find myself impelled by the question of what forms of care would support a good death not to rise above the welter of single events. And it is not just because, as one caregiver among many, I am both a statistic myself and have had experiences that remain particular to the protracted “event” of the bed of trouble that was my grandmother’s decision to die. Thinking the process of dying and dynamics of care demands, I suggest, not just the distance of statistical generalities but also and importantly the affective proximities and cathexes of close reading. If you will bear with me, I am going to attempt to demonstrate that these statistics come to mean differently and in a palpable way when explored at the scale and in the dynamic of the intimate encounter at the level of the case study. And, thus, I turn to enact a version of care, attending closely to Never Let Me Go.

The beseeching torch-song grip of "Never Let Me Go" doesn’t loosen either. Instead, it repeats across Kazuo Ishiguro’s 2005 science fiction novel, the 2010 film adaptation directed by Mark Romanek, and their dystopically projected future of the present promise of genetic clones. This is a future in which current technologies of genetic cloning meet the everyday realities of human organ harvesting and transplantation. That is, it is a world not unlike our present. It is a verdant place-time which promises to simplify the dense knots and “nots” of the ethico-political complexities of biopower or the powers to make live and make die; that is, the dire and the banal instances in which the rights to life and death; individual and state powers; technologies of reproduction; global economy; transnational exploitation; and precarity, sovereignty and choice; radical inequalities between different classes of human, the nonhuman, and the somehow-not-fully human; donation, theft, and the capitalization of bodies down to the genes—are crossed. This is a countryside Arcadia, a green England of the late-twentieth century in which genetic human clones (without the capacity to sexually reproduce themselves) are raised from childhood in a specially dedicated and seemingly idyllic rural boarding school to become "carers" who assist at the hospital bedsides of "donors" (and eventually become “donors” themselves), giving their “care” in and as their internal organs, and eventually their lives, so that another class of living beings—those who are not clones—can live on. Indeed this is life on repeat. Donors
do not die; they “complete” while sustaining life via a version of nonsexual reproduction; their genes and their organs—ever vital—go on.

And, at the same time, so does Never Let Me Go. The present imperative demand ties this not-so-far-off sci-fi future to the recent past in which novel and film are set. The haunting refrain gives the novel, the film adaptation, and their central theme song an imploring title but also a central binding, but lost object. From the novel to the film to the film’s promotional materials (including a simulacrum of the “lost” stereo cassette Songs After Dark sung by sultry Judy Bridgewater, a phantom lounge singer of 1950s vintage and a composite of the names, smoke, and feelings of Judy Garland, Dee Dee Bridgewater, and Julie London), Never Let Me Go calls out again and again and on repeat from a worn piece of dead technology. The old, castoff cassette tape (already a rerecorded version of an even older record album) is itself an attempted replacement. A dusty tape found in a junk shop in Norfolk (the “lost corner” of England that the clone children imagine literally as a “lost and found,” the place where all precious things can be recovered) stands in for the lost cassette found at a school rubbish sale, and cherished by the narrator, Kathy H., in the recollected childhood of her days at the experimental boarding school breeding ground for clones called Hailsham. How can one refrain from responding to the appeal of its smoky address that the siren song, “Never Let Me Go,” seems to implore? And how can one resist the appeal of such simple and obvious forms of repetitive address: the clichés, stereotypes, double entendres, and puns (with their own form of repetition with a difference) that call out for recognition and response?

Whether the childhood experiences of the repeated rural idyll of the English boarding school is somehow intimately yours via A Little Princess, Harry Potter, or St. Trinian’s—to name only a few—Hailsham is uncannily familiar (a school almost like the others) and it hails us. It certainly got me. I saw the film guiltily on a transatlantic flight during which I was supposed to be working, and instead, I cried my way across the Atlantic in an itinerary of tear-jerking not unlike that of the cassette itself: “It’s slow and late night and American, and there’s a bit that keeps coming round when Judy sings: ’Never let me go ...Oh, baby, baby...Never let me go...” While this hailing is also ideological and disciplinary (there’s no getting round the obviousness of the schoolroom), Never Let Me Go gets you, if or as it does, with the hook of feeling. While the song itself is slow, the words stretched, its dragged tempo is also torched by the truths of loss and the impasses of never letting go (the hold on life for some being propped literally on the slow death of others). Yet, this slowed
time, its repetitions and repeatability grant extended duration, making a kind of space in time for the illusion of an eternal presence, a felt embrace that is held and holds. That is, *Never Let Me Go* is not just about the most intimate and passionate of attachments, the stuff of torch songs (lost, unrequited or impossible loves); it calls out to us for our rapt attachment.

And, yet, at the same time, its register hovers not just between lost and found: “Never Let Me Go,” from *Songs after Dark*, is caught even more so between what might, in the harsh light of the morning after, reappear as rightly so: that is, as the willfully, justifiably, or necessarily discarded, or refused (“not the sort of thing any of us at Hailsham liked”). To the extent that the old-school spooling tape of the cassette is able to reel us in emotionally, even if, or despite not being the sort of thing we like, or are supposed to like, or will admit to liking, trash, or the refuse not refused, is thus irradiated, transformed by feeling. We might say that these are the familiar rules of camp and, yet, if *Never Let Me Go*’s transformative repetitions echo the technics of camp, it is a version of camp sincerity that comes closer to the affective strings of melodrama and the weepy, for there is strangely, uncannily nothing arch or ironic in its simple, simplified world in which refuse is literalized: the novel insinuates that the clones take their DNA from social discards (“We all know it. We’re modeled from *trash*. Junkies prostitutes, winos, tramps.”)

The powerfully simple figure for the charged material but also affective register of the lifeline that rescues or re-cues “rubbish” would be not the tape reel, but the barbed-wire fence with which *Never Let Me Go* ends, the fence across the verdant landscape’s vista of hope’s horizon line such that the promise of the distance point where wishes meet the ground of reality is pulled into the tangible midline (the “shoreline” as if dredged from the deep) of the barbs on the fence that have caught bits of plastic sheeting and carrier bags that flap in the wind. This is a boundary (it is a fence, after all) but a fence of and for the reeling of fantasy, a thought-image and a *fort-da* vehicle that promises to forestall the death sentence by pulling in and washing up the loved and lost along the overdetermined—but no less acutely felt—line of care. The narrator, Kathy H., the genetic clone who became a carer, misrecognizes the barbed wire of property and control, the barbed-wire perimeter of Giorgio Agamben’s diagram of “bare life” as the concentration and detention camp, the state of exception that is the rule. The barbed wire of private property, the conquest of the West, and colonial control transforms into the reel of fantasy, dredging with its barbs (now
something more like fishhooks) the loved and lost objects from the depths of loss to the shoreline of desire:

  I was thinking about the rubbish, the flapping plastic in the branches, the shore-line of odd stuff caught along the fencing, and I half-closed my eyes and imagined this was the spot where everything I’d ever lost since my childhood had washed up, and I was now standing in front of it, and if I waited long enough, a tiny figure would appear on the horizon across the field and get larger until I’d see it was Tommy, and he’d wave, maybe even call.\textsuperscript{14}

The lure of the fence is a call-and-response fantasy of love, one that promises return in every sense. Though painfully beautiful in its way, this fantasy image does not resist, but rather pulls in and makes itself up out of the refused stuff of the trite, for this barbed wire fence is the armature of what is, in large part, a straight-up love story in which Kathy H., the carer, loses her great love, Tommy, the donor. But it is also an uncannily and queerly haunting one in which, among other plot twists and devastating impasses, Tommy, the donor, refuses to allow Kathy H., the carer he loves, to carry him over into death because she cannot really feel what it is like to be a donor (though the film glosses over this cut, allowing a last exchanged glance between Kathy H. and Tommy through the glass of the operating room). Even more so, the would-be couple’s attempt to seek what they heard is the possibility of a deferral granted to former Hailsham students who can demonstrate that they are truly in love is punctured as well in both the novel and the film adaptation. The affective heart of the love story is a cloned one and it is on borrowed time. The lines between clone and human recipient, and between carer and donor are, of course, blurred and crossed: humans who are not clones become hybrids in order to live and also eventually die, and carers become donors themselves, but it is not love that enables this crossing. What is more interesting is that the love that is supposed to make all the difference supports the cutting pain of the difference it intensifies: clones may resemble humans in their demonstrated capacity for emotion but this does not defer their ends, and carers cannot cross the line of refused empathy dividing carer from donor.

But, if you are still with me even after this long and slow setup via a close reading of Never Let Me Go, why should I/we care? I would call on you to feel how it is precisely along these lines of attachment to the promise that love makes a difference, even if/as it does not change the outcomes of death and loss, that Never Let Me Go most piercingly poses the question and problem of how care nonetheless matters, and that it may well be a matter of not just holding on but also letting go. The poignancy of Never Let Me Go derives from its impossibility (we will let go and be let go) even as the school of melancholy from Freud to
the repetition and revision of melancholy in Lauren Berlant’s ”Cruel Optimism” instructs us that: “people never willingly abandon a libidinal position, not, even, indeed, when a substitute is already beckoning to them.”\textsuperscript{15} Politicizing Freud, as Berlant puts it, the double bind of object attachment is not just retrospective (as in melancholy’s attachment to a past it will not give up) but also prospective—and devastatingly so. That is, the politics, practices, and fantasies of future-oriented hope and their attention to the horizon of a future that is supposed to give back and return the good life may not be sustaining at all. The objects to which, unlike Bartleby, we may prefer to stay attached even when they become obstacles to our flourishing may be the very horizons or objects in that other sense that wear us out, that become the vehicles for our slow death by attrition.

As if in demonstration of the dynamics of Berlant’s cruel optimism, in which attachment to the promise of our objects of desire is what erodes us, in the crucial crossed exchange in Never Let Me Go between carer and donor, Kathy H. insists to Tommy, ”it’s important there are good carers. And I’m a good carer." He challenges her with: ”But is it really that important? Okay, it’s really nice to have a good carer. But in the end, is it really so important? The donors will donate, just the same, and then they’ll complete." However, she maintains, ”Of course it’s important. A good carer makes a big difference to what a donor’s life is actually like." And he responds, ”But all this rushing about you do. All this getting exhausted and being by yourself. I’ve been watching you. It's wearing you out." There, it would seem, is the rub of the cruel optimism of care: acting on the adhesive promise of care is also a practice of abandonment, leaving the carer alone and worn out on the slow road to death just the same.

Despite this resemblance between Berlant’s formulation of ”cruel optimism” and Never Let Me Go’s puncture of the inflated and fantasy-fiction promise of care, I have not pursued this close reading of Never Let Me Go to position “art” as an illustration of theoretical formulations worked out elsewhere. Nor should this close attention to Never Let Me Go be mistaken as an appeal to humanist notions that art is somehow redemptive because it humanizes the abstractions of statistics by giving a face and a soul to the numbers. Calling out the inhumanness of the human and the untenable species-exceptionalism of the “humanist value of art” in “Ishiguro’s Inhuman Aesthetics,” Shameem Black takes Never Let Me Go as an “ethical experiment in the aesthetics of simulacra” that “generates a new aesthetics of empathy for a posthumanist age.”\textsuperscript{16} By enabling our identification with Kathy H., Black argues, the novel teaches us to feel from the place of the
inhuman and the not fully human in others and in ourselves. While I find it powerfully provocative to position *Never Let Me Go* as an ethical experiment in which we are enlisted to participate, I am not at all convinced that identification and empathy are its vehicles, and I am deeply mistrustful of the ongoing assumption that care must, or even should be exercised in its terms. Carers may be clones and, yet, as Kathy H. says of herself from the beginning, “My name is Kathy H. I’m thirty-one years old, and I’ve been a carer now for eleven years … [c]arers aren’t machines. You try and do your best for every donor, but in the end, it wears you down.” The uncanny and piercing punctum here might be that the case of Kathy H., the carer, is a clone in another sense. The cruel and banal “truth” of Kathy’s H.’s case history is its very familiarity, its close resemblance—especially in terms of gender—to the general statistical norms of caregiving in the twenty-first-century United States. According to the AARP study of 2008, as reported in the *Wall Street Journal*, the typical US caregiver is a 46-year-old woman who works outside the home and spends more than 20 hours a week providing unpaid care to her mother. I could just as easily be Kathy H. This case history could almost be mine. And it could almost be yours.

But the *almost* marks the space of important differences: Kathy H. is younger, my caregiving skipped a generation (queer granddaughter in her early 40s attached to a centenarian grandmother), the profile of the average caregiver shows marked variations in age when correlated to ethnicity (women of color, for example, are more likely to become caregivers at a younger age), and, as Janet Jakobsen strikingly reminds us, the state is more than happy to transform queer bonds into normatively familiar ones because, in relegating healthcare to the “family,” it demands our caregiving labor. Further, to return to the cassette-tape recording of “Never Let Me Go” to which Kathy H. refuses to listen properly, extracting and repeating, “Baby, baby, never let me go…” the novel presents us with feeling produced not by empathy (feeling, for example, what and as the singer is supposed to feel) but generated rather from creative misrecognition (a version, writes Berlant, of the optimism that recalibrates the objects we encounter into promises of fulfillment, that they might return what we desire) and the great and important gaps of feeling such as, for example, in the distance between Judy Bridgewater’s sultry voice repeating the song’s come-hither address to a lover, and Kathy H.’s fantasy, while slow dancing with a pillow, that the song is about holding the baby that she was told she would never have, and what she is later told by the adult witness to this dance. For Madame Marie-Claire, the domestic companion to Miss Emily, the school’s headmistress, Kathy H.’s dance appeared as a
heartbreaking spectacle of “a little girl, her eyes tightly closed, holding to her breast the kind old world, one that she knew in her heart could not remain, and she was holding it and pleading, never to let her go.” The scene got to me, too, but I will go ahead and admit to a rash of recoil at the devastatingly gendered and heteronormative reduction of care to maternal love and the desire for a baby of one’s own (and perhaps I am not the only one, since both scenes, the one of recalled witness and then the second recall, as well as all references to attachments to “baby, baby,” are excised for the film).

But to argue that such affective relays, but also great gaps between us—that such a circuit of being moved by someone, being carried along by the sound of a voice, the touch of words, the pulse of gestures (and their re-presentation)—stop dramatically short of feeling as they do merely illustrates the failures of empathy is, I think, to miss the point of the “both/and” operating along Never Let Me Go’s fence of and for fantasy and feeling, that barbed wire of connectivity. In “Two Girls, Fat and Thin,” Berlant writes alongside what she has learned from Eve Sedgwick about deshaming our fantasmatic attachments so that we might take such feelings as objects of knowledge by emphasizing not the private interior lining of the subject but rather its outsides, or what she calls the “impersonal.” Rather than a source of despair, however, Berlant finds in the “impersonal” a way to see how the world is “organized around the impersonality of the structures that conventionalize desire, intimacy, and even one’s own personhood.” In what Berlant calls an “optimistic” concept in the positive sense, the impersonal pulls the sensations that feel personal from the plotted lines of what might otherwise appear inevitable. Out of the felt blows of the impersonal—the social and historical that feels personal—Berlant fashions a tool “for interfering with the march of individualities toward liberal freedoms,” for showing that things have been and, thus, could be otherwise. But my point here is that personal and impersonal derive their meaning when made to bristle in proximity just as the individual case history and the generalities of numbers, the particular deviations, and the general principles only start to do their critical work when brought into transforming contact without radical reduction or euphemizing abstraction. And this optimistic method of holding in tension the close and the distant, the qualitative and the quantitative, the personal and the impersonal brings me back to the barbed-wire fence and the question of what forms of care might support a good death.

The space of care that Never Let Me Go both demarcates and also opens up with the charged and barbed fence and its vista of up so close you could touch and so faraway you
could barely discern whether there might be a wave of return is a domain of "feeling with" the particular and the general, the specificities of the individual case study and the generalities of statistical norms and trends held just this side of a dangerous collapse. This space of care holds us just at the edge of falling into the colonizing fictions of being able to feel as someone else does (the claims, for example, that we know that the majority of people who request physician-assisted death do so to end suffering). It holds us just at the threshold of the traumatic pedagogies of being made or shamed or chastened into feeling as we are told we should (that we should, for example, desire to end suffering but not desire to die).

The barbed-wire fence also intrudes to give us the estrangingly alienated, the not-me (but also the not-you either) with the weight and bite of the intimately personal (the stuff of attachments such as the fantasy of return and the sovereignty of personal preference and choice). The barbed-wire fence is not just a vehicle of personal fantasy; it is also importantly a historical and political technology. It is the figure, in Reviel Netz’s *Barbed Wire: An Ecology of Modernity*, for modernity’s production of power through the territorialization of space from Buchenwald to the bison in the conquest of the West, the creation of death camps, detention camps, prisons, work gulags, Indian removal policies, reservations, and cattle pens. Conducting personal fantasy along its historical and political lines, the barbed fencing gives us an awareness of the shaping force of what is also not at all personal by making it just as sensed in our flesh as what we would call “personal.”

If Netz is correct that the state and global capital no longer need barbed wire because they have done their work and space is already colonized, then the barbed-wire fence as fantasy and thought vehicle makes visible the frames of power we might otherwise mistake as the fixed, immutable—even natural—realm of personal choices presented as protected individual freedoms.

Thinking with Mona Hatoum’s recent installation on exile, called *Interior Landscape* (2008), a bare room furnished with little more than a mattress-less bed fitted with barbed wire where one would otherwise lay one’s body (and about which I have written elsewhere), one might say that the bed of trouble that is caregiving in the twenty-first century is lined with crossed rows of barbed wire, which link the conceptualization of the human subject and body as private property to the capitalization of biomatter and genetic information; the state dependence on unpaid caregiving labor to the gendered, classed, and raced forms of unpaid and underpaid labor in the maintenance of life that consigns those
who perform it to slow death; the presumptions that care is a family matter to the
characterization of care as maternal; and the exercise of the right to die extended only to
those who are already “terminal” to the fiction of the affirmation of life that depends on the
scene of slow, hard death.

What would it take to reconceive care’s bed of trouble? The question of what getting
so close to a work such as Never Let Me Go offers to the “distant reading,” the abstractions,
the statistics, graphs, charts, and numbers of quantitative methods, and in particular, the
numbers regarding the prevalence and costs of care-giving with which I began, has
something to say to the question of what might constitute a good death. That is, I would like
to propose that thinking and feeling with the aesthetic experimentation of the novel and the
film (and not just Kathy H.) gives us an arena in which to try out the necessary “as if” of the
very tough but very necessary practice of an ethics and politics of care premised on the
both/ands of close and distant; intimate and impersonal; familial and communal (including
the families and communities we make); and state-supported, agential and deeply
interdependent, alone and nearby. This both/and of a practice of care that is both close and
distant takes me back to the scene of the fence and its spatial dynamics of both nearby and
faraway: the refuse not refused, but caught in the fence and the wave at a distance. The
scene of the barbed-wire fence seems a helpful figure with which to exercise the as-if of a
radically reimagined, posthuman practice of care because it pierces the pieties and
euphemisms of care, reminding us that care has its colonial histories, its capitalist social
constructions, and its gender politics. It reminds us as well that care also involves loss—of
many kinds.

The scene of care may remain a bed of trouble, but perhaps in a different sense, one
that calls for painstaking practices of holding in tension what might seem like irreconcilable
opposites and maintaining a fragile, precious space or interval of distance and difference
between us; a kind of support both affective and material that maintains a spacing of and for
freedom, risk, and the precious possibility of not just care for life but also care for death,
that is, a practice of care that recognizes the interrelations of the good life and the good
death, and that supports us even—and perhaps especially—in preparing for death by
enabling us to let go and to be let go. This is no easy task for something as fragile as the alien
and necessarily impersonal terrain of what we may yet learn by listening to and feeling
alongside those who want to die, and not because they have been thrown away or
consigned to death; because they are fearful of an end of life as the exiled rubbish of a state
system that tells them they are too expensive to support; nor because they have been made to feel, for one reason or another, that they are trash. But, to be sure, attending closely to those who wish to die, preparing for death, and learning to let go and to be let go with attentive care will also demand the reorganization of care for life: A fragile and daunting burden indeed. Handle with care.

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References:


Never Let Me Go. Dir. Mark Romanek. DNA Films, Film4 and Fox Searchlight Pictures. 2010. 103 min.


**Links:**

Peter Howell, “The Hunt for the Elusive Judy Bridgewater”:

"Never Let Me Go" song recording:
http://www.youtube.com/watch?v=cE6lSBjkPKY&feature=related

Trailer for *Never Let Me Go*: http://www.youtube.com/watch?v=kymQcM4ej3w

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12 Ishiguro 2005: 70.
17 Ishiguro 2005: 3-4.
21 Lauren 2002: 104,