

UC Berkeley

UC Berkeley Electronic Theses and Dissertations

Title

Technologies of Incapacitation: US Torture Regimes and the Captive Body

Permalink

<https://escholarship.org/uc/item/1xz6c1hz>

Author

Potts, Michelle Christina

Publication Date

2019

Peer reviewed|Thesis/dissertation

Technologies of Incapacitation: US Torture Regimes and the Captive Body

By

Michelle Potts

A dissertation submitted in partial satisfaction of the

requirements for the degree of

Doctor of Philosophy

in

Rhetoric

and the Designated Emphasis

in

Women, Gender and Sexuality

in the

Graduate Division

of the

University of California, Berkeley

Committee in charge:

Professor Samera Esmeir, Chair
Professor Michael Mascuch, Chair
Professor Juana María Rodríguez
Professor Charis Thompson

Spring 2019

Abstract

Technologies of Incapacitation: US Torture Regimes and the Captive Body

by

Michelle Potts

Doctor of Philosophy in Rhetoric

and the Designated Emphasis

in

Women, Gender and Sexuality

University of California, Berkeley

Professor Samera Esmeir, Chair

Professor Michael Mascuch, Chair

My dissertation project studies the practice of force-feeding at Guantánamo Bay detention camp and how incarcerated individuals mobilize their bodies against indefinite confinement. Using the critical-analytical methods of feminist science and visual cultures studies, I examine force-feeding within longer histories of racially gendered subjection such as vivisection and behavior modification in order to consider how the feeding tube came to be used as an instrument of punishment on the orientalized body of Muslim men perceived to be terrorists. Through empirical research, textual interpretation, and aesthetic analysis, my dissertation intervenes in the fields of critical prison studies, and science and technology studies by foregrounding genealogies of biomedicalization and how those incarcerated reclaim corporeal agency through practices such as hunger striking. Ultimately, I argue that force-feeding is commensurate with other interrogation techniques that have become more mainstream since the Cold War, emphasizing the medicalization of war tactics and punishment.

Chapter one, “Vivisectional Mandate: Behavioral Science and Torture from the Cold War to the War on Terror,” follows the ways that the Cold War’s experimentation sets the stage for the war on terror. In particular, I situate the Enhanced Interrogation Techniques of the war on terror within Cold War behavioral science in order to track the role psychology has played in the progression of biopolitical torture techniques that aim to discipline racialized bodies. The second chapter, “From Cracking the Mind to Bodily Abjection: Situating Force-Feeding in the Torture Archive,” considers how force-feeding transforms the medical clinic into a site of punitive suffering. How is this transformation linked to the emergence of biotechnologies geared towards the optimization of life in the early part of the 20th century? These questions expand outward to

be considerations of patient and prisoner autonomy in the wake of right-to-die litigation and the use of the feeding tube in US domestic prisons. My third chapter, “Suspended Animation: Force-Feeding and the Visuality of Pain,” analyzes a policy manual on techniques for managing hunger striking at Guantánamo Bay detention camp alongside the visual testimonies of prisoner Samir Naji al Hasan Moqbel and activist Yasiin Bey. This chapter investigates how the state frames medical ethics inside of the camps and how the emphasis placed on care obfuscates not only the demands of the prisoners but also the feeding tube as carceral technology. The fourth chapter, “Staging Incapacitation: Hunger Striking in the Wake of Force-Feeding,” considers the practice of hunger striking and self-harm at Guantánamo Bay. Here I examine prisoner’s testimonials of hunger striking and how such resistance to policies of corporeal wholeness functions as a viable form of political self-expression.

By situating force-feeding practices at Guantánamo Bay into a history of medical experimentation, I reveal the inadequacies of prevailing theories of biopower, theories that are not capacious enough to account for how state sponsored torture is underwritten by the operation of Islamophobia and institutionalized racism. Tracing out an archaeology of state torture with the tools of critical prison studies and science and technology studies reveals Guantánamo Bay as neither a space of life nor death, but rather of what I refer to as *suspended animation*, a pointedly medicalized mode of living death.

Table of Contents

Introduction: Hunger Striking and the Suspended Animation of Force-Feeding	1
Chapter One: Vivisectional Mandate: Behavioral Science and Torture from the Cold War to the War on Terror	13
Chapter Two: From Cracking the Mind to Bodily Abjection: Situating Force-Feeding in the Torture Archive	33
Chapter Three: Suspended Animation: Force-Feeding and the Visuality of Pain	50
Chapter Four: Staging Incapacitation: Hunger Striking in the Wake of Force-Feeding	66
Conclusion: The World Yet Made	80
Notes	84
Bibliography	106

Acknowledgments

Thank you to my family: Rosa, Michael, and Melissa. You tether me to the world and remind me of my meaning in it. Mami y Papi, thank you for your love and support. Thank you for your sacrifices, many of which I'll never know. Melissa, thank you for being my person, and for your care and loyalty. Living with you has taught me so much about the beautiful struggle of interdependency. Thank you for taking care of me, it's been an honor to take care of you. There are not enough words for my gratitude to each of you, but I will continue to try anyway.

I am grateful to each of my amazing committee members. Thank you Samera Esmeir and Michael Mascuch for taking this project on and guiding me along the way. You pushed my thinking and writing, never letting me settle. Your support throughout the many stages of this research has meant so much to me, it's been an honor to think alongside each of you. Michael, our many conversations about visuality helped me to see better, thank you. Samera, you sensed from the beginning what this project would come to mean to me. Thank you for encouraging me, and for emulating what it means to open a text and to ask new questions of it; my thinking is forever shaped by you. So much gratitude to Juana María Rodríguez, the Latina femme mentor of my dreams. The imagination, pleasure, and rigor you bring to your writing and thinking is something I aspire to. Thank you for your engagement over the years and the kitchen table conversations along the way. I'm immensely grateful to Charis Thompson for agreeing to think alongside me. Charis, thank you for the excitement you always brought to this project. I hope my work reflects back even a fraction of what you taught me.

Thank you to the graduate students I've been lucky enough to make community with over the years. Darren Arquero, Adam Hutz, Paige Johnson, Tala Khanmalek, Suzanne LiPuma, Zachary Manfredi, Seán McKeithan, Andrea Miller, Kel Montalvo-Quiñones, Emily O'Rourke, Lakshmi Padmanabhan, Giancarlo Cornejo Salinas, Kim Tran, Jean-Thomas Tremblay, Janice Yu, Johnathan Vaknin, and Veronika Zablotzky. Thank you for your friendship, the hours gossiping, complaining, and trying to forge a life out of an impossible institution. Each of you has supported my writing and thinking in so many ways; you're all my teachers and the world is better for the work you bring into it. Special thanks and gratitude to Kel, who is the best work husband I could have asked for and whose friendship and care has sustained me through it all. In many ways graduate school was only bearable because I had you beside me.

Thank you to Shin Yi Tsai for giving me space to think through my own interiority, what a privilege it's been. You make me feel less scared about my own groundlessness. It's because of you that I remain optimistic about therapeutic practice.

To my Riverside homegirls: Margaret Farr-Neiderer, Evelyn Mercado, Amanda Tune, Rachel Rodríguez, and Amanda Holguin. Thank you for being the best reminders of where I come from. Thank you for always seeing me, your friendship has meant everything to me.

Thank you to the beautiful queer community that's sustained me throughout my years living in the Bay Area. Sylvan Black, Mona Eshaiker, Jocelyn Freitas, Dara Garcia, Bridge Ho, Paige Johnson, Kayla Keener, Becca Rozo-Marsh, Leticia Miranda, Kel Montalvo-Quiñones, Serena Padilla, Dip Pakier, Ángel Ross, Neda Said, Wild Tigers, Kim Tran, Turner, Kate Vander Tuig,

and Veronika Zablotsky. You've all brought so much pleasure and purpose to my life, and I'm continuously in awe of the work you do for our community. Thank you for showing me care, support, love, and other affects that make being with others interesting and hard, but always worthwhile. My sense of self and political commitments have been shaped by each of you. I'm forever grateful for the spaces we've carved out together and our commitment to finding new ways of existing. I'm honored to call each of you family.

And finally, thank you to those who refuse. Throughout this project my own limitations have made it so that I don't always have a name by which to call you. I nonetheless remain humbled, and because of you, committed to pushing my writing and thinking—my capacity to imagine beyond this world. In gratitude, thank you.

For Rosa; my beginning, my first home

Introduction: Hunger Striking and the Suspended Animation of Force-Feeding

A new system of detention and interrogation was developed following the attacks of September 11, 2001.¹ On September 18, 2001, President George W. Bush signed the Authorization for Use of Military Force (AUMF), giving him free reign to deploy the military on anyone he determined associated with 9/11.² In the wake of the AUMF, the Bush administration authorized the CIA to build the Enhanced Interrogation Program (EIP), essentially legalizing the torture of US detained prisoners suspected of terrorism. This authorization was established to allow for the administration of harsher interrogation practices, including torture, or what Darius Rejali defines as “the systemic infliction of physical torment on detained individuals by state officials for police purposes, for confession, information, or intimidation.”³ The Bush administrations’ consensus was that “enhanced interrogation techniques” (EIT) would ensure that “high-value intelligence” was collected from prisoners. The “interrogation techniques” used—such as sleep deprivation, dietary manipulation, water boarding, and rectal feeding—were later made public by the Senate Committee on Intelligence’s Report on Torture. Published in 2014, the report details the history of the CIA’s EIP from its inception in 2001 to its termination in 2009, including a review of the 119 prisoners detained.⁴

My dissertation, *Technologies of Incapacitation: US Torture Regimes and the Captive Body*, examines state-crafted forms of torture from the 1950s to present day. My primary site is Guantánamo Bay and the use of the feeding tube at the detention hospital. Since 2002, prisoners at the detention camp have been force-fed as punishment for hunger striking, prompting the question of whether the feeding tube is now being used as a torture instrument, and at what point the medical clinic becomes a site of punitive suffering. The coercive use of the feeding tube recalls a range of historical practices including the force-feeding of female anorexics in psychiatric hospitals, and of incarcerated British Suffragettes and Irish paramilitaries throughout the 1900s. By placing force-feeding practices at Guantánamo Bay into a history of medicalized technologies in the US carceral state, I develop an account of the techniques of power used to manage life in the carceral setting in the late twentieth century, and also the forms of defiance that emerge in their wake. Against scholarly interpretations that only examine the legal parameters surrounding Guantánamo Bay or prisoner resistance, I insist that we need to understand the significance of the feeding tube and locate the practice of force-feeding within a genealogy of control meant to neutralize resistance to post-9/11 militarization.

The United States invaded Afghanistan in October of 2001 and detained three hundred Taliban fighters.⁵ Much is unknown about what happened to these captives, but many were sent to detention facilities for interrogation in Kandahar, Afghanistan, and later to a detention facility at Bagram Air Base. That November, Bush issued the military order, “Detention, Treatment, and Trial of Certain Non-Citizens in the War Against Terrorism,” authorizing the imminent detention of “al-Qaeda members and other terrorist suspects who were being swept up in Afghanistan ‘at an appropriate location designated by the Secretary of Defense,’ and stipulating that suspects should be tried by military commissions overseen by the executive branch, and not by federal courts.”⁶ The impetus was to create a system where detainees would have no legal rights and US courts would have no power to intervene, a space where “the US government was free from court scrutiny, free from the constraints of the constitution, and free, sadly, to violate people’s rights with impunity.”⁷ Lawyers from the Department of Justice’s Office of Legal Counsel advocated for a prison site that would be located in a null space of legal jurisdiction such that the requirements of human rights law would not hamper activity occurring on-site.

The Legal Counsel chose the US Naval Base comprising twenty-five square miles at Guantánamo Bay, Cuba, as the site for the detention camp. Between 2002 and 2006, the US military transported almost eight hundred “enemy combatants” to Guantánamo Bay.⁸ By 2008, less than three hundred men remained captive. At the time of this writing in 2019, only forty captives remain. Most detainees have come from Afghanistan, Saudi Arabia, Yemen, and Pakistan.⁹ After taking office, Barack Obama issued an executive order to close the detention camp within a year. His efforts were met with legal and political obstacles, leaving his plans for closure unfulfilled.¹⁰ Prior to 9/11, the US Naval Station at Guantánamo Bay was used as a processing center for Cuban and Haitian refugees throughout the 1990s. As an act of military expansion, the United States took hold of Guantánamo Bay from Spain after the Spanish-American War in 1898. In 1903, the United States signed a lease making official its control over the military base. Attempts to “rescind the lease” were made by Fidel Castro in 1959 but were unsuccessful, and the United States “remains fixed at Guantánamo, making it in the eyes of the Cuban state ‘an illegitimately occupied territory.’”¹¹

Although Guantánamo Bay may at first appear emblematic of Giorgio Agamben’s state of exception—functioning outside the purview of law and procedure, Laleh Khalili argues the contrary.¹² In Khalili’s analysis, the law is essential to the ways the United States operates its detention centers. It is not a lack of law that makes Guantánamo possible but, rather, a proliferation of legal analysis and procedure.¹³ “The whole complex,” writes Khalili, “and the worldwide network of lawyers, legal scholars, advocates, military judges and prosecutors, human rights activists, and news reporters, attests to something else again: a space of legal dispute. Not of lawlessness, as it is claimed again and again, but of excess of law, rules, procedures, legal performances made by the government to legitimate control, and contested by those who seek to subject the detainees there to an alternate regime of legality.”¹⁴ I argue that the connections between law and human rights at the Naval Station must be addressed within a larger history of military scientific advancement and how those incarcerated reclaim corporeal agency through practices such as hunger striking.

In particular, I argue that force-feeding is commensurate with other interrogation techniques that have become more mainstream since the Cold War, techniques that, in my account, constitute what I call the medicalization of war tactics and punishment. Following Khalili, I consider how those held captive at the detention camp negotiate the control of law and what I refer to as, technologies of incapacitation—the removal of individuals from society into the prison/camp, and the self-incapacitating/disabling of the body incurred during a hunger strike—administered by camp officials. Through the valence of incapacitation, I investigate how incarcerated individuals mobilize embodied modes of protest such as hunger striking in response to indefinite confinement and the various other technologies, such as force-feeding, leveraged by the state to manage the captive’s refusal and defiance.

In 2002, hunger strikes began at Guantánamo Bay. Released prisoners reported to the Center for Constitutional Rights that the first Guantánamo hunger strike began “in response to the mistreatment of the Qur’an by a military police officer (MP) in Camp X-Ray.”¹⁵ Incidents leading up to the strike included officers stomping, kicking, and throwing Qur’ans belonging to detainees. After eight days, a senior officer apologized, assuring that the Qur’an would not be disrespected or touched again. This was in the beginning of 2002, but by the end of February, the first rolling hunger strike began after another officer “removed a homemade turban from a prisoner during his prayer.” Over the coming months, the strike grew to include the participation of 194 detainees and would be articulated as a protest prompted by prisoners’ indefinite

detention, harsh living conditions at the site, and religious intolerance. Military officials acknowledged at this point that the detainees were protesting “their murky future.”¹⁶

Although the camp spokesperson refused to release the identities of the men striking, the *Miami Herald* reported that the “Justice Department did notify the attorneys of captives who became so malnourished that they required military medical forced-feedings.”¹⁷ New procedures for force-feeding were introduced in 2006, which included “strapping detainees to a chair, forcing a tube down their throats, feeding them large quantities of liquid nutrients and water, and leaving them in the chair for as long as two hours to keep them from purging the food, according to detainee accounts and military officials.”¹⁸ These procedural shifts point to how the medical clinic at Guantánamo Bay has become a site of punitive suffering. To this end, I situate force feeding within longer histories of racially gendered subjection such as vivisection and behavior modification in order to consider how the feeding tube came to be used as an instrument of punishment on the Orientalized body of Muslim men perceived to be terrorists.

I claim that the technology of the feeding tube is central to examining the technologization of torture with the ongoing force-feeding of hunger strikers at geopolitically varied sites, such as California’s Pelican Bay State Prison, Turkey, and Northern Ireland. Scholarship in legal studies has argued that the site of the prison and detention camp positions the incarcerated subject outside the bounds of legal and civil personhood, establishing a position of rightlessness.¹⁹ Scholars of anthropology and political theory have noted how the prisoner’s embodied practices shift the prison from inhumane regime to a site of protest and redress.²⁰ However, none of these works have addressed how the feeding tube might be considered an instrument of punishment that incapacitates the body and one’s ability to resist captivity. My project intervenes in fields across the humanities and social sciences, in particular American Studies, critical prison studies, and science and technology studies, by bringing to light how prisoners’ modes of resistance, such as hunger striking, test the limits of the biomedicalization of punishment. I argue that without understanding how force-feeding challenges the strategies that prisoners mobilize in response to indefinite confinement we will not be able to fully grasp the relationship between medicalization and technologies of punishment, as well as the complexities of embodied resistance to these carceral practices.

The materials I draw from include legal academic scholarship around questions of torture, litigation involving force-feeding and the feeding tube, behavioral psychology studies on the brain, army field manuals, medical literature of the feeding tube, prisoner testimonial and visual culture made in response to the forced-feeding at Guantanamo Bay. I approach these materials through an interdisciplinary lens informed by feminist science studies and critical prison studies in order to argue that the naturalization of medical intervention in the prison as a practice of care obfuscates the racial and gendered origins of medicine as punishment. Four chapters compose *Technologies of Incapacitation*, which begins in the 1950s at the dawn of Cold War behavioral science. The chapters ultimately build to show how the emphasis placed on biological life at Guantánamo Bay marks a shift in interrogative practices that no longer simply draw from the behavioral sciences discussed in chapter 1 but invoke the biomedicalization of the body as well.

“Vivisectional Mandate: Behavioral Science and Torture from the Cold War to the War on Terror,” the first chapter, follows the ways that Cold War scientific experimentation set the stage for the war on terror. In particular, I situate the Enhanced Interrogation Techniques of the war on terror alongside Cold War behavioral science studies on the human brain and army

interrogation manuals such as *KUBARK* in order to track the role psychology has played in the progression of torture techniques that aim to discipline and manage the captive's body.

Chapter 2, "From Cracking the Mind to Bodily Abjection: Situating Force-Feeding in the Torture Archive," locates force-feeding within the archive of torture described in chapter 1 in order to consider how the reintroduction of force-feeding in carceral sites is linked to the emergence of biotechnologies geared towards the optimization of life in the mid-twentieth century. I examine two seminal right-to-die cases from the 1990s and the contemporary use of the feeding tube at Pelican Bay State Prison to explore how biological life has come to be regulated and managed by the state in both the clinical setting and carceral setting.

The third chapter, "Suspended Animation: Force-Feeding and the Visuality of Pain," exclusively examines Guantánamo Bay and force-feeding. I analyze Joint Task Force Guantanamo's *Medical Management of Detainees on Hunger Strike*, a policy manual on techniques for managing hunger striking at Guantánamo Bay detention camp alongside the testimonial of prisoner Samir Naji al Hasan Moqbel and video project by activist/artist Yasiin Bey. I argue that engaging with aesthetic representations of force-feeding at the camp, such as the video of Bey simulating the standard operating procedures for force-feeding, makes possible a more relational approach to pain and suffering between the captive and the spectator.

In chapter 4, "Staging Incapacitation: Hunger Striking in the Wake of Force-Feeding," I consider the practice of hunger striking and self-harm in the wake of not only force-feeding at Guantánamo Bay, but the infamous 1981 hunger strike at Northern Ireland's Maze prison. Through sustained attention to the concept of incapacitation and prisoner's testimonials I investigate how refusal to policies of corporeal wholeness come to function as a viable form of political self-expression in Northern Ireland and Guantánamo Bay, Cuba.

By placing force-feeding practices at Guantánamo Bay within a history of medicalized technologies in the US carceral state, I reveal how post-9/11 torture techniques blur the line between life and non-life, inducing a state of what I call *suspended animation*. Suspended animation, itself a medical term for the temporary cessation of the body's vital functions, characterizes modes of brutality, such as rectal feeding, practiced by the state that are life-sustaining rather than merely repressive and/or pain inducing. Suspended animation offers a framework for understanding how the state manages and regulates its captives, and how it induces medicalized control over bodies. As a technique of governance or political rule, suspended animation develops beyond past regimes of managing/controlling prison populations in that it does not simply "make live" but incapacitates the prisoner's refusal to the demand to live, forcing incapacitated forms of life in its wake.

The Corporeal Politics of Hunger Striking

More, than simply a technique of bodily containment, suspended animation is also a technique of political subjectification. Hunger striking—the refusal of food as an act of political protest—is most commonly associated with prison struggles of the twentieth and twenty-first centuries. However, hunger strikes can be traced back to at least the late 1800s where, in a Siberian gulag, Russian political prisoners refused to eat as a demand for better treatment.²¹ The British Suffragette movement of the early 1900s is another early example of the practice, where the practice of hunger striking was undertaken by women's rights activists incarcerated for militant tactics associated with their mobilization around the right to vote. In the wake of the Suffragette movement, thousands participated in hunger strikers throughout the Irish War of Independence from 1919–1921. Ireland would come to dominate the cultural imaginary around self-starvation

with the infamous 1981 strike in the Northern Ireland's Her Majesty's Prison Maze, or "The Maze."

While most hunger strikers seek political change above self-harm/death, a death fast may increase the efficacy of the strike as a political tactic. Physician Steven Miles defines a hunger strike as "an action in which a person or persons with decision making capacity (often, but not always, in prison) refuses to ingest vital nourishment until another party accedes to certain specified demands." Most hunger strikes include the drinking of some water, and "ingestion of...salt, sugar, and vitamin B1 for a certain time without asserting intent to fast to death." However, the Turkish death fast of the early 2000s, like the Irish strike of 1981, transformed into a death fast in order to interrupt the government's construction of high-security prisons. Miles on the medical particularities of a death fast states that,

A person on a death fast takes water, salt, sugar, and vitamin B1 and asserts that the fasting will continue to death unless the aims of the strike are met. The ingested vitamins decrease the chance of permanent nutritional disability (neuropathy or congestive heart failure) if the strike should end. Although death fasts cause a progressive and eventually lethal protein and caloric malnutrition, the fluids and ingested nutrients extend the duration of negotiation with regard to the aims of the strike.²²

In the contemporary moment, the United States has seen a resurgence of hunger strikes, including the 2013 Pelican Bay State Prison strikes where thousands of incarcerated people across California organized in opposition to long-term solitary confinement. What tethers the practice of hunger striking across political and geographical bounds is that its central function is to draw attention to violent state practices that seek to subjugate minoritized persons across gender, race, sexuality, and religious lines. The practice serves as a powerful critique of not only the institution of the prison itself but also the proliferation of forms of state-authorized violence too often times normalized and hidden from public view. As my analysis makes clear from Pelican Bay, Guantánamo Bay, and Northern Ireland hunger striking produces forms of solidarity that extend outside of the prison. Strikes have historically depended on journalistic accounts and word of mouth to disseminate information from inside of the prison into their respective communities. For instance, *The British Medical Journal* and *The Guardian* newspaper played prominent roles in circulating information about the British Suffragettes in the 1900s. In the twenty-first century, digital media play a more prominent role in delivering information regarding strikes. Indeed, the hunger striker has always been at the center of political spectacle, whereby the body of the striker inspires sociocultural attention and critique. Not only do lawyers and news media inform publics of strikes, but so too do prisoners themselves through forums such as Internet blogs. However, information is still mediated by state actors. At Guantánamo, for example, it is the executive branch that releases information about prisoners, often under the compulsion of juridical orders or Freedom of Information Act requests. Journalists can visit, but camp officials take them on choreographed tours, prohibiting them from certain areas or taking photos/videos of prisoners.²³

The refusal to eat is often the only recourse the incarcerated subject has to protest the conditions of not only the prison but also the sociopolitical circumstances surrounding one's incarceration. For example, those incarcerated at Guantánamo articulated the central demand behind the various hunger strikes as "respect for our religion, including an end to the desecration of the Qur'an and religious discrimination." Additionally, they also demanded fair trials and legal representation, adequate food and water, sunlight, medical treatment, familial contact, and "a neutral body to observe the situation and report publicly about the conditions at

Guantanamo.”²⁴ If the prison both symbolically and materially manages and controls the life of the prisoner, then the threat of self-starvation directly challenges the institution’s grasp on life, biological and otherwise. To be clear my concern is not with the legality or legitimacy of these practices per se—a subject of extended discussion in legal literature—but rather, I consider the ways in which specific resistance contest and reframe questions of “living” and “dying” in relation to the technologies of control used to subjugate.²⁵ Mine is not a history of the “inhumanity” of these technologies of life, but rather an articulation of how their deployment and political refusal to that deployment produce new conceptualizations of life, autonomy, and embodiment.

To choose not to eat, then, is its own form of incapacitation, one that draws from the very immobility that the carceral system imposes onto the prisoner’s body. According to guidelines published by the California Department of Rehabilitations and Corrections,

someone refusing food will initially feel hunger pangs, but these will disappear after the third day. Glucose levels will start to fall dramatically. Between days four to thirteen, the body will start to break down fatty acids as an energy source, and fatty tissue and muscle will start to be lost. Between two weeks and approximately thirty-four days, the striker will feel faint, suffer lightheadedness and dizzy spells, will feel weak and often cold, and suffer “mental sluggishness.” Days thirty-five to forty-two are, say the guidelines, “considered the most unpleasant phase by those who have survived prolonged fasting” and can bring vertigo, vomiting, and a difficulty in drinking water.²⁶

The extremity of hunger striking and the physical toll on the body is precisely why the demands of the prisoners are so often met, as many prisons seek to avoid publicity scandals. Most sociological and literary writing on the subject of self-starvation has sought to think through the historical and social conditions that make possible the willingness to let one’s body consume itself. Vandereycken and Van Deth’s oft-cited *From Fasting Saints to Anorexic Girls* traces the figure of the fasting saint, as well as the hunger artist and entertainer, in order to make an argument about the modern young woman suffering from anorexia. Maude Ellmann’s *The Hunger Artists* uses hunger as a metaphorical trope when considering self-sacrifice and its relationship to writing and literature. Curiously, Vandereycken and Van Deth, as well as Ellmann, fail to devote significant attention to the hunger striker inside of the prison. This absence, to me, presupposes a form of intelligibility of self-starvation as a political and collective act.

My project contends however, that hunger striking is more than simply the prisoner’s last resort. Rather, the individual who hunger strikes demonstrates the ways that one’s corporeal subjugation is the condition of possibility for political strategizing. The aim of my research is to consider how prisoners’ refusal to corporeal wholeness comes to function as a viable form of political self-expression that counters modern conceptions of the body as necessarily avoiding pain and suffering, while also attending to the state’s biomedical approach to punishment. In *Discipline and Punish*, Michel Foucault wrote that it was the technology of the body itself at the heart of the emergence of technologies of punishment in the eighteenth and nineteenth centuries: “It is always the body that is at issue, the body and its forces, their utility and their docility, their distribution and their submission.”²⁷ What we see in the practice of hunger striking is the transformation of the body, but not simply via supervision, surveillance, and docility. The prison cell is clearly an obstacle; yet to pull from one’s own interiority pushes one to reconsider freedom and unfreedom while confined spatially to the cell and “infested with the state apparatus.”²⁸ The asymmetries of power exist in and around the prisoner’s body. This is most

apparent in the prison's management and discipline of the prisoner's body through the separation of bodies in cells, a process that works to produce incapacitation through bodily stillness, silence, and idleness. Hunger striking underscores the ways that the penal system functions within an asymmetric context, where power's hold on the individual should be complete but is not.²⁹

My work builds upon this by reading regimes of carceral incapacitation with and against incarcerated peoples' self-induced practices of incapacitation, offering frameworks to approach such practices for the ways they disturb normative regimes of embodiment and in/capacity. My research addresses the theoretical and historical issues surrounding the hunger strike as a tactic of embodied and performed mode of refusal. Patrick Anderson's *So Much Wasted* is useful in considering how hunger striking functions as a form of political performance, and in particular, how performance offers a useful lens by which to read prisoner's own testimonials of hunger striking and force-feeding. Anderson explores the act of self-starvation in three specific sites: the clinic, the art gallery, and the prison. To this end, he argues that in all three sites self-starvation maintains a kind of representational effect and, as such, points to the need to consider hunger in relation to the political economy in which it is operating. For Anderson, hunger striking functions as a form of embodied political performance that sacrifices one's own corporeal integrity. Hunger striking is also a productive act in that there are goals that collective strikers wish to meet. Through the continuous act of refusing food the demands of the strike must be rearticulated. This iterative quality of striking is necessarily durational. On this, Anderson writes, "defined most simply as a refusal to eat, hunger striking is actually a continuing form of abstinence, one that extends beyond the moment of its origin through and across periods of normative (and, in state interventions, forced) alimentary exchange. It becomes itself not simply at the moment of the declarative 'I choose not to eat' but also when that refusal is reiterated through time."³⁰ Anderson underscores the physicality and temporal dimensions of self-starvation, making his work effective for considering the representational and political stakes of the practice.

Similar to Anderson, my project primarily traffics in the idiom of the body. However, I do converge with Banu Bargu's scholarship on the Turkish death fast, in that I understand hunger striking, read through incapacitation, as that which refuses a normative regime of capacity, on behalf of another organization of life and the body. In her ethnographic study *Starve and Immolate*, she frames the Turkish death fast as both material and metaphysical. Self-starvation in the context of confinement can be understood as the phenomenological price one's body must pay in order to move towards political transformation, the practice is both material and metaphysical. In 2000, Turkish hunger strikers began protesting high-security prisons known as "F Types." These prisons replaced collective confinement wards with solitary confinement cells. Bargu writes that over eight hundred militants participated in the hunger strike, which soon after culminated in the security operation known as Operation Return to Life, whereby the Turkish state invaded its own prisons with the intent of "rescuing the prisoners from their own self-destruction."³¹ However, rather than impede or dissolve the hunger strike, Operation Return to Life only intensified the struggle and "led more prisoners to escalate their protest, by either transforming their hunger strike into a fast unto death or resorting to acts of self-immolation."³²

Although the central demand of the death fast was to close down the F-type prison, Bargu still questions how it is that self-destructive tactics such as death fasting, self-immolation, and suicide attacks came to be the chosen modes by which the political prisoners organized and performed their struggles. On this Bargu writes,

The technique of self-destruction as the basis of political action is radical and enigmatic in general: it is self-inflicted, painful, potentially irreversible, and final, therefore existential and embroiled within a logic of sacrifice that is opposed to out conventional notions of instrumental actions because it renders difficult, if not altogether impossible, the achievement of political ends through means lesser than death.³³

Bargu names such techniques of self-destruction the “weaponization of life.” In Bargu’s formulation, “the body . . . is utilized as the conduit of a political intervention,” even as the intervention is not reducible to the corporeality of the body. In this sense, the weaponization of life presents a paradox whereby the body is a necessary intermediary to achieving certain political ends at the same time that its necessary destruction “defies the distinction between means and ends and obliterates instrumental rationality.” The metaphysical aspect of the weaponization of life is situated in a conception of life that prioritizes the “life of a political cause over the biological existence of its proponents.”³⁴ It is this tension between the material and the metaphysical that leads Bargu to name this phenomenon the weaponization of life rather than the weaponization of the body.

Indeed, the body remains central to the form that each protest takes. My projects asks: what is the relationship between socially or politically rendering a subject incapacitated through incarceration and rendering a body incapacitated through various forms of physical or material intervention such as hunger striking and forced feeding? Here, I draw from Allen Feldman’s contention that even in confinement the body can become its own source of agency. For Feldman, the 1981 Irish hunger strike underscored the ways “the body as the terminal locus of power also defines the place for redirection and reversal of power. In revolt, the prisoner also bifurcates and objectifies the body as an instrument of violence.”³⁵ The Irish Republican “Dirty Protest,” in which prisoners refused to wear uniforms, bathe, or use the bathroom outside of their cells, was a direct response to Margaret Thatcher’s retraction of the prisoner’s “political status.” Status plays an important role in not only the Irish context but also Guantánamo, where part of the impetus behind the early strikes was to gain the title of prisoners of war as opposed to “enemy combatants.” Similarly, the British suffragettes and Irish Republican Army (IRA) prisoners demanded Special Category status, which for them was important in underscoring the political nature of their dissent, as opposed to the everyday crimes of robbery and threat with which they were otherwise associated.

In the Irish context, the excess of force used by guards and prisoners alike at The Maze challenges the regulatory functions of the prison. The political tactics of both the Irish hunger strikers “established a correspondence between institutional performance and biological performance,”³⁶ exposing the ways in which one’s corporeal vulnerability can serve as the basis for empowerment. After four years of the “Dirty Protest,” the IRA decided that another hunger strike would provide the most realistic means by which to gain political status. Bobby Sands would be the first IRA prisoner to hunger strike and ultimately died after sixty-six days of refusing food. Importantly, the Irish and Turkish death fasts highlight how death is the ultimate incapacitation, and that such capacity is a basic human right that should not be subject to state control.

I argue that the force-feeding of prisoners at Guantánamo Bay demonstrates a technological way of rupturing the political defiance of the hunger striker and underscores the power of self-harm to expose what the prison and detention camp seek to hide. In 2005, twenty-three prisoners attempted to hang themselves in their cells at the Guantánamo Bay. The suicide

attempts were said to have been organized in opposition to guards desecrating the Qur'an. None of the prisoners died, but of the twenty-three, the military categorized only two as "genuine" suicide attempts and labeled the rest as "manipulative, self-injurious behavior." The statement from the US Southern Command (the naval base's command center) reported that the men were sent to the behavioral health services unit for evaluation.³⁷

Military officials propagate the binary opposition between madness and reason when considering the government's prisoners accused of terrorism. In her study on the rhetoric of mass suicide, Allison Howell notes that in response to questions concerning alleged acts of self-harm at the naval base, the psychological character of the prisoner figures prominently.³⁸ The US military frames the men held captive, the majority of whom are Arab and/or Muslim, as irrational and unstable. This framing relies on a categorization of Muslims and Islam predicated upon a racialized discourse positioning the East as backward, fanatical, and irrational, and the West as modern, civilized, and rational.³⁹ The hunger strike occurs in response to ethnoracialized violence (e.g., violating the Qu'ran, interrupting prayers, etc.), underscoring the link between religion, supposed irrationality, and forced medical intervention.

Howell notes that discourses of humanitarianism likewise deploy the language of psychology and behavioral science, but towards different ends. Here, the language of victimhood is mobilized to argue that prisoners are traumatized victims, driven to suicide by the unlivable conditions of confinement. Howell characterizes such language as "diagnostic competitions," a "discursive competition about how best to diagnose, and thus depict, the detainees incarcerated at Guantánamo Bay generally, and those who have reportedly attempted suicide more particularly."⁴⁰ Humanitarian responses position the prisoners as mere victims rather than autonomous agents, deeming suicide as an act of desperation rather than a form of protest. Hunger striking, however, appears to be the exception to the rule when it comes to pitting agency and victimization against each other. Howell attributes the omission of hunger striking in human rights discourse to how the practice remains squarely within liberal conceptions of agency. Self-starvation in the context of political protest is deemed active and assertive; suicide, however, is always indicative of some form of mental instability. Indeed, notions of bodily sacrifice do not wholly diverge from the modern liberal political imaginary. Talad Asad's *On Suicide Bombing* argues that modern liberal society takes one of its foundational impulses from the Crucifixion, which indexes a form of self-sacrifice in which the loss of life is justified in the name of redeeming or resurrecting life.⁴¹ Asad uses the example of the soldier who dies to protect a "way of life," and suggests that the horror of suicide bombing might be that it is ultimately consonant with the itineraries of liberalism.⁴² If opposition by the prisoner is not wholly antithetical to the liberal tradition of sacrifice, what then, does the practice of force-feeding target in the hunger striker?

Rather than categorize the hunger striker as agent or victim, my research seeks to elaborate on how hunger striking refuses or defies the prison and detention camp vis-à-vis techniques of self-inflicted violence that push against liberal understandings of freedom as the opposite of force. Asad argues that pain is often regarded as inimical to reason. Suffering, then, is thought of as a human condition that secular agency seeks to eliminate universality.⁴³ "The assumption here is that power—and so too pain—is external to and representative of the agent, that it 'subjects' him or her, and that nevertheless the agent as 'acting subject' has both the desire to oppose power and the responsibility to become more powerful so that disempowerment—suffering—can be overcome."⁴⁴ The secular viewpoint posits that one is either an agent or victim. It is commonly thought that to suffer is to be passive, to be an object not a subject. The

assumption is that the agent always seeks to overcome pain, conceived as object and state of passivity. The secular emphasis on the integral human body as the locus of moral sovereignty makes it difficult to grasp the idea of pain as more than an experience. Rather, pain is part of what creates the conditions of action and experience.⁴⁵ This way of framing is helpful as a heuristic to read force-feeding and prisoner testimonials that narrate the pain induced by the practice in that they offer an opportunity for the formation of political solidarities, especially in response to political subjectification by state authorities. Indeed, pain becomes the basis of subjectivity and relationality between captives and spectators by virtue of its mediation through multimedia representations, such as Yasiin Bey's video project and other recorded carceral and anti-carceral actions/events organized in response to post-9/11 torture.

Force-Feeding and Political Sovereignty

The introduction of, and resistance to, force feeding at Guantánamo is a case study in the current state of the politics of hunger striking. I situate the technology of the feeding tube within the choreography of torture intended to optimize life in the prison. The feeding tube, as a prosthetic, points to the increasing technologization of torture that prioritizes mere biological life. The biopolitics of force-feeding, its liveliness, shows us how a torture instrument such as the feeding tube is aimed at both biological and political life. In 1975, the World Medical Association officially opposed the practice. As Steven Miles asserts in *Oath Betrayed*, the physician is ethically obligated to provide medical information regarding the often-irreversible effects of self-starvation as well as discern whether the prisoner's decision to strike is his own and not one of coercion.⁴⁶ Forcible treatment against the prisoner's consent not only is unethical but is also clearly opposed by the World Medical Association.

My intent is not to argue that the feeding tube is always a torture instrument. Rather, I'm interested in the ways that enteral feeding—the continuous administration of nutrients to the digestive system using a tube—becomes force-feeding within carceral settings.⁴⁷ The example of forced rectal feeding, detailed by the Senate Committee's Report on Torture, is one of the most visceral examples of how actors in the US war on terror have used medical technology to further develop torture practices. Rectal feeding is the administration of nutrients via a tube into an individual's anal passage.⁴⁸ There has not been a medical need for rectal feeding since the 1800s, when alternate modes of delivering nutrition to an incapacitated body were developed. Rectal feeding was the artificial method by which to feed due to "the difficulties in accessing the upper GI tract without also killing the patient."⁴⁹ By the early 1900s, important experimentation was being done with nasally inserted feeding tubes as well as nutritional formulas. The feeding tube as a medical instrument in end-of-life-care is almost exclusively a positive association with the preservation of life and the benefits of assistive technologies. To be clear, my intention is not to undermine the advances in synthetic nutritional products that facilitate a more comfortable and safe experience with a tube-fed diet.⁵⁰ Instead, my research tracks how the functions of the feeding tube are altered and reimagined by the military toward punitive and abject ends in the name of biological life. Whereas in end-of-life care the feeding tube is often conceived as an apolitical assistive technology enabling the consumption of nutrients, I show how within spaces of confinement the military developed the uses of feeding tubes in direct opposition to prisoner led protests.

Foucault's theory of biopower is useful here in conceptualizing how a life-enhancing technology such as the feeding tube should be situated within contemporary understandings of torture. It was at the end of *History of Sexuality, Volume I* that Foucault first referred to his

positive account of power as *biopower*. Foucault contrasted biopower with the ancient right of the sovereign to “*take life or let live*.”⁵¹ Prior to the Classical age, power’s relation to life was one of taking or of letting be. Put differently, the sovereign exercised power only through the right to kill, that is, to repress life. However, beginning in the seventeenth century, the relationship between power and life evolved into something positive and productive. This is not to say that the sovereign was no longer able to take life. Rather, the sovereign deployed power strategically toward the optimization of life. On this shift, Foucault states, “The ancient right to *take life or let live* was replaced by the power to *foster life or disallow* it to the point of death.”⁵²

Death, or the threat of death, could no longer subjugate “legal subjects” in the way it did previously through sovereign power. Mastery could now be forged at the level of “life itself.” Yet, for power to master “life itself,” new forms of continuous regulatory discourses had to be produced. Unlike sovereign formations of power in which both the threat and act of putting a subject to death served as the final manifestations of power, biopower needed a flexible and reproductive organizing structure. However, this ability to make live or to let die was not only the power to generate life but also the power to decide what constituted a healthy and productive body. Through the regulatory (the population) and disciplinary (the individual body) poles of biopower, the rights of man came to be structured around capacities and needs. On this, Foucault writes:

In concrete terms, starting in the seventeenth century, this power over life evolved in two basic forms. . . . The first to be formed, it seems-centered on the body as a machine: its disciplining, the optimization of its capabilities, the extortion of its forces, the parallel increase of its usefulness and its docility, its integration into systems of efficient and economic controls, all this was ensured by the procedures of power that characterized the disciplines: an anatomo-politics of the human body. The second, formed somewhat later, focused on the species body, the body imbued with the mechanics of life and serving as the basis of the biological processes: propagation, births and mortality, the level of health, life expectancy and longevity. Their supervision was effected through an entire series of interventions and regulatory controls: a biopolitics of the population.⁵³

Thus, biopower, as the introduction of life into power, names the techniques for achieving the subjection of bodies and the control of populations. The terms *control* and *population*, then, become significant as the necessary precursor for “control” of a subject is life. Force-feeding presents a paradox that is at once emblematic of Foucault’s biopower while also functioning as an incapacitating technique. Force-feeding poses a conceptual challenge to the biopolitical regime, where “make live and let die” takes on a specific valence in the case of hunger strikes in prison. “Making live” and “letting die,” here, do not necessarily hold as separate categories, as forcing the body to live has become a form of control.

If biopower’s function is to make live, then “how can it let die?” Critics such as Achille Mbembe question whether a Foucauldian framework sufficiently accounts “for the contemporary ways in which the political, under the guise of war, of resistance, or of the fight against terror, makes the murder of its enemy its primary and absolute objective.”⁵⁴ Bargu similarly asserts that what frames modern forms of governance is both “thanatopolitics” as well as “biopolitics” and calls the assemblages of practices where both life and death are made into objects of knowledge “biosovereignty.” Undoubtedly, biosovereignty—as the “discourses and practices, signs and actions that define the power regime that currently emerges at the intersection of different

modalities of power”⁵⁵—produces techniques of war such as forced-feeding. However, the effects of such techniques are better apprehended as practices of incapacitation rather than death.⁵⁶

Throughout the four chapters comprising *Technologies of Incapacitation*, I ultimately argue that force-feeding underscores the violence of “life”-sustaining measures that produce a living death for its subjects. Here, suspended animation is conceptually useful to consider the relationship between medicalized modes of torture and indefinite confinement authorized by the sempiternal war on terror that has been ongoing for nearly two decades. By situating force-feeding practices at Guantánamo Bay into a history of medical experimentation, I reveal the inadequacies of prevailing theories of biopower, theories that are not capacious enough to account for how state sponsored torture is underwritten by the operation of Islamophobia and institutionalized racism. Tracing out an archaeology of state torture with the tools of critical prison studies and science and technology studies reveals Guantánamo Bay as neither a space of life nor death, but rather suspended animation, a pointedly medicalized mode of living death.

Chapter One: Vivisectional Mandate: Behavioral Science and Torture from the Cold War to the War on Terror

While military battle usually destroys the body, torture disturbs it, dismantles it in order to reach the mind, open it, and pave the way for its rearranging.

—Marnia Lazreg, *Torture and the Twilight of Empire*⁵⁷

From the role of military psychologists in developing “enhanced interrogation techniques” (EIT) to the detention hospital staff at Guantánamo Bay who monitor hunger strikers and administer force-feedings, the “psy” disciplines of psychology and psychiatry have played a pivotal role in managing captives of the war on terror. As is now well established, during the 1950s and 1960s, the Central Intelligence Agency (CIA) developed many interrogative methods based on research in the behavioral sciences.⁵⁸ Experiments focusing on brain-change activity in subjects exposed to prolonged isolation became the basis for *The CIA Document of Human Manipulation: KUBARK Counterintelligence Interrogation Manual*, which detailed how best to implement techniques of psychic coercion onto Communist captives of war.⁵⁹ Taking this history into account, this chapter follows how this Cold War experimentation in thought reform and debilitation, a regime for torture, sets the stage for the war on terror in the twenty-first century. Through the valence of vivisection—the involuntary, experimental opening up of organisms—I argue that while today’s behaviorists continue to emphasize the mind, the torture techniques of the war on terror mark a scientifically articulated conceptual shift between mind-brain and mind-body that amplify Cold War debilitation towards unspecified ends.

In particular, I situate the EIT of the turn of the twenty-first century war on terror within a longer itinerary of Cold War behavioral science. My objective is to track the shift between two methods of human experimentation: those that focused on the role of brain activity in disciplining subjects throughout the Cold War and technologies of incapacitating the body and mind deployed by military psychologists in the war on terror, such as waterboarding and force-feeding. I argue that there is no complete rift between the Cold War and the war on terror when it comes to the centrality of the mind in the US state’s attempts to understand how its perceived enemies think and act. Indeed, the psychological character of prisoners has figured prominently in the sociocultural imaginary of the war on terror, with the US military framing Arab and Muslim communities as irrational, unstable, and what Shaista Patel names “mad Muslim terrorist[s].”⁶⁰ If the behavioral scientists of the Cold War era aimed to crack the mind by studying the brain, how have the behavioral scientists of the war on terror continued this work while also departing methodologically in how they target their subjects?

The doctor and/or scientist of the Cold War was invested in exploring what possibilities the brain had to offer in burgeoning modes of social control. The idea was that if the mind could be successfully penetrated, then the regression of the body would follow. As Marnia Lazreg argues in *Torture and the Twilight of Empire*, nation-states use torture to conquer racialized and gendered populations of occupied territories. “The conquest of information,” she writes, “substitute[s] itself for the conquest of the population.”⁶¹ Here, torture becomes a vehicle to convince the subjected of the “just cause of war and empire.”⁶² Although Lazreg was writing on the Algerian War, her analysis is relevant to this chapter’s aim. The Cold War did not simply attempt to experiment on the mind to elicit information from enemies. Rather, the objective was to rearrange the mind at the level of ideology in order to convert the Communist or other

prisoner into the ideal Western subject. This emphasis on conquering or breaking the mind of the abject “other,” I contend, continues into the war on terror with the use of behavioral science research in selecting interrogation techniques.

The Cold War and the war on terror present two different regimes of power/knowledge of torture. The Cold War studied the functionality of the brain as a way by which to target the mind of the supposed communist spy in order to elicit information. The mind-brain relation was predicated on a notion of manipulating the brain to produce a particular outcome that would facilitate confession while also converting the deviant subject. The rhetoric of Cold War behavioral science had a very clear objective: that through enough research on the brain the mind could be successfully manipulated to produce the kind of output that both scientists and interrogators were looking for. This is to say, the torture techniques of the Cold War aimed to produce accurate information that would be useful strategically. The war on terror’s torture regime is still oriented towards the production of information, but it’s not utilitarian in the same ways as its predecessor. Utilizing contemporary theories of the mind-brain, the war on terror understands how the brain will produce states of intolerability for the subject regardless of the usefulness or accuracy of the information that is obtained. Instead, power/knowledge produces the legibility of behavioral science through enacting forms of physical degradation towards unspecified use. The war on terror torture regime reimagines a new docile subject, then, one that’s dissociated from the notions of “truth” articulated in the Cold War—“truth” that had predetermined use for gathering intelligence in the fight on Communism.

The chapter argues that while there is no definitive break between the two torture regimes, their disjunctures demonstrate that vivisection has conceptually and practically been reimagined as torture regimes adapt out of bureaucratic, legal, and scientific necessity; a shifting understanding of the relationship between mind-brain and mind-body where behavioral science begins to understand the brain and mind as constitutive of each other as opposed to separate sites. This is all to say, both mind and brain are socially produced and racialized concepts where notions of truth produced through torture are less about content than about the ability to apprehend the threshold between mind-brain and mind-body. The war on terror’s departure, then, hinges on how much force can be enacted on the body while still purporting to produce scientifically legible information for the sake of experimentation.

Through an analysis of psychological studies on the brain and army field manuals from the 1950s and 1960s, the first half of the chapter details the role of behavioral science in developing the interrogation methods adopted by the CIA during the Cold War that were used on “enemy agents,” such as Soviet intelligence officers. Such experimentations in thought reform were also implemented in US prisons, giving rise to practices such as solitary confinement. The end of the chapter shows the relationship between the psychologists and psychiatrists researching behavior and thought reform throughout the Cold War and its current iteration in the contemporary war on terror.

Targeting the Brain: CIA Experimentation as Vivisection

Various CIA interrogation programs throughout the 1950s recruited and hired psychologists to perform brain research in both the United States and Canada. The studies on the brain of this period are generally understood as a less brutal or civilized form of human experimentation. This section, however, argues that Cold War behavioral psychology emerges out of a longer history in racial science that sought to congeal gender, race, and sexuality as a way to delineate the category of the human.

The connection between the state, interrogation, and medical professionals was made explicit by World War II, which marked a moment of international concern regarding human experimentation and the role of science in the service of state war. In 1942, President Franklin D. Roosevelt established the Office of Strategic Services (OSS), which conducted special operations in the service of espionage. Preceding the Nuremberg trials and the National Security Act of 1947 was a succession of criminal trials involving the military officers and physicians of the Third Reich. These trials sparked conversations about the ethics of human experimentation, and, with the Nuremberg Code, formed the universal standard for what constitutes ethical experimentation on human subjects.

In 1947, the OSS was renamed the CIA, precipitating the agency's experimentation with drugs such as lysergic acid diethylamide (LSD). The end of the Korean War (1950–53) exacerbated anxieties about the relationship between the United States and the USSR, and the United States began its fight against Communism in earnest. The Soviets had been researching human consciousness; the CIA felt pressure to generate research in the burgeoning field of behavioral science as well. What the CIA's 1950s experimentation with "brain washing" techniques suggests is that psychologists of the period experimented on the brain in order to better access the mind, which was perceived as extremely malleable, suggestable, even capable of being emptied and reorganized to replace a noncompliant or deviant personality with a more acceptable and cooperative one.

The fifties not only brought together weapons and medicine in an unprecedented way but also saw a reinvention of vivisection, where the human brain was now being probed in attempts to understand the effects of external stimuli on the mind and body. I argue that vivisection, in this period, came to mean any experimental manipulation, not just surgery or the cutting open of the body. Researchers used techniques including sensory deprivation, sensory overload, intensive group therapy, and involuntary administration of drugs such as antipsychotics, tranquilizers, and muscle relaxers to make individuals more suggestable in various contexts. Understanding the contours of the brain became an explicit objective of various CIA interrogation projects, such as Project Bluebird, discussed below. The change in who and what you could experiment on laid the foundation for what was to become torture in the Cold War, with implications for understandings of vivisection and the relationship between mind-brain-body.

Project Bluebird is considered the earliest of the CIA's programs to develop mind control drugs for use against the Soviet Bloc. Bluebird's objectives were "discovering means of conditioning personnel to prevent unauthorized extraction of information from them by known means, investigating the possibility of control of an individual by application of special interrogation techniques, memory enhancement, and establishing defensive means for preventing hostile control of Agency personnel."⁶³ The program also investigated "unconventional" interrogation techniques involving LSD and hypnosis. Project Chatter, a Navy program, emerged directly out of Project Bluebird in 1947. Project Chatter was really the inception of the CIA's experimentation with drugs on altering consciousness and is said to have been conceived to match the Soviets' use of "truth serums," a range of psychoactive medications that put subjects into a loose dream-like state, enabling the extraction of information that they would otherwise be reluctant or unwilling to provide.⁶⁴ The focus of the program was to identify such drugs and their usefulness in Soviet interrogations. The project expanded significantly following the Korean War but ended in 1953. Out of Chatter came Project Artichoke, a CIA-led psychological and political program aimed at competing with Soviet propaganda, which operated from 1951–56.

Project Artichoke also conducted experiments that mixed drugs with hypnosis. Alfred McCoy reports that the combination was first used on two Soviet double agents. Artichoke reported back to the CIA that the subjects were held in a trance for nearly two hours and were interrogated but remembered nothing due to “amnesia produced by post-hypnotic suggestion.”⁶⁵ In addition, Artichoke conducted experiments on CIA staff inside headquarters. Yet, as the Lexington study—also under the purview of the CIA—suggests, the way Project Artichoke targeted populations followed the racial hierarchies of a white supremacist state. This particular study was conducted at the Lexington Rehabilitation Center, a prison for drug addicts in Kentucky. Here, black prisoners were administered hallucinogenic drugs and were given the drugs of their choosing as compensation.⁶⁶ The CIA received approval by the US Department of Health, Education, and Welfare to use federal medical facilities for experimentation with drugs and interrogation practices. The subjects were nearly all black Americans.⁶⁷

American science has a long history of targeting the black body from the plantation to the laboratory. Most notably, 1932 marked the inception of the “Tuskegee Syphilis Study.” The US Public Health Service believed that syphilis attacked the neurological system and brain in whites, but that in black men it attacked the cardiovascular system; it attributed this to the belief that black Americans had more “primitive and underdeveloped brains.” The study began as an attempt to document these differences by finding a pool of black men with untreated syphilis and purposefully withholding treatment—but convincing the test subjects that they were in fact being treated as opposed to simply being observed. Science has understood racialized and gendered populations as bearers of disease as well as conduits of information for understanding disease prevention. Also in the early 1950s, doctors cut a piece of cancerous cervical tissue from Henrietta Lacks, a black woman being treated for cancer at Johns Hopkins University. Live cells from her initial biopsy were grown in test tubes and kept at body temperature in an incubator. She died eight months later without ever knowing the impact that her biological labor would have on modern science. The descendants of these original cells continue to grow in laboratories.⁶⁸ The biologizing techniques of public health and human experimentation are not merely informed by prevailing theories of race and sex. Rather, they themselves shape these theories, facilitating the reproduction of social differentiation. Sex and gender are themselves, then, the effects of medical knowledge predicated upon racial science.⁶⁹ Such instances of racial science, such as the coercive extraction of Lacks’s cells, point toward medicine as an enterprise premised on normalizing the vivisectional imperative at the heart of science. Or thought differently, the vivisectional imperative is about extraction of knowledge at the biological level from subjects deemed inferior and in so doing transforms the subject into mere scientific instrument that collects data.

Vivisection proves a productive analytic here, as it helps to trace the move from a genocidal logic of torture that precedes the Cold War to a scopic regime of biologized torture. One framework for understanding the role of behavioral science in the Cold War and war on terror, then, is through what historian of science Shiv Visvanathan calls the “vivisectional mandate.” For Visvanathan, vivisection is foundational to the violence of modern science. He defines it as the experimentation and infliction of pain on humans and animals in the name of scientific advancement.⁷⁰ It is the violation of the body in search for “scienticized” production and control. The practice of vivisection dates back to ancient Greece and Rome and was first publicly debated in the United States in 1863. The Enlightenment, which brought questions of who could be classified as human into stark racial relief, was led by European philosophers and

traders who justified the use of African chattel slavery and indigenous genocide through a colonial hierarchy of the human.

This debate shifted halfway through the seventeenth century, and philosophers became concerned with the morality of practicing vivisection on animals.⁷¹ An argument emerged, however, that if vivisectioning animals was cruel, then slaughtering and eating animals must also be cruel. People saw animals as justified victims of science, at once martyrs and machines to be dismantled. Here, there is a continuum between the justified vivisection on animals and the necessary animalization of racialized humans in order to recreate the same justification. Visvanathan writes that “modern management has its origins in the in the vivisection of the animal body” and that factory assembly lines were preceded by “meat conveyor belts in the packing industry.”⁷² This speaks to what Charis Thompson understands as the “distinction” and “connection” that bioethical research makes between humans and animals. Writing about stem-cell research, Thompson elaborates that “animals were thought of and used as appropriate biological tools and models for, and necessary ethical replacements of, humans in the early stages of research.”⁷³ The pain experienced by animals and humans alike is considered excusable insofar as it is seen as the condition of possibility for medical advancement.⁷⁴ This is what Visvanathan calls *social triage*: the deliberate decision or act on the part of a state to define a target group within its territory as dispensable.⁷⁵ The Cold War practices of administering toxic substances to unwitting subjects and exposing them to hazards such as radiation, chemical products, vaccines, and infectious agents should be situated within longer histories of racial science. Here, I argue, we see another iteration of vivisection, one that is not about living or dying but biopolitical subjection, which treats racialized and gendered humans as organisms that exist for the benefit of more privileged populations, or what postcolonial philosopher Sylvia Wynter refers to as “Man’s human Others.”⁷⁶ Such biologized genres of vivisection emerge out of and maintain “hegemonic terms of our present biocentric . . . conception of what it is to be human, of *its* ‘name of what is good.’”⁷⁷ This history precedes Project Artichoke, as well as its predecessor Project MKULTRA’s investment in the brain as a tool to categorize human subjects and control behavior toward specific ends.⁷⁸

Project Artichoke officially ended in 1956 and, although the dates are debated, it is generally understood that the infamous Project MKULTRA emerged from Artichoke in 1953 and ran until 1964. Sidney Gottlieb, a poison expert, became the head of MKULTRA, acting as chief of the technical services division. (He went on to gain fame for administering LSD and other psychotropic drugs to unwitting participants.) MKULTRA researched and developed chemical, biological, and radiological materials to be used in interrogative operations with the intent of altering and controlling human behavior. Most of its records were destroyed in 1973. By the end of the program, the term *brainwashing* was conventionally administered, understood to be a “process of isolating a human being, keeping him out of contact, [and] putting him under long stress in relationship to interviewing and interrogation.”⁷⁹ Brainwashing was believed to produce results without resorting to “any kind of esoteric means.”⁸⁰ Which is to say, the technologies that facilitated brainwashing were viewed as a civilized response to totalitarian terror. The logic behind brainwashing—to study the brain so as to better control the subject—is precisely that which exposes how the nation-state’s deniability of vivisection hinges on constructing its practices as banal in addition to maintaining the fiction of an enemy that only science can make known.

MKULTRA operated as an umbrella project, ultimately investing in 149 subprojects. Most were concerned with researching drugs and behavior modification and were funded by the

Society for the Investigation of Human Ecology, a covert company established to research behavioral sciences. Most participants were unaware that their projects were being funded by the CIA. Most were designed to counteract foreign enemies' use of drugs as a weapon against the United States, thought to be a major threat. Integral to MKULTRA were the physicians, psychologists, and psychiatrists conducting tests on human subjects. The 1963 Inspector General Investigative Report on MKULTRA states that there were eight subprojects on hypnosis and drugs, nine on behavior and sleep, and twenty-three about training and interrogation techniques. Radiation, electroshock, behavioral psychology, psychiatry, sociology, anthropology, harassment substances, and paramilitary devices were all methods through which MKULTRA sought to control and manipulate human behavior. The institutions that provided such sites were forty-four universities, fifteen research foundations or chemical pharmaceutical companies, twelve hospitals, and three penal institutions. Their experiments emphasized, above all, manipulating consciousness in order to induce regression in the subject.⁸¹

The advent of CIA brainwashing operations superimposed a eugenic logic onto the idea of the American nation itself. A regime not of sadism but highly technological enterprises aimed at novel research in the brain sciences and psychological profiles of the enemy's mind. This science of torture, sometimes referred to as "brain warfare," was a means by which to simultaneously erase and contain more straightforwardly eugenic histories.⁸² The brain had simply become the newest site by which to enact upon a more advanced version of vivisection put forth in this section.

Technologies of Debilitation, or Emptying the Brain

If brainwashing was understood as an attempt to infiltrate the mind, what, then, were the burgeoning technologies in psychology and medicine to do so? Technologies such as the electroencephalogram (EEG) aided in thought-reform experiments by providing a visual representation of brain activity. Brain waves, the communication between neurons within the brain, now was thought to tell a story not just about the brain as an organ but also about the behavior and consciousness of a person. This would forge a new understanding of the relationship between mind-brain-body that the behavioral sciences, but in particular military psychology, sought to master.

The work of Canadian psychologists Donald Hebb and Donald Cameron matured how brainwashing came to be conceived as a technique for extracting information and how such behavioral research would be implemented in CIA training manuals. Hebb and Cameron did not introduce brainwashing as such; as the previous section made clear, techniques of altering the mind were already in place, but the two doctors were instrumental in maturing the science behind brainwashing's role in interrogation. In the 1950s, many still viewed the mind and brain as strict dualities. For instance, the neurophysiologist Sir Charles Sherrington stated that "we have to regard the relation of mind to brain as still not merely unsolved, but still devoid of a basis for its very beginning."⁸³ The experiments of Hebb and Cameron depart from this view, however. Indeed, the experiments conducted at McGill University throughout the fifties and sixties suggests at least a cursory understanding that mind and brain are constituted by each other—that is, they anticipated the premise in contemporary neurobiology that "mind is what brain does."⁸⁴ If the mind was, in fact, a property of the brain, the capacities by which to intervene in the brain, then, were of paramount importance.⁸⁵

Hebb, one of the more famous doctors of the Cold War period, was a specialist in neuropsychology. In 1947, after briefly studying primate behavior in Florida, Hebb returned to

Canada as a Professor of psychology at McGill University, where “his broader ambition was to solve the riddle of the relationship between the biological functions of the brain as an organ and the higher functions of the mind.”⁸⁶ In particular, he began research on sensory deprivation and isolation tanks, theories later adopted by the CIA. His research interests led to the CIA offering to fund a study on how “the presence and absence of stimuli affected consciousness.”⁸⁷ And in 1951, Hebb received a grant from the Defense Research Board of Canada to study the effects of prolonged monotony on the brain. Canada remained in the shadow of the United States throughout the Cold War but was just as complicit in the development of anti-communist intelligence operations. The Quebec Agreement was signed by President Franklin Roosevelt and British Prime Minister Winston Churchill in 1943. The agreement ensured British and American collaboration on the aforementioned Manhattan Project. As such, Canadian involvement was assumed, and in 1944, Canadian scientists and technicians joined the multinational team in the United States.

Canada’s McGill University was a central site for exploring the link between brain and mind. Hebb’s test subjects were college-aged men who were paid twenty dollars a day. They lay on a bed for twenty-four hours while wearing visors that transmitted light while preventing pattern vision. They were given cotton gloves to prevent them from touching anything, as well as cardboard cuffs that extended beyond their fingertips. Auditory perception was limited through white noise and a U-shaped foam pillow. Wires connected to an EEG in an adjacent room were attached to each subject’s scalp. In an EEG, which eventually became the preferred technology for diagnosing patient deaths in hospitals, probes are stuck to the head in order to capture variations in electrical activity in the brain and then print those variations as a series of wavelengths. The EEG differentiates between a dormant brain and an active brain. The machine detects changes to the normal pattern of the brain’s electrical activity, which is helpful in diagnosing tumors, epilepsy, brain damage, and sleep disorders. Hebb found that cutting the human brain off from external stimuli for significant time results in hallucinations, irritation, and “blank periods” in which the subject thinks nothing at all.⁸⁸

Woodburn Heron, one of Hebb’s students who helped conduct the initial experiment, writes that “nearly all of [the men] reported that the most striking thing about the experience was that they were unable to think clearly about anything for any length of time and that their thought process seemed to be affected in other ways.”⁸⁹ Of most interest to Hebb and his colleagues was the side effect of hallucinations. The test subjects reported that their hallucinations began as cartoonish and entertaining but became progressively more disturbing with time and encompassed vision, hearing, sensation, and touch. The men emerged from the experiment with their visual perception extremely skewed: the room appearing to be in motion or objects changing in size and shape. Notable in the brain activity of participants was “a tendency for slow waves, which are normally present in sleep but not when an adult is awake, to appear after a period of isolation.”⁹⁰ Heron cites contemporaneous brain studies that discovered that the reticular formation in the midbrain regulates the brain’s activity. Significant to Hebb’s experiment was that “normal functioning of the brain depends on a continuing arousal reaction generated in the reticular formation, which in turn depends on constant sensory bombardment.” Without stimulation, the brain begins to behave “abnormally.”⁹¹ Inside of mental asylums the “abnormal brain” had already become a locus of mental pathology prompting the popularization of lobotomies that literally cut into the brain, not in an attempt to better understand its contours but to discard it.

The vivisection lobotomies and even electroshock sought to replace people with mere silhouettes, not so unlike Hebb's approach.⁹² Behavioral psychologists were observing brain waves through EEGs and drawing conclusions about the exterior behavior and the interiority of the individual. Technologies such as the x-ray, computerized tomography (CT) scans, and magnetic resonance imaging (MRI) visualized the brain, making illness, addiction, and other pathologies visible and, thus, demonstrating that such pathologies are physical rather than ailments of the soul. Sociologist Nikolas Rose writes that "when mind seems visible within the brain, the space between person and organ flattens out—mind is what brain does."⁹³ By the seventies, it had been established that

The brain is an organ like any other . . . all mental processes reside *in the* brain . . . and each mental process will react, or be mediated by, or have something variously described as a correlate, an underpinning, or a basis, in brain events . . . and any mental state or process (normal or abnormal), and the behavior associated with that state or process (normal or abnormal), will have a relation—exactly what relation is in dispute—with a potentially observable material process in the organic functioning of the neuromolecular processes in the brain.⁹⁴

Thus, response to stimuli doesn't happen simply inside of the brain itself. Rather, if we take that the mind is what the brain does, as Rose describes above, then the brain is also a property of systems of meaning within the social. Our responses to stimuli do not lie in the neurons, which transmit information, but in the socialization of our response. Hebb's quest to understand the physiology of the brain at the level of neurons and their effects on reflexes to stimuli under duress is a precursor to attempts at showing definitively how the brain can change the mind. Put differently, "minds are properties of that organ of the body that we term the brain. And brains make humans human, because the minds that constitute their humanity emerge from their brains."⁹⁵ In his studies, Hebb notes that the mind will do what the brain does, making both penetrable, malleable.

Though Hebb's experiments would greatly influence the CIA, it is unclear how implicated he understood his work as being in interrogation and torture practices. His colleague Donald Ewen Cameron, however, was notorious for his investment in helping military neuroscience aid in social control through experiments "correcting schizophrenia by erasing memories and 'reprogramming' psyches."⁹⁶ Cameron was stationed at the Allan Memorial Institute at McGill University between 1957 and 1964, where he carried out MKULTRA experiments and was a pioneer in behavioral and social psychology. He experimented with LSD, electroconversion therapy, and psychic driving. Importantly, he oversaw the construction of the Radio Telemetry Lab, where patients were exposed to electromagnetic signals in order to track changes in their behavior. They were strapped into chairs and electrodes and transducers attached to their heads. If the person resisted, the researchers administered curare, a muscle relaxant:

The subject's brain waves were beamed to a nearby reception room crammed with voice analyzers, a wire recorder and radio receivers. . . . The systematic annihilation, or "depatterning" of a subject's mind and memory, was accomplished with overdoses of LSD, barbiturate sleep for 65 days at a stretch and ECT [electro] shocks at 75 times the recommended dosage. Psychic driving, the repetition of a recorded message for 16 hours a day, programmed the empty mind.⁹⁷

The institute was eventually sued by former patients who argued that that they suffered lasting physiological and emotional effects from the procedures, from "near-total amnesia and loss of

speech to total incontinence.”⁹⁸ For Cameron, however, the permanent distress suffered by patients merely signified that greater attention needed to be paid to how much brain waves could be controlled and at what point the impacts of intense stimulation on the brain became irreversible. He “had found the threshold beyond which sensory deprivation and manipulation rendered Humans so incapacitated that they were of no practical use as pliable tools in the superpower rivalry. The goal, after all, was to coerce enemy agents to talk, not babble.”⁹⁹ Hebb’s and Cameron’s behavioral methods had little to do with politics, ethics, or morality and much more to do with capitalizing on their complete control over vulnerable prisoners.

Cameron’s and Hebb’s experimentation on the human brain did more than simply service CIA counterterrorist efforts. Rather, their approach to the brain maps on to studies to come that argue for “the belief that we can see the mind in the living brain, can observe the passions and its desires that seemingly underlie normal and pathological beliefs, emotions, and behaviors.”¹⁰⁰ Put otherwise, this could be thought of as the mind-brain-body relation, functionally holistic despite the fiction mobilized by the state that thought reform constitutes a civilized weapon against its enemies—one capable of inciting “truth” while leaving the body unscathed.

***KUBARK* and the Utility of Isolation and Pain**

Counterintelligence research compiled in the 1950s and 1960s through Hebb’s and Cameron’s studies on the brain, as well as Project Artichoke and MKULTRA’s early research in the debility of prisoners of war, was ultimately assembled in *The CIA Document of Human Manipulation: KUBARK Counterintelligence Interrogation Manual*. Written in 1961 and used by the CIA as a training manual in the eighties and nineties, *KUBARK* outlines how agents should approach interrogation—a guide to the craft. “There is nothing mysterious about interrogation,” the introduction states. “It consists of no more than obtaining needed information through responses to questions. As is true of all craftsmen, some interrogators are more able than others; and some of their superiority may be innate.”¹⁰¹ Here, the interrogator’s approach is intent on perfecting the art of human psychology—asking the right questions and the ability to decipher the answers. Following this logic, interrogation is about reading the body through the study of voice. This section explores how this logic introduces another vivsectional mandate, one that is less concerned with formal instructions in applying torture techniques and more about instrumentalizing pain in an effort to incite speech.

KUBARK’s emphasis on psychological profiles, however, eclipses the brutality inherent to interrogation techniques; the supposed distance between the interrogator and the interrogatee’s body enables the military to figure interrogation as a craft that departs from the laboratory’s experimentation on the body. The implied opposition between craft and science, however, is not particularly useful, in that science itself is also a craft where researchers seek to advance both theories and their application. Instrumentation, then, becomes a central component of the manual articulated primarily through the language of craft. The opening pages of *KUBARK* juxtapose interrogation as a craft against the resistance of increasingly trained and experienced Communist and KGB interrogatees. The manual stresses the importance of engaging with burgeoning “scientific findings.” Its techniques include arrest, detention, deprivation of sensory stimuli through solitary confinement, threats and fear, pain, heightened suggestibility and hypnosis, psychotropic narcotics, polygraph tests, and induced regressions.¹⁰² Such coercive practices induce debility, dependency, and dread in the subject. The manual makes clear that the interrogator must capitalize on this dependency before the interrogatee becomes completely

apathetic.¹⁰³ Sensory deprivation, it notes, induces unbearable stress, which can lead to hallucinations:

The more completely the place of confinement eliminates sensory stimuli, the more rapidly and deeply will the interrogatee be affected. Results produced only after weeks or months of imprisonment in an ordinary cell can be duplicated in hours or days in a cell which has no light . . . which is sound proof, in which odors are eliminated. . . . An environment still more subject to control, such as water-tank or iron lung, is even more effective.¹⁰⁴

KUBARK recommends coercion methods, but only to the extent that the CIA finds them effective in manipulating the subject into believing there is no real benefit or use to not delivering “truthful” intelligence.

The body does not always make visible the inscription of its abuse, as is often the case with psychological techniques of torture. Darius Rejali argues in *Torture and Democracy* that the proliferation following the Cold War of human rights reports documenting and exposing torture to better hold state actors accountable “encouraged torturers to invest in less visible, and hence harder to document, techniques.”¹⁰⁵ These are referred to as “stealth torture” or “clean torture.”¹⁰⁶ So long as the body does not bear the physical marks or traces of torture, the lasting effects of the method can remain debatable and legally sanctioned. The implications for stealth torture on conceptualizations of mind-body-brain are that it instills doubts about what constitutes violence and how to make such violence intelligible if one can’t visually decipher it. The widespread deployment of stealth torture in the wake of *KUBARK* marks another moment in the history of vivisection whereby the military-scientific nexus is determined to distinguish between mind-brain-body in an attempt to evade recognition of the severe and oftentimes permanent effects of isolation on a subject.

The emphasis placed on craft, then, is one of the many grammars of vivisection. The *KUBARK* manual echoes the contention that torture is a craft, not a science. Rejali maintains that there are expectations associated with which technique is deployed and why, but never any guarantees that a technique will work. There is a “learning pattern in torture” due to the way torture has transformed over the centuries.¹⁰⁷ However, Rejali argues that this learning occurs through watching and observing, not from reading manuals. “Torturers may customize torture to the needs of the situation and the character of the prisoner.”¹⁰⁸ Interrogators pick up techniques through habits, training, and environment and geopolitical customs. Following Rejali, the psychology of behavior modification and the interrogation manuals it has inspired work less as “specific instruction in torture techniques” and more as arguments for the instrumentality of pain or isolation to induce “psychological regression.”¹⁰⁹ There is a disjointedness between the technologies used to research the brain and their practical application for the purposes of conducting interrogations. In this context, torture emerges out of “high technology” but is then administered in a more practical fashion. This speaks to the vast network of torture and vivisection, which relies on an assortment of actors to discover and produce knowledge. What binds these various actors together extends beyond simply a common “enemy” found in the communist or similarly deviant subject. Rather, the components of this network are bound through continuities in the administration of pain and the defilement of the mind-body.

The psychological emphasis of the manual is explored throughout *KUBARK*’s first half which deals with “noncoercive” approaches that develop a bond between the interrogator and interrogatee. One important study for *KUBARK* was the *Communist Interrogation and Indoctrination of “Enemies of the States”* by Lawrence Hinkle and Harold Wolff. Taking the

Russian and Chinese states as case studies, Hinkle and Wolff detail how “the Communists” extract information from their prisoners and convert their behavior and thinking. The study asserts that these interrogation methods were developed by the KGB but “refined” and intensified by the Chinese. It describes the architecture of Soviet detention prisons, including ensuring that the height and width of the cells would allow them to be occupied by only one person. It is clear just how important isolation is to detainment. The prisoner’s routine is rigid and completely solitary outside of interrogations. Sitting or standing in a fixed position for very long periods is also part of the “detainment regimen.”¹¹⁰ This eventually led to a preference for the “clean torture” described above, which would influence how US prisons manage and punish the most vulnerable of their prisoners. Here, I am less interested in what kind of pain such regimens produce and more in observing how Hinkle and Wolff approach pain as that which can be stretched and produced responsively to one’s environment.

Hinkle and Wolff argue that isolation creates a “disease syndrome,” a set of symptoms that begin to appear after a significant amount of time in isolation. Bewilderment is soon followed by making demands or attempting to appeal to the sympathies of the guards. But soon, the “period of anxiety, hyperactivity, and apparent adjustment to isolation” sets in, and the prisoner begins to submit, becoming increasingly dependent on his captors. It takes four to six weeks to transform the prisoner from resistant captive to a docile “trained animal.”¹¹¹ Isolation, anxiety, and fear make the prisoner willing to talk to the interrogator. But if that is not sufficient, fatigue and lack of sleep become powerful tools in breaking them down further. Constant light in the cell, stress positions in bed, and awakening the prisoner at different times throughout the night are all mobilized as tactics. Other aspects of the environment can be manipulated: keeping the temperature too high or low, rationing food so that the prisoner is constantly hungry. Hinkle and Wolff note that the “Communists do not look upon these assaults as ‘torture’” and that they “use the methods which they do in order to conform, in a typical legalistic manner, to overt Communist principles, which demand that no ‘force or torture be used in extracting information from prisoners.’”¹¹² The assumption is that physical pain might be a barrier to truth, but isolation creates dependency—which, in turn, produces talking. If brain research sought to apprehend how the subject responds to external stimulation, then *KUBARK* is a manual for interpreting and experimenting with said responses, and in particular pain as a response.

Illuminating to read alongside *KUBARK* is Elaine Scarry’s *The Body in Pain*, which describes the relationship between pain, interrogation, and power. The prisoner’s pain is the torturer’s power; it necessitates the transformation of the body into voice. But this transformation relies on a set of oppositions between the prisoner and the torturer:

The torturer experiences his own body and voice as opposites; the prisoners experiences his own body and voice as opposites; the prisoner’s experience of the two is an inversion of the torturer’s. . . . The pain is hugely present to the prisoner and absent to the torturer; the question is, within the political fiction, hugely significant to the torturer and insignificant to the prisoner; for the prisoner, the body and its pain are overwhelmingly present and voice, world, and self are absent; for the torturer, voice, world, and self are overwhelmingly present and the body and pain are absent. These ultiple sets of oppositions at every moment announce and magnify the distance between torturer and prisoner and thereby dramatize the former’s power, for power is in its fraudulent as in its legitimate forms always based on distance from the body.¹¹³

Perhaps most significant is how torture turns the prisoner into both an active and a passive agent. Boundaries between inside and outside become blurred as one's own body willingly participates in confession and torture exercises. However, the body, which acts as a "willing" agent, no longer belongs to the prisoner in any real sense. It is not the interrogatee's body as such that matters to the interrogator but, rather, the interrogatee's voice—in hopes of extracting "truth," whatever that may be. Truth, in the manual, is not only about what the interrogator *sees* but his interpretation of what he *hears*, which is to say his interpretation of the interrogatee's mind, a confirmation of that which is always already established. As this chapter has argued, science itself is implicated in producing truths about who or what will constitute internal and external threats to the nation. This, in turn, produces "self-fulfilling results" on behalf of the interrogator at the same time that it enables the duration of torture to intensify for it "presupposes that one has gathered circumstantial information that allows one to know the truth when one hears it."¹¹⁴

Important to note is that "truth" is never unpacked in the manual. There is no real sense of what kind of information is desirable or toward what ends it will be used. Although, the final section of *KUBARK* is concerned with manipulation and coercion, describing different tactics of pain and debilitation and their utility for the extraction of truth. We are told, however, that "all coercive techniques are designed to induce regression. This works to debilitate the interrogatee, make him or her dependent upon the interrogator, and produce fear." Quoting a behavioral psychologist, the manual states that coercive techniques such as "derangement, fatigue, pain, sleep loss, or anxiety may impair . . . most people who are exposed to coercive procedures will talk and usually reveal some information that they might not have revealed otherwise."¹¹⁵ Here, we are brought back to the coproduction of mind and brain explored through Hebb and Cameron. The interrogator, unable to rely simply on technologies such as the EEG and the imagined verifiable scientific truths they produced, must prioritize listening and psychologizing the interrogatee. On this Rose writes:

A psy-shaped space opens up, and becomes the privileged object of the psychiatric gaze: the inner space of the individual. This was not the mind as it had been in the nineteenth century—"a space of rationality coterminous with the cerebral tissues"—but a "moral" space between the organic brain on the one hand and the social space of conduct on the other, a space on which the sediments of familial and human relations were superimposed or inscribed, perhaps even those of collective existence in society. This space could not be seen, it could only be interpreted.¹¹⁶

While *KUBARK* emphasizes such a "psy-shaped space," the physical effects of pain conveniently fall away. The manual manages to espouse the utility of corporeal and mental anguish for the benefit of extracting intelligence at the same time that it "present[s] interrogation as an antiseptic exercise in applied behavioral sciences."¹¹⁷ The death camps and nuclear weapons of World War II created the archetype of the "evil genius" scientist. But the behavioral scientist of the Cold War does not quite fit this image, reminding us that vivisection and torture often take more banal forms that exploit quotidian sensory processes.

The experiments this section has traced illustrate how torture and vivisection are framed as side effects in the doctor's/interrogator's search for truth and knowledge. In this sense, the torture of the Cold War period is not a craft at all—it was, in fact, working in tandem with science in that it sought to, as Rejali writes, "regulat[e] pain to achieve results."¹¹⁸ The rhetorical distance between craft and science is important here and has certain political effects, as science is meant to be empirical production of knowledge. To this end, Rejali disagrees with the assertion

that there can be a science of torture in that such an idea would require “general rules, fixed in advance, that identify the correct choice in particular situations. It also requires a unit that is commensurable regardless of its source . . . Pain . . . is not a single commensurable unit; sensations vary depending on their source.”¹¹⁹ Yet, Rejali might be rationalizing science too much here. After all, what is eugenics and vivisection if not logics predicated upon “general rules, fixed in advance”? The torture techniques outlined by *KUBARK* need not be defined as scientific in order to see that they emerge out of a scientific enterprise intent on studying, measuring, and observing what effects isolation and debilitation have on the mind-brain-body, even if for the most part the manual’s authors articulate their interest as exclusively psychological. Perhaps useful, then, is to move away from asking how much of torture is scientific to instead ask: how much of science and medicine is premised on torture?

The following section continues to look at the banality of torture practices through the work of Doctors Mitchell and Jessen, the so-called architects of the war on terror’s Enhanced Interrogation Program (EIP). Torture in its current iteration no longer centralizes the brainwashing of the enemy or prisoner of war. Rather, behavioral scientists emphasize the mind through experimentation with theories such as “learned helplessness,” where the place of pain and debilitation are much more pronounced in their applications to the mind-body.

Targeting the Flesh: The War on Terror’s Enhanced Interrogation Program

The war on terror continues the behavioral research of the Cold War, but the objectives of torture in this context, however, do not begin with the brain. Instead, the military’s EITs target the mind-body immediately. If, as Rejali comments, the war on terror is about the United States “affirming our way of life, our fundamental identity of liberal democratic society,”¹²⁰ then it also makes clear that the state can kill its enemies or keep them alive with impunity. This bind is what the war on terror’s torture is about: it invests in the animacy of its target with the goal of endless captivity.¹²¹ A new system of detention and interrogation was developed following the 9/11 attacks. The George W. Bush administration authorized the CIA to build the EIP, essentially legalizing the torture of US detained prisoners suspected of terrorism. This authorization was established in order to allow for the administration of harsher interrogation practices, including torture. The consensus was that Enhanced Interrogation Techniques (EIT) would ensure that “high-value intelligence” was collected from prisoners. The underlying behavioral theories behind the EIT were put forth by military psychologists in an attempt to test out the efficacy of learned helplessness, a psychological theory established in the 1960s, and deduce whether learned helplessness might be built vis-à-vis the intelligence gathered by captives of the war on terror.

On September 17, 2001, a detailed memo produced by Jay Bybee and John Yoo of the Office of Legal Counsel of the Department of Defense was presented to President Bush, detailing a series of covert CIA operations that would require the oversight of only four members of Congress. Operation Gravestone was a top-secret directive instructing the CIA to render any al-Qaeda suspects to secret detention facilities known as “black sites” outside the United States. It also authorized the use of EITs on suspects captured with the assistance of foreign intelligence agencies, who were flown in unmarked planes to the black sites. The military psychologists contracted for the EIP accumulated over \$80 million in profit during their time as the program’s lead researchers.¹²² Their identities were eventually exposed: James Mitchell and Bruce Jessen, both of whom were fundamental in developing and implementing new interrogation techniques. They were in the room during interrogations or watching via videotapes. This revelation

provoked a debate within the American Psychological Association (APA) concerning the ethics of psychologists' involvement in interrogation and at detention sites.

The Bush administration relied heavily on psychologists to monitor interrogations at black sites and Guantánamo Bay, due in large part to the APA's support of such involvement—as opposed to the American Psychiatric Association, which voiced reservations early on that included a “concern that such consultation could involve psychiatrists in facilitating deception and cruel and degrading treatment . . . that it was wrong to permit skills that offer healing to ever be used for gaining intelligence.”¹²³ In 2004, when EIT started to face serious public scrutiny, CIA military psychologists met with APA officials to hash out guidelines that reiterated the APA's stance that it was acceptable for members to be involved in the EIP.¹²⁴ APA ethics officer Dr. Stephen Behnke “promised that the APA would not reveal the names of attendees or the substance of discussions and pledged that if information about prisoner abuse were to come up at the meeting no assessment or investigation would ensue.”¹²⁵ This meeting led to the creation of the APA Presidential Task Force on Psychological Ethics and National Security (PENS) in 2005. In June 2005, PENS issued a report making clear that the APA board would continue to approve psychologists' involvement.¹²⁶

In 2015, the APA's actions during the inception of the EIP came under scrutiny again, as did allegations that the psychologists involved in the EIP were engaging in human experimentation on those detained at black sites.¹²⁷ The APA board ordered an independent review of the organization's role in the interrogation program, to be led by David Hoffman, a Chicago lawyer. His findings resulted in a new policy prohibiting psychologists from participating in national security interrogations. With the Hoffman Report came an onslaught of criticism highlighting APA collusion with the CIA and a renewed interest in what kind of behavioral science exactly EITs were predicated on.

The 2017 Physicians for Human Rights report *Nuremberg Betrayed: Human Experimentation and the CIA Torture Program* makes the case that the 2001 military order “Detention, Treatment, and Trial of Certain Non-Citizens in the War Against Terrorism,” which exempted the Department of Defense from international and domestic law, redefined “pain and suffering,” creating an environment that permitted torture.¹²⁸ Most importantly, the report argues that Mitchell and Jessen designed the EIP as human-subject research with the aim of using “learned helplessness,” a theory explored in the 1960s and 1970s by the psychologist Martin Seligman in the context of trauma and depression research, in interrogations. The theory of learned helplessness sought conclusions about human beings while basing itself on animal experimentation whereby an electric shock was given to an animal confined inside a box. The animal, unable to avoid the shocks, exhibited behavior often associated with post-traumatic stress in humans. Learned helplessness, according to trauma psychiatrist Metin Başoğlu, is “a phenomenon characterized by failure of animals initially exposed to uncontrollable shocks to later learn to escape or avoid shocks that were potentially controllable in a different situation.”¹²⁹ In the context of the war on terror, learned helplessness was used with the intent of securing total compliance and dependence from the prisoners being interrogated.¹³⁰ Mitchell and Jessen contend that they simply used learned helplessness as a baseline to assess how to apply EITs. Drawing from prisoner testimonials and human rights reporting, however, I argue that any distinction between the use of learned helplessness as an assessment vs. as an end goal is null as the effects are the same—namely, torture or the “brutalization” of the mind-body.

The Vivisectional Logic of Learned Helplessness

In 2001, the CIA hired Mitchell and Jessen to develop new interrogation practices based on their expertise in human manipulation. Mitchell and Jessen were first hired to review the *Manchester Manual*, the name given to the al-Qaeda training manual discovered in Manchester, England. The two wrote a government white paper determining that al-Qaeda members are particularly skilled at resisting interrogation. The psychologists used their assessment to “provid[e] a range of psychological consultation services, reflected in dozens of contracts for ‘applied research,’ development, and operational support.”¹³¹ They created a consulting company, Mitchell Jessen and Associates, into which the CIA funneled \$81 million.

Operation Gravestone made Mitchell and Jessen’s psychological research the basis of the CIA’s EIP. Gravestone, “a top-secret directive” issued on September 17, 2002, ordered that prisoners suspected of terrorist activity be transferred to a special unit of the CIA that would work exclusively on counterterrorism.¹³² As noted, the CIA established black sites around the world where suspected terrorists were flown in unmarked planes and held in secret. It is documented that both Mitchell and Jessen were present at these black sites where they themselves administered interrogations.

Mitchell’s background was in the psychology of terrorism; he had spent time as a bomb specialist, hostage negotiator, clinical psychologist, and Survival, Evasion, Resistance, and Escape (SERE) training specialist for the US Air Force. The latter was what landed him a job with the CIA. Jessen was a US Air Force retiree who also had experience with SERE training. SERE was formed at the end of the Korean War and exposed American military personnel to “brainwashing techniques” associated with Chinese Communism, such as stress positions, sensory overload, sensory deprivation, and isolation.¹³³ Jessen describes SERE training:

There are two basic divisions of training at a survival school: There’s field training, which consists of helping people take care of themselves if they’re isolated, building shelters, merging themselves, also protecting themselves from the enemy if they’re in a combat area and rendering assistance to others if needed. The other part is the resisting training laboratory. . . . Some of our military at times are captured either by a lawful enemy or detained by a government or held by terrorists, and the resistance training laboratory is designed to help them acquire skills so that if they’re in that position, they can protect the United States government and themselves. There are different scenarios, there are different courses, there are different threats that are addressed in the different courses. In the more advanced courses, particularly related to counterterrorism, we had to prepare scenarios that were consistent and accurate to various terrorist groups, their modus operandi, how they would treat captives, what their weaknesses were, what their beliefs were, what their vulnerabilities were, condense that into a package so that if one of these high-risk operators were captured, sometimes they’re specific to a mission. If they go into a particular place and there’s a particular terrorist group and the risk of capture is high, then you tailor it in that way.¹³⁴

SERE training is meant to prepare US prisoners of war for brainwashing techniques that may be used against them. As Mitchell and Jessen note, SERE’s 2002 manual stresses the importance of resilience in the face of brutal tactics such as waterboarding: “Maximum effort will be made to ensure that students do not develop a sense of ‘learned helplessness’ during the pre-academic laboratory. . . . The goal is not to push the student beyond his means to resist or to learn (to

prevent ‘Learned Helplessness’).”¹³⁵ Mitchell and Jessen reverse-engineered the logic of SERE: if SERE training teaches how to resist physical pressures that instill fear, panic, and helplessness in a captive, the theory of learned helplessness can be used against suspected terrorists to break them into submission psychologically.

The methods, based on Mitchell and Jessen’s recommendations, included suffocation by water, prolonged stress position, beatings by use of collar, beating and kicking, confinement in a box, prolonged nudity, sleep deprivation, exposure to cold temperature, prolonged shackling, threats of ill treatment, forced shaving, and deprivation or restricted provision of solid food. For the most part, the EIP aimed to break down the subject’s psyche, leading to delusions and hallucinations, mental clouding, confusion, and suggestibility. Over the objections of the CIA, the Senate Intelligence Committee compiled a 6,700-page summary of the history of the EIP and the torture and abuse of 119 prisoners. The Senate Committee spent five years analyzing 6.3 million CIA documents in preparation for the report, which cost \$40 million to produce. The CIA fought to keep the summary private, but a redacted version of the report was published and made available to the general public in 2011. That the report provided a declassified list of survivors that had been in the torture program had major implications for litigation filed on behalf of survivors.¹³⁶ Mitchell and Jessen’s involvement in torture and facilitating human experimentation would be taken to trial in 2015 in the *Salim v Mitchell* case.

In 2015, a lawsuit against Mitchell and Jessen was filed in Federal District Court in Spokane, Washington, on behalf of Mohamed Ben Soud, Suleiman Salim, and the family of Gul Rahman, who died in CIA custody in Afghanistan in 2002. The suit argued that the three former prisoners had been tortured while in custody and “sought unspecified punitive and compensatory damages.”¹³⁷ The case against Mitchell and Jessen was settled in the summer of 2017 when “the parties agreed to a joint statement in which the psychologists said that they had advised the C.I.A. and that the plaintiffs had suffered abuses, but that they were not responsible.”¹³⁸ Throughout each doctor’s deposition, torture was mentioned only in passing. The plaintiff’s lawyer was more interested in Mitchell and Jessen’s understanding of learned helplessness and whether or not they had used the EIP to conduct research on the efficacy of the theory in the context of interrogation and confinement.

Learned helplessness had never before been used in the context of intelligence collection. *Nuremberg Betrayed* argues that the Bybee memos not only elevated the threshold of pain and suffering but also created a research mandate to monitor the effects of learned helplessness. Post-9/11 torture is akin to a scientific bureaucracy where the governmental mandate is to present a sanitized version of how the CIA torture program came about and that military officials involved were doing their best ethically. The EIP produced research derived from captives was then reproduced as “reports, presentations, briefings, training materials, and consultations with individuals inside and outside the agency” and developed into special courses attended by medical personnel.¹³⁹ Medical officers were involved to ensure “safety” and “efficacy” and “collected and aggregated data on detainee health, generally and specific to the medical effects of torture and abusive conditions of confinement.”¹⁴⁰ The report maintains that the CIA consistently, in its clinical presentations, misrepresented the severity of the health issues involved in the use of interrogation techniques. Its documentation on EIT became the basis for Standard Operating Procedures, the legal standard for managing captive populations, such as at Guantánamo Bay, throughout the war on terror.¹⁴¹

In short: The CIA had an incentive to make the EIP appear as safe and effective as SERE trainings have come to be understood, though it had initially treated it as so dangerous that

soldiers might succumb to “learned helplessness.” The physical abuse of the EIP was toward the ends of psychological manipulation—yet there appear to have been no real guidelines for monitoring psychological harm. This isn’t to say that the emphasis on “learned helplessness” in choosing the EITs was arbitrary but that there was no outline by which to build upon the theory. Instead, Mitchell and Jessen essentially tinkered with torture techniques with no real sense of how the mind-body would be affected. The CIA adapted Mitchell and Jessen’s theory to fit the needs of the EIP. Mitchell’s alleged paradigm of learned helplessness is as follows: “It starts with isolation, then they eliminate the prisoner’s ability to forecast the future, when their next meal is, when they can go to the bathroom. It creates dread and dependency.”¹⁴² Learned helplessness instills complete passivity in the subject, and Mitchell contends he warned the CIA about the risk of prisoners becoming so impaired so as not to provide any reliable intelligence at all.¹⁴³ He states here:

The ultimate goal, according to both doctors, was to find another way to apply psychological pressure that wouldn’t cause so much injury to the flesh: You want to prevent learned helplessness. You want them to experience a sense of helplessness, but you want to prevent that profound thing that happens over here, right? So what you really want to do is train them to be optimistic about their ability to resist to the best of their ability and then bounce back, and the way that you do that is literally evoke different kinds of emotions, which would be different for different people, you know, and give them an opportunity to successfully cope in the presence of those emotions, but they have to be real emotions.¹⁴⁴

Mitchell maintains that he did not design the EIP and takes issue with being designated as its “architect,” which he says suggests that he broke new ground when he merely provided a list of interrogation techniques long used to elicit emotional responses, followed by social influence, to generate talking. This claim certainly echoes the *KUBARK* manual’s understanding of the usefulness of emotional manipulation while in isolation. However, learned helplessness is not the brainwashing of the fifties that drew from methods such as reeducation. Mitchell and Jessen’s version of learned helplessness exists in the wake of brainwashing, whereby neuroscience apprehends the mind-brain as not simply malleable but plastic. In neurobiology, plasticity is the brain’s ability to rewire or rehabilitate itself after severe trauma.¹⁴⁵ For Catharine Malabou, there are three defining principles of plasticity: “On the one hand, it designates the capacity of certain materials, such as clay or plaster, to receive form. On the other hand, it designates the power to give form—the power of a sculptor or plastic surgeon. But, finally, it also refers to the possibility of the deflagration or explosion of every form.”¹⁴⁶ I suggest that Mitchell and Jessen approach torture from the vantage point of plasticity, even if never articulated in such terms. If the mind is now considered plastic—creative even in the face of its destruction—then the EITs of the war on terror are aimed less at studying the contours of the captive mind and more at destroying the mind-brain-body simultaneously. The implementation of the EIP’s torture methods take a holistic approach to subjectivity, anticipating that the individual can be taken to the brink of death and still recover.

When considering how the EITs assume a certain amount of plasticity on the part of the captive, the torture of Abu Zubaydah, one of the first prisoners to undergo EIT, is telling. One of the Bybee torture memos proposes confining Zubaydah with an insect, apparently to leverage a phobia. This was the only technique administered with the subject’s own phobia in mind. The memo goes on to propose enclosing Zubaydah in a cramped box and telling him that a stinging

insect would also be in the box, though in reality it would only be a caterpillar. Insect torture was proposed, in the words of Neel Ahuja, as the “affective weapon” most capable of “exploiting [Zubaydah’s] deviant psyche through a scene of bestial touch.”¹⁴⁷ Ahuja goes on to argue that Bybee’s construction of Zubaydah’s impenetrability is contingent upon the orientalist fantasy of the “terrorist’s blind faith.”¹⁴⁸ Jessen, throughout his deposition, affirms this reading:

I had been in the military my whole life and I was committed to and used to doing what I was ordered to do. That’s the way I considered this circumstance and so I went. . . . These men were like Jedi knights. These men that we worked on were utterly and totally committed. They had the faith that most people of faith wish they had. Unwaiverible [*sic*]. And they’re strong, most of them, pretty strong, and they’re intelligent and they have their own code of moral ethics and rapport.¹⁴⁹

Zubaydah’s state of mind is deemed not psychologically unstable but pathologically committed to his cause. That he is presented as sound in body and mind, then, justifies the proposed waterboarding and insect torture. Both Mitchell and Jessen defer to the language of hierarchy and responsibility, as in “simply taking orders.” They are patriots but also bureaucrats, being told what to do from above. Moreover, staging torture through such methods as waterboarding and insect torture is less about eliciting “truth” from the supposedly calculated and composed terrorist than about advertising state power and redistributing fear. After all, interrogators know that beyond the application of a certain amount of physical force not only does a subject become desensitized to pain but also any information given is likely a false confession meant to appease the captor or simply cease any further punishment. The divergent responses to pain force torturers “to push harder, using more severe methods to overtake a victim’s maximal pain threshold. Because victims experience different types of pain, torturers have to use a scattershot approach.”¹⁵⁰ A post- 9/11 plastic approach to torture, then, is at once a self-aware public acknowledgment of the brutalization considered necessary to combat terrorism and a private inventory of how different techniques impact the captive followed by tinkering with said methods depending on the results.

This is a contemporary twist on the infamous execution in Foucault’s *Discipline and Punish*: Charged with regicide, Damien is mutilated and tortured in public. After great agony he is finally allowed to die. For Foucault, the publicness of Damien’s death indicates the nature of sovereign power. The execution reminds the body politic of the absolute authority of the king. Physical punishment was theatrical, with the intention of searing into the minds of spectators a warning that this could happen to them, too. At the beginning of the nineteenth century, however, Foucault marks a shift when punishment becomes less extravagant and more private. Due in large part to the rise of the penitentiary, the body became a conduit for suspending the rights of citizens. Foucault acknowledges that modern punitive measures such as isolation, confinement, and forced labor are “physical” but nonetheless maintains that punishment’s aim now is to pierce the soul, not the body. Here, he is speaking to the reformatory goals of the penitentiary: the beginning of panoptic surveillance, where the architecture of the prison itself instills self-disciplinary techniques into the minds of prisoners. Architecture now represents punishment, not people. It is precisely this shift in the visibility of punishment that enables the supposed disappearance of the body for those that enact punishment on the captive body and for the public writ large.

Indeed, the doctors deny the material violence enacted against Zubaydah or speak about it in flippant terms. Throughout their depositions, Mitchell and Jessen treat the prisoners’ alleged pain and suffering with distrust. They express disbelief that the EIT could inflict such suffering;

if in fact the interrogation methods *did* cause harm, it was unintended but still justifiable, because it was for psychological advancement in studying the terrorist mind. In Mitchell's opinion, walling and sleep deprivation were the most effective and least painful techniques. Mitchell plays with the malleability of the category of pain, knowing that excessive pain is akin to dehumanization, to torture.¹⁵¹ Instead he insinuates that the techniques used are merely uncomfortable, maintaining that walling is "discombobulating" more than anything.¹⁵² Jessen asserts the same about sleep deprivation: "There is a tether anchored to the ceiling in the center of the detention cell. The detainee has handcuffs and they're attached to the tether in a way that they can't lie down or rest against a wall. They're monitored to make sure they don't get edema if they hang on the cuffs too much . . . after an hour or two, it's uncomfortable and you can't sleep."¹⁵³ Visvanathan discusses the apparent contradiction in scientists discussing the ethical dilemmas of certain cases while researching and studying them at the same time. This, Visvanathan argues, can be attributed to the indifference of vivisection. He writes that vivisection "is mechanical, so there are only more-or-less efficient machines. The laboratory . . . becomes the paradigm for the managerialization of the world . . . vivisection conflate[s] [the laboratory and world] by emphasizing the power of science as hegemonic truth."¹⁵⁴ The logic of vivisection is indifference to the sentient body, a means to an end that denies value to both death and life.

Vivisection as both a practice and conceptual framework highlights how Mitchell and Jessen used learned helplessness and scientific discourse to justify objectifying Zubaydah's body. This production of science is itself the production of the mind/body of racialized subjects, which derives from the history of racial science that I began this chapter with. Methods of torture such as waterboarding repeatedly attempt to break the body toward unspecified ends. Mitchell and Jessen's ambivalence to the psychic and corporeal effects of learned helplessness, as displayed in their depositions, is a biopolitical consequence of state racism's objective to "indirectly murder" subjects deemed a threat to the state.¹⁵⁵ The EIP is one such iteration of biopower's state racism, which exposes its subjects to death without actually killing them.

If *overkill*, as Eric Stanley describes it, is "a term used to indicate such excessive violence that it pushes a body beyond death," can the torture of Abu Zubaydah be thought of as overkill without the murder?¹⁵⁶ Here is how Zubaydah describes his experience:

I was put on what looked like a hospital bed, and strapped down very tightly with belts. A black cloth was then placed over my face and the interrogators used a mineral water bottle to pour water on the cloth so that I could not breathe. After a few minutes the cloth was removed and the bed was rotated into an upright position. The pressure of the straps on my wounds caused severe pain. I vomited. The bed was then again lowered to a horizontal position and the same torture carried out with the black cloth over my face and water poured on from a bottle. On this occasion my head was in a more backward, downwards position and the water was poured on for a longer time. I struggled without success to breathe. I thought I was going to die.¹⁵⁷

Learned helplessness aside, it remains unclear what experiments on methods such as waterboarding are meant to accomplish, but here we see a vivisectional logic akin to overkill emerge whereby the mandate of torture, "names the technologies necessary to do away with that which is already [deemed] gone."¹⁵⁸ Overkill in the context of Mitchell and Jessen is that its very excessiveness derives from there being no clear use-value aside from displaying the subjugation of the material body in the context of experimental science. Vivisection here is not deployed to

produce strategically relevant information, highlighting how vivisectional logic is both a technique and a framework for committing acts of violence that are exempt from torture.

The first half of this chapter argued that the scientist of the Cold War was invested in exploring what possibilities the brain had to offer in burgeoning modes of social control. The idea was that if the brain could be successfully penetrated then the regression of the mind-body would follow. This emphasis on conquering or breaking the mind of the object “other,” I contend, continued into the war on terror with the EIP and the use of learned helplessness. Learned helplessness, like research on the brain throughout the Cold War, enables the EIT of the war on terror to be represented as outside the bounds of torture. Methods such as waterboarding, which are aimed squarely at the body are presented as psychological tactics that avoid injuring the flesh, as Mitchell claimed in his deposition. Cold War scientific experimentation, then, set the stage for the war on terror’s own vivisectional logic, which draws from behavioral psychology approaches such as learned helplessness that are aimed at disciplining bodies deemed “enemies” by the state. The science of both the Cold War and post-9/11 highlight the ways that the science of torture, its vivisectional mandate, congeals markers of “otherness” such as gender, race, and sexuality together. Torture in the laboratory, then, becomes the site for not only targeting the brain but also co-producing the mind and body through methods of vivisection.

The following chapter focuses on another post-9/11 torture technology—the feeding tube—and begins to situate force-feeding within the archive of torture described throughout this chapter. Force-feeding becomes an ideal method of punishment because biological life can simultaneously be used against the captive, while also framed as being in service of the captive’s wellbeing. Carceral punishment has become increasingly technologized with the ongoing force-feeding of hunger strikers at geopolitically varied sites, such as Pelican Bay State Prison in California and Guantánamo Bay detention camp. This technologization preoccupies the end of the chapter 2, where the mind-body problem of torture is complicated by the ways that force-feeding stabilizes the body as opposed to breaking it down.

Chapter Two: From Cracking the Mind to Bodily Abjection: Situating Force-Feeding in the Torture Archive

In this chapter, I track the shifts that biomedical technologies underwent in the latter half of the Cold War from the late 1960s to the 1990s, when science began to place greater emphasis on the biomedical possibilities for the optimization of life. Tube feeding in particular gained prominence during this time, as severely incapacitated patients, although living longer than ever before due to medical advancements in treatment and diagnosis, nonetheless necessitated assistance with eating and the delivery of nutrients to the body. In 2017, it was estimated that 189,036 pediatric patients and 248,846 adults rely on feeding tubes in the United States. There are hundreds of conditions and diseases that might require artificial nutrition, including cerebral palsy, and advanced dementia.¹⁵⁹ I argue that the pervasiveness of contemporary tube feeding in the United States, despite varying diagnoses, has made possible the reintroduction of force-feeding as a prominent mode of management within clinical-carceral spaces. Throughout the twentieth century, force-feeding was a common response to varying deviations from social norms and was common practice on female anorexics admitted to psychiatric hospitals and in the management of prisoners on hunger strike across the United States and Europe respectively. The deaths of several prisoners in Northern Ireland from botched tube feedings led to the World Health Association taking an official stance against force-feeding in the Declaration of Tokyo released in 1975. These shifting conversations in medical ethics, in addition to questions about how safe the procedure was led to abandoning the widespread use of the practice. Taking this history into account, I trace the formalization of the feeding tube as a technique of biopower for the regulation of life, through two seminal right-to-die cases and a California court order approving the force-feeding of prisoners at Pelican Bay State Prison. I argue that the role of the feeding tube in both right-to-die debates in clinical and carceral settings highlights how mere biological life—that is, life without sentience—has come to be regulated and managed by the state.

The widespread usage of biomedical technologies fundamentally altered medical care and how death was experienced in US hospitals.¹⁶⁰ In US hospitals, machines such as the mechanical ventilator (more commonly known as a breathing machine) help stave off death, increasing both the maintenance and optimization of physiological life. Beginning in the 1970s, technologies were used as evidence in court, giving the families of patients the right to oppose medical treatments even if such denial meant physiological death. In the first half of the chapter, I examine two US right-to-die cases in the 1990s, both involving the feeding tube. The first is that of Nancy Cruzan, who in 1983 was declared to be in a persistent vegetative state (PVS), a state in which patients lack cognition and whose brain functions are limited to basic bodily functions. Nancy survived a car crash in which she was thrown from her vehicle and landed face down in a ditch. After four years of artificial nutrition, her parents decided it was time to remove her feeding tube; fearing homicide charges, the hospital refused to do so without a court order. The second case involves Theresa (Terri) Marie Schiavo, who collapsed in 1990 from an alleged eating disorder and was also diagnosed with PVS. *Cruzan* was significant in that it established the principle of autonomy, suggesting that decisions about life fall within the purview of that autonomy while also taking the feeding tube that was prolonging Nancy's physiological life to task. Indeed, both *Cruzan* and *Schiavo* questioned whether the feeding tube, as a technology that directly mediates physiological life for PVS patients, could in fact be refused due to the principles of patient autonomy and rights to privacy. Even as *Cruzan* set a precedent for patient

autonomy—a patient’s right to self-determination in making medical decisions, only a few years later, *Schiavo* challenged the same principle, underscoring just how mutable the concept of medical autonomy actually is. More specifically, these cases demonstrate the ways exceptions are inherent to any universalizing liberal principle such as autonomy.

Derived from the organizing concept of political liberalism, medical autonomy emerges from a liberal legal discourse concerned with protecting individual property rights (hence the principle of patient privacy), engendering the supposed universality of the liberal subject as sovereign and autonomous. Thus, from the seventeenth century onward, formulations of liberalism have been about universality and politically inclusionary character.¹⁶¹ Yet, liberalism, as argued by Uday Mehta, is also marked by the exclusion of “various groups and ‘types’ of people.”¹⁶² Liberal theory, then, consists of inclusionary pretensions but exclusionary practices. Liberalism posits “certain characteristics that are common to all human beings” such as natural freedom, equality, and rationality, but then specifies distinct and necessary conditions for their actualization.¹⁶³ Thus, liberalism is a theory that aims to advance universal liberty by necessarily excluding certain individuals. Following Mehta, liberalism is a fiction that contributes to the production of legal and social spaces. In this chapter, I offer a very cursory genealogy of the concept of medical autonomy, understanding that despite its ideological nature it nonetheless produces material effects that become the site for medical-legal intervention. This is to say, my purpose is to understand the operations and limits of medical autonomy, by way of the hospital, and how this principle while purportedly absent in the prison, is nonetheless a vehicle through which those with power manage the bodies of the incarcerated, ultimately effacing the exclusionary nature of the principle of autonomy itself. Force-feeding is the site by which the state monopolizes the right to make decisions about life and death, which are precisely the decisions that the principle of autonomy purports to grant liberal subjects. Autonomy, in my usage, is not a wedge through which to show the awfulness of force-feeding; rather, autonomy is a useful heuristic to highlight some of the operations of force-feeding as a practice. The chapter shows the particularities of how the concept of autonomy plays out in the scene of the courtroom, the hospital room, and the prison.

The second half of the chapter moves into the space of the carceral. Here, if patient autonomy is debatable in right-to-die cases, it is non-existent in the site of the prison. The state calls upon autonomy to justify force-feeding but in doing so exposes the prison itself as the site where the principle is most malleable. I argue that autonomy is utilized for the purposes of medical intervention in the service of biological life at the expense of the exertion of political life through hunger striking. In particular, I examine the 2013 Pelican Bay State Prison hunger strikes where after a “handful” of strikers were admitted to the hospital for dehydration, prison officials, citing *Cruzan*, issued a court injunction to force-feed prisoners. Here, the concept of patient autonomy is mobilized by the prison in order to disallow the biological death threatened by the hunger striker’s self-starvation. Indeed, the preservation of life is at the center of the debate of whether hunger strikers should be forcibly fed or allowed to fast unto death and whether the guardians of PVS patients have the right to discontinue tube feedings and allow their loved ones to die.

The Right to Die and the Preservation of Life

Contemporary medical autonomy has been influenced by shifts in the doctor-patient relationship. Feminist science scholar Lisa Diedrich describes the patient of modern medicine as alienated and voiceless: “The experience that matters is not the experience of the patient, who must remain

silent, but the experiences of the doctor, who is alone capable of perceiving and speaking the truth of disease. . . . The clinic is a space where the internal spaces of the body can be made visible through the doctor's supposedly objective practices of examination and his interrogation of the patient."¹⁶⁴ The patient of this regime is essentially an abstraction, simultaneously individualized and objectified.¹⁶⁵ If modern medicine objectified the body upon which doctors then intervened through expertise, contemporary medicine had also become about the patient knowing how to dissect their own interiority, their own symptoms. Diedrich marks the end of the twentieth century as a moment where a postmodern, more expressive patient emerges, one who is eager to narrativize illness. The patient is now expected to be responsible, autonomous, and capable of making the right medical choice.

The 1970s saw a significant transformation in the doctor–patient relationship with the emergence of the term *noncompliance*. *Noncompliance* was used to describe patients who didn't take advice about medication or treatments in a vacuum, or at the doctor's word, but deliberated over their options and were unwilling to comply with the doctor.¹⁶⁶ Following *noncompliance*, the term *concordance* emerged—the idea that if the patient and doctor shared in making treatment decisions, the problem of noncompliance would disappear. According to medical sociologist David Armstrong, “Concordance implied a greater agreement between doctor and patient on the nature of the problem, the need for treatment and the most appropriate medication. Noncompliance had indicated a failure of the patient; lack of concordance reflected a failure of the consultation, mostly through the physician not having elicited the true nature of the patient's problem . . . or the patient's real concerns.”¹⁶⁷ This marked a shift in the US medical profession toward what is now called *bioethics*—the ethical issues pertaining to healthcare, and scientific research. The term would introduce the construct of *patient autonomy*. As Armstrong notes, patient autonomy wasn't so much a practice “of medical involvement with promoting a sense of agency in patients, but a set of political and ideological beliefs that defined the contours of a new conceptual and moral space.”¹⁶⁸ In a word—agency. Armstrong points to the antipsychiatry movement and research into dementia as cornerstones for debates about patient autonomy. The question was: What is mental capacity, and does the patient have it?¹⁶⁹ This led to another question, however, regarding whether patients are in every instance capable of making their own medical decisions.

The 1980s saw even more of an alteration toward the self-managing or self-caring patient, who felt empowered to take responsibility for their own health. As Armstrong notes, however, self-management wasn't necessarily driven by individuals but by healthcare institutions. It was about creating a new kind of patient who is self-sufficient, articulate about their condition, and conscious of the effects of their illness on them and their family. Importantly, the autonomous or agentive patient knows how to weigh their medical options and prioritized talking about their condition, inside and outside the clinic. Indeed, this transformation from the passive patient to the active, autonomous one took place not only in medical discourse but also in law.

The earliest legal acknowledgment of personal autonomy was in *Union Pacific Railroad v. Botsford* in 1891. Clara Botsford was injured while occupying the upper berth in the sleep car of a train. The railroad company requested that Botsford undergo a medical exam, but Botsford refused, arguing that she should have consent to any medical examination. The court ruled in her favor.¹⁷⁰ This was a Supreme Court ruling that used the language of autonomy and rights explicitly: “No right is held more sacred, or is more carefully guarded by the common law, than the right of every individual to the possession and control of his own person, free from all

restraint or interference of others, unless by clear and unquestionable authority of law.”¹⁷¹ *Botsford* set a precedent for patient autonomy, but in the contemporary era, *Cruzan v. Director, Missouri Department of Health* would establish and rearticulate the core principle for a patient’s right to die in a clinical setting.¹⁷² In 1990, the Court decided that Nancy Cruzan’s parents did in fact have the right to remove the feeding tube so long as they could provide proof that that’s what their daughter would have wanted.

The case of Terri Schiavo also debated the ethics and legality of removing a feeding tube in a medical autonomy case.¹⁷³ In 1990, twenty-six-year-old Terri collapsed in her Florida home from cardiac arrest brought on from a potassium imbalance. She was unconscious for five minutes before her husband, Michael Schiavo, called the paramedics, during which time the blood flow to her brain was severely diminished. The paramedics resuscitated her, but she never regained consciousness. The event resulted in a prolonged brain injury that deprived her brain of oxygen, leaving her in a PVS. A gastrostomy tube (G-tube) was placed to provide nourishment and hydration and, for the next fifteen years, Schiavo’s parents and husband engaged in an intense legal battle over the removal of her feeding tube. In 2005 the Schindlers lost their appeal to the Supreme Court, which ruled that Terri would no longer be artificially fed.¹⁷⁴

Per Tom Beauchamp and James Childress’s influential *Principles of Biomedical Ethics*, patients have the right to refuse or discontinue any medical treatment they do not want. At the center of Beauchamp and Childress’s methods is “principlism,” which they define as “a set of principles in a moral account [that] should function as an analytical framework that expresses the general values underlying rules in the common morality.”¹⁷⁵ The four principles that follow in accordance are autonomy, nonmaleficence, beneficence, and justice.¹⁷⁶ The principles and ethics of biomedicine conjoin patient autonomy and informed consent to facilitate choice. Yet, biomedicine has been critiqued for contributing to “universalist postulations.” Psychiatrist Neil Aggarwal cautions that “principlism prescribes reductionist norms for all solutions without considering how bioethical dilemmas are historically, socially, and culturally constructed in local contexts . . . Principlism assumed that all people share ‘the common morality.’”¹⁷⁷ Indeed, PVS patients such as Nancy Cruzan complicate such ethics in that they are unable to advocate for themselves and instead must rely on a proxy—usually a family member, parent, or spouse—to make treatment decisions for them. Right-to-die cases most often involve a family member, or sometimes a healthcare provider, taking issue with the continuance or discontinuance of life-sustaining treatment.¹⁷⁸

Darren P. Mareiniss argues “the right to refuse care [in *Cruzan*] was weighed against an absolute state interest in life.”¹⁷⁹ There was no real state interest in discontinuing Nancy’s care, but Nancy’s autonomy was put into question by her family’s insistence upon refusing medical care. *Cruzan* was important in that it held that “the right to refuse medical treatment is a liberty interest under the Fourteenth Amendment . . . the state has a valid interest in protecting all life. Finally, the Court established a justification for a high standard of proof in evaluating the actual intentions of a persistently vegetative patient.”¹⁸⁰ Despite Nancy’s family providing evidence from past statements that she would prefer to discontinue care, the Missouri Supreme Court disagreed that the evidence was convincing enough, stating that “an ‘erroneous decision’ to preserve life was preferable to an erroneous decision for death.”¹⁸¹ Nonetheless, the Supreme Court in *Cruzan* affirmed that a patient has the right to refuse medical treatment, including nutrition and hydration via a G-tube. The case established “refusal of medical treatment as a liberty interest under the Fourteenth Amendment, but subject to procedural safeguards by the state to protect a valid interest in life.”¹⁸² The court’s decision made clear the state’s investment

in protecting not only life but also the contentious definitions of and relationship between death, autonomy, and “quality of life.” In this particular instance such practices were “contingent upon a qualified capacity to reason.”¹⁸³ Despite the court ruling in favor of the Cruzan’s wish to terminate care, it was also made clear that if one fails to “exercise reason” in the normative fashion ascribed by the state then by “implication, therefore, they can be excluded from the political constituency, or what amounts to the same thing, they can be governed without their consent.”¹⁸⁴ It showed that autonomy is never absolute, the equivalent to Mehta’s argument concerning the principle of liberalism including its own exclusionary practices.

Cruzan highlights the tension between the state’s interest in preserving life—an interest that is moral, political, and financial—and the autonomy of patients unable to advocate for themselves.¹⁸⁵ The case also elucidates the technological side of end-of-life care, fundamentally shifting national conversations about the ethics of feeding-tube usage. *Cruzan*, according to journalist Ann Neumann, “considered [feeding tubes] medical care, not comfort care, as opponents of removal had sought.” If artificial nutrition and hydration—in which feeding tubes are inserted, often surgically, into the stomach to decrease the risk of infection during long-term use—were considered comfort care, society (by the means of the state and the hospital) would be obligated to provide it. The term comfort care when used in a hospital setting means that the Doctor or healthcare provider have exhausted all treatment options and all that is left is to ensure that the patient feel comfortable and as little pain/discomfort as possible. Often times this means the patient returns home or enters hospice. But the courts in *Cruzan* said feeding tubes were medical treatments, not mandatory comfort care, and therefore something which individuals could refuse.¹⁸⁶ Bioethicists argued that it is immoral to keep a tube in someone for the emotional comfort of her family, but for the patient’s family, refusing the tube can only represent letting the loved one die.¹⁸⁷

But even while the courts distinguished between comfort and medical care many Doctors engaged in the ethical debates concerning artificial nutrition continue to posit where artificial nutrition is “*simply* medical treatment, so that a competent patient or qualified surrogate may refuse it? Or is [artificial nutrition] morally different from other medical care, so that it must be provided even when other treatments may be refused?”¹⁸⁸ The feeding tube is a life-prolonging technology, and it is precisely because it prolongs life that Doctors inadvertently (or not) liken the feeding tube to life itself instead of an object that assists in maintaining important physiological functions. Technologies that are essential to sustaining life have come to be assumed as a natural, innate extension of the sick, or disabled body rather than the mediating medical devices they are. The feeding tube guarantees the preservation of biological life, which has come to signify the form of life par excellence within US medical establishments.¹⁸⁹

Indeed, the medical industry’s obsession with the prolongation of life has impacted the very lexicon by which we speak of biotechnologies. So much so that the term *life support* has become controversial, with many now preferring to use the more precise *physiological support* in its place.¹⁹⁰ The mechanical ventilator, which aids in breathing is not reducible to mere biological life; yet, the machine ceases to be viewed as a medical technology and instead a natural means by which to preserve life. And here I extend this line of reasoning to the feeding tube, where if breath is akin to life, then nutritional sustenance is as well, if not more. This is to iterate an already well-established point in technology studies that the symbolic value attributed to technology is both found in what the object does and what it comes to mean socially.¹⁹¹

The ventilator, medical anthropologist Sharon Kaufman writes, was initially designed with one specific purpose in mind: to maintain patients’ respiratory functions, particularly during

surgery on major organs. Yet, it ended up paving the way for many other uses; after the 1970s, it became standard equipment as “physicians quickly discovered that the device could be used for a long list of diseases and problems beyond those originally targeted.”¹⁹² The ventilator made organ transplantation possible and also conferred the possibility of keeping a subject physiologically alive who has otherwise been declared “braindead” or in a PVS. Kaufman notes that “new technologies could create, unintentionally, a gray zone between life and death that no one wanted.”¹⁹³ The feeding tube, like the ventilator, remains in the public imaginary “the most glaring example of the mutable nature of the goals of medical technologies and of the troubled relationship that has developed among life-sustaining interventions, the desire for them, and the changing uses of them.”¹⁹⁴ For sociologist Bruno Latour, this indicates how human behavior comes to be projected onto a nonhuman cold, technical object.¹⁹⁵ Following Latour, humans not only shape technology; rather, nonhuman objects also discipline and mold humans. On this distinction between the human and inhuman, Latour writes, “I do not hold this bias but see only actors—some human, some nonhuman, some skilled, some unskilled—that exchange their properties.”¹⁹⁶ This imbrication between human and technology also resonates with Donna Haraway’s infamous *cyborg*. Haraway is mindful of technology’s role in advancing capitalism and war while also acknowledging the inescapability of the tech-human hybrid. The cyborg is a “cybernetic organism, a hybrid of machine and organism, a creature of social reality as well as a creature of fiction.”¹⁹⁷ The transgression of boundaries is what’s most interesting to Haraway. The machine breaks down the binary between natural and artificial, mind and body, self-developing and externally designed.¹⁹⁸

Like Haraway, I’m not interested in disavowing technology but in its role in disrupting another duality: life and death. If technology has collapsed the boundary between human and machine, then it follows that new enhancements in technology such as the feeding tube seek to hybridize the subject with mechanical equipment in order to manage the body at its organic level. *Cruzan* (and, as we’ll see, the *Schiavo* cases) subscribe to this notion, emphasizing technology’s insistence on preserving life.¹⁹⁹ Indeed, the cyborg, as a late-twentieth-century phenomenon, appears more representative of power’s shift to “make live” than not. Foucault notes in “*Society Must Be Defended*” that the state’s emphasis on life worked to cast death as the ultimate taboo, even more so than sex.²⁰⁰ If power’s focus is fostering life through medical technologies such as the ventilator and feeding tube, then, following Foucault’s logic, death might still be uncontrollable, but mortality isn’t: “Power no longer recognizes death. Power literally ignores it.”²⁰¹ The feeding tube does not so much ignore death but evade it, stretching the body’s capacity to stay alive to its limits.

That death had become “the most private and shameful thing of all” was never more present than in the Terri Schiavo case, where the “sovereignty over death” and “regularization of life” played out for over a decade.²⁰² For several years after Terri’s accident, doctors tried a variety of speech and physical therapies on her. In 1998, sensing that Michael Schiavo wanted to remove his wife’s feeding tube, the Schindlers, Terri’s parents, took Michael to court in an attempt to revoke his status as legal guardian and medical proxy to their daughter.²⁰³ A Florida trial court denied this motion, and, in 1998, Michael petitioned the court to remove Terri’s G-tube and discontinue hydration. Terri’s parents protested this petition. However, the court approved Michael’s request to discontinue care, and Terri’s tube was removed. The Schindlers then filed an emergency motion to have the tube reinserted, arguing that Terri would have wanted to continue medical treatment.²⁰⁴ By the early 2000s, the Schindlers no longer contested their daughter’s alleged medical wishes but the medical facts themselves, arguing that Terri

wasn't as severely brain damaged as the doctors had diagnosed. This resulted in a remand order: they had to prove that PVS was a misdiagnosis and that new medical treatments could in fact help Terri regain cognitive function. They failed to prove this. In 2003, the trial court ruled in Michael's favor, and Terri's tube was again removed. Following the Schindlers's lost appeal in 2005, Terri's G-tube was removed once and for all, and she died from final complications of cardiac arrest. She was forty-one years old.

The *Cruzan* case ruled that patient autonomy is—absent an explicit legislative directive—outside of the court's equitable powers to control and that “the right to refuse medical treatment is a liberty interest under the Fourteenth Amendment.”²⁰⁵ The later cases of *Schiavo* and *Pelican Bay*, however, suggest that the feeding tube, and the politics of life it enables, has changed this formulation. The default for the incapacitated and for prisoners has become an imperative to preserve life, sometimes over and against supposed autonomous patient choice. What, then, is the role of the law and courts in mediating the relationship between life, death, and the autonomous subject? Is it the use of equitable powers to enforce the technological demands of life or to provide subjects a vehicle to exercise “autonomy” to die against a kind of coercive technology that enables the prolongation of mere biological life?

The Clinical: Terri Schiavo and the Politics of the Feeding Tube

The Terri Schiavo case demonstrates how the principle of autonomy was taken over by the state, which is to say paradoxically violated by the state itself in its quest to regulate and manage life and death. In the legal proceedings of the Schiavo case, the right to personal autonomy was the biggest factor in the removal of Terri's feeding tube. In the legal context, the autonomy and protection of the body from intrusion, medical or otherwise, “constitutes a protection of the body from battery through medical intervention and forms the crux of the right-to-die argument.”²⁰⁶ The Starvation and Dehydration of Persons With Disabilities Prevention Act was introduced into the Florida legislature in 2005 in an attempt to delimit autonomy and self-determination regarding medical care. The law sought to distinguish

medically supplied nutrition and hydration from all other types of medical treatment. It then would establish a presumption against the refusal of such an intervention, contrary to established case law in many state courts and the United States Supreme Court that medically supplied nutrition and hydration does not stand in a class by itself but rather is a form of medical treatment representing exactly the sort of invasive procedure that all persons in the United States, under both the common law and state and federal constitutions, may refuse.²⁰⁷

The Schiavo case established that artificial nutrition is medical treatment that can be withdrawn at any point, just like any other medical treatment. But, more than many other technologies, the feeding tube is an approximation of life itself, facilitating necessary corporeal functions even if the subject remains unconscious. Technology that supplements respiration and circulation complicates the criteria used to define death: all US states have now adopted some version of “whole brain death.”

Brain death has become a valid diagnosis of death. Terri, however, was not brain dead.²⁰⁸ This returns us back to a point that *Cruzan* established: artificial nutrition is considered a medical treatment that can be denied by a patient or medical proxy, not mandatory comfort care that a physician or hospital is obligated to provide. Terri was left unable to be fed without the intervention of a tube, “which required endoscopy or a surgical procedure to insert . . . and the pre-prepared nutritional formulas infused via the tube require the oversight of an experienced

nutritionist. Therefore, that which was required to sustain her was beyond the level of humane or comfort care; it was a medical intervention.” Artificial nutrition facilitates normal physiological functions such as hydration and sustenance, but it isn’t in and of itself inherent to the body. The feeding tube here is an apparatus central to a particular medical intervention and, as such, can be “withheld and/or withdrawn when it is determined to be unwanted by the patient or incapable of leading to the desires goals of medical treatment in general, such as restoration of function and independent living.”²⁰⁹ In much of the conservative cultural imaginary surrounding the case, the removal of the tube became synonymous with murder. Fox News reported that Terri “relie[s] on the feeding tube to keep her alive,”²¹⁰ and speaking on the removal of the tube, Republican Representative Tom Delay stated that “right now, murder is being committed against a defenseless American citizen in Florida.” The feeding tube does indeed aid in nourishment but works similarly to any other medication or apparatus that may be removed or discontinued during treatment. Yet, for right-wing politicians and pundits such as Representative Delay “pulling out a feeding tube and letting her starve for two weeks” went against Terri’s “constitutional rights to live.”²¹¹

Kenneth Goodman notes that “medically administered artificial hydration and nutrition [is] regularly presented as something ordinary, thus making its withdrawal extraordinary. In fact, the withholding or withdrawal of artificial nutrition and hydration is generally and correctly regarded as not unlike the withholding or withdrawing of any other medical treatment, including other life-sustaining or prolonging treatment.”²¹² Indeed, Terri’s brain was so severely damaged that she was incapable of feeling any sensation of hunger. As Goodman goes on to note, the feeding tube in *Schiavo* was made exceptional in ways that other technologies of life seldom are for its association with sustenance and nutrition. Judge George Greer, who presided over the case, consistently agreed with Michael Schiavo that Terri would not have wanted the tubes.

In a 2000 statement regarding the removal of Terri’s tube, Judge Greer wrote, “The court does find that Terri Schiavo did make statements which are credible and reliable with regard to her intention given the situation at hand . . . [which] include statements (to Michael Schiavo) . . . that if she was ever a burden she would not want to live like that.” Such methods reaffirmed the stance that loss of autonomy, as understood by a medically defined loss of consciousness of self, constitutes the loss of life.²¹³ Thus, placing a feeding tube is sometimes, though not always, a matter of facilitating caregiving, an issue of convenience for the care provider rather than a medical necessity for the patient. Assertions of the frequent lack of medical necessity in placing a feeding tube hold life-or-death consequences for the patient because right-to-die decisions, in most courts, are typically predicated upon just such a determination of medical need.

The importance of considerations of oral feeding versus artificial nutrition is made clear by Florida governor Jeb Bush’s 2003 *amicus curiae* brief:

The Governor submits this memorandum to ensure that the Court consider the critical distinction between removing artificial life support and the deliberate killing of a human being by starvation and dehydration. These are two different actions. The first is performed according to state law and is allowed under Florida’s constitutional right to privacy. The second is prohibited by the right to life enshrined in the Florida and federal Constitutions. The Governor submits that removal of the feeding tube without first determining by medically accepted means whether the plaintiff can ingest food with or without rehabilitative therapy, constitutes the deprivation of her life without due process of the law.²¹⁴

Terri Schiavo's death following the removal of her tube, then, was a result of dehydration, not starvation. However, withdrawing artificial hydration and nutrition became synonymous with starvation in the case. Part of the rhetoric of starvation has to do with cruelty, murder, and disregard for life. Jeb Bush's brief places such rhetoric in opposition to dehydration, which assumes the natural process the body undertakes. Bush's concern that the rightful removal of "life support," in the Schiavo case, had leaked into murderous territory is important, for it speaks to a larger issue of the state acting as mediator between what constitutes life and death and between what constitutes removal of assistive technology and killing. Autonomy is always already a concept by and for the state. It is through autonomy, then, that the state seizes hold of the subject's right to assess for oneself a decision regarding life and death, producing more exceptions to its rule. A bioethicist commenting on the case wrote that "to suggest that the withdrawal or withholding of medically supplied artificial hydration and nutrition constitutes such a thing is medically false, morally mistaken and socially misleading. It would be a tragedy for the people of Florida if our Legislature were to make this error. Terri Schiavo died of [dehydration] in 12 days, 19 hours, and 45 minutes. She did not die of starvation."²¹⁵ However, the Schindler family insisted that she was purposefully starved and dehydrated to death, writing that "watching someone being starved and dehydrated to death, let alone your own daughter, is something so cruel that it can never be forgotten. . . . No, we will never forget the agonizing starvation death Terri suffered. Nor will we ever rest until each and every one of the perpetrators who orchestrated Terri's death is brought to justice for their crime against humanity."²¹⁶ Pain is imagined in relation to the tube's removal rather than its presence and the risks associated with long-term usage. These risks include aspiration pneumonia (the inhalation of food or stomach acid into the lungs), infection at the site of the G-tube, and urinary tract infections that result when unconscious patients such as Terri need to be catheterized to ensure urine is able to drain properly.²¹⁷

Diagnosis and classification of Terri's physiological state were the determining factors in the Schiavo debate between Terri's parents and the court. That she remained diagnosed with PVS allowed Michael to win the case in the court. This verdict, for many disability-rights activists, was tantamount to the state reducing Terri to a diagnosis, one that made her unworthy of life.²¹⁸ As Terri Beth Miller writes, contemporary medicine's reliance upon deciphering the body solely through diagnosis reduces the body to mere object:

This rendering of the patient's body as object, as scientific "text," however, constitutes a one-dimensional lens that profoundly limits both clinical and personal understandings of illness even as it distorts the patient's own experience of her body. The sensing, feeling, communicative body is replaced by an enigmatic system of measurements, codes, and signals decipherable only by a privileged few, furthering the subject's isolation and redoubling her dependence upon medical experts, the only ones capable of "translating"—and legitimizing—the experiences of a suffering body that has become a stranger even to itself.²¹⁹

Indeed, disability-rights activists viewed the removal of Schiavo's tube as indicative of a culture that would rather see a woman dead than disabled.²²⁰ Many labeled her disabled due to her corporeal incapacitation and cognitive state. The medical community, however, argued that to be permanently unconscious is not the same as to be disabled. An unlikely alliance between disability activists and anti-abortion supporters was forged, in that the two groups seemed to hold similar pro-life positions regarding the case. This alliance wasn't simply arguing that life must be

preserved no matter the circumstances but that it wasn't within the court's jurisdiction to decide what constitutes a good life, or a body worth preserving.

On October 23, 2003, twenty-three national disability organizations issued a public statement in support of Terri Schiavo's human and civil rights. Diane Coleman, from the disability-rights organization Not Dead Yet, argued regarding *Schiavo*:

The courts have consistently excused parents who have murdered children with disabilities. . . . People with disabilities and incurable chronic diseases have experienced a long history of persecution and genocide. . . . Contempt for life with disability is very much around us. . . . Physicians must not be given the power to decide who lives and who is escorted to death . . . the Nazi experience demonstrates how easily compassionate and well-educated physicians can lose their moral compass. . . . Medical rehabilitation specialists report that quadriplegics and other significantly disabled people are dying wrongfully in increasing numbers because emergency room physicians judge their quality of life as low and, therefore, withhold aggressive treatment. . . . Children with non-terminal disabilities who never asked to die are killed "gently" by the denial of routine treatment. . . . The laws that protect our lives have often been the only buffer between us and annihilation.²²¹

Within the disability-rights community, many advocates maintained that if Terri's tube could legally be removed, then they, too, could easily be denied the assistive technology they need to survive. As disability-studies scholar Eli Clare writes of Terri, "Over and over again neurologists, journalists, judges made decisions about her body-mind based on the beliefs that language and self-awareness makes us worthy, that death is better than disability, that withdrawing the basic human rights of food and water can be acts of compassion."²²² However, the Schiavo case isn't so much about cure, even as her parents presented evidence of experimental treatments to the courts. Rather, *Schiavo* is more about sustaining the body, which here becomes a stand-in for what is normatively conceived of as conscious life, vis-à-vis artificial nutrition.

Whether Terri should have been labeled disabled, incapacitated, or in a vegetative state is not the central issue here. Rather, it is the undeniable tension brought up between Diane Coleman's experience articulated above with the medical establishment and *Schiavo*. Meanwhile, it was precisely a lack of corporeal autonomy that led many to believe that no matter what Terri might have wanted the feeding tube should continue providing her with physiological support. The case raised fundamental questions: What bodies are worthy of the optimization of life? Only able-bodied ones? What does it mean to be alive, to be conscious? These questions are beyond the scope of this chapter, but the critique of *Schiavo* through a framework of disability brings us back to medicine and technology's agonistic relationship with life, death, and the subjects most vulnerable to this struggle.

Schiavo was about what it means to choose to die and who gets to decide. It was about the complicated place in law and technology of subjects who inhabit the space between *bios* (autobiographical or recognizable life) and *zoe* (bare life).²²³ The feeding tube is the object that mediates the two, the zone of liminality between a body and life. For the Schindlers and their supporters, Terri's physiological life was enough of a reason to believe that she would have wanted long-term assisted nutrition. Indeed, Terri's parents, and the disabled community that rallied around her demanded a reconceptualization of what constitutes a life, as if to say: Terri is fine as she is, her life is a good life regardless of a preordained conception of what awareness

looks like. My point here, however, is less about the Schindlers' conception of life and how it was superimposed onto their daughter (for better or worse) and more about how the state throughout this case superimposed meanings of life onto the feeding tube itself with artificial nutrition becoming a site by which to stretch the category of autonomy.

Patrick Anderson writes, "The feeding tube also represents the struggle between the enactment of individual will and the force of state intervention."²²⁴ Yet, we can't presume to have access to Terri's individual will or desire, and, even if we did, such a will is never absolute. This is to say that if we understand that within the principles of liberty, and by extension autonomy, there are always exclusions, then perhaps the question needn't be when is the feeding tube assistive by choice and when is it coercively leveraged against the subject. Instead, we might ask, when is the technology used as a means by which to propagate biological life and regulate life and death on behalf of the state? And what does such a power operation entail exactly?

Cruzan and *Schiavo* established the "sanctity of self-determination,"²²⁵ yet no federal court has ever recognized such self-determination to prisoners. This recognition would have materialized the prisoner's right to participate in a hunger strike (or "death fast").²²⁶ But of course this is delimited by the civil death of the prison itself, which negates any pretense to such an application of autonomy, which is to say autonomy always already produces its own exclusions. Both *Cruzan* and *Schiavo*, then, help situate the Pelican Bay State Prison hunger strikes, which started in 2011 to protest long-term solitary confinement, within a genealogy of autonomy. At the intersection of right-to-die litigation and hunger striking stand medicine and the state, determining in what manner life is to be preserved.

The Carceral: Pelican Bay and Force-Feeding

Solitary confinement, as a normalized mode of punishment in contemporary US prisons, was conceived as a response to the Black Power Movement. In the 1970s, political organizing was gaining momentum both inside and outside of prisons. For example, in 1972 at Marion Penitentiary in Illinois, a group of prisoners organized, across racial and ethnic lines, a labor strike protesting the unlivable conditions of their incarceration. Lisa Guenther writes that in response, "inmates were tear-gassed and left naked in their cells for three days. All prisoners were forced to participate in a behavior modification program called CARE (Control and Rehabilitation Effort), and 149 prisoners were kept in solitary confinement and sensory deprivation for eighteen months."²²⁷ Programs such as CARE emerged out of another 1970s behavioral science experiment, the Special Treatment and Rehabilitation Training Program (START). START was used as a baseline for prison programs that targeted individuals considered politically radical. Particularly vulnerable to these increasingly standardized technologies of isolation were black activists associated with organizations such as the Black Panthers. Indeed, the focus of these behavioral programs was to implement practices such as solitary confinement that would debilitate political organizing associated with radical politics.

From the late seventies to mid-eighties, litigation and judicial oversight began to emerge on behalf of prisoners contesting the conditions of solitary confinement. Brutality on the part of guards, unsanitary living conditions, lack of nutritional food, overcrowded cells (some prisons, such as Folsom State Prison in California, would have two men per "solitary" cell), and lack of educational programs would all be at the forefront of prisoners arguing that their Eighth Amendment rights were being violated: their conditions were "cruel and unusual."²²⁸ This moment is generally considered the second wave of solitary confinement, a moment concerned

with rehabilitation and reformation of the subject vis-à-vis behavioral programs. Our current moment is solitary confinement's third wave: the era of the control prison, neoliberal economic and social policies concerned with risk management, privatization of punishment, and increased overall surveillance.²²⁹ It's currently estimated that between twenty-five and eighty thousand prisoners are in supermax confinement across forty-four states.²³⁰

Opened in 1989, Pelican Bay is located in Crescent City, California, and was one of the world's first supermax prisons. It was designed as the best of the best in corrections technology, with long-term confinement and isolation in mind. It serves as both a traditional maximum-security prison, with a 2,000-prisoner capacity, and a supermax security complex with 1,056 windowless isolation cells: 132 pods of eight cells each.²³¹ The Security Housing Unit (SHU) cells, where the majority of hunger strikers were held, measure eleven by seven feet and have no windows. The cells are painted white or grey to reduce visual stimulation and are furnished with a bed, table, seat, toilet, and sink. There are no windows, or a very small one high enough to allow only a bit of and no view of the outside. Fluorescent lights and surveillance cameras are kept on twenty-four hours a day. Prisoners are permitted a television, a radio, books, magazines, and a legal pad.²³²

By 2010, more than five hundred prisoners had lived in continuous isolation for more than ten years. By the mid-1990s, it was standard practice to place prisoners with alleged gang status into solitary. The stated purpose of the SHU is to segregate those perceived to pose a high security risk. Prisoners are isolated for twenty-two to twenty-four hours a day, and florescent lights are used in the cell all day and night. There is a "cuffport" in the door: a slot where the prisoner's hands are cuffed and uncuffed. Meals are delivered through the cuffport twice a day. The cuffports can be bolted to prevent "bombing," which is where prisoners throw their feces and urine at guards. When such acts of resistance happen, prisoners can be "forcibly extracted from their cells by an emergency response team in riot gear. They may be pepper-sprayed or tasered and put in four- or five-point restraints (with wrists and ankles fastened to the ground, with or without a helmet fastened to the ground) or in a restraint chair. Officers are entitled to perform strip searches of inmates—including cavity searches—if they suspect the inmate of possessing contraband items."²³³

Both the second and third waves of solitary confinement would certainly appear emblematic of Foucault's insistence that modern punishment is now directed at the level of the mind, so as to leave the body unmarked. As we'll see, this formulation is problematized not only by the use of force-feeding but also by more expansive ways of understanding the substantial pain and debilitation inherent to extreme isolation that isn't reducible to solely the psyche, but body as well. The debilitation inherent to isolation is precisely why four hundred prisoners in Pelican Bay's Security Housing Unit (SHU) went on hunger strike on July 1, 2011, to protest the restrictive conditions and length of confinement in the SHU. Over the next three weeks, at least 6,600 prisoners across California participated in the strike in solidarity with Pelican Bay. The majority had been in solitary anywhere from five to twenty years, exposed to extreme sensory deprivation. On July 20, 2011, some of the strike demands were met: prisoners could take one picture of themselves a year to send to their families; they could have colored pencils, wall calendars, and warm caps for outdoor exercise during winter; they could access exercise equipment; and more food options were offered.²³⁴ Undoubtedly the tactic of hunger striking was useful in drawing awareness to the prisoners' cause, yet it was also short-lived due to the legal authorization to force-feed strikers, or what California Corrections refers to as "refeeding." Here

the *Cruzan* case reappears, paradoxically referenced in order to delegitimize patient autonomy for prisoners.

Cruel and Unusual

Prisoner-rights litigation continue to contest the practices described above at Pelican Bay, highlighting the power struggle inherent to the space of prison. In the 1995 Eighth Amendment case *Madrid v. Gomez*, upon hearing that prisoners were being chained to toilets and beds with their hands and feet bound together or left outside in cages the size of telephone booths, half naked and exposed to other prisoners and harsh weather, Judge Thelton Henderson stated that “leaving inmates in outdoor cages for any significant period—as if animals in a zoo—offends even the most elementary notions of common decency and dignity.”²³⁵ Henderson sought to protect the “human dignity” of prisoners in SHU at Pelican Bay but ended up reproducing prolonged solitary confinement.²³⁶ He never found solitary confinement cruel and unusual as a practice, only the conditions of the prison—and thus wanted to ensure that institutions met constitutional standards. Such logic prioritizes the corporeal body and draws a line of distinction between what conditions the mind but not the body can withstand. “Loneliness, frustration, depression, or extreme boredom,” for Henderson, are manageable, while the “animalizing” treatment described above crosses a legal and moral line.²³⁷

Colin Dayan notes that the emphasis placed on corporeality in Eighth Amendment cases is striking: “courts attend to the body, not the intangible qualities of the person (e.g., psychological pain or fear) or the deadly social components of indefinite solitary confinement.”²³⁸ Contemporary solitary confinement, as demonstrated by Henderson, aims to disappear the mind while managing the body. Henderson concluded that cruel and unusual punishment was applicable for prisoners in isolation who “are at a particularly high risk for suffering very serious or severe injury to their mental health . . . such inmates consist of the already mentally ill, as well as persons with borderline personality disorders, brain damage or mental retardation, impulse-ridden personalities, or a history of prior psychiatric problems or chronic depression.”²³⁹ The state predictably evades any responsibility for its role in reproducing such psychic ailments. The logic of the Cold War lingers on here in that mind and body are deemed separate entities with the material body taking precedence in these Eighth Amendment cases.

Another reason that the SHU has not been successfully challenged on Eighth Amendment grounds as “cruel and unusual” is that it is not considered a “punishment” but a disciplinary practice executed by prison administrators, keeping it within legal bounds.²⁴⁰ The distinction here is between a “sentence” issued by a court, which is a form of punishment, and a penological discretionary decision by prison staff to preserve the “security” of staff and prisoners. This would include secluding alleged gang leaders and prisoners who attempt to escape, refuse to work, are caught in possession of contraband, self-harm, or express suicidal ideation.²⁴¹ But as Josh Harkinson and Maggie Cladwell report, “Prisoners can be thrown into the SHU indefinitely without any due process, meaning that they never get a chance to review or contest the evidence that they’ve done something wrong.”²⁴² This emphasis on the intent of punishment dates back to *Wilson v. Seiter* (1991), where Justice Antonin Scalia found that, regardless of how much a prisoner suffers at the hands of a guard or any other official, if the intent to cause severe harm, physical or otherwise, is not proven, then the ramifications on the prisoner’s mental and physical health is not enough to warrant judicial review.²⁴³ “The Court’s logic,” writes Dayan, “thus strips

the victim of the right to experience suffering, to know fear and anguish. Legally, the plaintiff has become a nonreactive body, a defenseless object.”²⁴⁴

Although *Estelle v. Gamble* (1976) established that neglecting prisoners’ medical needs violates their Eighth Amendment right to be free of cruel and unusual punishment, making prisoners the only population in the United States with a constitutional right to medical care.²⁴⁵ *Cruzan* and *Schiavo* demonstrated the state’s investment in preserving biological life. I suggest that while this is still the case with incarcerated subjects, here, the state’s desire to preserve biological life is bound up with its interest in punishment.²⁴⁶ As Mara Silver has noted, “retributive-based punishment requires no action by the offender demonstrating personal accountability other than serving out the required sentence. Therefore, ‘doing the time’ is critical.”²⁴⁷ This is particularly apt regarding the Pelican Bay hunger strike. As the strike escalated, with more and more men hospitalized, it became clear that prison officials held a monopoly on the suffering of prisoners. The social death produced through solitary confinement was seen as acceptable but the self-induced suffering of starvation as coercive and manipulative. Such biopolitical entanglements cannot simply be reduced to who gets to live and who gets to die. Life, in both instances, is leveraged against individual subjects and collectives, pitting self-determination against life and retribution.

The state decides the health of the mind, the integrity of the body, and when living death is allowed to become natural death, making force-feeding an excellent mask for such control over life. As we saw through *Schiavo*, the tube itself becomes life, perhaps even more so in the case of Pelican Bay where prison authorities make distinctions between social death and biological death. The feeding tube is a torture instrument of life that disallows natural death but also disallows the practice of hunger striking, which seeks to make visible the unlivability of solitary confinement and the isolationist practices of the prison.

“Refeeding” and the Optimization of Life

Two years after the first hunger strike at Pelican Bay, on July 8, 2013, thirty thousand prisoners across California penitentiaries refused their state-issued meals, resuming the largest hunger strike in the state’s history. The strike committee, known as the Pelican Bay SHU–Short Corridor Collective, listed five demands:

- 1) to end group punishment for individual rule violations, 2) to reform gang validation procedures, 3) to comply with the recommendations of a national commission on long-term solitary confinement, 4) to provide adequate and healthy food, and 5) to expand rehabilitation, education, and recreation programs.¹

To draft the demands, “prisoners had shouted at one another through plumbing pipes in their cells and drain pipes in the exercise yards, passed notes under cell doors (‘kites’), and communicated through advocates in San Francisco, sending letters back and forth, seeking help in amplifying their demands.”²⁴⁸ The stakes would indeed prove higher for the 2013 strike. Dozens of prisoners were hospitalized, and one died by hanging himself in his cell.²⁴⁹ This suicide highlights the limits of the argument that isolation manages mental health and disability inside the prison. The practice not only exacerbates mental illness but reproduces it in such a way that it’s impossible to know which comes first for most incarcerated subjects. Hunger striking, then, is one such response to the literal space of death that the prison so often becomes.

Even as carceral technologies such as solitary confinement seek to diminish sociality, the reality is more complicated. Forms of relationality can ensue, and with them defiance. So

successful was the prisoners' collective refusal that in August 2013, with 129 prisoners refusing meals at Pelican Bay, state officials requested authorization to "refeed" hunger strikers—the process of reintroducing food after significant malnourishment or starvation. As Keramet Reiter's ethnography of the hunger strikes recounts, at this point, a "handful" of participants had been hospitalized. Since many of the men had signed "do not resuscitate" directives, their lawyers conceded and began to negotiate with the prison. The same Judge Henderson who had sought to reform solitary confinement in the *Madrid* case ruled that California prison doctors could "refeed" inmates if the prison's chief medical executive decides that a hunger striker is at risk of "near-term death or great bodily injury."²⁵⁰ The orders are worth quoting in full:

If the Chief Medical Executive ("CME") at an affected prison determines, to a reasonable degree of medical certainty, that a hunger striker is at risk of near-term death or great bodily injury in the absence of intervention or has become incompetent to give consent or make medical decisions, refeeding or other lifesaving measures may commence immediately without need of a further court order, provided that the hunger striker has not previously executed a valid "do not resuscitate" directive. 2. For purposes of this order, a previously executed "do not resuscitate" directive will not be considered valid if a) the CME, reasonably and in good faith, determines it was the result of coercion or otherwise not the product of the hunger striker's free will when executed; b) a court has determined the directive is invalid as a matter of law; or c) the hunger striker, or an attorney-in-fact for the hunger striker acting pursuant to a properly executed power of attorney, revokes such directive. 3. In addition, in view of the risk that inmates may be or have been coerced into participating in the hunger strike, for purposes of this order a "do not resuscitate" directive executed by a participant in the hunger strike at or near the beginning of or during the strike will be deemed not valid.²⁵¹

The court cited *Cruzan*, stating that a large-scale prison hunger strike "poses significant challenges in the prison setting and presents difficult, sometimes conflicting, policy questions concerning institutional safety and security, inmate-patient autonomy over their person and the receipt of medical treatment, the ability of medical staff to monitor and provide adequate care to striking inmates and medical ethical requirements pertaining to the protection of patients from harm while respecting patient autonomy."²⁵² Throughout the 2013 strike, prison officials framed their response to the strikes through the framework of care. California Corrections spokespeople, such as Elizabeth Gransee, made clear that hunger strikers' caloric intake would be carefully monitored and that vitamins, electrolytes, and liquid nutritional supplements were offered regularly to prisoners.²⁵³ Beds and the "highest levels of care" would be available at the prison's healthcare facilities.²⁵⁴ The message was clear: prison doctors would not only monitor the health of prisoners but also take all measures to "preserve life," even if that meant resorting to the feeding tube.

California Correctional Health Care Services dedicates an entire page to the risks involved in refeeding, apparently as a deterrent to hunger striking.²⁵⁵ Reiter notes the vagueness of the term *refeeding*, asking, "Did it mean prison officials could provide intravenous fluids and nutrients to prisoners who lost consciousness? Or did it authorize forcing a tube down a wide-awake prisoner's nose against his will?"²⁵⁶ Refeeding, in this context, is nothing short of force-feeding—which will keep a prisoner alive, as Silver notes, but the "associated levels of intrusion need no further illustration. These procedures—and the accompanying pain and health risks—

produce exactly the kind of bodily intrusion warned against in cases like *Cruzan*.²⁵⁷ The threat of force-feeding at Pelican Bay, then, is indicative of what Nicolas Rose calls *ethnopolitics*—that which shapes the conduct of human beings by acting upon their sentiments, beliefs, and values.²⁵⁸ The ethnopolitics of California Corrections’ stance on hunger striking emphasizes the preservation of life while drawing from the rhetoric of patient autonomy to argue that the strikers aren’t mentally competent enough to make their own medical decisions. The tension between patient autonomy and the state, then, boils down to what is deemed care by institutions such as hospitals and prisons, and how asserting one’s right to die by refusing palliative care or choosing to starve necessitates refusing legible practices of care. Here, the active patient, with whom this chapter began, is replaced by the inactive subject, who refuses medical intervention, food, or the rehabilitation of the prison in place of a political defiance that places them at what Dayan so aptly names the “edge of life.”²⁵⁹

Less than a month after the refeeding authorization, the strike officially came to an end. On September 5, 2013, after a core group of forty prisoners had refused meals continuously for sixty days and hundreds more had participated for days or weeks on end, the hunger strike was suspended after state assembly member Tom Ammiano and state senator Loni Hancock committed to holding a legislative hearing before a joint Public Safety Committee. In response to these hearings, the California Department of Corrections and Rehabilitation conducted an internal policy review and a case-by-case audit of SHU prisoners. Further, a class-action lawsuit initiated by hunger-strike organizers and the Center for Constitutional Rights, *Ashker v. Brown*, was advancing in the courts. The lawsuit set out to challenge long-term solitary confinement in California as unconstitutional.

During the Department of Corrections and Rehabilitation audit, 528 case files of SHU prisoners were reviewed, 343 were approved to be moved into the general population, and an additional 150 were placed in programs to get them ready to “step down” to the general population. In June 2014, an additional 214 prisoners were transferred to the general population and another 180 to the step-down program. However, it soon became apparent that many of the prisoners being transferred were being placed right back into SHU—and were also plaintiffs in the lawsuit *Ashker v. Brown*. In September 2015, prison officials agreed to settle *Ashker*. The agreement “prohibited the assignment of prisoners to the SHU based solely on their status as gang members, capped all stays in the SHU at five years, made the provisions retroactive, and required prison officials to provide prisoners’ lawyers monthly data reports for two years about the characteristics of the SHU populations.” Other state prison systems have since adopted similar reforms.²⁶⁰

Hunger striking uses the threat of one’s own death as a means to contest the conditions of state confinement. The *Cruzan* and *Schiavo* cases suggest that decisions about biological life fall within the purview of personal autonomy. Such are the contours of liberal legal ideology and practice. Rather than argue that the Pelican Bay hunger strikes and the authorization to force-feed should be grouped within such right-to-die litigation, I’ve instead sought to highlight how autonomy is at once delimited in the site of the prison and leveraged against the prisoner.

Autonomy is the liberal, legal definition of life conferred to individual subjects on the basis of law and rights. Prisoners, however, are denied this form of life, and hunger striking offers a way of conceiving life outside a liberal framework of autonomy. Life, in this case, is not liberally individualized and might also be collective, as in the prisoners working out their demands through and despite the carceral conditions in which they live. Force-feeding, vis-à-vis the feeding tube, attempts to rearticulate the prisoner as a legal, even if rightless and de-

autonomized subject. Just as the feeding tube comes to stand in for life as autonomy in the Schiavo case, it also stands in for life as autonomy in forced-feeding, even as it denies that to the prisoner.

Hunger striking, then, is that which points out how the prison is a place of unfreedom that draws from the vocabulary of autonomy to uphold a liberal fiction of rehabilitative justice. This is not the same in *Schiavo* and *Cruzan*, as autonomy becomes negotiable even if it also exposes itself to exceptions and exclusions. A place of utter unfreedom such as the prison cannot negotiate autonomy. However, this is not to say that the hunger striker is trying to negotiate autonomy. Instead, I argue that hunger striking is a performative and embodied articulation of the struggle between life and death waged inside the prison. Like *Schiavo*, questions of what constitutes a worthy life and a good life arise in addition to the hunger striker, who asks: How do I make a life when the unlivability of confinement becomes too much? This is what I mean when I argue that hunger striking is not a negotiation of autonomy—it is an attempt at communicating sentence. The social death of the prison is elided by concepts such as autonomy, mobilized in order to make the lives of so many unimaginable and unthinkable to those on the outside, and perhaps even to state actors on the inside as well. The state argues that pain isn't enough to warrant judicial attention if no markings are left on the body, but the hunger striker refuses to accept the argument that pain, suffering, boredom, and unrest are unintelligible.

Mehta argues that there are specific cultural and psychological conditions that are woven in as preconditions for the actualization of liberal capacities such as rationality and consent.²⁶¹ However, the prison itself stands in for an already established judgment of the prisoner's capacities. The prisoner by virtue of being incarcerated is always already excluded from principles such as autonomy. Although the Pelican Bay strikes led to significant reform to isolation practices, we shouldn't ignore the ease with which refeeding or force-feeding was weaponized against the solidarity forged across racial and ethnic lines. Indeed, every federal court tasked with addressing the issue has sanctioned force-feeding, and the Federal Bureau of Prisons has clear guidelines detailing protocol for handling prisoners who participate in a hunger strike.²⁶² Here the feeding tube at first glance has the same effect as solitary confinement. Dayan writes, "solitary confinement and execution both mark the continuum between unnatural (civil or spiritual) death and natural (actual and physical) death."²⁶³ But, it might be that this isn't the case with force-feeding, that force-feeding is precisely that which disrupts the continuum between life and death. Force-feeding becomes the mechanism by which life and death is articulated back into a liberal legal framework of autonomy, which the prisoner is denied. Perhaps, here, the strange and elusive "refeeding" takes new significance, acting as a grammar for the act of making live again and again. This point is further extrapolated in the following chapter, which looks exclusively at force-feeding at the Guantánamo Bay detention camp.

As of 2019, forty prisoners remain at Guantánamo Bay. Ten have been charged or convicted, but the detention of the rest remains indefinite. Reportedly, at least five continue to hunger strike. However, since 2017, the medical staff at the detention hospital have allowed them to starve rather than follow the protocol for what they term "enteral feeding." The following chapter explores the particularities of "enteral feeding" at the naval base, or what I maintain is force-feeding, in addition to prisoner testimonials and multimedia encounters with force-feeding.

Chapter Three: Suspended Animation: Force-Feeding and the Visuality of Pain

The end of chapter 2 argued that force-feeding and solitary confinement are technologies whose aim is to suppress communal practices of refusal, such as hunger striking, inside of carceral spaces. In the case of Pelican Bay, prison officials were unable to completely manage the political dissent that hunger striking and litigation, helped facilitate. This inability to adequately discipline the prisoner's body through solitary confinement resulted in deploying force-feeding as an alternative means by which to discipline the prisoners. The Pelican Bay hunger strikes quickly led to negotiations and, as such, force-feeding remained a short-lived threat. The hunger strikes at Guantánamo Bay, however, have played out very differently over the past two decades. Since 2002, those held captive have staged individual and collective hunger strikes throughout the camps in protest of their indefinite detention. Their refusal to eat, which is to say their embodied refusal to comply with the unlivability of indefinite detention was met almost immediately by the feeding tube. Hunger striking necessarily prioritizes the life of a cause over the integrity of the body. As such, camp protocol that authorizes the force-feeding of prisoners who, for example, have only refused meals for days or weeks—"long before their lives were in danger"²⁶⁴—points to the state's mobilization of biological life as a means to counter political opposition at the camp. The maintenance of life by way of force-feeding occupies a paradoxical position insofar as it is both life-affirming and life-denying, an application of torture and infliction of pain in the name of biological life. In conjunction with this forced and violent maintenance of biological life, one way in which the life of the political cause is disavowed or elided by the state/prison is through the repression of the very representation/visual encounter with the scene of torture.

While the demands of the strike and its specificities are further explored in chapter 4, here, I sharpen my focus on prisoner testimonials about the pain suffered from force-feeding in order to better consider the control of visibility surrounding the management of hunger strikers at Guantánamo Bay. Indeed, the military task force that runs the facility based at the naval station has established itself as the authority of not only what can be said but also what can be seen. Militarization at the detention camp authorizes its own authority through methods of classification and organization of the men held captive, deciding what information does or doesn't serve "operational purpose" for the public. This is perhaps best illustrated by the fact that camp officials refuse to allow public access to video recordings demonstrating the force-feeding procedure on prisoners. In May 2014, lawyers from the London-based organization Reprieve filed a motion on behalf of Guantánamo Bay Detention Camp prisoner Abu Wa'el (Jihad) Dhiab to unseal thirty-two videotapes of Dhiab being forcibly extracted from his cell and force-fed in a restraint chair. Dhiab's lawyer described his force-feedings as being administered so incorrectly that he vomited repeatedly and lost consciousness. As a consequence, he suffered a chest infection, and his nostrils and throat were so raw that he had difficulty breathing. The Justice Department contended that releasing the videotapes to the public would compromise national security, "spurring extremist attacks against US personnel or encouraging resistance by Guantánamo detainees." The Justice Department further argued that the footage might provide too much visualization of "prison infrastructure,"²⁶⁵ which might instruct other prisoners how best to refuse their own force-feedings. The case came to a close in 2017, when a three-judge panel of the Circuit Court of Washington, DC, ruled that the videotapes would remain under seal and not made public.²⁶⁶

Vision, or visibility, then, mediates a site of subject formation in and around Guantánamo Bay, intended to control prisoners by denying them affective relations with spectators. Spectators, here, is meant to signal what media scholar Lili Chouliaraki calls a general “collection of watching individuals,” engaged in news media and digital culture surrounding the camp conditions and protests at Guantánamo Bay.²⁶⁷ More specifically, however, I consider the role of the political activist as a unique spectator, one who engages directly with and responds to prisoner testimonials that travel outside of the camp into publications such as the *New York Times* and campaigns surrounding litigation mobilized by nonprofit organizations such as Reprieve seeking to draw visibility to, and put pressure on, public figures, in hopes of ending the practice of force-feeding at the camps. Without access to the videos of Dhiab’s forced cell extractions, printed testimony is another site where the pain of force-feeding is archived.

In 2013, the *New York Times* published Guantánamo prisoner Samir Naji al Hasan Moqbel’s testimonial of the pain he endured from being forcibly fed. His widely circulated testimonial insists that the spectator both listen to *and* look at his suffering, concluding his testimony with a plea: “I just hope that because of the pain we are suffering, the eyes of the world will once again look to Guantánamo before it is too late.”²⁶⁸ Following Moqbel’s embodied approach to witnessing, I argue that pain becomes the basis of not only political subjectivity but also relationality between those held captive and the spectator. As ethnic studies scholar A. Naomi Paik comments, “Testimonies of rightlessness contest the nationalism and racism behind camp-thinking,”²⁶⁹ nationalist categorizations of difference predicated on oppositions such as “self/other” and “friend/stranger.”²⁷⁰ Prisoner testimonials in response to force-feeding attest to the violence of “camp-thinking” and, importantly, to the desire for corporeal sovereignty. The sovereignty of the prisoner relies on others to witness the suffering induced by state practices by “build[ing] a link between the speakers and us (the rightless and the relatively rightful), to reach beyond the camp’s boundaries and connect their world to us.”²⁷¹ Following Paik, I argue that suffering, for Moqbel, isn’t that which numbs the spectator but what is capable of jolting one out of complacency.

In what follows, I consider the disappeared videos of Dhiab’s force-feedings and Moqbel’s plea for the world to once again turn their gaze towards Guantánamo as guides by which to consider what it might mean to encounter, through written testimony and visual representation, the brutalities enacted against the mind-bodies of the men held captive without reducing prisoners to mere victims. Rather, their acts of embodied protest communicate how the metrics of force-feeding suspend political life—that is, the right to protest the conditions of one’s confinement through hunger striking and other acts of self-harm. Such metrics are undoubtedly displayed in the videos of Dhiab’s cell extractions and force-feedings, but without access to the footage one must turn to other documentations of suffering, such as testimony and activist interventions. Indeed, pain is a site established through prisoner testimony, which is then made available to outside activists by means of mediation through visual culture objects, such as multimedia documents, enabling a new kind of relational site demanding political sovereignty for the men held captive.

By examining Moqbel’s testimony; Joint Task Force (JTF) Guantánamo Bay’s *Medical Management of Detainees on Hunger Strike*, a thirty-page document detailing the standard operating procedures for force-feeding; and a video project by human rights organization Reprieve featuring artist Yasiin Bey simulating the “proper” techniques for force-feeding, I maintain that the verbal and embodied modes by which prisoners and activists resist the state’s framing of force-feeding as medical obligation to preserve life exposes how such a medical

procedure is, in fact, torture. Here, testimony is crucial, in that it places the spectator in a certain proximity to the men held captive, allowing for the felt pain of force-feeding to travel outside the detention camp and to become available to political activists, who may use it as a tool of refusal that potentially leads to a more relational encounter that doesn't depend upon a narrative of victimization or a narrative of a sovereign autonomous subject.

Witnessing and a Responsibility to Look

Moqbel begins his testimony by describing the first time he was force-fed at Guantánamo: "I will never forget the first time they passed the feeding tube up my nose. I can't describe how painful it is to be force-fed this way. As it was thrust in, it made me feel like throwing up. I wanted to vomit, but I couldn't. There was agony in my chest, throat and stomach. I had never experienced such pain before. I would not wish this cruel punishment upon anyone."²⁷² Moqbel's narrative, and the many other testimonies by prisoners that bear witness to force-feeding, opens up the possibility for pain to be not simply an experience felt in isolation but, rather, an experience shared with a public. The legal battle that started in 2013 to end force-feeding at Guantánamo depends on the narratives from prisoners such as Moqbel to incite legal and public outrage against the pain that they insist force-feeding causes. The state must exercise its authority over life without causing pain, or, at the very least, there must be a clear penological purpose behind the cause of pain. The military personnel at Guantánamo Bay claim that the feeding process is safe. The denial of the adverse health effects caused by force-feeding relies on a logic that considers Moqbel's pain unverifiable.

The state's refusal to allow the pain that these prisoners testify to be seen or felt, I argue, is what makes it unverifiable. The state's discourse of the unverifiability of pain is in line with Elaine Scarry's account of the nature of individual or private pain. Scarry's *The Body in Pain* stresses the curious nature of physical pain as it oscillates back and forth between being that which "cannot be denied and that which cannot be confirmed."²⁷³ There is something about pain, for Scarry, that is beyond representation and resists language. It is true that there are cultural and communal ways of registering pain. The sounds and words emanating from the subject help communicate, convey, or expose pain, but the central problem remains that pain's "resistance to language is not simply one of its incidental or accidental attributes but is essential to what it is." Scarry argues that physical pain is an exceptional interior state precisely because it is "not *of* or *for* anything. . . . It is precisely because it takes no object that it, more than any other phenomenon, resists objectification in language."²⁷⁴ In Scarry's account of pain, the subject can lose recourse to speech and, as such, relies on outside actors to speak on their behalf.

Litigation attempts to remedy the gap between language about pain and experience of pain articulated by Scarry above. The motion to produce video footage of Dhiab being force-fed is an example of litigation's attempt at making public pain and injury. In May 2014, Judge Gladys Kessler ordered that the thirty-two videos showing the forcible feeding of Dhiab be turned over to his lawyers but that the content of each was not to be commented on publicly. However, only eight redacted videotapes were given to Dhiab's defense team, and in 2017, the district court in Washington, DC, ruled that the videos would remain classified. The emphasis on acquiring filmic evidence acknowledges the instability of mere descriptions of suffering. What would the video footage of Dhiab's forcible cell extraction and tube feedings tell us that Moqbel's narrative doesn't? And what of the power of the visual to interrupt the reality that the authorities at Guantánamo have constructed concerning new force-feeding procedures, such as the restraint chair featured in the footage of Dhiab? It is not just litigation or advocates who fill

the gap between language and experience but also the prisoners themselves who represent their own pain to the world. Indeed, the prisoners speak for themselves, even as the state refuses to listen.

Thinking of pain as relational takes us in a different direction than Scarry's account—one more concerned with what Talal Asad understands as the agentive possibilities generated by the articulation of pain. There will always be certain aspects of pain that cannot be fully conveyed to an observer and will thus remain to some degree unintelligible. There is no way to experience the exact pain that Moqbel felt as the feeding tube was thrust up his nose, but, as Asad argues, this needn't be the point of sharing one's pain with others. "Sufferers are also social persons (animals)," he writes, "and their suffering is partly constituted by the way they inhabit, or are constituted to inhabit, their relationships with others."²⁷⁵ Importantly, there is a power dynamic involved in assuming we can feel another's pain, as we end up substituting our own body for that of the sufferer. Pain here, however, is not simply an experience that may or may not be verifiable but is, instead, the means by which relations are mediated. This is not to say that there is something inherently good about the experience of pain. Rather, contrary to understanding pain as passive and commensurable only by the subject experiencing it, pain is actually active and capable of relationality.

If we take Moqbel's pain as something more than a private event and, instead, relational, then perhaps a space of plurality might be opened where the spectator feels called to take part in "new conditions for moral action."²⁷⁶ This call is not abstract; indeed, contemporary visual culture around political violence takes what Ariella Azoulay calls the "active gaze" quite seriously. The active gaze necessitates an extreme attention to the image at hand and destabilizes any presumption of vision as transparent. Such a gaze, Azoulay writes, "holds itself humble before the image, recognizes the fact that not everything can be seen or shown, knows that removing the social prohibition of the visible will not lead to full visibility, and understands that not only is such visibility impossible, but that the passion for such visibility is precisely what thwarts the eye from seeing what is visible on the surface."²⁷⁷ Here, a spectator must decide how to decipher images of violence and which images should and must be made public. As such, to extend the active gaze to Moqbel's verbal testimony isn't counterintuitive but a means by which to reorganize what is meant by the category of what Azoulay calls "authentic documentation."²⁷⁸ This is to say that a multitude of textual elements are essential to one's recognition of the visible. Embedded in Moqbel's testimony is an opportunity to listen and imagine what we are barred from seeing. This is what it means to reconstruct and fabricate images from testimony that are spoken or written down. But, despite this gap, we continue to look. Moreover, as Azoulay argues, we *must* look, for there is a responsibility inherent to the witnessing of the image.

The capacity to determine any sole meaning of the visual is impossible, but emphasizing a more relational engagement with images moves us beyond what Azoulay understands as Susan Sontag's "image-fatigue" and instills a responsibility inherent to looking that is conscientious of how suffering is framed and how that framing affects our responsiveness to the image. Sontag's argument about the problematic "Image-World" that we find ourselves in highlights how so often one's engagement with the visual lacks critical thought or socio-historical engagement.²⁷⁹ For Sontag, a photograph has only one language yet is potentially destined to be deciphered by anyone. She writes, "The photographer's intentions do not determine the meaning of the photograph, which will have its own career, blown by the whims and loyalties of the diverse communities that have use for it."²⁸⁰ Interpretation necessarily makes it so that an unforgettable

photograph, or any photograph for that matter, will eventually become depoliticized and unmoored from its original context or intention.

Similarly, at the end of her classic *On Photography*, Sontag muses that it is now photographs, and not the world, that have become the standard for beauty. Thus, there is a necessary tension between photography that seeks to beautify and photography that seeks to “tell the truth.” In Sontag’s account, an unforgettable photograph becomes depoliticized, and our looking at images has become empty. In response to Sontag and other critics who view images as immobilizing, such as Roland Barthes, Azoulay considers that perhaps “they simply stopped looking. The world filled up with images of horrors, and they loudly proclaimed that viewers’ eyes had grown unseeing, proceeding to unburden themselves of the responsibility to hold onto the elementary gesture of looking at what is presented to one’s gaze.”²⁸¹

Azoulay is right to suggest that the gesture of looking is elementary, but this does not make looking at images of violence and suffering any less painful. Indeed, Sontag’s world was forever divided after looking at photos of the Nazi death camps. And Barthes, in *Camera Lucida*, is haunted by the contention that the ultimate form of the photograph should be death. Undoubtedly, for Barthes, the photograph wounds and pricks. Yet the meaning of the photograph, for him, can only ever be consumed aesthetically, not politically. It follows, then, that he should lament that the photograph “cannot say what it lets us see.”²⁸² Yet, in spite of this, we continue to look. Moreover, as Azoulay argues, we *must* look, for there is a responsibility inherent to the witnessing of the image.

Moqbel’s insistence on not only his own pain but also public acknowledgment of that pain resists the prison’s control over what audiences will have access to concerning the detention camp. After all, vision is regulated not only inside the camps but also outside as well, through the control of what information is made public concerning hunger striking and force-feeding. Camp oversight takes the form of panoptical surveillance at the same time that it hides or prevents certain forms of life from being made visible. The sealed videotapes documenting how punishment is medicalized at the camp is one such instance of obfuscation, as is the detention camp’s 2013 decision to no longer report to the public the number of men hunger striking. Indeed, camp officials understand that violence done to the self for the self is a powerful demonstration of sovereignty that pushes up against the state’s emphasis on biological life/existence.

The military task force that runs the facility based at Naval Station Guantánamo Bay has established itself as the authority of not only what can be said but also what can be seen. Militarization at the detention camp authorizes its own authority through methods of classification and organization of the men held captive, deciding what information does or doesn’t serve “operational purpose.” Moreover, this relation between authority and visibility is an unstable one in constant need of rearticulation. In the following section, I consider how the state frames force-feeding as ethical form of medical care to cover over or hide what is in fact a regime of compulsory visibility within the field of authority, power, and punishment. I ask: How does the state frame medical ethics inside the camps and documents such as the *Medical Management of Detainees on Hunger Strike*? How does the state’s emphasis on care obfuscate not only the demands of the prisoners but also the feeding tube as carceral technology?

The Standard Operating Procedures of Authority

In 2013, *Al Jazeera* asked to see the *Medical Management of Detainees on Hunger Strike*, the document outlining the standard operating procedures (SOP) for force-feeding. The request was

granted. Originally written in 2003 and updated in 2005, the SOP was designed to serve as a policy manual in the event of hunger striking at the camps. In 2013, the manual was revised again with the intention of preventing another mass hunger strike like the one that took place in 2005.²⁸³ It was put into effect on March 5 and, unlike previous versions, released without redactions.²⁸⁴

Unique to the 2013 manual is that it directs staff in how to handle prisoner resistance to the feeding tube itself. The introduction states that “just as battlefield tactics change throughout the course of a conflict, the medical response to GTMO detainees who hunger strike has evolved with time.”²⁸⁵ Here the evolution of tactics is synonymous with the alteration of medical technology and procedure. Hunger strikers are no longer simply nasally fed but strapped down to restraint chairs and forcibly fed several times a day, and it is the commander—not the certified physician—who has final say over whether a prisoner is forcibly fed.²⁸⁶ The thirty-page document details twelve categories of medical management, some of which include evaluation and assessment sheets, medical equations, calculations, and electrolyte deficiency management. These categories, taken together, make up the “General Algorithm for a Hunger Strike,” a worksheet that is also included within the report. Staff use the algorithm as a guide in the event of a hunger strike to enact “involuntary enteral feeding” of prisoners who “[are] at a weight less than 85% of the calculated Ideal Body Weight” or suffering from other adverse health effects, such as seizures, muscle wasting, and significant weakness as a consequence of the prolonged refusal of food and water. The SOP guidelines also mobilize visual techniques of oversight, such as observation, examination, and documentation, in an attempt to “rehabilitate” the prisoner into a docile and normalized subject who eats rather than hunger strikes, concedes rather than objects.

The language of the report is medicalized, referring to prisoners on strike as “patients” and enteral feedings as “procedures,” as if it is a surgical operation to which the prisoner has consented. Enteral feeding is the continuous administration of nutrients to the digestive system using a tube. Intermittent feedings, in contrast, are feedings that take place at different times throughout the day. When not quoting the report, I have chosen to refer to enteral feedings, and by extension intermittent feedings, as “force-feedings.” This term both highlights the coercion and abuse on the part of the state as well as respects how prisoners themselves have chosen to describe what has been done to them in response to hunger striking. The SOP’s “Policy” section specifies that it is a nasogastric tube (NGT) used to administer enteral feedings. Once admitted to the detention hospital, the prisoner is administered a 10 French or 12 French (this is the diameter, or size) tube, which is inserted through the stomach, all the way down to the small intestine.

The state’s term *involuntary* already gestures toward a lack of autonomy for prisoners, but the use of the feeding tube at the detention camp should also be situated within a longer history of carceral punishment, where force-feeding has been used as a tactic of incapacitation meant to immobilize and stifle political defiance within the prison regime. Most notably, force-feeding was used on British Suffragettes and Irish political prisoners in the early 1900s. This is not to say that the authority of JTF at the detention camp is totalizing. Rather, as Lorna Rhodes warns in “Panoptical Intimacies,” although disciplinary spaces of confinement are contingent on transparency of panoptical vision, they also

invite and magnify disorder, pollution, and noise. While vision is certainly central to the effect of transparency, inmates and prison workers attest that the senses of smell and hearing predominate in some of the more aversive prison experiences and can be deployed to interfere with the panoptical mechanism and challenge the notion of a transparent society free of zones of darkness. Their experiences serve

to remind us that the visual emphasis both of the panopticon and of our use of it as a figure of modern discipline . . . is an “optical” illusion that minimizes the material, felt body even as it highlights the body as the mediator of projects of docility.²⁸⁷

Indeed, the restraint chair and feeding tube as instruments of discipline produce suffering in the prisoner, but also resistance and strategy. The felt experiences of pain, such as lacerations in the back of the throat, trouble swallowing, and the discomfort of tape used on the face to secure the feeding tube, should not be ignored, for they demonstrate the disconnect between the SOP as policy manual and the lived experience of the prisoner who chooses to hunger strike. By biting and swallowing the tube, prisoners resist the camp’s medicalization of punishment, and incapacitation, but at the cost of physical discomfort and suffering. Self-inflicted pain, as refusal to the pain caused by force-feeding, becomes one such zone of darkness that escapes the detention camp’s complex of visibility predicated on oversight and surveillance.²⁸⁸

Surveillance and Control

The SOP document instructs staff to surveil prisoners’ bodies, recording heart rate, blood pressure, and weight. As an authoritative document, surveillance and management are legitimated through the coupling of care with the preservation of life. Medical personnel are constructed as the technicians of carceral oversight and force-feeding as the technology of health and nutrition that most efficiently protects, preserves, and promotes life at the camp. Here life is purely biological and takes precedence over political life. As a policy manual, the SOP document focuses not on medical ethics but on targeting, disciplining, and surveilling the captive’s body with the objective of eliminating political opposition.

The SOP makes clear the centrality of isolation and immobility to incarceration: “In event of a mass hunger strike, isolating hunger striking patients from each other is vital to prevent them from achieving solidarity.”²⁸⁹ The medical evaluation and subsequent punishment begins by closely monitoring and recording prisoner meals. The Joint Detention Group security force notifies medical personnel of any prisoner appearing to be hunger striking, and a daily list of those perceived to be striking is sent out to “key leadership” in JTF Guantánamo. Once it is determined that a prisoner is on hunger strike, a medical provider counsels him on the health risks of going without food and/or water for prolonged periods of time. The “Hunger Striker Medical Evaluation Sheet” documents whether the prisoner is drinking fluids, the number of meals that have been missed, and the reason for the hunger strike. It also records a full physical assessment that consists of documenting the prisoner’s weight. Weight plays an important role on this sheet, with specifications needed for the “in processing weight,” “pre-hunger strike weight,” “current weight,” and “weight loss.”

The preoccupation with weight at the detention camp has been described by Sami al-Haj, who was released in 2008, as the only concern of physicians. He states, “All they care about is the prisoner’s weight. . . . ‘Are you sick? Are you in pain?’ Who cares? It is all about the number on the scale.”²⁹⁰ For al-Haj, a side effect of force-feeding was bloating, resulting in the impression of legitimate weight gain whenever he was made to step on the scale. Indeed, the importance of recording weight at the naval base cannot be understated, and the public release of the measurements and weight of prisoners has been used to give the illusion that the majority of the men held captive are not only healthy but also not participating in the hunger strikes.²⁹¹

A behavioral assessment follows weight intake to determine the exact reasons behind the prisoner’s decision to hunger strike. Following the assessment, the prisoner is evaluated daily

using the “Hunger Striker Medical Flow Sheet,” used to keep track of the prisoner’s heart rate, blood pressure, fluid intake, whether he is eating, the caloric intake of the enteral feed, weight, and comments concerning the prisoner’s mental health. All counseling efforts and treatments are recorded in the prisoner’s medical record. If it is determined that medical intervention is necessary, the prisoner will be admitted to the detention hospital or transferred to a designated feeding block to be force-fed. The various disciplinary techniques surrounding force-feeding, such as the algorithm, medical evaluation sheet, and flow chart, keep the prisoner constantly within a line of sight, with the intention of correcting the prisoner’s behavior. The ultimate goal is that the prisoner terminate his hunger strike and return to “oral nutrition.” Staff management of hunger striking at the camp normalizes, attempting to unify behavior while also observing, judging, and making visible differences. This “normalizing gaze” is what both subjects and objectifies those being examined.²⁹²

Force-feeding at the detention camp is more opaque than other forms of discipline administered, both hiding and making visible its intentions. One example of this is the way in which the SOP prevents the hunger striker’s own knowledge about the health and status of the body itself in the form of concealing measurements such as weight loss or weight gain. In his testimonial, Moqbel notes that at least one month passed before he was updated on how much he weighed. And Dhiab is quoted, along with several others, in litigation as being certain that the medication Reglan is being administered without their consent. The drug is used to treat nausea and vomiting, but prolonged usage has been linked to a neurological disorder called tardive dyskinesia—the involuntary movements of the tongue, lips, face, and extremities.²⁹³ Other complications that can arise when tube feedings are administered poorly are diarrhea; dehydration; aspiration pneumonia, which is the inflammation of lung due to the entrance of food; and a number of gastrointestinal disturbances.²⁹⁴ Prisoners reported to their attorneys that it was pointless to resist tube feedings. Regardless of whether they cooperated, the tubes only got bigger, and both insertion and removal were equally painful, causing the men “to urinate and defecate on themselves.”²⁹⁵ These testimonials are in stark contrast to Guantánamo officials’ assertion that “medical personnel do not insert nasogastric tubes in a manner intentionally designed to inflict pain.”²⁹⁶ Yet the protocol for “enteral feedings” administered in restraint chairs suggests otherwise.

Restraint chairs were introduced to the detention camp in 2005 after a psychiatrist, accompanied by three consultants from the Federal Bureau of Prisons, visited the camp. It was suggested that the SOP be revised to include the use of restraint in managing hunger strikers. The chair is described by the Constitution Project as a technology that “completely immobilizes a person strapped into it, using a lap belt and straps that immobilize the head as well as wrist and ankle restraints.”²⁹⁷ The use of the chair is also described in the SOP where the guard

shackles [the] detainee and a mask is placed over the detainee’s mouth to prevent spitting and biting . . . the detainee is escorted to the chair restraint system and is appropriately restrained by the guard force . . . upon completion of the nutrient infusion and removal of the feeding tube, the detainee is removed from the restraint chair and placed in a ‘dry cell.’ . . . The guard force will observe the detainee for 45–60 minutes for any indications of vomiting or attempts to induce vomiting. . . . If the detainee vomits or attempts to induce vomiting in the ‘dry cell’ his participation in the dry cell protocol will be revoked and he will remain in the restraint chair for the entire observation time period during subsequent feedings.²⁹⁸

The will of the prisoner here is trapped, and his movements are constricted. The feeding tube both maintains biological life at the same time that it kills political life. We can also think of this in terms of the living or social death of the prisoner, or what legal scholar Colin Dayan calls “soul death.”²⁹⁹ For Dayan, the prisoner is one who possesses a natural life but whose loss of civil rights illustrates how the law can make one dead in life. If, as Dayan also suggests, confinement offers prescriptions and treatments for those constructed as criminal, what kind of treatment, then, is force-feeding?

Practices such as these have led to strong critiques of the ethics of force-feeding. Physicians and nurses remain concerned about the medical ethicality of administering the feeding tube. In 1975, the World Medical Association issued the *Declaration of Tokyo*, guidelines for physicians concerning torture and inhumane treatment and practices with regard to detention. The declaration states: “Where a prisoner refuses nourishment and is considered by the physician as capable of forming an unimpaired and rational judgment concerning the consequences of such a voluntary refusal of nourishment, he or she shall not be fed artificially.”³⁰⁰ Physicians are screened beforehand to ensure that they do not hold any ethical objections to force-feeding. Physicians are also ethically obligated to provide medical information regarding the often irreversible effects of self-starvation as well as to discern whether the prisoner’s decision to strike is his own and not one of coercion or madness.³⁰¹ Here there is a certain amount of agency attributed to the decision to hunger strike, but not however, to the decision to be force-fed or not.

Forcible treatment against the prisoner’s consent is not only medically unethical but is also clearly opposed by the World Medical Association of Malta (WMA). The WMA’s guidelines on hunger striking specifies that force-feeding is very rarely acceptable: “Even if intended to benefit, feeding accompanied by threats, coercion, force or use of physical restraints is a form of inhumane and degrading treatment. Equally unacceptable is the forced feeding of some detainees in order to intimidate or coerce other hunger strikers to stop fasting.”³⁰² A physician acts ethically when respecting the wishes of the hunger striker. The guidelines make clear that physicians have a responsibility to be loyal to their patients above all else. Given these clearly enunciated guidelines, my interest is less in how particular physicians have neglected the guidelines of the WMA; more pertinent are the ways in which the state prioritizes the preservation of life to underwrite its obligation to force-feed.

The medical ethics surrounding whether or not physicians should force-feed is illustrated well by journalist Luke Mitchell. Writing for *Harper’s Magazine*, Mitchell recounts interviewing Dr. William Winkenwerder Jr., Assistant Secretary of Defense for Health Affairs. In Winkenwerder’s logic, if there is any possibility of a hunger striker lapsing into a coma or being near death, then it’s the physician’s right to make a judgment call as to whether the patient is forcibly fed or allowed to die. This is also made clear in the WMA guidelines, with the stipulation that any advanced refusals of treatment made by the prisoner are to be respected. But, Winkenwerder maintains, “if we’re there to protect and sustain someone’s life, why would we actually go to the point of putting that person’s life at risk before we act?”³⁰³ This logic is clearly incompatible with the state’s supposed support of the prisoner’s right to strike. As Mitchell puts it, “Allowing people to hunger strike and preventing them from dying as a result [are] mutually contradictory aims.”³⁰⁴ As A. Naomi Paik argues, it is this very paradox that makes an ethics of care an impossibility at Guantánamo.³⁰⁵ However, what it does do, quite literally, is foster life.

The SOP illustrates how force-feeding aims for the incapacitation of the body at the same time that it keeps the prisoner alive, fulfilling Foucault’s definition of biopower as the power to

“make live or let die.”³⁰⁶ Biopower, the introduction of life into power, names the techniques for achieving the subjection of bodies and the control of populations. Both the terms *control* and *population* become significant, as the necessary precursor for control of a subject is life. Force-feeding presents a paradox that is at once emblematic of Foucault’s biopower while also functioning as incapacitating technique. For Foucault, at issue are two different populations: the one that will die and the one that will live a healthier life. In the case of the hunger striker, the paradox is found within the same figure. The same figure who is to be saved is also incapacitated. Throughout this dissertation, I’ve named this paradox “suspended animation,” for it gets at the ways that confinement and captivity produce in subjects a state that is neither dead nor alive.

Suspended animation, itself a medical term, is a process that replaces the body’s blood with cold saline, dropping one’s temperature to 10°C, making almost all cellular activity stop. In 2014, surgeons at University of Pittsburgh Medical Center Presbyterian Hospital conducted a trial using suspended animation on gunshot victims. A doctor working on the trial clarified to a reporter that “we are suspending life, but we don’t like to call it suspended animation because it sounds like science fiction. . . . So we call it emergency preservation and resuscitation.”³⁰⁷ Although toward very different ends, the SOP, too, articulates force-feeding as emergency preservation, a procedure that in its vitalism rehabilitates the body to its proper weight and physiological functions. However, terminology aside, what is it if not the suspension of life, which is to say the suspension of one’s right to protest an end to indefinite detention predicated on religious othering, xenophobia, and racism?

The SOP for force-feeding and the use of the restraint chair, described by prisoner Nabil Hadarab as an execution chair, calls to mind Foucault’s notion of the panopticon as a laboratory of power, a “privileged place for experiments on men, and for analyzing with complete certainty the transformations that may be obtained from them.”³⁰⁸ Indeed, the restraint chair has remained a powerful image in the popular imaginary for the medicalization of punishment at the detention camp. Physicians and military officials meld into one in this imaginary, and the DH becomes synonymous with a cell—or a laboratory.

The Visible/Nonvisible

The Guantánamo Bay hunger strikes offer a counternarrative to the authority of the SOP. The prisoners’ resistance to being force-fed is an attempt at reclaiming political and corporeal autonomy. The SOP points to such embodied forms of resistance: “On occasion, a detainee undergoing enteral feeding will attempt to bite the tube in an attempt to swallow the feeding tube. . . . The detainee may attempt to bite the portion of the tube outside the nose by turning his head and snaring the tube with his mouth, or may attempt to regurgitate the tube partially into the oral cavity and attempt to sever the tube covertly without opening his mouth.”³⁰⁹ Here, we see the prisoner resisting incapacitation by attempting to bite or swallow the feeding tube. We can read this resistance as not only struggling against the administration of force-feeding but also opposing the feeding tube itself as medical apparatus. The feeding tube, as Patrick Anderson asserts, “represents and facilitates the enforcement of normative alimentary exchange by the institutional apparatuses of the State—for example, clinic and prison.”³¹⁰ Indeed, medical personnel in the clinic are cleared to restrain the prisoner in instances of resistance:

If a particular detainee displays repeated attempts to bite the tube, a weighted 10 ft tube shall be used. . . . If the detainee is able to gain the tube between his teeth, the nurse will: 1. Simultaneously turn off feed and, immediately stabilize the

distal end of the tube and pull the tube from the detainee's nose. 2. Maintain traction on the proximal portion of the tube until the detainee releases the tube from between his teeth. This may take considerable time. . . . If the detainee refuses, the RN shall immediately remove the tube, inspect it for damage, and re-insert it.³¹¹

How are we to understand the biting and attempts at swallowing the tube? Important is the repetition of the feeding. No matter the amount of resistance or pain on the part of the prisoner, the feeding does not cease; rather, its administration intensifies through the feeding tube's repeated insertion.

Similarly, Sami al-Hajj, a journalist for *Al Jazeera* who was held at the detention camp for seven years and whose hunger strike lasted 480 days, describes force-feeding in terms of its repetition:

They're supposed to feed you [with] two cans, small cans . . . but they feed us 24 cans and 24 bottle[s] of water, continuous. And we [were] throwing up, it continues and we throwing up and it continues. This is one feeding; [it] would take 8 hours like that, you are in chair. Until your cell become full of [vomit]. And after that, when they come and [remove the feeding tube from the esophagus], they [would grab the tube and just walk away with it]. Then there was blood coming. And [the guard] takes it from you and he goes to another [detainee] directly and [inserts it] . . . without cleaning.³¹²

Such repetition is precisely what transforms enteral feeding into force-feeding and the "preservation of life" into torture. For Dayan, the death of spirit caused by confinement is akin to suspended animation. Indeed, the feeding tube, like solitary confinement, keeps the mind and body technically whole, but at the cost of the spirit, which will deteriorate in the restraint chair or cell. Yet the suspended animation of force-feeding doesn't completely foreclose embodied forms of opposition. Similarly, Dayan argues that prisoners who self-mutilate while in solitary confinement make visible what the law seeks to mask.³¹³ What do the prisoners of Guantánamo make visible about not only the law but, more specifically, the militarization of medicine? The self-inflicted pain of the hunger striker works to communicate not only the pain induced by force-feeding but the pain of confinement itself. In the next section, I turn to one of the ways in which the public has responded to force-feeding and how video and performance come to play a role in the ethics of witnessing.

Reframing Force-Feeding

On July 8, 2013, in response to the first litigation filed concerning the force-feeding of Dhiab and several other prisoners, Judge Kessler concluded that although there was sufficient evidence to suggest that force-feeding is torture, the court nonetheless lacked the jurisdiction to grant the injunction. On the same day, the human rights organization Reprieve launched a campaign in solidarity with prisoners on hunger strike, releasing a nearly five-minute video, directed by British Academy of Film and Television Arts award winner Asif Kapadia, featuring the artist Yasiin Bey (formerly known as Mos Def) being force-fed according to Guantánamo's SOP.³¹⁴ In July 2013, the *Guardian* newspaper released the video, which has over seven million views on YouTube.³¹⁵ By creating this video, Reprieve aimed to generate public outrage and pressure President Barack Obama to close the military prison.³¹⁶

The video begins with a caption stating that 120 prisoners are hunger striking at Guantánamo Bay and 44 of them are being force-fed. Yasiin Bey then enters an empty white

room furnished with a feeding restraint chair, two cameras, an IV, and a table with the feeding supplies. He introduces himself and calls what we are about to see a “demonstration of the standard operating procedures for force-feeding.” The camera focuses on Bey’s attire, lingering on his expensive-looking jacket, pants, and shoes. The next shot is of him in an orange prison jumpsuit and in shackles, as his hands, feet, and head are strapped down into the feeding chair. As the procedure is about to begin, “Standard Operating Procedure: Medical Management of Detainees on Hunger Strike” appears on the frame. While the doctor, a British physician, lubricates the nasogastric tube, Bey’s eyes shift back and forth nervously. The physician proceeds to insert the tube into Bey’s nose. Bey immediately begins to physically struggle, coughing, moaning, and grunting. At this point, actors in black T-shirts enter the room to restrain Bey; the doctor removes the tube from Bey’s nose and begins to lubricate it again, restarting the procedure. As the doctor attempts to reinsert the tube, Bey becomes significantly more agitated and, at this point, begins to resist; he must be restrained at the head and neck. Bey cries toward the end of the video, “No, please, stop, stop it please, this is me, I can’t do it anymore.” He puts his head in his hands and begins to cry. The captions tell us that at Guantánamo the full procedure is carried out twice a day and typically takes two hours to complete. The video ends with Bey describing the tube being inserted into his nasal cavity as having caused a burning sensation—a feeling he describes as unbearable that goes into his brain, reaching the back of his throat to the point that he really couldn’t take it.

A criticism of the above simulation is Bey’s ability—his agency—to stop the feeding and demand that the tube be removed. Here, Moqbel’s and Dhiab’s testimonies are a sharp contrast, in which they too begged that the feeding stop, but to no relief. “It was so painful,” writes Moqbel, “that I begged them to stop feeding me. The nurse refused to stop feeding me. As they were finishing, some of the ‘food’ spilled on my clothes. I asked them to change my clothes, but the guard refused to allow me to hold on to this last shred of my dignity.”³¹⁷ While Bey expressed gratitude at being asked to participate in the simulation, Moqbel remained indefinitely detained, suffering for exercising his right to protest. If Bey’s simulation pales in comparison to what happens when prisoners are force-fed at the detention camp, what, then, is the utility of Bey’s representation of force-feeding? After all, what is necessarily hidden from the frame are the dozens of men unable to escape the restraint chair and feeding tube. Looking relies on not only an exchange of gazes but also the visual degradation of the other, or misrecognition of the other. Bey’s failed simulation, and by failed, I mean that he stopped the feeding before its completion, speaks to this, then, in that it moves away from the insistence that representation can successfully reproduce reality. The video neither fails nor succeeds at reproducing the SOP; instead, it derives its force from highlighting the pain authorized by the SOP and the practice of force-feeding itself.

Performance studies has long argued that representation always exceeds intention and is, thus, never totalizing.³¹⁸ Indeed, it’s the excess that makes interpretation and critique possible. Within any text there is a relationship between what is understood as the “real” and what is understood as the “representational.” Representation transforms a subject into that which the subject is *not* in real life, making suffering loom large by globalizing it. Sontag, for example, argued that to find beauty in war photography seems heartless, yet the landscape on which it was taken remains always a landscape.³¹⁹ Chouliaraki articulates this tension through Luc Boltanski’s theory of “distant suffering,” whereby the proximity between Western spectators and images of suffering in the Global South are problematically mediated by the news and internet. Problematic, because such distance enables the consumption of humanitarian atrocities without

any real incentive by which to act on.³²⁰ “The reason for this regression,” notes Chouliaraki, “is that the very technological form of the medium ‘sanitizes’ reality—that is, it cuts real life off from its raw sensation.”³²¹ Further, television, for example, deploys images and language in such a way that suffering becomes palatable to Western viewers, always presented through the frame of compassion and pity.³²² The question, then, for Chouliaraki is “what are we [in the West] supposed to do with our knowledge of suffering?”³²³ Of course, the paradox is that mediating technologies such as the television enable us to watch in real-time as events unfold while at the same time distorting the authenticity of what is represented.³²⁴

The above speaks to the tension that this chapter has been working through regarding spectatorship and pain, certainly all of which has long been a preoccupation of visual studies. Yet, what’s potentially disruptive about Bey’s simulation of the SOP is that he’s unable to fully register the pain of the force-feeding to the audience. In part, this is because he stops the simulation. However, his response to the pain of the procedure also makes clear that there is something incomprehensible about it. He can’t understand the suffering taking place at Guantánamo, and neither can the spectator. Nonetheless, his failed encounter with force-feeding emphasizes the political utility in witnessing scenes of suffering and encounters with pain. Bey’s performance deflects from the subject to orient the viewer to the felt experience of pain and the technology responsible for producing that pain. Indeed, the camera makes a point to linger on all medical technology present: the positioning and lubrication of the tube and the IV drip, both against a white backdrop.

Although I would caution against any interpretation of Bey’s performance in the video as emancipatory, I nonetheless deem it important to highlight his interruption of the simulation when he pleads, “No, please, stop, stop it please, this is me, I can’t do it anymore.” His refusal to continue bars the viewer from continuing to witness his suffering and, as such, pushes against a gaze that has already naturalized the pain and suffering of the captive body. This is to say, Bey doesn’t equate his own pain with that of Moqbel, Dhiab, or any of the other men who have been forcibly fed. Rather, Bey’s participation responds to Moqbel’s call to once again look toward the detention camp. This simulation, or what I would like to call Bey’s embodied looking, centralizes pain and suffering in such a way that what began at the start of the video as, in the language of the SOP, a “medical procedure” becomes a torture session. The feeding tube is thus transformed from medical instrument that “makes live” to carceral technology that inflicts unnecessary pain and suffering.

Embodied Looking

This is not to say that Bey’s own embodiment can or should be ignored in relation to a video project that seeks to simulate extreme violence onto his body. Bey’s lived reality as a black man and practicing Muslim is made all the more visible as he replaces his own clothing and removes his kufi (prayer cap) for the orange jumpsuit. Whether Reprieve consciously sought to draw a parallel between the captivity of black men within the US prison regime and the racialized men held captive at Guantánamo is unclear. Indeed, one might argue that Bey’s blackness here is exploited to make translatable the suffering taking place, in that, as Saidiya Hartman’s *Scenes of Subjection* argues, blackness always already marks a social relationship of dominance and abjection.³²⁵ Here, Hartman returns us to the (im)possibility of recognition, problematizing the assumption that recognition of the “other” necessarily leads to the liberation of the black subject. More, she makes the case that rather than offer release from suffering, discourses of humanity, such as recognition, actually work to intensify suffering.

I'd like to suggest, then, that Bey demonstrating Guantánamo's feeding procedures, like Moqbel's testimonial, attempts to build on the relationality between the subject in pain and the spectator watching even as his own embodiment is mediated by a racialized optics that necessarily prohibit identification or recognition. Departing somewhat from Hartman's reluctance towards the imbrication of pain with humanization, Frantz Fanon argues that at the core of recognition should be a reciprocal exchange.³²⁶ To desire recognition is to desire to live with and for the other. There are certain forms of habitation in which we may emerge from as subjects and some of these habitations have to do with visibility and the ability to be recognized. I know myself because you recognize me, and you know yourself because I recognize you. There is a form of relationality that informs subjectivity. In some ways this is precisely the kind of identification that Moqbel's testimonial asks of the reader and what Bey then attempts to ventriloquize through the simulation.

In his *Group Psychology and the Analysis of the Ego*, Sigmund Freud writes of identification as the expression of an emotional tie with another person, "identification," he writes, "endeavours to mould a person's ego after the fashion of the one that has been taken as a model."³²⁷ Fanon works with and against this concept of identification and uses it as a way to understand the debilitating and violent effects of the social interaction between the colonizer and the colonized. Fanon's use of identification is in relation to not only the linguistic failures of the black man but also the misrecognition of the black man, which bars his subjectivity and precludes him to mere object, leading to the foreclosure of any true encounter between the black and white man. Fanon's description of his own body schema is interrupted by the infamous exclamatory "Look! A Negro!" in "The Lived Experience of the Black Man."³²⁸ This violent interpellation forces him to contend with the color of his skin as that which can no longer be accounted for by a simple body schema. Indeed, the hail forces the collapse of the body schema, leaving Fanon's body parts shattered and fragmented rather than enveloped into each other.³²⁹

I see a corollary between Fanon and Bey through Hartman, in that, within spaces of extreme terror, such as chattel slavery, blackness nevertheless marks the potential for redress and emancipation through, for example, the enunciation of pain and the insistence upon black sentience.³³⁰ And it is precisely this insistence upon sentience, or the vocalization of one's felt experiences, that I locate within Fanon's articulation of his own objectification by whiteness, which begins by way of the fragmented and desperate declaration "I explode"³³¹ before culminating in a moment of such ontological uncertainty that Fanon can only weep.³³² Bey's cries, his embodied reaction to the feeding tube, are not Fanon's agonistic relationship to subjectivity, but both are points of departure for considering the ways that listening enables a different experience of the visual, enabling a less desensitized mode of contact. Misrecognition is an inevitability, but sometimes there are moments of defiance. To this end, I'm arguing that encountering pain and suffering, depending on how one approaches the scene, can facilitate a new line of sight.

The video, then, is an example of framing that provides a visualization of the punitive use of force-feeding that is otherwise offered solely through testimonials and human rights reporting while also underscoring the racialized optics inherent to US carceral practices. Indeed, framing is first and foremost about presentation, but it is also about boundaries. In other words, the frame is not only a boundary to the image but also itself that which structures the image.³³³ The camera's gaze frames the feeding tube as a weapon against Bey and those being force-fed at Guantánamo. The feeding tube, here, comes to signify and critique the state's emphasis on life and the perceived necessary management of the captive in the service of US security. Reprieve's video is

a tactic that has the potential to reverse the authority of the state by wresting control of the gaze. This reversal of the gaze, whereby documentation is used to respond back to authority by using the state's own standard operating procedures, mobilizes pain in the service of drawing visibility around the medicalization of punishment at the camp.

Reprieve's campaign accompanying the video encouraged members of the public to undertake short-term hunger strikes in addition to drawing awareness to Guantánamo Bay with their political representatives.³³⁴ It's unclear just how many participated in the campaign, and, ultimately, President Obama did not close the detention camp.³³⁵ However, assessing the success of Reprieve's campaign is less of interest to me than how the video competes against the state's refusal to release video documentation of Dhiab's force-feedings.³³⁶ In doing so, the reenactment of the SOP makes pain as public as possible instead of relegating it solely to inside the detention camp where the state frames the procedure as medically sound. Although the state denies the pain it subjects onto prisoners, the video demands that Bey's pain be seen as real by attempting to "resituate the terms of which reality is understood."³³⁷ This resituating of reality attempted by Bey can also be likened to a reframing of the field of representation, forcing us to look at the "image outside the scene of its production"³³⁸ where its interpretation is no longer solely controlled by the norms of the state. Our attention as spectators is turned toward the functioning of the feeding tube as a prosthetic capable of administering a pain that is authorized by the state. The video, then, is a simulation of not only the prisoner's struggle for corporeal autonomy but also a demand for transparency and accountability. Bey—as both spectator and performer—provides a mode of visibility for the zone of darkness that is the detention camp and the moans of suffering from the men held captive there. I read Bey's attempt at simulating the SOP of force-feeding as a way by which to impose form onto the sealed videos, the absence of Dhiab's recorded, yet sealed, cries. Without access to Dhiab's videos, all we're left with is the SOP document.

I'd like to suggest that Reprieve's video enables a different mode of engaging not only with the visual as such but also with state documents such as the SOP, where we must learn to both look and listen to the page. What we see in Reprieve's video is Bey's ability to interrupt being force-fed through his verbal commands "please stop, please . . ." as well as the phonic substance of his moans.³³⁹ Writing on the photograph of Emmett Till's open casket, Fred Moten encourages that one both listen and look at the photo representation of Till's brutalized body.³⁴⁰ "The meaning of the a photograph is cut and augmented by a sound or noise that surrounds it and pierces its frame," writes Moten.³⁴¹ Might we extend this to Bey's moans, his enunciation of pain? Taking this question seriously, Moten writes that "this is to say not only look at [the photograph] but look at it in the context of aesthetics, look at it as if it were to be looked at . . . that holds open the question of what looking might mean in general, what the aesthetics of the photograph might mean for politics."³⁴² Reprieve's video is indeed difficult to witness, but I maintain that confronting pain and its visual and sonic representations might provide us with an affective engagement that is capable of looking without reducing images of violence to spectacle. Indeed, the wide-spread circulation of the video enables the possibility for not only the activist spectator to be called to action, but a more general spectator as well, who in watching the video, might not only critically empathize with the violence of force-feeding in particular, but the violence of transnational carceral practices more generally.

Reframing the Archive

With the ruling against making public Dhiab's video footage, we must look toward alternative archives of evidence not authorized by the state. The SOP and Dhiab's court litigation, for that matter, are certainly central to this archive, but part of what this chapter has attempted to do is to locate more affective resources by which to bear witness to the pain and suffering of those held captive and subjected to various techniques of power. Moqbel's testimony, although one of many, presents an opportunity to not only look but also listen to the sounds of suffering generated by force-feeding.³⁴³ This phonic substance is embedded within any representation of violence, and, indeed, we ought to consider both Moqbel's statement and Bey's enactment of the SOP as simultaneously aesthetic and political, which can be just another way to think about representation itself.³⁴⁴ And if representation always already signifies an absence, as we've seen throughout this chapter, then what I would like to propose is that within this absence is the condition of possibility for imagining a new ethics of seeing, acting, and feeling. It remains unclear what Moqbel wishes us to do once we have again wrested our gaze toward Guantánamo. Perhaps here, then, the power of looking hinges not on an ideal ethical witness but a gesture of defiance that resists transnational carceral enterprises such as Guantánamo Bay and the US supermax prison, where the objective at both sites is, ultimately, to disappear its subjects.

This chapter has argued that inherent to the punitive use of force-feeding at Guantánamo Bay is the compulsory visibility of the prisoner's body inside the detention camp. In its attempts to normalize the hunger striker's embodied defiance and behaviors, the SOP guidelines highlight the struggle intrinsic to state authority and the corporeal modes of resistance that are ongoing by Dhiab and those remaining at the detention camp. Integral to this struggle is the question of the visual and the power of the state to control what information and images can be made public. The SOP of force-feeding and Dhiab's missing video footage are central archives of visibility in that they not only further the investigation of how force-feeding has become a medicalized technique of punishment but also expose the aggressivity essential to contemporary tactics of surveillance, tactics that literally violate the corporeal integrity of the body.

Dhiab was released from Guantánamo Bay to Montevideo, Uruguay, in 2014.³⁴⁵ He has yet to be reunited with his family and began hunger striking in 2016 to protest his detainment in South America. His most recent hunger strike began around the same time coincidentally as the Pelican Bay State Prison strike. Such ongoing political struggles remind one that to engage with archives of suffering and pain is to necessarily engage in their constant repetition. The following chapter considers the practice of hunger striking and self-harm at Guantánamo Bay alongside the infamous 1981 Irish Republican hunger strike. Here, I examine prisoners' testimonials of hunger striking and how such resistance to policies of corporeal wholeness functions as a viable form of political self-expression, while also considering how force-feeding transforms the terrain of such embodied modes of refusal.

Chapter Four: Staging Incapacitation: Hunger Striking in the Wake of Force-Feeding³⁴⁶

The end of chapter 3 drew from performance theory and activist interventions to argue for a more relational approach to witnessing the pain that force-feeding induces. This chapter introduces incapacitation as a guiding thread by which to illustrate the myriad ways that those held captive by the state negotiate, utilize, and perform corporeal pain and sacrifice. By incapacitation I mean the disabling of the body incurred during a hunger strike administered either by camp officials or the prisoners onto themselves. In the space of the prison where the body is both the site and the target of power, incapacitation is a strategic deployment of embodiment when normative political demands are illegible. Considering incapacitation alongside performance more broadly enables another sensibility—one that doesn't simply collapse freedom and force into binary oppositions—by which to examine protest and defiance at Guantánamo Bay and the now demolished Maze prison in Northern Ireland. In 1981 a hunger strike led by Irish Republican prisoners resulted in ten men fasting unto their deaths. The historical continuum between 1981 and contemporary Guantánamo is significant in that the Irish strike showcased the utilization of biological life to its ends in waging political struggle. That force-feeding wasn't used in the 1981 strike offers the opportunity to consider the particularities of its use post-9/11 as a torture technique that, then, blurs the line between life and non-life, or what I referred to as suspended animation in chapter 3. The role corporeal sacrifice plays in resisting suspended animation finds a point of intersection between the Irish strike and Guantánamo Bay offering an opportunity to historicize contemporary hunger striking in light of technological advancements in military experimentation.

On February 27, 2002, a large-scale hunger strike was organized by two-thirds of the men held captive at the US Naval Station at Guantánamo Bay, after another officer “removed a homemade turban from a prisoner during his prayer.”³⁴⁷ By the next day, 194 prisoners were refusing meals. For the next several weeks, at least a dozen prisoners participated in the hunger strike. Various news media reported that the remaining strikers were being hydrated intravenously. The camp commander at the time, General Michael Lehnert, asserted “nobody is going to die,”³⁴⁸ acknowledging both the organizational capacity of the strikes and, more importantly, that hunger strikes were unacceptable. The prolonged tension between refusing to eat and being forcibly-fed is articulated by Shaker Aamer, who was released from Guantánamo in 2015. In an op-ed for *The Guardian*, he gestures towards the incommensurability of refraining from eating for a sustained period of time: “Have you ever tried going without food for 24 hours? Today, I am on my 68th day. But a man in my block has been on strike since 2005. Can you imagine it? He's only alive today because the Americans force-feed him, preventing him from making that ultimate statement of principle, the same one they have on their New Hampshire licence (sic) plates: ‘Give me freedom, or give me death.’”³⁴⁹ Here Aamer highlights the temporal and sacrificial underpinnings of self-starvation, a gesture that frames the possibility of dying as a necessary risk to political transformation.

In light of General Lehnert's comments, *The Telegraph* magazine declared “there will be no Bobby Sands-style martyrs at America's controversial Camp X-Ray,”³⁵⁰ an implicit reference to the Irish hunger strike of '81, waged in the name of a sovereign Ireland free from British colonialism. Sands, generally thought of as the leader, was the first prisoner to die after sixty-six days of refusing food and water. *The Telegraph's* reference to Sands's death serves as a point of departure in this chapter for considering the corporeal stakes, or how death is no longer the limit to hunger striking in the wake of the war on terror's torture regime. Since 2002, force-feeding at

Guantánamo Bay detention camp has been used as a biopolitical tactic by the state to manage and regulate political transgression and life itself. Force-feeding fends off the corporeal consequences of slow starvation, but it doesn't necessarily stop a hunger strike. Indeed, forcibly feeding a liquid diet to a subject is not the same as that subject willingly pausing and/or terminating a strike to eat. Rather, the medicalization of punishment at Guantánamo Bay complicates how one is to understand the beginning and end of the hunger strike and the forms incapacitation takes.

This chapter examines the ongoing hunger strikes at Guantánamo Bay detention camp alongside the Irish death fast of 1981 in order to consider how prisoners' resistance to corporeal wholeness continues to function as a viable form of political self-expression. I maintain that hunger striking, and the prisoners' willingness to mobilize corporeal incapacitation more broadly, counters liberal conceptions of pain and self-harm as that which must be eliminated. This is to say that self-incapacitating acts, such as a long-term hunger strike, approach corporeal pain and suffering as an essential means to political change. Pain and suffering, then, are not experiences that necessarily must be avoided; instead, they are agentive and generative of relational possibilities (as I began to argue in chapter 3).³⁵¹ As Talal Asad argues in *Formations of the Secular*, the prevailing assumption under modern liberalism is that the subject must seek to overcome pain which is understood as a state of passivity.³⁵² Through the valence of incapacitation, then, I emphasize the importance of the body as the material and theoretical site through which we can examine not only pain but also protest. Throughout this chapter, incapacitation is understood as both geographical and embodied, a two-fold process whereby military personnel separate and isolate the prisoners; meanwhile, the prisoners incapacitate themselves by refusing to eat or to comply with protocol.³⁵³ In effect, the Irish and Guantánamo hunger strikers leverage bodily incapacity towards a set of political demands even as the prison and detention camp deploy their own technologies of incapacitation in order to manage dissent. In both instances, forms of corporeal incapacitation function as the mechanisms through which protest and discipline register.

The remainder of the chapter turns to how military personnel take the stage back from the hunger strikers who built it. Through methods of incapacitation such as rectal searches and force-feeding the state stages racial and sexual displays of power in its treatment of incarcerated bodies as organisms. Indeed, the war on terror as a war against subjects of the Global South deemed racially inferior has reproduced an image of the Muslim terrorist as psychically and sexually deviant. One need only recall the images of Abu Ghraib to understand how gender, sexuality, and race have been weaponized against Muslim and Arab men post-9/11.³⁵⁴ Despite the differences in the role race plays in their respective subjugations, both the incarceration of Irish political prisoners and the war on terror highlight not only the nexus between gender, race, sexuality, and captivity but also the ways punishment has become increasingly technologized. To this end, I argue that the self-incapacitation lodged by the hunger striker exists outside the prison regimes monopoly on dictating when and how the prisoner will experience pain and suffering. The practice of force-feeding reemerges, then, as the state's attempt to once again seize hold of the hunger striker's defiance.

Revolutionary Violence

The Irish Republican Strike, which began in March of 1981 and left ten men dead after eight months, is often referenced in order to contextualize the political practice of self-starvation in prison. As such, the protests leading to the '81 strike are an important precursor to how scholars

and activist theorize hunger striking on the one hand, and how hunger striking is managed by the prison on the other. Between 1969 and 1981 in Northern Ireland, 2,187 people—the majority of which were civilian casualties and members of the British security forces targeted by Irish paramilitaries—were killed in this period historically referred to as the “The Troubles.” Engaged in political struggle against Britain for sovereignty of land and religious autonomy, Irish Republicans were categorized as political terrorists and incarcerated in Long Kesh—a modern prison also known as Maze or H-block due to the watchtower surrounding eight cell blocks taking the shape of an “H.” The prison opened in 1976 and became synonymous with the political turmoil occurring throughout Northern Ireland. The conflict in Northern Ireland during this time “escalated from street protests into organized armed struggle.”³⁵⁵ The 1981 fast was preceded by a hunger strike that took place in 1972 at Crumlin Road Jail, Northern Ireland. This strike demanded “Special Category” status, which would confer recognition of the political context of Republican incarceration, rather than the status of so-called “civilian crimes” used to describe incarceration for crimes such as petty theft. The strike was effective, with a special category developed in 1972 to allow for “the segregation of prisoners in separate compounds according to their ideological and organizational affiliations.”³⁵⁶

A year later, however, Prime Minister Margaret Thatcher retracted the prisoners’ political status, with the British government regarding “all terrorist acts as ordinary crimes rather than as politically motivated offences.”³⁵⁷ Thatcher went on to famously declare that “there is no such thing as political murder, political bombing, political violence. There is only criminal murder, criminal bombing, and criminal violence. We will not compromise on this. There will be no political status.”³⁵⁸ This broken promise and criminalization would prompt the death fast of 1981. While some prisoners understood the strike as simply a viable political tactic capable of ensuring that their demands be met, Bobby Sands, considered both the poet and teacher of the H-block, was intent on crafting a political ideology around the eventual hunger strike.³⁵⁹

By the inception of the 1981 strike, Sands knew with certainty that it would take not only his death but also the death of other strikers in order for the British government to concede to their demands. As Banu Bargu notes of the Turkish death fast, the shift from life to death was “part of the escalation of the struggle.”³⁶⁰ Death, in this context, communicates “the righteousness of the revolutionary cause” and “utilizes self-discipline in the attainment of the purity of militancy and submission to the revolutionary cause.”³⁶¹ The Irish political prisoner embarked on the hunger strike in adherence to his commitment to the cause even while uncertain whether he would live to see the demands met. “Death in the Hunger Strike,” writes Allen Feldman, “was conceived as both the literal termination of biological functions and the countdown, the long drawn-out sociobiological death that the endurance of starvation dramatically stretched into an iconic act of historical mediation. ‘Going to the edge’ . . . was reaching the cusp of history; it was the creation of a new sociotemporal continuum arising out of the biological time of the dying prisoner.”³⁶² “Going to the edge” was not only a way to articulate death but also a way for the Republican striker to apprehend a kind of radical openness to a different world. Death is the revolutionary’s responsibility to a cause, but without the certainty of what lies in its wake.

Marxist philosopher Maurice Merleau-Ponty takes up the necessity of political risk, not unlike the one Sands articulates in relation to Irish sovereignty. Merleau-Ponty names the uncertainty of what your political actions will mean for the future “Terror.” It is the coming to terms with one’s own responsibility to history, and the decision of what kind of violence one will depend on, whether it will be a progressive or regressive form of violence. The unfinished world

of the revolution is always a world of Terror, forcing one to situate oneself into history and within the world. The revolutionary violence and Marxist commitment to history upon which Terror is predicated on necessitates working towards an unknown future, yet always a future based on one's commitment to praxis as the condition of possibility for historical transformation. Quoting Leon Trotsky, Merleau-Ponty writes: "For the greatest human happiness lies not in the enjoyment of the present but in the preparation of the future."³⁶³ Merleau-Ponty admired Trotsky's confrontation with death, which, for him, was the essence of his thought. Yet, he still questions whether this kind of essence is in fact the way to make history. Questioning Trotsky's rationalism, he states,

But we have to ask ourselves whether such men make history. They have such a tenacious belief in the rationality of history that when it ceases for a while to be rational, they throw themselves into the future they seek rather than have to deal with compromises and incoherence. But to live and die for a future projected by desire rather than think and act in the present is precisely what Marxists have always considered utopianism.³⁶⁴

At stake is the reluctance to contend with the contradictions that one's actions in the present will produce. This is the risk that one takes whenever making any decision to act. One's actions will inevitably lead to contradiction, but it is within the contradictions that change and historical transformation become possible. There is an inherent risk in choosing to act, yet the hunger striker remains committed to action even when the future is uncertain. Arguably, the hunger striker, as a sacrificial figure, does not desire death but rather understands the possibility of dying as a necessary risk inherent to political transformation. This risk, as suggested by Bargu, can be understood as an intense willingness to live, and the prisoner's relation to death is one predicated on responsibility and struggle. To this end, as Bargu further argues, hunger striking resists the "hegemonic allure based on 'mak[ing] live.'"³⁶⁵ This rupture to the biopolitical functioning of the state, which is to say the collective management of bodies, necessarily destabilizes modern sovereignty, the legitimacy of which "is built on the idea of individual preservation."³⁶⁶ Biopower brings under calculation processes of life such as birth rates, mortality rates, illness, and public hygiene in order to facilitate the maximum health of the population.³⁶⁷ The hunger striker, then, defies biopower's attempts in optimizing life by sacrificing corporeal integrity in favor of political struggle.

Framed differently, hunger striking and death fasting emerge as forms of refusal that resist legibility. This is to say, hunger striking is predicated upon inaction whereby the subject refuses to comply with prison protocol, refuses to nourish the body, and even refuses to invest in the idea of the future. The striker lives for the now while also challenging forms of management, such as force-feeding, that insist upon life. Performance theorist Tina Campt defines refusal as "a rejection of the status quo as livable and the creation of possibility in the face of negation i.e. a refusal to recognize a system that renders you fundamentally illegible and unintelligible; the decision to reject the terms of diminished subjecthood with which one is presented, using negation as a generative and creative source of disorderly power to embrace the possibility of living otherwise."³⁶⁸ Following Campt, it is precisely hunger striking's negation that gives it its power. Nonetheless, the following sections attempt to make sense of how Irish paramilitaries and those indefinitely detained at Guantánamo refuse the ruins of the prison, producing a conception of life that remains unrecognizable to the state.³⁶⁹

Indeed, to starve one's self in an institution such as the prison underscores the complicated relationship between freedom and captivity. For the hunger striker, the prison cell is

meant to serve as a repentant space where the “criminal” is stripped of sociality through the separation of bodies in cells, a process that works to produce stillness, silence, and idleness of not only the body but also the mind. Although the prisoner is confined spatially to the cell, I would argue that to waste away willingly signifies a radical gesture that works with, against, and through the violence of state sovereignty that seeks to impede freedom. In what follows, I recount the events of the Guantánamo hunger strikes starting in 2002 while also considering how hunger striking, as a self-destructive practice, offered a recourse to the debilitating effects of confinement for Irish prisoners and Guantánamo captives alike. The weaponization of human waste mobilized at Maze, and on a smaller scale at Guantánamo Bay, tests the limits of normative conceptions of what corporeal capacity/incapacity looks like.

Guantánamo Bay Hunger Strikes (2002-2013)

Since 2001, military “black sites,” or secret detention facilities, have been set up outside of the United States in order to conduct “‘an alternative set of interrogation procedures’ on suspected terrorist leaders taken into custody.”³⁷⁰ In 2002, the CIA and Department of Justice developed detention centers inside of Guantánamo Bay as a site to transfer prisoners captured in Afghanistan. Since its inception as a US territory, Guantánamo Bay has been a site of removal and isolation. As an act of military expansion, the United States took hold of Guantánamo Bay, Cuba, from Spain after the Spanish-American War in 1898. In 1903, the United States signed a lease making official its control over the military base. Attempts to “rescind the lease” were made by Fidel Castro in 1959 but were unsuccessful.³⁷¹ Before functioning as a detention camp for alleged enemy combatants of the war on terror, the US Naval Station at Guantánamo Bay was used as a processing center for Cuban and Haitian refugees throughout the 1990s. In 1991, thousands of Haitian refugees seeking asylum from political unrest were tested for HIV upon arrival to the camp. Those who tested positive were segregated and confined to cages, and those who tested negative were either sent back to Haiti or allowed entry to the US mainland.

The detention centers in Guantánamo consist of Camp Delta, Camp Echo, Camp Iguana, and the now-closed Camp X-Ray. Other operative camps have been 4–7, which were built in 2006 and housed fourteen “high value detainees.”³⁷² Most prisoners held throughout the military prison have come from Afghanistan, Saudi Arabia, Yemen, and Pakistan. In early 2002, the year the camps were installed, prisoners began hunger striking. The strikes were coordinated and would last for weeks or months at a time, with a significant number of prisoners participating. It is notoriously difficult to access information about the detention camp at Guantánamo Bay. Reporters who visit the camp are not allowed to interview or photograph the prisoners on-site. Thus, in order to access information about those incarcerated, one must rely upon news media sources and reports compiled by lawyers and human rights organizations to calculate how many people remain in captivity and/or on hunger strike. Particularly useful are the hunger strike timelines that have been compiled by journalists Michael Keller and Jason Leopold at *Al Jazeera*, as well as *The Miami Herald*’s graph tallying how many prisoners participated in the 2013 hunger strike.³⁷³

A report put together by The Center for Constitutional Rights, *The Guantánamo Prisoner Hunger Strikes and Protests: February 2002-August 2005*, cites British prisoner Feroz Abassi, who was released in 2005 back to the United Kingdom. Abassi dates the first hunger strike as having occurred in 2002 and reports the strike was triggered by a guard who “was alleged to have stomped on the Qur’an” in Camp X-Ray. Rhuhl Ahmed, another British prisoner, witnessed the desecration of the Qur’an when he “saw a guard walk into a detainee’s cell, search through

the Koran [sic] and drop it on the floor. The detainee told him to pick it up and put it into its holder. I remember the guard looked at the Koran on the floor and said ‘this’ and then kicked it. Everyone started shouting and banging the doors.”³⁷⁴ After eight days and “roughly 150 detainees” striking, a senior officer apologized over the camp’s intercom assuring that the Qur’an would not be disrespected or touched again.³⁷⁵

The state asserts itself as the only power capable of killing, wounding, harming, and incapacitating. This speaks to not only the power of a death fast to ensure that collective demands are met but also the representational possibilities in its public circulation. After all, Sands was so beloved as a leader that he was even voted into parliament shortly after the 1981 strike began. But, just as the practice of hunger striking stages its own kind of performative politics, military officials too are invested in the methods by which they communicate force to the men held captive and the public writ large. On this, Patrick Anderson in *So Much Wasted* argues that force-feeding “emerges . . . more as a military maneuver staged on the theatre of war than as an enactment of the humane choreographed as medical treatment”³⁷⁶ It took the death of ten Irish strikers before their demands were to be met. Force-feeding at Guantánamo Bay, however, necessarily ensures that the choice to fast unto death remains an impossibility while masquerading the fostering of life as a politics of care for the men hunger striking.

Three years later, in August 2005, the Department of Defense had yet to comply with the prisoners’ demands for changes to camp protocol, and physical use of force against the captives escalated. Denied other channels of organized legal resistance, prisoners once again turned to hunger striking. The Center for Constitutional Rights reported that 200 prisoners were documented as striking, that they articulated the strike as peaceful and nonviolent, and that they were also calling “for starvation until death.”³⁷⁷ The attorneys relayed the prisoners’ demands behind the strike:

- 1) We need respect for our religion, including an end to the desecration of the Qur’an and religious discrimination;
- 2) We need fair trials with proper legal representation;
- 3) We need proper human food and clean water. We are not given adequate amounts of food and the food is often old and inedible. The water is frequently dirty and tastes contaminated;
- 4) We need to see sunlight, and not be forced to go months without seeing daylight;
- 5) We need to know why we are in Camp 5 for so long, in some cases for over a year. What have the Camp 5 detainees done to be treated so much worse than the other detainees?
- 6) We need basic human rights like everyone else in the world—including real, effective medical treatment;
- 7) We need to be able to contact our families, and write to them and receive letters. Some prisoners have not received any of the letters sent by their families, their families have not received any of the prisoners’ recent letters, and this is a widespread problem across the camp;
- 8) We need the “level system” of the various Camps and privilege levels to be abandoned and everyone treated equally;
- and 9) We need a neutral body to observe the situation and report publicly about the conditions at Guantánamo.³⁷⁸

The hunger strike came to an end when military officials guaranteed that the camp would operate according to the Geneva Conventions through the creation of a detainee council. After two weeks, prisoners were made aware that the council had already been disbanded. This prompted the largest hunger strike to date with the *New York Times* reporting “131 prisoners refusing meals for at least three days straight.”³⁷⁹ In a written statement to the British lawyer Clive

Stafford Smith, and quoted in an article for *The Guardian*, Binyam Mohammed, a British citizen incarcerated at Guantánamo Bay, declared,

I do not plan to stop until either I die or we are respected . . . The administration promised that if we gave them 10 days, they would bring the prison into compliance with the Geneva conventions. They said this had been approved by Donald Rumsfeld himself in Washington DC. As a result of these promises, we agreed to end the strike on July 28 . . . It is now August 11. They have betrayed our trust (again).³⁸⁰

By the beginning of 2006, restraint chairs were cleared for use at the camp, as was the tactic of separating hunger strikers across the naval base into different camps. With the introduction of restraint chairs and a more hardline approach to force-feeding, the number of reported hunger strikes dropped significantly. For example, there were reports of twenty prisoners hunger striking in protest of the construction of Camp 6—a maximum security facility built in 2007. And thirteen of the twenty strikers were forcibly fed on an extended basis. Lawyers working with those incarcerated in Camp 6 compared the facility to US supermax prisons since prisoners were locked up in “their 8-foot-by-10-foot cells for at least 22 hours a day, emerging only to exercise in small wire cages and to shower.”³⁸¹ Adnan Farhan, a Yemeni prisoner commenting on the abject camp conditions, stated, “My wish is to die . . . we are living in a dying situation.”³⁸²

Despite the drop in the number of hunger strikers, February 2013 marked the beginning of the most significant hunger strike at the detention camp, with 106 of 166 prisoners striking. Military officials reported prisoners in communal cellblocks covering up security cameras, refusing to return to their cells for lockdown, and splashing guards with urine. Commander John Smith Jr. ordered a raid on the cells, “forcing all the detainees into a lockdown in separate cells. He and other prison officials said they feared that a detainee would commit suicide by starving himself, hidden from the cameras.”³⁸³ Although the camp spokesperson refused to release the identities of the men striking, the *Miami Herald* reported that the “Justice Department did notify the attorneys of captives who became so malnourished that they required military medical forced-feedings.”³⁸⁴

Of all the men striking, forty-six were “eligible for tube feedings,” and attorneys of the prisoners communicated that at least twenty-four of those forty-six men were being fed intravenously.³⁸⁵ Due to negative publicity concerning the numbers of men striking, camp officials announced in the fall of 2013 that they would no longer release updates to the public. Navy Commander John Filostrat commented that “Guantánamo allows detainees to peacefully protest, but will not further their protests by reporting the numbers to the public . . . The release of this information serves no operational purpose and detracts from the more important issues, which are the welfare of detainees and the safety and security of our troops.”³⁸⁶ This speaks to the power of the hunger strikes to draw attention to the treatment of prisoners at the camps; yet, the authorization to withhold information from the public underscores the ease with which carceral violence is maintained due in large part to the inherent isolation of the prisoners inside of the camps.

Guantánamo is certainly emblematic of what Michel Foucault describes as the panoptic function of the prison space to isolate prisoners and, in so doing, to instill mechanisms of surveillance in the name of distributing the exertion of power across the prisoner’s not only physical but also mental state. For Foucault, the panoptic prison first developed by the English social reformer Jeremy Bentham in the seventeenth century programs in the individual a sense of being watched at all times. He notes in *Discipline and Punish* that solitude was conceived as a

“positive instrument of reform” in prisons and that isolation enables an exertion of power “that will not be overthrown by any other influence; solitude is the primary condition of total submission.”³⁸⁷ This echoes chapter 2 and the mobilization of the law to legitimize the sequestration of incarcerated subjects who push back against complete isolation inside the prison. Solitary confinement has become the preferred tool by which to address dissent of any kind inside of the prison. But what Foucault addresses above speaks more to the way that solitude, originally conceived, targeted the soul of the prisoner. The cell was a place where guilt might freeze, leaving the incarcerated subject no other choice but to turn inward and repent. As such, it is precisely the spatial dynamics of confinement that have prompted incarcerated people to radically reconceive of what corporeal interiority has to offer them in terms of protesting. Within both the Irish and post-9/11 Guantánamo contexts, protesters have respectively weaponized their own biological waste, such as urine and excrement, to make a statement about not only how much pain and suffering they could endure but also how that very discomfort was the means by which they might attain control within the prison.³⁸⁸

Weaponizing Incapacitation

Mobilizing human waste as part of an act of defiance is a common theme within states of incapacitation. Irish prisoners began to cover the walls of their cell with their own excrement and food and at night poured urine into the hallways from the crack of their cell doors. Such acts held symbolic significance and were the biological means by which to comment on the prison’s use of interrogation techniques in all-white cells, sterilizing the already white washed interior of the H-blocks. Or, as Lorna Rhodes writes, excrement is “an effective weapon developed by those deprived of everything but their own bodies.”³⁸⁹ The incarcerated body is perceived as contaminated, but by spreading excrement around one’s surroundings and even throwing it at guards, as is the case in both the Maze and Guantánamo, prisoners blur the line between which bodies are pure and which are abject.

In *Formations of Violence*, Feldman’s influential ethnography of violence in Northern Ireland, he argues that “the body as the terminal locus of power also defines the place for redirection and reversal of power.”³⁹⁰ This reversal of power would follow a series of other protest tactics inside of Maze, including Irish Republicans refusing to wear the prison uniform—a gesture that would culminate in “The Dirty Protest.” Here, in addition to not wearing the uniform, prisoners also refused to bathe or use the bathroom outside of their cells. Such resistance was in response to not only the brutality of the prison guards but also the architectural design of the H-block itself. The Republicans’ refusal to wear the prison uniform meant that they were completely naked aside from wrapping towels and blankets around themselves while in their cells—hence the nickname “Blanketmen” given to the protesters. Eventually, the Blanketmen refused to leave their cells even to go to the bathroom due to escalating harassment on the part of the guards. At this point, guards began to empty the prisoners’ cell-buckets filled with urine onto their beds. The prisoners’ response was to, then, empty the buckets out of the cell windows. However, soon after, the windows were closed up.

The defiled walls of the prison cell became symbolic of the incapacitated and defiled body of the prisoner. Incapacitation offered a new mode by which the men understood their own embodiment and their bodily capacity for political struggle. As the Dirty Protest continued, postcolonial theorist David Lloyd suggests that “it became rather a mode of living that embodied the outlines of another mode of sociality that not only defied the prison regime but actually exceeded the very terms in which the social defines and delimits the representable. . . . The

Pathological body rather than the disciplined subject became the vehicle of a possible alternative sociality.”³⁹¹ As such, the Irish Republican found political utility in no longer adhering to social conventions dictating what could be made public and what must remain private—the protest collapsed any discernable distinction between the two.

In the early years of the Guantánamo Bay strike an array of protest tactics centralizing the biological and psychical boundaries of the body were deployed against military guards.³⁹² *The Guantánamo Effect* details one form of collective protest at the camp whereby prisoners created “cocktails”—“mixtures of bodily excretions”— they flung at guards through their cell bars.³⁹³ The army psychologist Larry C. James is quoted as having walked through the cell block one night while an action was taking place:

On this night, I had no idea what started the riot, but I could see guards and other staff were trying to dodge urine, feces, and other bodily fluids . . . I learned from talking to the MPs [military personnel] afterwards that . . . the methodology was the same: make the deposit in a cup, add some toilet paper for stability when throwing, douse liberally in urine, and hide the concoction in your cell for a while and let ferment. Then wait for an opportune moment when the guards let his attention wander and suddenly . . . fling [it] . . . through the “bean chute” used to pass meals.³⁹⁴

Resistance to the feeding tube instigated similar kinds of revolt, with a prisoner reportedly pushing his own excrement up his nose. On this, journalist Carol Rosenberg observes that “the guards see it as a tactic meant to demean those tasked with keeping the captive alive.”³⁹⁵ Guantánamo guards have articulated this use of excrement as a weaponization of bodily waste. Other collective actions were staged, such as refusing to bathe to protest female soldiers searching for the Qur’an on prisoners and the non-cooperation of entire cellblocks to protest prolonged interrogation sessions. As one prisoner put it, “depending on what kind of treatment you got, you would spark a different kind of strike.”³⁹⁶

The weaponization of biological substance transgresses the borders between self and other, inside and outside, functioning within the position of abjection. Abjection, psychoanalytic theorist Julia Kristeva tells us, does not have a “definable *object*.”³⁹⁷ Rather the object is excluded, drawing the subject toward a space that lacks meaning. The abject, then, offers an entry point by which to theorize not only the limits to institutionally imposed biological and psychical boundaries. Rather, the abject further demonstrates how these boundary lines are always already articulated as oppositions. What I find productive in the abject isn’t whether it is a successful model for embodied protest. Indeed, when it became clear that The Dirty Protest was “going nowhere,” the Blanketmen resorted back to the familiar tactic of hunger striking. Rather, it is the abject as both *representative* of a breakdown and a *reaction* to a breakdown that is a productive point of departure for considering bodily incapacity. The abject offers, as queer theorist Juana María Rodríguez suggests, an opportunity to consider how the shattering of the integrated self “becomes the site through which the particularities of our material embodiments exert their most powerful influence, and exert it in a way that returns us to an encounter with our sensing bodies.”³⁹⁸ The emphasis on encountering one’s own body is particularly important here as one of the objectives of the prison is to numb the body’s senses to the pleasures of light, touch, sound, smell, and even taste. The Dirty Protest stripped prisoners and guards alike of the pleasure of sentience, exposing each side to its revulsion. The body of the striker teeters between the sacred, as conduit for protest, and profane, as uncared for or unattended.

If suspended animation works to shut down the subject's biological functions, the embodied protests described above vis-à-vis the disruption and violation of one's own corporeal boundaries test the limits of such living death in addition to the normative conceptions of what capacity/incapacity looks like in the space of the prison.³⁹⁹ When it became clear that The Dirty Protest was "going nowhere," the Blanketmen resorted back to the familiar tactic of hunger striking. And although prisoners at Guantánamo Bay have at times adopted similar methods to the Irish strike, specifically the weaponization of bodily excretions, the durational quality of the Guantánamo strikes have differed significantly. The practice of force-feeding at the Guantánamo detention hospital has made hunger striking largely a symbolic gesture, symbolic in that it is never clear how long the men will be allowed to refuse food. Strikes have lasted days, weeks, and months and have been extended in time by the nasogastric tubes that facilitates force-feeding. This durational aspect is significant in that it reorients the idea that a hunger strike is an unmediated means to achieving one's political goals in confinement. For Anderson, a long-term hunger strike can "alter both the meaning of the protest itself and the notions of success and failure that often limit how the protest's larger impacts may be understood."⁴⁰⁰ This in particular resonates with Guantánamo, where the prolonged use of force-feeding at the camp intercedes upon the prisoner's defiance, coercively extending the performance of the strike.

Less reported, however, is the rectal feeding of captives of the war on terror. In 2004, CIA prisoner Majid Khan started to hunger strike and self-mutilate. In response to Khan's refusal to eat, medical personnel administered fluids intravenously and through a nasogastric tube. Khan was captured in Pakistan in 2003 and taken to a secret detention site in Afghanistan, where his hunger strike began. According to CIA records obtained by the Senate Committee on Intelligence, Khan abided by the nasogastric feedings and even began administering "the fluids and nutrients himself." Despite Khan's cooperation, the CIA subjected him to "involuntary rectal feeding and rectal hydration, which included two bottles of Ensure." Rectal feeding is the administration of nutrients via a tube into an individual's anal passage.⁴⁰¹ According to The Senate Intelligence Committee Report on Torture, Khan continued to hunger strike and engage in "acts of self-harm." These acts included an attempt "to cut his wrist on two occasions, an attempt to chew into his arm at the inner elbow, an attempt to cut a vein in the top of his foot, and an attempt to cut into his skin at the elbow joint using a filed toothbrush."⁴⁰² Rectal feeding as a specifically gendered and sexualized form of torture bears to mind the mirror searches conducted on Irish prisoners, which entailed the use of mirrors to search prisoners' rectums for contraband such as weapons or communiqués, or messages that are smuggled into the prison and sometimes referred to as "com" for short.

The Irish Republicans found political utility in no longer adhering to social conventions dictating what could be made public and what must remain private—the protest collapsed any discernable distinction between the two. Rectal feeding and the mirror searches seek only to surveille and discipline the exteriority and interiority of the incarcerated person.

Disciplining the Orifice

In Guantánamo, as in the Maze, the disciplining of the modern self is contingent upon the regulation of bodily orifices—the practice of which is imbricated with the threat of queer humiliation in both settings. To punish the Blanketmen for The Dirty Protest, mirror searches intensified. The technique of the searches relies on compulsory visibility that seeks to regulate what the prisoners can do or hold. Carceral surveillance depends on full exposure of the body, and, as such, the prisoner's body is necessarily prohibited from being a vessel for objects from

the outside. The weaponization of feces or the refusal to eat, to do what is proper with the orifice of the mouth, is matched by the disciplinary technology of the mirror searches, invading the interiority of the prisoners, essentially turning the “bodies inside out.”⁴⁰³

The Irish context illuminates how the rectal feeding of captives of the war on terror as medicalized/sexualized torture functions similarly to the mirror searches, in that each demonstrates how “the opening up of the architectural spaces of the prison is inseparable from the opening out of the body into a surface across which its orifices are redistributed into a chain of dehierarchized and metonymic equivalencies.”⁴⁰⁴ For Feldman, the mirror searches reified the power dynamics of the prison whereby subjection and domination were once again, quite literally, in the hands of the guards. The mirror symbolized complete and utter surveillance over the body, with the reflected interiority of the subject representing total knowledge of that subject.

Rectal feeding, in particular, illustrates how torture and control are gendered and sexualized acts that invest in the propriety and discipline of the anus. The anus, like the mouth, is a feminized orifice often equated with sexuality, dominance, and a fatalistic passivity in the context of homosexuality and AIDS.⁴⁰⁵ Thus, rectal feeding as a hyper-masculine mode of torture seeks to make explicit not just physical domination but sexual domination, which is to say feminized humiliation. The detention and interrogation of Khalid Sheikh Muhammad in a secret detention site furthers this point. In 2003, the detention site’s chief of interrogations ordered the “rectal rehydration” of Muhammad “without a determination of medical need,”⁴⁰⁶ which would later be characterized by the same chief of interrogations as “illustrative of the interrogator’s ‘total control over the detainee.’”⁴⁰⁷ The Senate Report also documents the rectal feeding of Mustafa al Hawsawi before he was transferred to Guantánamo Bay in 2006. The feedings were so severe that his lawyer had sought medical intervention for him at the camp to treat a “rectal prolapse that had caused Hawsawi to bleed for more than a decade.”⁴⁰⁸ His attorney, Walter Ruiz, insisted to reporters not only that Hawsawi was “tortured in the [detention] black sites” but also that he was sodomized. He urged reporters to “shy away from terms like rectal penetration or rectal rehydration because the reality is it was sodomy.”⁴⁰⁹

Ruiz’s choice to use the word sodomy is curious. Sodomy, a category that equates genital-anal sex with a “crime against nature,” wasn’t decriminalized in the United States until 2003 in the *Lawrence and Garner v. Texas* ruling. As Nayan Shah notes, sodomy charges almost always involve two men. Sodomy is a feminization of masculinity, articulated as an act that transforms “the boy into a passive object that could be sexually acted upon and penetrated.”⁴¹⁰ Whether such historical significance informed Hawsawi’s attorney’s use of the term is unclear, but what is clear is that Ruiz recognizes rectal feeding as a sexualized mode of torture meant to dominate, feminize, and submit Hawsawi to the interrogator’s total control. Arguably, then, tactics such as rectal feeding are used as a means to “queer” the prisoner in order to humiliate him. This echoes Jasbir Puar’s argument that the Muslim body and/or the body of the terrorist is “constructed as pathologically sexually deviant and as potentially homosexual, and thus read as a particularized object of torture, but the torture itself is constituted on the body as such.”⁴¹¹ Puar helps us think through the ways that if the Muslim body is constructed as unnatural or monstrous, then it follows that the violence inflicted must be understood as equally “queer.”

Sex, race, and gender are always already operative in the dynamics of torture. On this imbrication, Marnia Lazreg writes that in Algiers captives were forced to strip their clothes under the gaze of male police and soldiers:

The use of portable generators to provide electrical current anywhere—on the battlefield, during operations—underscores the significance of sex and sexuality

to the intelligence officer qua torturer . . . Sex was understood to be the fundamental, most efficient way of making a combatant or suspect talk. . . . In the torture situation, in an enclosed setting, however, the ritualized stimulation-performance of sex with the stripping of suspects, attachment of electrodes to their genitals, rape, and the frequent smashing of testicles raise a number of issues . . . sex was predictably calculated to humiliate as well as desex the Algerian man's or woman's body.⁴¹²

Sexual torture became a surplus perverse pleasure, an event to look forward to on the part of the torturer.⁴¹³ Following Puar and Lazreg, torture is not only material, but it is also symbolic of the racialized and gendered relations between the captor and captive. More, it is not only sex that is at the core of torture, but rape. The technology of the portable generator described by Lazreg in the context of the war on terror can be understood as analogous to coerced rectal feedings. What Hawsawi's lawyer described as simply sodomy is, in fact, rape. Indeed, Lazreg reminds us that rape as a tactic of war is not solely enacted against women but also enacted against men, making the language we use to describe torture and its apparatuses all the more important.

Torture as humiliation further operates by way of Orientalism in the case of Guantánamo prisoners, who are always already marked by their perceived foreignness and backwardness. Lloyd writes of the Irish context that the "civilizing process" is not "merely a matter of manners and behavior: its gradual unfolding involves the systemic occupation and disciplining of the orifices of the human body in accord with the regime of 'propriety.'"⁴¹⁴ Indeed, the weaponization of one's bodily functions demarcates the racial and sexual imaginaries reproduced through the regulation of the orifice, and the rectum in particular.

If, as Lloyd argues, the "corporeal feminization"⁴¹⁵ of the Blanketmen is a direct "effect of the prison regime,"⁴¹⁶ it follows that the rectal feedings of Khan, Muhammad, and Hawsawi similarly function as a gendered penetration that seeks to make the men as vulnerable as possible. Although rectal feeding and even force-feeding run along a continuum to the mirror searches, the Irish were not forcibly fed at any point during their hunger strike. This is not to say that the 1981 strike preceded the technology of administering the feeding tube as punishment. In 1974, Michael Gaughan, an Irish Republican Army (IRA) prisoner on hunger strike, died from a punctured lung following a botched tube feeding.⁴¹⁷ After his death, the prison avoided force-feeding for fear of administering the tube incorrectly and being responsible for yet another death. Perhaps this is why the method of corporeal invasion at the H-blocks came to rely so heavily on the mirror searches. It also poses the question of whether the mouth, in all its symbolism of sustenance and sociality, is actually the orifice of control par excellence, calling to mind the widely circulated image of Saddam Hussein's mouth being examined after US forces captured him.

The parallel between the invasion of the anal orifice of the IRA captive and the captives of the war on terror, at first glance then, read as similar. The mirror searches invade the interiority of the body in order to extract non-bodily objects, while force-feeding inserts life-sustaining matter into the prisoner. Both techniques seek to regulate what the prisoners can do or hold. Nonetheless the feeding tube as a prosthetic points to the increasing technologization of torture that prioritizes mere biological life as opposed to the pointed efforts of gendered and sexualized control of the mirror searches and rectal feeding. Yet, eating or the refusal to eat has always been inextricably tied to normative conceptions of gender, race, and ability. The force-feeding of British Suffragettes during the early 1900s and the deep roots force-feeding has in psychiatric hospitals, particularly with regards to the female anorectic, are but a few examples of

the ways that the state attempts to control what feminized subjects do with not only the orifice of the mouth but also with one's own morbidity. Towards this end, the suspended animation of torture, it can be argued, isn't simply repressive but profoundly productive, which is to say bound up in the optimization and production of life itself. Force-feeding, then, is yet another important site for considering the medicalization of war tactics.

Wrestling in Solitude

In a perplexing passage near the end of Walter Benjamin's 1921 essay "Critique of Violence," he speaks to the question of responsibility through an interpretation of the tenth commandment, "Thou shalt not kill." Benjamin states, "This commandment precedes the deed, just as God was 'preventing' the deed. But just as it may not be fear of punishment that enforces obedience, the injunction becomes inapplicable, incommensurable, once the deed is accomplished. No judgment of the deed can be derived from the commandment." Benjamin here reformulates both the commandment and the question of violence, making it not about generalities but, rather, about particularities, suggesting an historical necessity for violence. Violence has always been with "humankind," and the decision becomes how one will direct it. The commandment, he tells us, "exists not as a criterion of judgment, but as a guideline for the actions of persons or communities who have to wrestle with it in solitude."⁴¹⁸

What would it mean to think the self-harm of the hunger striker through Benjamin's idea of "wrestling in solitude"? To act entails wrestling with what forms of violence will be mobilized and to what end. The magnitude of such a decision is lost neither on Benjamin nor on those held captive at Guantánamo. As of 2019, forty prisoners remain at Guantánamo's detention camp.⁴¹⁹ Ten have been charged or convicted, but the incarceration of the rest remains indefinite. Reportedly, at least five of the men continue to hunger strike. However, since 2017, the medical staff at the detention hospital are allowing the men to starve instead of following the protocol for force-feeding. The human rights organization Reprieve has articulated this refusal to provide medical care as maintaining the hunger strikers in a "half dead" state while keeping them "alive in forever-detention without trial."⁴²⁰ Lakhdar Boumediene, who was formerly incarcerated at Guantánamo, writes of his conflicting feelings on the change to camp protocol:

To be honest, I'm torn about whether hunger-strikers should be force-fed. On the one hand, force-feeding is a form of torture. You're strapped into a six-point restraint chair—we even called it the "torture chair"—and a lengthy tube is jammed into your nose and snaked down your throat. You feel as though you are choking, being strangled, and yet somehow still able to breathe. It's an excruciating, impossible-to-describe feeling that I wouldn't wish on anyone . . . At the same time, it is also torture to force a man to choose between giving up his only means of protest and giving up his life.⁴²¹

Here, Boumediene succinctly describes the straddling between life and death that I've referred to as suspended animation throughout this dissertation. Boumediene gestures towards how it is not only force-feeding that produces a liminal space between freedom and captivity, whereby the feeding tube both supplements and deprives, keeping the body physically alive but without movement or choice. Rather, indefinite detention itself, and the hunger striking used to protest it, also becomes symptomatic of the liminal space between freedom and captivity.

The feeding tube elongates the strike, stretching it out farther and farther, taking away the individual's right to decide its end. Anderson argues that as a durational and performative practice, "a dramatic surge accrues to any given hunger strike, in a sort of crescendo that

ultimately gestures toward an ever-larger moment of resolution, imagined either as the accession to the expressed demands or as the actual (and, in the expressive context of the strike, the metaphorical) death of the strikers.”⁴²² Anderson also makes clear that the “alimentary normativity”⁴²³ of force-feeding fundamentally alters the political performance that is a hunger strike. Boumediene’s words echo the stakes of such political staging when he refers to hunger striking as one’s “only means of protest.” Yet, his words also remind us that even the choice, the decision to strike, is compromised at Guantánamo. There will be no death fast at the camps, but neither will there be any protests unmediated by biomedical technologies of war.

Yet, the body remains despite such force. The body, as I’ve sought to theorize it, is neither wholly incapacitated by practices such as the mirror searches and rectal feeding nor wholly resistive to the forces of the state. The question, then, is how to attend to the state’s regulation of life via carceral technologies and what Alex Weheliye describes as “the importance of miniscule movements, glimmers of hope, scraps of food, the interrupted dreams of freedom found in those spaces deemed devoid of full human life.”⁴²⁴ Hunger striking, I’ve argued, is one such articulation of the impulse and movement towards existential and material freedom. The 1981 Irish strike and the ongoing struggles at Guantánamo Bay illuminate the gendered, racialized, and sexualized tactics of war and torture, while also drawing attention to continued efforts to reverse power. The protests at the detention camp exist in the wake of Maze prison and with it an evolving biopolitical landscape that suspends the lives of the men left captive. Across diverging geopolitical landscapes such as Northern Ireland and the US Naval Station, incapacitation remains a steadfast logic of the carceral state. The different forms the body will take in dissent and the role of pain in guiding those forms, however, continue to unfold.

Conclusion: The World Yet Made

This dissertation project emerged out of a preoccupation with how hunger striking necessitates a different conception of time, where one acts in the present for a future beyond them. The hunger striker's reconceptualization of time, something akin to Walter Benjamin's "now-time,"⁴²⁵ struck me as ultimately what shapes most, if not all, political activism and acts of state defiance. The work of prison abolition, for instance, is to build a world without prisons and cages, even as the abolitionist knows they likely won't see the material manifestation of their work. To this end, any anti-state/decolonial praxis, such as hunger striking and prison abolition, is about imagining a different world and then building towards it. Abolition time isn't linear, with the world one builds towards awaiting to be grasped. Rather, abolition is a practice that's lived and experienced in the day to day. It's to live in the world yet to be made.⁴²⁶ As I began to think more about hunger striking in this way, it seemed to me a powerful instantiation of living in the face of the prison and making a life anyway—a life that ironically deprioritizes one's own biological life and corporeal integrity in favor of the political life of a cause or struggle. This project and the final two chapters in particular have attempted to conceptualize what role self-directed violence, or incapacitation, plays in forging life out of spaces of unfreedom such as the laboratory and detention camp where the torture and isolation that ensue produce, or attempt to produce, a non-sentient existence in subjects.

What, then, does hunger striking as incapacitation tell us about how bodies not only become targets of the state but also target the state through refusal, breakdown, and momentum-building in the prison? Although the primary site of inquiry throughout *Technologies of Incapacitation* is Guantánamo Bay detention camp, my interest in the temporality of self-starvation as political praxis began by way of the 1981 Irish strike, explored in chapter 4. Steve McQueen's 2008 film *Hunger*, which follows the protests leading up to the strike at Maze prison in Northern Ireland, visually helped register for me both the political stakes of hunger striking and, more, how corporeal self-harm takes the existing violence of the prison and redirects it onto the self but toward revolutionary aims.⁴²⁷ This last point, for me, reformulated the question of violence, highlighting that distinctions could, and indeed should, be made about different forms of violence and their application. The corporeal sacrifice necessitated by hunger striking is not a celebration of violence, but it does expose the historical necessity of violence. This is the crux of Maurice Merleau-Ponty's idea of "Terror" referenced in chapter 4. The necessity of violence, however, brings with it its own uncertainties of what's to come in the future. The 1981 strike and by extension *Hunger* crystallize the political and corporeal stakes of such uncertainty.

Hunger centers on the figure of Bobby Sands (Michael Fassbender), the lead organizer of the strike, and the first to fast unto death. As the film nears its end, there is a pivotal scene between Sands and Father Dominic Moran (Liam Cunningham). In what appears to be the visitors' room, Sands and Father Moran sit at a table situated at the center of the frame as they engage in a fast-paced dialogue about the ethics of the strike about to take place. The dim lighting and the fact that each man's face is slightly out of focus produce a sense of distanced intimacy. Rather than deploy shot-reverse-shot editing, where the camera switches between speakers to emphasize diverging views in conversation, McQueen films a seventeen-minute static shot with the camera centered on both Sands and Father Moran. The shift away from more classic conventions of representing conversation allows for the intensity to build as Sands and Moran engage in playful banter before debating whether a death fast is in fact anything more

than suicide. What becomes clear from their exchange is that Father Moran understands the hunger strike as an act of suicide, whereas for Sands it is an act of martyrdom.

In *Remnants of Auschwitz* the philosopher Giorgio Agamben asserts that the martyr is one who bears witness to their faith and as such, an act of martyrdom is not about dying.⁴²⁸ Similarly in this film conversation, Sands equates life, not death, with the struggle for a sovereign Ireland, free from British colonialism. His life is a real life, he asserts. His decision to strike, and potentially starve to death, is predicated upon responsibility and obligation, not morality or sentiment. The extended duration of this scene in which these men are locked within the frame enables the viewer to think and sit with both sides of the debate. Before the shot cuts and the camera shifts to Sands, a political binary has been established: the side that understands violence as a precursor to radical change, and the other that condemns destruction and believes in the power of negotiation and dialogue.

The film *Hunger* represents Bobby Sands as a figure who conceptualized his actions as revolutionary. Admittedly, Sands's conviction to risk his life is, at first glance, beautiful. Throughout his conversation with the priest, Sands is framed as confident and composed. But as the scene fades out and cuts to the strike, where for sixty-six days Sands's body will slowly consume itself, we must acknowledge the cruel corporeal consequence of his death fast. The viewer's, and perhaps even Sands's, own political convictions begin to waver with every extreme close-up of the sores eating away at his back and spine, the sound of his vomiting, and the hallucinations of birds that become more frequent with every day of starvation. The camera takes multiple angles as the scene progresses eventually focusing from above on his face, mouth gaping open, blank eyes staring at nothing. The birds' reappearance, perhaps a subtle reference to Sands's love of the lark, takes on a symbolic valence, as they would come to be associated with Sands's commitment to freedom. The light shines on his face from the window and a young Bobby appears before him. We witness Sands descend into madness. The final vision he sees is again of birds, blackbirds flying across a midnight sky. His final moments, however aesthetic, are not beautiful but, rather, terrifying.⁴²⁹ As he leaves his body, the film exposes the risk one takes whenever one makes any decision to act.

Bobby Sands's future is now our past and in the nearly four decades since 1981, hunger striking has remained a steadfast, transnational means of protest inside of prisons and detention centers. Throughout this dissertation I've situated the Guantánamo Bay strikes alongside Northern Ireland, and to a lesser extent the Turkish death fasts of the early 2000s, which mobilized tactics of self-harm beyond simply hunger striking to include self-immolation and suicide bombing. The hunger strikes at Guantánamo Bay detention camp that began in 2002 are a useful point of departure from the Irish and Turkish strikes respectively, enabling an opportunity to explore not only the terrain of hunger striking but also the technologies deployed in opposition to hunger-striking, such as the feeding tube. The more recent Pelican Bay State prison hunger strikes explored in chapter 2 also speak to the reintroduction of force-feeding with what California Corrections names "refeeding." Although it remains unclear just how many strikers were force-fed during this strike, what is clear is that the state's rhetoric of "preserving life" at any costs isn't limited solely to Guantánamo Bay, but to US domestic prisons as well.

Force-feeding, I've argued throughout, is a technology of living death, or suspended animation, a medicalized attempt at stripping the prisoner of their defiance. The deployment of the feeding tube highlights how life and death are central components to the choreography of not only hunger striking but to torture as well. A common thread throughout the four chapters pertains to how biological life is leveraged against the captive. Chapter 1 situated torture

techniques of the war on terror, such as waterboarding, within Cold War behavioral science to highlight how the progression of torture that once targeted the brain-mind-body now stretches the mind-body's capacity for pain to its limits inducing a state of suspended animation that force-feeding then medicalizes. Chapter 2 examined the significance of the feeding tubes in US right-to-die cases to illustrate how "life-preserving" technologies have come to represent life itself as opposed to simply technologies of mediation and assistance. I turned to Pelican Bay State Prison where both the principle of autonomy and the feeding tube are weaponized to preserve biological life, delimiting collective acts of refusal such as hunger striking. Chapter 3 considered the visual encounter with force-feeding at Guantánamo Bay. I argued that the pain induced by force-feeding presents an opportunity for an alternate political sensibility by which to approach the scene of medicalized torture, one both attuned to the corporeal effects and technological innovations on behalf of the state. Chapter 4 culminated with the hunger strikes at Guantánamo Bay and Northern Ireland where, in the wake of force-feeding, a reevaluation of the practice of corporeal sacrifice is necessitated.

In the above chapters, I've sought to trace how the state intercedes questions of life and death from post-9/11 torture techniques to right-to-die litigation and embodied protest inside carceral spaces. More specifically, I've sought to trace the state's regulation of life and death through the specific technology of the feeding tube and how, when used coercively, assistance in nutrition transforms into force-feeding. There are other sites by which to investigate necropolitics, but for me the punitive administration of the feeding tube presents a compelling paradox in that force-feeding aims for the incapacitation of the body at the same time that it invests in the biological maintenance of the body's life. By tracing the nuances of this paradox, I've argued, the naturalization of medical intervention in the prison as care obfuscates the origins of medicine as punishment on populations deemed abject by the state. Indeed, as the future of Guantánamo Bay unfolds the politics of life and death at the camps take on unforeseen valences regarding how the military manages the health of its captives.

The detention camp at Guantánamo Bay has been operative for seventeen years now. The oldest captive is in his 70s, but the grand majority are middle aged now. In a recent *New York Times* article Carol Rosenberg reports that with the ageing of those incarcerated, and the Trump administration's plan to keep the detention camp open for at least another 25 years, hospice care is now on the horizon.⁴³⁰ Many of the men are prediabetic and will soon perhaps require dialysis. Others might eventually need hip and knee replacements and wheelchair assistance. Some already necessitate breathing machines as sleep apnea has recently become a concern for many of the men. There are talks of building a small prison with communal hospice care to address middle aged concerns such as high blood pressure, cholesterol, joint pain, and diabetes. Architectural changes would need to be made to the prison cells as more and more of the men will soon be in wheelchairs requiring that cells be bigger with ramps and grab bars. The Pentagon, Rosenberg reports, is now in the early planning stages for "terrorism suspects" to grow old and die at Guantánamo Bay's detention camp.⁴³¹

What does it mean to think hospice care in a torture facility? Hospice, deriving from the Latin *hospes*, meaning both "guest" and "host," is a philosophy that first gained traction in the 1960s and 1970s with the work of British physician, Dame Cicely Saunders. In Dr. Saunders' philosophy hospice was an approach to terminal illness and death that centered palliative care—care that offers relief from pain, thus improving one's quality of life—instead of treatments that seek to cure or eliminate disease or illness.⁴³² Underwriting hospice is the prioritization of the patient's comfort as opposed to curative treatment. If one's death is immanent then hospice seeks

to facilitate that death as comfortably as possible. This is what journalist Anne Neumann refers to as a “good death,” or the emphasis in modern medicine to not only prolong life but alleviate pain and suffering as much as possible.⁴³³

Just as military officials at the detention camp have maintained that force-feeding captives is in the interest of preserving life, they now maintain that hospice care is also in the interest of facilitating a good death for the men who may never be released. With the feeding tube already used to sustain life and the possibility of hospice to facilitate death, the detention hospital at Guantánamo Bay will have come full circle. On this, Guantánamo psychiatrist, Dr. Stephen N. Xenakis states: “It is paradoxical...But we don’t let people just die in this country. It violates all of our ethics and medical ethics.”⁴³⁴ The irony here is that hunger striking underscores one’s own morbidity as the ultimate risk and commitment to one’s cause. At Guantánamo this possibility has necessarily been foreclosed since the first hunger strikes in 2002. Yet now, a new kind of death, the pretense of a good death, looms over Guantánamo’s horizon. The US military doesn’t *just* let people die, tells us Dr. Xenakis. Indeed, the state continues to expose just how much it has invested in the regulation of death, deciding its breadth and scope.

Time moves forward and with it the US military attempts to erase the brutalities of the war on terror’s Enhanced Interrogation Program with new life-preserving technologies and rhetorics meant to offer reprieve to the very wearing out of the captive’s body that they made possible. Lauren Berlant defines the phrase “slow death” as the “physical wearing out of a population in a way that points to its deterioration as a defining condition of its experience and historical existence.”⁴³⁵ Berlant makes clear that her interest is in the applicability of slow death to spaces of ordinariness that animate late capitalism. At first glance Guantánamo eschews the ordinary and is much more in line with the unfolding of a traumatic event. Yet, slow death articulates how indefinite detention is precisely that which slowly wears out its population. Slow death, and my use of suspended animation to describe the medical-political power operations of indefinite confinement are so terrifying precisely because they transform exceptional spaces into ordinary ones. And so, the ageing body in detention, like the ageing body outside of confinement, becomes disabled and with it a new kind of incapacitation emerges—an incapacitation that is both the physiological response to getting older, and what the space of detention facilitates and encourages. Whether hospice care at Guantánamo Bay is an even more pronounced display of state sovereignty, yet another iteration of “make live” or “let die” is necessarily unclear. What is clear, however, is that with the military’s burgeoning lexicon in geriatric and palliative medicine, the coupling between managing life’s gradual wearing out and torture will require further extrapolation. My aim throughout *Technologies of Incapacitation* has been to build a vocabulary, however cursory, around such insidious scenes of torture, and the myriad of ways that the captive subject responds, refuses, and waits.

Notes

¹ For clarity, I've provided the full date, but will shorten to 9/11 throughout.

² See Karen Greenberg, *The Least Worst Place: Guantanamo's First 100 Days* (New York: Oxford University Press, 2010).

³ Darius Rejali, *Torture and Democracy* (Princeton, NJ: Princeton University Press, 2007), 35.

⁴ Senate Select Committee on Intelligence, *The Senate Intelligence Committee Report on Torture: Committee Study of the Central Intelligence Agency's Detention and Interrogation Program* (Brooklyn: Melville House, 2014).

⁵ See Greenberg, *The Least Worst Place*, 2.

⁶ Eric Stover and Victor Peskin, *Hiding in Plain Sight: The Pursuit of War Criminals from Nuremberg to the War on Terror* (Berkeley, CA: University of California Press, 2016), 337.

⁷ Michael Ratner, Ellen Ray, and Anthony Lewis, *Guantánamo: What the World Should Know* (White River Junction, VT: Chelsea Green Publishing, 2004), xv.

⁸ The "Detention, Treatment, and Trial of Certain Non-Citizens in the War Against Terrorism," issued by Bush established the category of "enemy combatant"—a whole new category of person, distinct from "convicted felon" or prisoner of war, both of which have rights recognized by domestic and international law. Directly following 9/11, an enemy combatant came to mean any person who supported or engaged in the Afghanistan War but would later be expanded to encompass anyone who has committed a belligerent act or has directly supported hostilities in and of enemy forces against the United States. See A. Naomi Paik, *Rightlessness: Testimony and Redress in U.S. Prison Camps since World War II* (Chapel Hill, NC: University of North Carolina Press, 2016), 159.

⁹ Laurel E. Fletcher, Eric Stover, Stephen Paul. Smith, and Patricia M. Wald, *The Guantánamo Effect: Exposing the Consequences of U.S. Detention and Interrogation Practices* (Berkeley, CA: University of California Press, 2009), 42.

¹⁰ See Charlie Savage and Julie Hirschfeld Davis, "Obama Sends Plan to Close Guantánamo to Congress," *New York Times*, February 23, 2016, www.nytimes.com/2016/02/24/us/politics/obama-guantanamo-bay.html.

¹¹ A. Naomi Paik, "The 'Visible Scapegoats' of U.S. Imperialism: HIV Positive Haitian Refugees and Carceral Quarantine at Guantánamo Bay," *Work & Culture* 4 (2006): 1–22, 2.

¹² Giorgio Agamben, *State of Exception*, translated by Kevin Attell (Chicago, IL: University of Chicago Press, 2005).

¹³ For early feminist counters to Agamben's state of exception, see Amy Kaplan, "Where Is Guantánamo?" *American Quarterly* 57, no. 3 (2005): 831–858; Anne McClintock, "Paranoid Empire: Specters from Guantánamo and Abu Ghraib." *Small Axe* 28 (2009): 50–74. Here both authors argue for thinking of Guantánamo as dense with law.

¹⁴ Laleh Khalili, *Time in the Shadows: Confinement in Counterinsurgencies* (Stanford, CA: Stanford University Press, 2013), 74.

¹⁵ Barbara Olshansky and Gitanjali Gutierrez, "The Guantánamo Prisoner Hunger Strikes and Protests: February 2002–August 2005," *The Center for Constitutional Rights*, 2005, <http://www.ccr-ny.org>, 6.

¹⁶ Olshansky and Gutierrez, *The Guantánamo Prisoner Hunger Strikes and Protests*, 7.

¹⁷ "Twenty-Four Force Fed Captives," *Miami Herald*, July 17, 2013,

<http://www.miamiherald.com/news/nation-world/world/americas/guantanamo/article1950931.html>.

- ¹⁸ Josh White, “Police End Probe into Moroccan Ex-Guantanamo Detainees’ Case,” in “Press Release,” Algeria Watch, February 27, 2006, https://algeria-watch.org/pdf/pdf_en/campaign_guantanamo/press_270206_050306.pdf.
- ¹⁹ See Paik, *Rightlessness*; Colin Dayan, *The Law is a White Dog: How Legal Rituals Make and Unmake Persons* (Princeton, NJ: Princeton University Press, 2011).
- ²⁰ See Banu Bargu, *Starve and Immolate: The Politics of Human Weapons* (New York: Columbia University Press, 2014); Allen Feldman, *Formations of Violence: The Narrative of the Body and Political Terror in Northern Ireland* (Chicago: The University of Chicago Press, 1991).
- ²¹ See Ian Miller, *A History of Force Feeding: Hunger Strikes, Prisons and Medical Ethics, 1909-1974* (New York: Palgrave Macmillan, 2016).
- ²² N. Y. Oguz and Steven H. Miles, “The Physician and Prison Hunger Strikes: Reflecting on the Experience in Turkey,” *Journal of Medical Ethics* 31, no. 3 (2005): 169–172, 169.
- ²³ See Paik, *Rightlessness*.
- ²⁴ Olshansky and Gutierrez, *The Guantánamo Prisoner Hunger Strikes and Protests*, 10.
- ²⁵ For more legal interpretations of Guantánamo Bay see Jana K Lipman, *Guantánamo: A Working-Class History between Empire and Revolution* (Berkeley: University of California Press, 2009); Kaplan, “Where Is Guantánamo?”; Khalili, *Time in the Shadows*; Stover and Peskin, *Hiding in Plain Sight*; Paik, *Rightlessness*.
- ²⁶ Quoted in David Barnett, “A History of Hunger strikes: From the Suffragettes to Guantánamo,” *Independent*, December 2, 2018, https://www.independent.co.uk/news/long_reads/gus-hales-hunger-strike-protest-ira-maze-prison-ukraine-suffragettes-guantanamo-a8648936.html.
- ²⁷ Michel Foucault, *Discipline and Punish: The Birth of the Prison*, translated by Alan Sheridan (New York: Vintage Press, 1977), 25.
- ²⁸ Feldman, *Formations of Violence*, 236.
- ²⁹ Bargu, *Starve and Immolate*; Feldman, *Formations of Violence*
- ³⁰ Patrick Anderson, “There Will Be No Bobby Sands at Guantánamo Bay,” *PMLA* 124, no. 5 (2009): 1729–1736, 1733.
- ³¹ Bargu, *Starve and Immolate*.
- ³² Bargu, *Starve and Immolate*, 3.
- ³³ Bargu, *Starve and Immolate*, 6.
- ³⁴ Bargu, *Starve and Immolate*, 16.
- ³⁵ Feldman, *Formations of Violence*, 178.
- ³⁶ Feldman, *Formations of Violence*, 174.
- ³⁷ See James Risen and Tim Golden, “3 Prisoners Commit Suicide at Guantánamo,” *New York Times*, June 11, 2006, <http://www.nytimes.com/2006/06/11/us/11gitmo.html>; Jackie Northam, “Guantánamo Detainees Attempted Mass Suicide in 2003,” *NPR*, January 24, 2005, <http://www.npr.org/templates/story/story.php?storyId=4464452>.
- ³⁸ Alison Howell, “Victims or Madmen?: The Diagnostic Competition over ‘Terrorist’ Detainees at Guantánamo Bay,” *International Political Sociology* 1, no. 1 (2007): 29–47, 30–31.
- ³⁹ There is a long history of this pathologization, especially in US counterterrorism. See Raphael Patai, *The Arab Mind* (Tucson, AZ: Recovery Resources Press, 1973).
- ⁴⁰ Howell, “Victims or Madmen?,” 30–31.
- ⁴¹ Talal Asad, *On Suicide Bombing* (New York: Columbia University Press, 2007).
- ⁴² Asad, *On Suicide Bombing*, 65–68.

- ⁴³ Talal Asad, *Formations of the Secular: Christianity, Islam, and Modernity* (Stanford, CA: Stanford University Press, 2003), 67.
- ⁴⁴ Asad, *Formations of the Secular*, 71.
- ⁴⁵ Asad, *Formations of the Secular*, 84–85.
- ⁴⁶ Steven Miles, *Oath Betrayed: Terror, Medical Complicity, and the War on Terror* (New York: Random House, 2006).
- ⁴⁷ The earliest recorded use of feeding by tube was found in papyrus 3500 years ago. Egyptians and Greeks used enemas to anally infuse nutrients for general health, but also inflamed bowels. Solutions were made from wine, milk, whey, wheat, or barley broths. In 1598 Capivaceus used a hollow tube with a bladder filled with a nutrient solution attached to the end and inserted into the esophagus. In the 17th century Von Helmont devised a leather tube for esophageal feeding and Boerhave then suggested it be used for nasogastric feeding. In the 18th century Jon Hunter used a catheter and syringe to deliver blended food into the stomach. The early 1900s was a time of renewed interest in experimenting with tube feedings via the duodenum or the jejunum. Nasogastric feeding remains the most used short-term enteral feeding access. See Eric Aadhaar O’Gorman, *Complete Tubefeeding: Everything You Need to Know about Tubefeeding, Tube Nutrition, and Blended Diets* (Scotts Valley, CA: CreateSpace Independent Publishing Platform, 2012), 7–9; Gail Cresci, MS, RD, CNSD,LD; and John Mellinger, MD, “The History of Nonsurgical Enteral Tube Feeding Access,” *Nutrition in Clinical Practice* 21, no. 5 (2006): 522–528.
- ⁴⁸ See Daniel Summers, “Rectal Feeding Has Nothing to Do with Nutrition, Everything to Do with Torture,” *Daily Beast*, December 10, 2014, <https://www.thedailybeast.com/rectal-feeding-has-nothing-to-do-with-nutrition-everything-to-do-with-torture>.
- ⁴⁹ O’Gorman, *Complete Tubefeeding*, 7.
- ⁵⁰ See O’Gorman, *Complete Tubefeeding*, 7–11.
- ⁵¹ Michel Foucault, *The History of Sexuality: Volume 1: An Introduction*, translated by Robert Hurley (New York: Vintage, 1990), 136, emphasis in original.
- ⁵² Foucault, *The History of Sexuality*, 138, emphasis in original.
- ⁵³ Foucault, *The History of Sexuality*, 139.
- ⁵⁴ Achille Mbembe, “Necropolitics,” translated by Libby Meintjes, *Public Culture* 15, no. 1 (2003): 12.
- ⁵⁵ Bargu, *Starve and Immolate*, 53.
- ⁵⁶ Worth further examination is the relationship between incapacitation and debilitation. For instance, Jasbir Puar traces “the use of maiming as a deliberate biopolitical tactic on the part of Israel in the occupation of Palestine” and extends the “right to kill” into the “right to maim.” The maiming of Palestinians at the hands of Israel, for Puar, is emblematic of the ways that corporeal debilitation has come to function as “will not let die” and “will not make die.” Jasbir K. Puar, “Inhumanist Occupation: Palestine and the ‘Right to Maim,’” *GLQ: A Journal of Lesbian and Gay Studies* 21, nos. 2–3 (2015): 218–221. See also, Jasbir K. Puar, *The Right to Maim: Debility, Capacity, Disability* (Durham, NC: Duke University Press, 2017).
- ⁵⁷ Marnia Lazreg, *Torture and the Twilight of Empire: From Algiers to Baghdad* (Princeton, NJ: Princeton University Press, 2008), 116.
- ⁵⁸ See Alfred McCoy, *A Question of Torture: CIA Interrogation from the Cold War to the War on Terror* (New York: Metropolitan Books, 2006); Darius Rejali, *Torture and Democracy* (Princeton, NJ: Princeton University Press, 2009).

⁵⁹ See Robert J. Lifton, “Chinese Communist ‘Thought Reform’: Confession and Re-Education of Western Civilians,” *Bull NY Acad Med.* 33, no. 9 (1957): 626–644. *KUBARK* was particularly influenced by Chinese indoctrination or “ideological reform.” This report cites the Chinese as the creators of “thought reform,” or “brainwashing.” Unlike the Russians, the Chinese didn’t isolate prisoners but kept them together in an overcrowded cell. There is an emphasis on what Lifton calls “re-education,” whereby the prisoner is essentially forced to participate in a kind of Communist study group with his cellmates, studying newspapers, pamphlets, and books for ten to sixteen hours per day. Prisoners were required to cultivate the “views of the people” or be severely criticized (641–642).

⁶⁰ Shaista Patel, “Racing Madness: The Terrorizing Madness of the Post-9/11 Terrorist Body,” in *Disability Incarcerated: Imprisonment and Disability in the United States and Canada*, edited by Liat Ben-Moshe, Chris Chapman, and Allison Carey (New York: Palgrave Macmillan, 2014), 201–16. Also see Alison Howell, “Victims or Madmen? The Diagnostic Competition over ‘Terrorist’ Detainees at Guantánamo Bay,” *International Political Sociology* 1, (2007): 29–47, 30–31.

⁶¹ Lazreg, *Torture and the Twilight of Empire*, 116.

⁶² Lazreg, *Torture and the Twilight of Empire*, 120.

⁶³ United States Senate, 95th Congress, 1st session (August 3, 1977). “Project MKUltra, The CIA’s Program of Research in Behavioral Modification,” *Joint Hearing Before the Select Committee on Intelligence and the Subcommittee on Health and Scientific Research of the Committee on Human Resources* (Report), 67.

⁶⁴ For more on this history see Martin A. Lee, and Bruce Shlain, *Acid Dreams: The Complete Social History of LSD, the CIA, the Sixties, and Beyond*, (New York: Grove Press, 1992); Alexander Kouzminov, *Biological Espionage: Special Operations of the Soviet and Russian Foreign Intelligence Services in the West* (London: Greenhill Books, 2006).

⁶⁵ McCoy, *A Question of Torture*, 27. The death of Frank Olson is perhaps one of the more famous cases to emerge out of this period. Olson was a CIA research scientist based at Fort Detrick, Maryland, where he experimented with chemical warfare. Olson and other scientists participated in a voluntary trial of LSD. It is generally believed that Olson committed suicide a week after taking the drug, having become unstable and paranoid.

⁶⁶ See Jeffrey Kaye and H.P. Albarelli Jr., “Cries from the Past: Torture’s Ugly Echoes,” *Truthout*, May 23, 2010, <http://truth-out.org/archive/component/k2/item/89725:cries-from-the-past-tortures-ugly-echoes>.

⁶⁷ Kaye and Albarelli Jr., “Cries from the Past.”

⁶⁸ See Hannah Landecker, “Immortality, In Vitro: A History of the HeLa Cell Line,” in Paul Brodwin, *Biotechnology and Culture: Bodies, Anxieties, Ethics* (Bloomington: Indiana University Press, 2000), 53–72.

⁶⁹ See Dorothy Roberts, *Killing the Black Body: Race, Reproduction, and the Meaning of Liberty* (New York: Vintage Books, 1998); Siobhan B. Somerville, *Queering the Color Line: Race and the Invention of Homosexuality in American Culture* (Durham: Duke University Press, 2000); Deirdre Cooper Owens, *Medical Bondage: Race, Gender, and the Origins of American Gynecology* (Athens, GA: University of Georgia Press, 2018); C. Riley Snorton, *Black on Both Sides: A Racial History of Trans Identity* (Minneapolis: University of Minnesota Press, 2017).

⁷⁰ Shiv Visvanathan, *A Carnival for Science: An Essay on Science, Technology and Development* (Cambridge, UK: Oxford University Press, 1997), 17.

⁷¹ See Nicolaas Rupke, *Vivisection in Historical Perspective* (New York: Routledge, 1990).

- ⁷² Visvanathan, *Carnival for Science*, 27.
- ⁷³ Charis Thompson, *Good Science: The Ethical Choreography of Stem Cell Research* (Cambridge, MA: MIT Press, 2013), 193.
- ⁷⁴ See Rupke, *Vivisection in Historical*, 14.
- ⁷⁵ Visvanathan, *Carnival for Science*, 33.
- ⁷⁶ See David Scott, “The Re-Enchantment of Humanism: An Interview with Sylvia Wynter,” *Small Axe* 8 (2000): 119–207, 176.
- ⁷⁷ Scott, “The Re-Enchantment of Humanism,” 180, emphasis in original.
- ⁷⁸ The brain has its own legacy in medical apartheid: for example, the work of nineteenth century scientist Samuel Morton, who measured skulls with the intent of proving white people had innate intelligence and morality compared to black people. Another example is the spirometer, which was invented in the 1840s as a way to prove that black people consume less oxygen than whites and therefore had smaller brains. It became a tool used to mark black workers as physically fit for agricultural as opposed to factory labor. See Lundy Braun, *Breathing Race in the Machine: The Surprising Career of the Spirometer from Plantation to Genetics* (Minneapolis: University of Minnesota Press, 2014).
- ⁷⁹ McCoy, *Question of Torture*, 52.
- ⁸⁰ US Senate, Project MKULTRA, 62; G.H. Estabrooks, “Hypnosis Comes of Age,” *Science Digest* (1971): 44–50.
- ⁸¹ See McCoy, *A Question of Torture*, 50.
- ⁸² See W. Fitzhugh Brundage, *Civilizing Torture: An American Tradition* (Cambridge, MA: Belknap Press of Harvard University Press, 2018), 251. Brundage credits CIA Director Allen Dulles with coining this term.
- ⁸³ Nikolas Rose and Joelle M. Abi-Rached, *Neuro: The New Brain Sciences and the Management of the Mind* (Princeton, NJ: Princeton University Press, 2013), 3.
- ⁸⁴ Rose and Abi-Rached, *Neuro*, 3.
- ⁸⁵ See Rose and Abi-Rached, *Neuro*.
- ⁸⁶ Brundage, *Civilizing Torture*, 261.
- ⁸⁷ Brundage, *Civilizing Torture*, 261.
- ⁸⁸ See Woodburn Heron, “The Pathology of Boredom,” *Scientific American* 196, no. 1 (1957): 52–57.
- ⁸⁹ Heron, “The Pathology of Boredom,” 53.
- ⁹⁰ Heron, “The Pathology of Boredom,” 54.
- ⁹¹ Heron, “The Pathology of Boredom,” 56.
- ⁹² The twentieth century saw the introduction of physical treatments in asylums across North America and United Kingdom that included electro shock, insulin induced comas, and psychosurgeries such as lobotomies. For more on this psychiatric history see Rose and Abi-Rached, *Neuro*.
- ⁹³ See Nikolas Rose, *The Politics of Life Itself: Biomedicine, Power, and Subjectivity in the Twenty-First Century* (Princeton: Princeton University Press, 2006), 198.
- ⁹⁴ Rose and Abi-Rached, *Neuro*, 43, emphasis in original.
- ⁹⁵ Rose and Abi-Rached, *Neuro*, 3.
- ⁹⁶ Brundage, *Civilizing Torture*, 261.
- ⁹⁷ Alex Constantine, *Psychic Dictatorship in the U.S.A.* (Port Townsend, WA: Feral House, 1995), 4.
- ⁹⁸ Brundage, *Civilizing Torture*, 262.

- ⁹⁹ Brundage, *Civilizing Torture*, 262.
- ¹⁰⁰ Rose and Abi-Rached, *Neuro*, 13.
- ¹⁰¹ Central Intelligence Agency (CIA), *The CIA Document of Human Manipulation: KUBARK Counterintelligence Interrogation Manual* (La Vergne, TN: BN Publishing, 2012), 1.
- ¹⁰² CIA, *KUBARK*, 85.
- ¹⁰³ CIA, *KUBARK*, 83–84.
- ¹⁰⁴ CIA, *KUBARK*, 90.
- ¹⁰⁵ Rejali, *Torture and Democracy*, 43.
- ¹⁰⁶ Rejali, *Torture and Democracy*, 4.
- ¹⁰⁷ Rejali, *Torture and Democracy*, 20–21.
- ¹⁰⁸ Rejali, *Torture and Democracy*, 414.
- ¹⁰⁹ Rejali, *Torture and Democracy*, 421.
- ¹¹⁰ Lawrence Hinkle and Harold Wolff, “Communist Interrogation and Indoctrination of ‘Enemies of the States’: An Analysis of Methods Used by the Communist State Police,” *Archives of Neurology and Psychiatry* (1956), 125–126.
- ¹¹¹ Hinkle and Wolff, “Communist Interrogation,” 128.
- ¹¹² Hinkle and Wolff, “Communist Interrogation,” 130.
- ¹¹³ Elaine Scarry, *The Body in Pain: The Making and Unmaking of the World* (New York: Oxford University Press, 1987), 46.
- ¹¹⁴ Rejali, *Torture and Democracy*, 465.
- ¹¹⁵ CIA, *KUBARK*, 83.
- ¹¹⁶ Rose, *The Politics of Life Itself*, 194.
- ¹¹⁷ Brundage, *Civilizing Torture*, 270.
- ¹¹⁸ Rejali, *Torture and Democracy*, 374.
- ¹¹⁹ Rejali, *Torture and Democracy*, 449–450.
- ¹²⁰ Rejali, *Torture and Democracy*, 541.
- ¹²¹ Indeed, this is Bush era logic that has been continued throughout Obama-Trump, even as the more explicit logic shifts to one of kill over capture (vis-à-vis drones and more conventional air strikes).
- ¹²² For more on the historical background of 9/11 see Eric Stover and Victor Peskin, *Hiding in Plain Sight: The Pursuit of War Criminals from Nuremberg to the War on Terror* (Berkeley: University of California Press, 2016).
- ¹²³ Paul Summergrad, M.D., and Steven S. Sharfstein, M.D., “Ethics, Interrogation, and the American Psychiatric Association,” *The American Journal of Psychiatry* 172, no. 8 (2015): 706–707.
- ¹²⁴ James Risen, “American Psychological Association Bolstered C.I.A. Torture Program, Report Says,” *New York Times*, April 30, 2015, <https://www.nytimes.com/2015/05/01/us/report-says-american-psychological-association-collaborated-on-torture-justification.html>.
- ¹²⁵ “The PENS task force in June 2005 issued a report which the APA board approved by emergency vote. In July, Dr. Geoffrey Mumford, APA science policy director, sent an e-mail to Dr. Kirk Hubbard, a psychologist who formerly worked for the CIA and by then had taken a position consulting with Mitchell Jessen and Associates. Mumford wrote: ‘I thought you and many of those copied here would be interested to know that APA grabbed the bull by the horns and released this Task Force Report today’”(Lisa Hajjar, “How the World’s Largest Psychological Association Aided the CIA’s Torture Program,” *Nation*, May 7, 2015,

<https://www.thenation.com/article/how-worlds-largest-psychological-association-aided-cias-torture-program/>).

¹²⁶See American Psychological Association, *Report of the American Psychological Association Presidential Task Force on Psychological Ethics and National Security*, June 2005, <https://www.thenation.com/wp-content/uploads/2015/05/pens.pdf>.

¹²⁷ The 542-page report details the association’s collusion with the CIA on developing ethical guidelines to allow for techniques such as waterboarding and sleep deprivation to continue.

¹²⁸ See Alexa K. Koenig, Eric Stover, and Laurel E. Fletcher, “The Cumulative Effect: A Medico-Legal Approach to United States Torture Law and Policy,” *Essex Human Rights Review* 6, no. 1 (2009): 146–168. The military order was devised and explicated by two lawyers: Jay ByBee of the Office of Legal Counsel (OLC) of the Department of Defense and John Yoo of the same office. Of paramount concern to the administration, regarding interrogation procedures were questions of protocol: how to “inflict pain without causing the type of injury that might inhibit or prevent further interrogation,” and questions of legality: how to “shield interrogators and their superiors from any potential legal consequences of their actions.” And finally, how to make the activity of designing the infliction of pain i.e., interrogation be considered lawful activity (147).

¹²⁹ Metin Başoğlu, “Introduction,” in *Torture and Its Definition in International Law: An Interdisciplinary Approach* (New York: Oxford University Press, 2017), xxiii–xxiv.

¹³⁰ Sarah Dougherty JD, MPH, and Scott Allen, MD, *Nuremberg Betrayed: Human Experimentation and the CIA Torture Program*, Physicians for Human Rights, June 2017, <https://phr.org/resources/nuremberg-betrayed-human-experimentation-and-the-cia-torture-program/>.

¹³¹ Dougherty and Allen, *Nuremberg Betrayed*, 8.

¹³² Stover and Peskin, *Hiding in Plain Sight*, 336.

¹³³ See Dougherty and Allen, *Nuremberg Betrayed*.

¹³⁴ Bruce Jessen deposition, *Salim v. Mitchell*, US District Court for the Eastern District of Washington at Spokane, 34, https://static01.nyt.com/packages/pdf/us/20170620_interrogations/john-b-jessen.pdf.

¹³⁵ Dougherty and Allen, *Nuremberg Betrayed*, 11.

¹³⁶ The government could no longer rely as heavily on “state secrets privilege,” which allows for the exclusion of certain evidence in civil trials if it can be proved that such information compromises national security.

¹³⁷ Sheri Fink and James Risen, “Psychologists Open a Window on Brutal C.I.A Interrogations,” *New York Times*, June 21, 2017, <https://www.nytimes.com/interactive/2017/06/20/us/cia-torture.html>.

¹³⁸ Fink and Risen, “Psychologists Open a Window on Brutal C.I.A Interrogations.”

¹³⁹ Dougherty and Allen, *Nuremberg Betrayed*, 29.

¹⁴⁰ Dougherty and Allen, *Nuremberg Betrayed*, 31.

¹⁴¹ Dougherty and Allen, *Nuremberg Betrayed*, 31.

¹⁴² James Mitchell deposition, *Salim v. Mitchell*, US District Court for the Eastern District of Washington at Spokane, 108, https://static01.nyt.com/packages/pdf/us/20170620_interrogations/james-e-mitchell.pdf.

¹⁴³ Mitchell deposition, 108.

¹⁴⁴ Mitchell deposition, 104.

¹⁴⁵ Rose and Abi-Rached, *Neuro*, 12.

- ¹⁴⁶ Catharine Malabou, *The New Wounded: From Neurosis to Brain Damage*, translated by Steven Miller (New York: Fordham University Press, 2012), 17.
- ¹⁴⁷ Neel Ahuja, “Abu Zubaydah and the Caterpillar,” *Social Text* 29, no. 1 (2011): 127–49, 129.
- ¹⁴⁸ Ahuja, “Abu Zubaydah,” 129.
- ¹⁴⁹ Jessen deposition, 117.
- ¹⁵⁰ Rejali, *Torture and Democracy*, 455.
- ¹⁵¹ For more on the utility of pain and humanization see Samera Esmeir, *Juridical Humanity: A Colonial History* (Stanford, CA: Stanford University Press), 120–121. Esmeir references Jeremy Bentham’s theory on the utility of pain as important to how the law came to equate excessive pain with dehumanization. Pain became an object of manipulation, whereby the imperative to overcome pain is the means of humanization.
- ¹⁵² Mitchell deposition, 361.
- ¹⁵³ Jessen deposition, 228.
- ¹⁵⁴ Visvanathan, *Carnival for Science*, 168.
- ¹⁵⁵ Michel Foucault, “*Society Must Be Defended*”: *Lectures at the College de France 1975–1976* (New York: Picador, 1997), 256.
- ¹⁵⁶ Eric A. Stanley, “Near Life, Queer Death: Overkill and Ontological Capture,” *Social Text* 107, no. 2 (2011): 1–19, 9.
- ¹⁵⁷ International Committee of the Red Cross, *ICRC Report on the Treatment of Fourteen “High Value Detainees” in CIA Custody*, February 2007, 10.
<https://www.nybooks.com/media/doc/2010/04/22/icrc-report.pdf>.
- ¹⁵⁸ Eric A. Stanley, “Near Death,” 9.
- ¹⁵⁹ For more statistics and general approach to tube feeding see Eric Aadhaar O’Gorman, *Complete Tubefeeding: Everything You Need to Know about Tubefeeding, Tube Nutrition, and Blended Diets* (Scotts Valley, CA: CreateSpace Independent Publishing Platform, 2012).
- ¹⁶⁰ Haider Warrich, *Modern Death: How Medicine Changed the End of Life*, (New York: St. Martin’s Press, 2017); Ann Neumann, “The Limits of Autonomy: Force-Feedings in Catholic Hospitals and Prisons,” *New York Law Review* 58 (2013–14): 305–18.
- ¹⁶¹ See Uday Singh Mehta, *Liberalism and Empire: A Study in Nineteenth-Century British Liberal Thought* (Chicago, IL: The University of Chicago Press, 1999).
- ¹⁶² Mehta, *Liberalism and Empire*, 46.
- ¹⁶³ Mehta, *Liberalism and Empire*, 52. These universal claims are what Mehta refers to as philosophical anthropology or anthropological characteristics. Here anthropology is meant as the general study of human beings.
- ¹⁶⁴ Lisa Diedrich, “Practices of Doctoring: Enacting Medical Experience,” in *Rebirth of the Clinic: Places and Agents in Contemporary Health Care*, edited by Christine Ceci and Suzanne Fraser, 143–68 (Minneapolis: University of Minnesota Press, 2010), 148.
- ¹⁶⁵ Lisa Diedrich, *Treatments: Language, Politics, and the Culture of Illness* (Minneapolis: University of Minnesota Press, 2007), 5.
- ¹⁶⁶ David Armstrong “Actors, Patients and Agency,” *Sociology of Health and illness* 36, no. 2 (2014): 163–74, 168.
- ¹⁶⁷ Armstrong, “Actors, Patients and Agency,” 168.
- ¹⁶⁸ Armstrong, “Actors, Patients and Agency,” 170.
- ¹⁶⁹ Armstrong, “Actors, Patients and Agency,” 170.
- ¹⁷⁰ *Union Pac. Ry. Co. v. Botsford*, 141 U.S. 250 (1891).
- ¹⁷¹ *Union Pac. Ry. Co. v. Botsford*, 141 U.S. 250, 251 (1891).

¹⁷² Beyond the scope of this chapter is the case of Karen Ann Quinlan, an important right-to-die case from the 1970s. After mixing Valium and alcohol, Quinlan collapsed, unconscious. Because she had stopped breathing for fifteen minutes, her doctors were unsure how much of her brain was still functioning. After a year of keeping her alive on a ventilator, her parents began to question whether they should turn the machine off and allow their daughter to die. The hospital, unsure whether this could be considered homicide on its part, refused. The case was taken to the New Jersey Supreme Court, which ruled that “a patient and her family had the right to privacy and could deny medical treatments, even if that denial meant certain death.” The case was significant in that it established that according to medical ethics a patient has the right to not accept, or discontinue any medical treatment they don’t want. This is obviously complicated when the patient is unconscious, but the Quinlan case argued that patient privacy combined with the family proving she would not have wanted to have been on a ventilator long-term was sufficient enough to have Karen taken off the machine. See Ann Neumann, *The Good Death: An Exploration of Dying in America* (Boston: Beacon Press, 2016), 14.

¹⁷³ The Schiavo case spanned six years of litigation, the appointment of three legal guardians *ad litem*, and multiple appeals and petitions for review. Here, I choose to focus on the facts and cultural implications of the case as opposed to performing a formal law review. See Daniel N. Robinson, “*Schiavo*, Privacy, and the Interests of Law,” in Kenneth Goodman, *The Case of Terri Schiavo: Ethics, Politics, and Death in the 21st Century* (Oxford: Oxford University Press, 2009), 50–77.

¹⁷⁴ See Kenneth Goodman, “Terri Schiavo and the Culture Wars: Ethics vs. Politics,” in *The Case of Terri Schiavo*, 1–38.

¹⁷⁵ Tom L. Beauchamp and James F. Childress, *Principles of Biomedical Ethics* (New York: Oxford University Press, 1994), 12.

¹⁷⁶ See Beauchamp and Childress, *Principles of Biomedical Ethics*.

¹⁷⁷ Neil Krishan Aggarwal, *Mental Health in the War on Terror* (New York: Columbia University Press, 2015), 35.

¹⁷⁸ Steven H. Miles and Allison August, “Courts, Gender, and ‘the Right to Die,’” *Law, Medicine and Health Care* 18, no. 1–2 (1990): 85–95.

¹⁷⁹ Darren P. Mareiniss, “A Comparison of Cruzan and Schiavo: The Burden of Proof, Due Process, and Autonomy in the Persistently Vegetative Patient,” *Journal of Legal Medicine* 26 (2005): 233–59, 236.

¹⁸⁰ Mareiniss, “A Comparison of Cruzan and Schiavo,” 237.

¹⁸¹ Mareiniss, “A Comparison of Cruzan and Schiavo,” 244.

¹⁸² Mareiniss, “A Comparison of Cruzan and Schiavo,” 235.

¹⁸³ Mehta, *Liberalism and Empire*, 60.

¹⁸⁴ Mehta, *Liberalism and Empire*, 59.

¹⁸⁵ See Sharon R. Kaufman, *Ordinary Medicine: Extraordinary Treatments, Longer Lives, and Where to Draw the Line* (Durham, NC: Duke University Press, 2015).

¹⁸⁶ Neumann, *Good Death*, 88.

¹⁸⁷ Goodman, *Case of Terri Schiavo*, 10.

¹⁸⁸ Howard Brody, MD, PhD, Laura D. Hermer, JD, LLM, Larry D. Scott, MD, MA, L. Lee Grumbles, MD, Julie E. Kutac, MA, and Susan D. McCammon, MD, “Artificial Nutrition and Hydration: The Evolutions of Ethics, Evidence, and Policy,” *Journal of General Internal Medicine* 26, no. 9 (2011): 1053–1059, 1054, emphasis in original.

¹⁸⁹ See Kaufman, *Ordinary Medicine* for a discussion of the pharmaceutical industry's incentive to make money off US society's increasing investment in risk awareness about illness and health. Technological innovation, and clinical trials, aren't necessarily motivated by finding cures but ensuring that people live longer, no matter the illness (96, 204).

¹⁹⁰ Neumann, *Good Death*, 88.

¹⁹¹ See Bruno Latour, *Science in Action* (Cambridge, MA: Harvard University Press, 1987); Donna Haraway, *Simians, Cyborgs and Women: The Reinvention of Nature* (New York: Routledge, 1991).

¹⁹² Kaufman, *Ordinary Medicine*, 129.

¹⁹³ Kaufman, *Ordinary Medicine*, 130.

¹⁹⁴ Kaufman, *Ordinary Medicine*, 130.

¹⁹⁵ Bruno Latour, "Mixing Humans and Non-Humans Together: Sociology of a Door Closer," *Social Problems* 35, no. 3 (1988): 298–310, 303.

¹⁹⁶ Latour, "Mixing Humans," 303.

¹⁹⁷ Donna Haraway, "A Cyborg Manifesto: Science, Technology, and Socialist Feminism in the Late Twentieth Century," in *Simians, Cyborgs and Women: The Reinvention of Nature*, 291–324 (New York: Routledge, 1991), 291.

¹⁹⁸ Haraway, *Cyborg Manifesto*, 293.

¹⁹⁹ Haraway, *Cyborg Manifesto*, 302. Important to note here is the way that technology not only preserves life but also enhances how bodies will experience life. This is of particular importance for the disabled body that so often becomes the example par excellence of the cyborg without any real attention to how subjects with disabilities experience assistive technologies or, more, do not even have access to many assistive technologies. For an analysis of the cyborg that prioritizes disability see Alison Kafer, *Feminist Queer Crip* (Bloomington, IN: Indiana University Press, 2013).

²⁰⁰ Michel Foucault, "*Society Must Be Defended*": *Lectures at the College de France 1975–1976*, translated by David Macey (New York: Picador, 2003), 247.

²⁰¹ Foucault, *Society Must Be Defended*, 248.

²⁰² Foucault, *Society Must Be Defended*, 247, 249.

²⁰³ In Florida, a proxy may make medical decisions whether they were appointed by the patient or not. In other states, a proxy is most often referred to as a surrogate, but in Florida, a surrogate is the person appointed by the subject.

²⁰⁴ Goodman, *Case of Terri Schiavo*, 82.

²⁰⁵ Mareiniss, "A Comparison of Cruzan and Schiavo," 239.

²⁰⁶ Terri Beth Miller, "Reading the Body of Terri Schiavo: Inscriptions of Power in Medical and Legal Discourse," *Literature and Medicine* 28, no. 1 (2009): 37–41, 44.

²⁰⁷ Kathy L. Cerminara, "The *Schiavo* Maelstrom's Potential Impact on the Law of End-of-life Decision Making," in Goodman, *Case of Terri Schiavo*, 96.

²⁰⁸ Goodman, *Case of Terri Schiavo*, 24.

²⁰⁹ C. Christopher Hook and Paul S. Mueller, "The Terri Schiavo Saga: The Making of a Tragedy and Lessons Learned" *Mayo Clinic Proceedings* 80, no. 11 (2005): 1449–60, 1456–57.

²¹⁰ "Appeal Filed to Restore Terri's Feeding Tube," *Fox News*, March 22, 2005, <https://www.foxnews.com/story/appeal-filed-to-restore-terris-feeding-tube>.

²¹¹ Abby Goodnough and Carl Hulse, "Despite Congress, Woman's Feeding Tube is Removed," *New York Times*, March 19, 2005, <https://www.nytimes.com/2005/03/19/us/despite-congress-womans-feeding-tube-is-removed.html>.

- ²¹² Goodman, *Case of Terri Schiavo*, 25.
- ²¹³ Miller, “Reading the Body of Terri Schiavo.”
- ²¹⁴ Jeb Bush quoted in Miller, “Reading the Body of Terri Schiavo,” 49.
- ²¹⁵ Goodman, *Case of Terri Schiavo*, 124.
- ²¹⁶ See the Schindler family website. *Terri Schiavo Life & Hope Network*. “Terri Schiavo’s Story,” <https://terrischiavo.org/>.
- ²¹⁷ See Adriane Fugh-Berman, “Feeding the Comatose Patient,” *The Washington Post*, June 26, 1990, https://www.washingtonpost.com/archive/lifestyle/wellness/1990/06/26/feeding-the-comatose-patient/25afbd5a-f2a8-41b1-a8e7-b065b07e8949/?utm_term=.60dfc79f037c.
- ²¹⁸ Miller, “Reading the Body of Terri Schiavo”; for a more general discussion concerning the ableist politics of diagnosis, see Eli Clare, *Brilliant Imperfection: Grappling with Cure* (Durham, NC: Duke University Press, 2017).
- ²¹⁹ Miller, “Reading the Body of Terri Schiavo,” 41.
- ²²⁰ The gendered politics are hard to ignore in the Schiavo case. Feminist scholars have noted the cultural expectations placed on women to be self-sacrificing, whether they are the patient in pain or, say, a mother who must insist that everything possible be done to save her daughter. Robin N. Fiore notes that Schiavo was compared to a fetus and her death to abortion; this is particularly fitting given the lobbying around Terri’s case by antiabortionists who sought to frame her as an “an abstract universal symbol of humanity and the right to life.” The gendered rhetoric around her case cast her as vulnerable, helpless, and in need of protection. See Robin N. Fiore, “Framing Terri Schiavo: Gender, Disability, and Fetal Protection,” in Goodman, *Case of Terri Schiavo*, 191–29.” See also Miles and August, “Courts, Gender, and the Right-to-Die.”
- ²²¹ Diane Coleman quoted in Goodman, *Case of Terri Schiavo*, 180.
- ²²² Clare, *Brilliant Imperfection*, 29.
- ²²³ For more on the relationship between *bios* and *zoe*, see Giorgio Agamben, *Homo Sacer: Sovereign Power and Bare Life*, translated by Daniel Heller-Roazen (Palo Alto, CA: Stanford University Press, 1998).
- ²²⁴ Patrick Anderson, *So Much Wasted: Hunger, Performance, and the Morbidity of Resistance* (Durham, NC: Duke University Press, 2010), 145.
- ²²⁵ *Cruzan v. Director, Missouri Department of Health*, 497 U.S. 261 (1990); Mara Silver, “Testing *Cruzan*: Prisoners and the Constitutional Question of Self-Starvation,” *Stanford Law Review* 58, (2005): 631–62.
- ²²⁶ *Washington v. Glucksberg*, 521 U.S. 702 (1997). *Washington* distinguished between suicide and the refusal of medical treatment.
- ²²⁷ Lisa Guenther, *Solitary Confinement: Social Death and its Afterlives* (Minneapolis: University of Minnesota Press, 2013), 130.
- ²²⁸ See Keramet Reiter, *23/7: Pelican Bay Prison and the Rise of Long-Term Solitary Confinement* (New Haven, CT: Yale University Press, 2016), 10–13.
- ²²⁹ For more on the neoliberalization of punishment see Stephen Dillon, *Fugitive Life: The Queer Politics of the Prison State* (Durham, NC: Duke University Press, 2018).
- ²³⁰ Guenther, *Solitary Confinement*, 131.
- ²³¹ See Reiter, *23/7*, 19, for more on the architecture of Pelican Bay.
- ²³² See Reiter, *23/7*, 10, and Guenther, *Solitary Confinement* for more on the general architectural landscape of SHUs.

- ²³³ Lisa Guenther, “A Critical Phenomenology of Solidarity and Resistance in the 2013 California Prison Hunger Strikes,” in *Body/Self/Other: The Phenomenology of Social Encounters*, ed. Luna Dolezal and Danielle Petherbridge (Albany, NY: SUNY Press, 2017).
- ²³⁴ Reiter, 23/7, 196.
- ²³⁵ Quoted in Guenther, *Solitary Confinement*, 134. See *Madrid*, 889, F. Supp., at 1146.
- ²³⁶ Guenther, *Solitary Confinement*, 95.
- ²³⁷ Quoted in Colin Dayan, “With Law at the Edge of Life,” *South Atlantic Quarterly* 113, no. 3 (2014): 629–39, 633. See Guenther, *Solitary Confinement* for a posthumanist critique of solitary confinement, what she terms a “violation of (human and nonhuman) animal ontology” (127).
- ²³⁸ Dayan, “With Law at the Edge of Life,” 633.
- ²³⁹ Colin (Joan) Dayan, “Legal Slaves and Civil Bodies,” *Nepantla: Views from the South* 2 no. 1 (2001): 3–39, 24–25.
- ²⁴⁰ Reiter, 23/7.
- ²⁴¹ Although beyond the scope of this chapter, it is also important to note the overwhelming numbers of queer and trans prisoners placed in SHU. This can be because queer and, in particular, trans prisoners seek protective custody from general population due to gender-based violence—though more often than not, trans prisoners face more violence, including sexual violence by guards, while in solitary confinement. For more on trans incarceration and the gendered logics of the prison-industrial complex see Eric A. Stanley and Nat Smith, *Captive Genders: Trans Embodiment and the Prison Industrial Complex* (Oakland: AK Press, 2011).
- ²⁴² Josh Harkinson and Maggie Caldwell, “50 Days without Food: The California Prison Hunger Strike Explained,” *Mother Jones*, August 27, 2013, <https://www.motherjones.com/politics/2013/08/50-days-california-prisons-hunger-strike-explainer/>.
- ²⁴³ See *Wilson v. Seiter*, 501 U.S. 294 (1991).
- ²⁴⁴ Dayan, “Legal Slaves and Civil Bodies,” 26–27.
- ²⁴⁵ *Estelle v. Gamble*, 429 U.S. 97 (1976).
- ²⁴⁶ Silver, “Testing *Cruzan*,” 642.
- ²⁴⁷ Silver, “Testing *Cruzan*,” 643.
- ²⁴⁸ Reiter, 23/7, 30.
- ²⁴⁹ Reiter, 23/7, 30.
- ²⁵⁰ See *Plata v. Brown*, Case No. Co1–1351, TEH, “Joint Request for Order Authorizing Refeeding under Specified Conditions of Hunger Striking Inmate-Patients and Order Thereon,” 4, solitarywatch.com/wp-content/uploads/2013/08/Plata-Hunger-Strike-Stipulation.pdf.
- ²⁵¹ *Plata v. Brown*, 4.
- ²⁵² See *Plata v. Brown*, 2.
- ²⁵³ Joe Johnson, “Inmate Strike Sparks Health Risks, Concerns,” *Sentinel*, August 16, 2013, https://hanfordsentinel.com/news/local/crime-and-courts/inmate-strike-sparks-health-risks-concerns/article_b3e9108e-06bf-11e3-96ad-0019bb2963f4.html
- ²⁵⁴ Johnson, “Inmate Strike Sparks Health Risks.”
- ²⁵⁵ California Correctional Health Care Services, “CCHCS Hunger Strike, Fasting, and Refeeding Care Guide,” July 2013, <https://cchcs.ca.gov/wp-content/uploads/sites/60/2017/08/MassHungerStrikeCareGuide.pdf>.
- ²⁵⁶ Reiter, 23/7, 60.
- ²⁵⁷ Silver, “Testing *Cruzan*,” 637–38.
- ²⁵⁸ Nikolas Rose, *The Politics of Life Itself: Biomedicine, Power, and Subjectivity in*

the Twenty-First Century (Princeton: Princeton University Press, 2006), 27.

²⁵⁹ Dayan, "With Law at the Edge of Life," 634.

²⁶⁰ Reiter, 23/7, 202.

²⁶¹ See Mehta, *Liberalism and Empire*, 48–49.

²⁶² See the case of William Coleman, a prisoner in Connecticut who was force-fed from 2008–13. Coleman understood being force-fed as a way for the prison to "let him slide," feeding him only when absolutely necessary. Coleman calls this the "torture gap." See Ann Neumann, "The Longest Hunger Strike," *Guernica*, January 15, 2013, <http://www.guernicamag.com/features/the-longest-hunger-strike>; Jacob Appel, "Rethinking Force-Feeding: Legal and Ethical Aspects of Physician Participation in the Termination of Hunger Strikes in American Prisons," *Public Affairs Quarterly* 26, no. 4 (2012): 313–35.

²⁶³ Dayan, "Legal Slaves and Civil Bodies," 17.

²⁶⁴ Banu Bargu, "Spectacles of Death: Dignity, Dissent, and Sacrifice in Turkey's Prisons," in *Policing and Prisons in the Middle East: Formations of Coercion*, edited by Laleh Khalili and Jillian Schwedler, 241–262 (New York: Columbia University Press, 2010), 241–261, 254.

²⁶⁵ Spencer S. Hsu, "Judge Again Orders U.S. to Release Guantanamo Bay Force-Feeding Videos," *Washington Post*, October 27, 2015, www.washingtonpost.com/local/public-safety/judge-again-orders-us-to-release-guantanamo-bay-force-feeding-videos/2015/10/27/6b46bfc8-7cd5-11e5-beba-927fd8634498_story.html.

²⁶⁶ Andy Worthington, "After Four-Year Legal Struggle, Judges Support Government Claims that Videotapes of Force-Feeding at Guantanamo Must Remain Secret," February 4, 2017, www.andyworthington.co.uk/2017/04/02/after-four-year-legal-struggle-judges-support-government-claims-that-videotapes-of-force-feeding-at-guantanamo-must-remain-secret/.

²⁶⁷ Lilie Chouliaraki, *The Spectatorship of Suffering* (London: Sage Publications, 2006), 12.

²⁶⁸ Samir Naji al Hasan Moqbel, "Gitmo Is Killing Me," *New York Times*, April 14, 2013, www.nytimes.com/2013/04/15/opinion/hunger-striking-at-guantanamo-bay.html.

²⁶⁹ A. Naomi Paik, *Rightlessness: Testimony and Redress in U.S. Prison Camps since World War II* (Chapel Hill: University of North Carolina Press, 2016), 17.

²⁷⁰ Paik, *Rightlessness*, 8.

²⁷¹ Paik, *Rightlessness*, 15.

²⁷² Moqbel, "Gtmo is Killing Me."

²⁷³ Elaine Scarry, *The Body in Pain: The Making and Unmaking of the World* (New York: Oxford University Press, 1987), 4.

²⁷⁴ Scarry, *The Body in Pain*, 5, emphasis in original.

²⁷⁵ Talal Asad, *Formations of the Secular: Christianity, Islam, Modernity* (Stanford: Stanford University Press, 2003), 85.

²⁷⁶ Ariella Azoulay, *The Civil Contract of Photography* (New York: Zone Books, 2008), 144.

²⁷⁷ Azoulay, *The Civil Contract of Photography*, 287.

²⁷⁸ Azoulay, *The Civil Contract of Photography*, 421.

²⁷⁹ See Susan Sontag, *On Photography* (New York: Picador, 1973).

²⁸⁰ Susan Sontag, *Regarding the Pain of Others* (New York: Picador, 2004), 39.

²⁸¹ Azoulay, *The Civil Contract of Photography*, 11.

²⁸² Roland Barthes, *Camera Lucida: Reflections on Photography* (New York: Hill and Wang, 1980), 100, emphasis in original.

²⁸³ Jason Leopold, "Revised Guantanamo Force-Feed Policy Exposed," *Al Jazeera*, May 13, 2013, www.aljazeera.com/humanrights/2013/05/201358152317954140.html.

²⁸⁴ It's unclear when the SOP was declassified. *Al Jazeera* reports that the Pentagon declassified the manual several years prior to its public release in 2013 but that this version still contained redactions. In this chapter, I quote from the 2013 version. See Leopold, "Revised Guantanamo Force-Feed Policy Exposed."

²⁸⁵ JTF (Joint Task Force) Guantanamo Bay, Cuba, Joint Medical Group. 2013. *Medical Management of Detainees on Hunger Strike*, SOP: JTF-JMG, 1.

²⁸⁶ See Clive Stafford Smith, "Gitmo: America's Black Hole," *Los Angeles Times*, October 5, 2007, www.latimes.com/news/la-oe-smith5oct05-story.html.

²⁸⁷ Lorna Rhodes, "Panoptical Intimacies," *Public Culture* 10, no. 2 (2008): 285–311, 288.

²⁸⁸ See Nicholas Mirzoeff, *The Right to Look: A Counterhistory of Visuality* (Durham, NC: Duke University Press, 2011).

²⁸⁹ JTF, *Medical Management of Detainees on Hunger Strike*, 6.

²⁹⁰ Andy Worthington, "Sami al-Haj: The Banned Torture Pictures of a Journalist in Guantanamo," April 13, 2008, www.andyworthington.co.uk/2008/04/13/sami-al-haj-the-banned-torture-pictures-of-a-journalist-in-guantanamo/.

²⁹¹ Andy Worthington, "Guantanamo's Hidden History: Shocking Statistics of Starvation," October 6, 2009, www.andyworthington.co.uk/2009/06/10/guantanamos-hidden-history-shocking-statistics-of-starvation/.

²⁹² Michel Foucault, *Discipline and Punish: The Birth of the Prison*, translated by Alan Sheridan (New York: Vintage, 1977), 184.

²⁹³ See Shaker Abdurraheem Aamer et al. v. Barack Obama, 742 F.3d 1023 (D.C. Cir. 2014).

²⁹⁴ See Nancy Plummer R. N, *Tube Feedings* (Indianapolis, IN: Vocational Educational Services, 1983).

²⁹⁵ Josh White, "Guantánamo Force-Feeding Tactics Are Called Torture," *Washington Post*, March 1, 2006, www.washingtonpost.com/wp-dyn/content/article/2006/02/28/AR2006022801344.html.

²⁹⁶ David Rose, "The Scandal of Force-Fed Prisoners," *The Guardian*, January 7, 2006, www.theguardian.com/world/2006/jan/08/usa.Guantánamo.

²⁹⁷ Constitution Project, *The Report of the Constitution Project's Task Force on Detainee Treatment*, The Constitution Project, April 16, 2013, detaineeetaskforce.org/report/?utm_source=News%3A+Task+Force+2nd+Anniversary&utm_campaign=News%3A+TF+2nd+Anniv&utm_medium=email. 229

²⁹⁸ JTF, *Medical Management of Detainees on Hunger Strike*, 7.

²⁹⁹ Colin Dayan, *The Law Is a White Dog: How Legal Rituals Make and Unmake Persons* (Princeton, NJ: Princeton University Press, 2013), 70.

³⁰⁰ World Medical Association, *WMA Declaration of Tokyo: Guidelines For Physicians Concerning Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment in Relation to Detention or Imprisonment*, May 19, 2006, <https://www.wma.net/policies-post/wma-declaration-of-tokyo-guidelines-for-physicians-concerning-torture-and-other-cruel-inhuman-or-degrading-treatment-or-punishment-in-relation-to-detention-and-imprisonment/>.

³⁰¹ Steven Miles, *Oath Betrayed: Terror, Medical Complicity, and the War on Terror* (New York: Random House, 2006), 107–110.

³⁰² World Medical Association, *World Medical Association Declaration of Malta on Hunger Strikers*, October 13, 2006, <https://www.wma.net/policies-post/wma-declaration-of-malta-on-hunger-strikers/>.

³⁰³ Luke Mitchell, “God Mode,” *Harper’s Weekly*, August 9–11, 2006, <https://harpers.org/archive/2006/08/god-mode/>.

³⁰⁴ Mitchell, “God Mode,” 10.

³⁰⁵ Paik, *Rightlessness*, 202–03.

³⁰⁶ Michel Foucault, *The History of Sexuality, Volume 1: An Introduction*, translated by Robert Hurley (New York: Vintage, 1999), 241.

³⁰⁷ See Ina Yang, “How It Works: Putting Humans in Suspended Animation,” *Popular Science*, June 3, 2014, www.popsci.com/article/science/how-it-works-putting-humans-suspended-animation.

³⁰⁸ Foucault, *Discipline and Punish*, 204.

³⁰⁹ JTF, *Medical Management of Detainees on Hunger Strike*, 12.

³¹⁰ Patrick Anderson, “On Feeding Tubes,” *Drama Review* 49, no. 3 (2005): 5–9, 6

³¹¹ JTF, *Medical Management of Detainees on Hunger Strike*, 29.

³¹² Constitution Project, *The Report of the Constitution Project’s Task Force on Detainee Treatment*, 227.

³¹³ Colin (Joan) Dayan, “Legal Slaves and Civil Bodies,” *Nepantla: Views from the South* 2, no. 1 (2001): 3–39, 28.

³¹⁴ This isn’t the only political campaign Reprieve has participated in, as detailed by Keith Feldman. Writing on the #NotABugSplat campaign (another of Reprieve’s projects), Feldman argues that the photograph of a young Pakistani girl taken after a drone strike had demolished her home intervenes in both human rights visual culture and the optics of homeland security. The caption on the photo reads, “As seen from a drone,” and the hashtag is a reference to drone officers calling their targets “bug splats.” Expanding upon arguments lodged against the ethical repercussions of the West’s visual gaze as objectifying the racialized and gendered “other” of the Global South, Feldman argues that “human rights discourse produces an archive of names, ages, faces, personal accounts, patterns of sociality—an archive, that is, of humanization—through which to bear witness to the violence of abstraction.” Worth further investigation is how Reprieve’s video of the SOP of force-feeding works with and against the contemporary human rights discourse detailed by Feldman. See Keith Feldman, “#notabugsplat: Becoming Human on the Terrain of Visual Culture,” in *Routledge Companion to Literature and Human Rights*, eds. Sophia McClennen and Ali Schultheis Moore, 224–232 (London, UK: Routledge, 2016), 228.

³¹⁵ See Asif Kapadia, “Yasiin Bey (aka Mos Def) Force-Fed under Standard Guantanamo Bay Procedure—Video,” *The Guardian*, July 8, 2013,

www.theguardian.com/world/video/2013/jul/08/mos-def-force-fed-Guantanamo-bay-video.

³¹⁶ For more on the categorical logic behind human rights representation, see Claire Moon, “What One Sees and How One Files Seeing: Human Rights Reporting, Representation and Action,” *Sociology* 46, no. 5 (2012): 876–890.

³¹⁷ Moqbel, “Gtmo is Killing Me.”

³¹⁸ For more on representation and performance, see Peggy Phelan, *Unmarked: The Politics of Performance* (New York, NY: Routledge Press, 1993). Phelan explores in *Unmarked* how representation always exceeds intention and is, thus, never totalizing. Indeed, it’s the excess that makes interpretation and critique possible. Within any text, there is a relationship between what is understood as the “real” and what is understood as the “representational.” The instability of the visible real about which Phelan references is necessarily reflective of the instability of the relationship between self and other. The politics, then, of representation or of the self and the

other become, for Phelan, politics of the “marked/unmarked.” Visibility is a trap where the real is in actuality that which is absent, while that which is present is merely a representation of loss.

³¹⁹ See Sontag, *Regarding the Pain of Others*.

³²⁰ Chouliaraki, *The Spectatorship of Suffering*, 2. See also Luc Boltanski, *Distant Suffering: Politics, Morality and the Media* (Cambridge: Cambridge University Press, 1999).

³²¹ Chouliaraki, *The Spectatorship of Suffering*, 24.

³²² Chouliaraki, *The Spectatorship of Suffering*, 3.

³²³ Chouliaraki, *The Spectatorship of Suffering*, 18.

³²⁴ Chouliaraki, *The Spectatorship of Suffering*, 24.

³²⁵ Saidiya Hartman, *Scenes of Subjection: Terror, Slavery, and Self-Making in Nineteenth-Century America* (New York and Oxford: Oxford University Press, 1997).

³²⁶ Frantz Fanon, *Black Skin, White Masks* (New York: Grove Press, 1967).

³²⁷ Sigmund Freud, *Group Psychology and the Analysis of the Ego* (New York: W.W. Norton and Company, 1990), 48.

³²⁸ Fanon, *Black Skin, White Masks*, 91.

³²⁹ For more on the body schema, see Maurice Merleau-Ponty, *The Phenomenology of Perception* (New York: Routledge 2014). Merleau-Ponty defines the body schema as that which works on a kind of subconscious level and attempts to translate into visual language why the body performs the movements it does during any number of gestures. He makes clear that the body is not only its form, which is the case for external objects or sensations. Rather, the body is a form that becomes accessible through content. For this reason, he contends that the body schema’s spatiality is one of situation, not of position. Furthermore, it registers shape and posture of the body and makes a record of the momentary relative disposition of one's own body parts. The body schema is a way of stating that the body is in the world and makes the experience of space and time possible, or perception is made possible because of our bodies.

³³⁰ See Hartman, *Scenes of Subjection*, 51.

³³¹ Fanon, *Black Skin, White Masks*, 89.

³³² Fanon, *Black Skin, White Masks*, 119.

³³³ Here, I’m drawing from Judith Butler, *Frames of War: When Is Life Grievable?* (New York: Verso Books, 2010). Butler argues that framing, affect, and interpretation extend beyond the viewer to the camera itself. Indeed, if the presence of the camera is understood as some form of enhancement, then the photograph builds and augments an event. Thus, for Butler, both seeing and photographing are shaped by norms that frame which life is rendered destitute and abject.

³³⁴ Reprieve, “Yasiin Bey Force-Feeding Video Launches Campaign to Support Guantanamo Hunger-Strikers,” July 8, 2013, reprieve.org.uk/press/2013_07_08_guantanamo_force_feeding_yasiin_bey/.

³³⁵ Charlie Savage and Julie Hirschfeld Davis, “Obama Sends Plan to Close Guantánamo to Congress,” *New York Times*, February 23, 2016, www.nytimes.com/2016/02/24/us/politics/obama-guantanamo-bay.html.

³³⁶ Parallels can be made to the recent water and salt campaign in solidarity with the Palestinian hunger strikes. See Julie Norman, “Five Myths about the Palestinian Hunger Strike,” *Washington Post*, April 26, 2017, https://www.washingtonpost.com/news/monkey-cage/wp/2017/04/26/five-myths-about-the-palestinian-hunger-strike/?utm_term=.13c3cbe4d2e4.

³³⁷ Mirzoeff, *The Right to Look*, 28.

³³⁸ Butler, *Frames of War*, 100.

- ³³⁹ Fred Moten, “Black Mo’nin’,” in *Loss: The Politics of Mourning*, edited by David L. Eng and David Kazanjian, 59–76 (Berkeley: University of California Press, 2003).
- ³⁴⁰ Moten, “Black Mo’nin’,” 65.
- ³⁴¹ Moten, “Black Mo’nin’,” 69.
- ³⁴² Moten, “Black Mo’nin’,” 63.
- ³⁴³ For more on listening and affect, see Tina M. Campt, *Listening to Images* (Durham, NC: Duke University Press, 2017). She writes, “sound need not be heard to be perceived. Sound can be listened to, and, in equally powerful ways, sound can be felt, it both touches and moves people” (6).
- ³⁴⁴ See Moten, “Black Mo’nin’.”
- ³⁴⁵ Amy Goodman, “Freed Gitmo Prisoner Jihad Abu Wa’el Dhiab Speaks as Pres. Candidates to Debate Terrorism,” *Democracy Now!*, September 26, 2016, www.democracynow.org/2016/9/26/exclusive_freed_gitmo_prisoner_jihad_abu.
- ³⁴⁶ A version of this chapter appears in the journal *Women and Performance*. See Michelle C. Velasquez-Potts, “Staging Incapacitation: The Corporeal Politics of Hunger Striking,” *Women and Performance: A Journal of Feminist Theory* 29, no. 1 (2019): 25–40.
- ³⁴⁷ Barbara Olshansky and Gitanjali Gutierrez, *The Guantánamo Prisoner Hunger Strikes and Protests: February 2002–August 2005*. Report compiled by the Center for Constitutional Rights, <http://www.ccr-ny.org>, 7.
- ³⁴⁸ “Sweet Tea and Therapy for X-Ray Inmates,” *The Telegraph*, March 20, 2002, <http://www.telegraph.co.uk/news/worldnews/northamerica/usa/1387308/Sweet-tea-and-therapy-for-X-Ray-inmates.html>.
- ³⁴⁹ Shaker Aamer, “I Want to Hug My Children and Watch them as They Grow,” *The Guardian*, April 20, 2013, <https://www.theguardian.com/world/2013/apr/21/shaker-aamer-guantanamo-bay>.
- ³⁵⁰ “Sweet Tea and Therapy for X-Ray Inmates.”
- ³⁵¹ See also Talal Asad, *On Suicide Bombing* (New York: Columbia University Press, 2007) for a more thorough discussion concerning the contradictions of modern liberalism’s approach to pain and suffering. The state naturalizes violence through the very institutions, such as war and the police, that purport to eliminate violence.
- ³⁵² Talal Asad, *Formations of the Secular: Christianity, Islam, Modernity* (Stanford: Stanford University Press, 2003).
- ³⁵³ For more on incapacitation as carceral logic, see Ruth Wilson Gilmore, *Golden Gulag: Prisons, Surplus, Crisis, and Opposition in Globalizing California* (Berkeley: University of California Press, 2007). Gilmore writes, “Incapacitation doesn’t pretend to change anything about people except where they are. It is a simpleminded way, then, a geographical solution that purports to solve social problems by extensively and repeatedly removing people from disordered, deindustrialized milieus and depositing them somewhere else” (14).
- ³⁵⁴ See Jasbir Puar, *Terrorist Assemblages: Homonationalism in Queer Times* (Durham, NC: Duke University Press, 2007).
- ³⁵⁵ David Lloyd, *Irish Culture and Colonial Modernity 1800–2000: The Transformation of Oral Space* (Cambridge, UK: Cambridge University Press, 2011), 116.
- ³⁵⁶ Lloyd, *Irish Culture and Colonial Modernity*, 117.
- ³⁵⁷ Lloyd, *Irish Culture and Colonial Modernity*, 117.
- ³⁵⁸ Margaret Thatcher, “1981 March 5th Speech in Belfast,” Margaret Thatcher Foundation, <https://www.margaretthatcher.org/document/104589>.

- ³⁵⁹ For more on this history see Lloyd, *Irish Culture and Colonial Modernity*; Allen Feldman, *Formations of Violence: The Narrative of the Body and Political Terror in Northern Ireland* (Chicago: University of Chicago Press, 1991).
- ³⁶⁰ Banu Bargu, *Starve and Immolate: The Politics of Human Weapons* (New York: Columbia University Press, 2014), 239.
- ³⁶¹ Bargu, *Starve and Immolate*, 240.
- ³⁶² Feldman, *Formations of Violence*, 225.
- ³⁶³ Maurice Merleau-Ponty, *Humanism and Terror: The Communist Problem*, translated by John O’Neill (New Brunswick: Transaction Publishers, 1969), 79.
- ³⁶⁴ Merleau-Ponty, *Humanism and Terror*, 80.
- ³⁶⁵ Banu Bargu, “Spectacles of Death: Dignity, Dissent, and Sacrifice in Turkey’s Prisons,” in *Policing and Prisons in the Middle East: Formations of Coercion*, edited by Laleh Khalili and Jillian Schwedler, 241–261 (New York: Columbia University Press, 2010), 254.
- ³⁶⁶ Bargu, “Spectacles of Death,” 254.
- ³⁶⁷ See Michel Foucault, “*Society Must Be Defended*”: *Lectures at the College de France 1975-1976*, translated by David Macey (New York: Picador, 2003), 243–246.
- ³⁶⁸ Tina Marie Camp, “Black Visuality and the Practice of Refusal,” *Women and Performance* 29, no. 1 (2019): 79–87, 83.
- ³⁶⁹ For more on the opacity of practices of refusal, see Lilian G. Mengesha and Lakshmi Padmanabhan, “Introduction to Performing Refusal/Refusing to Perform,” *Women and Performance* 29, no. 1 (2019): 1–8.
- ³⁷⁰ Laurel E. Fletcher, Eric Stover, Stephen Paul. Smith, and Patricia M. Wald, *The Guantánamo Effect: Exposing the Consequences of U.S. Detention and Interrogation Practices* (Berkeley: University of California Press, 2009), 3.
- ³⁷¹ For more on the history of the US Naval Station, see A. Naomi Paik, “The ‘Visible Scapegoats’ of U.S. Imperialism: HIV Positive Haitian Refugees and Carceral Quarantine at Guantánamo Bay,” *Work & Culture* 4 (2006): 1–22.
- ³⁷² See A. Naomi Paik, *Rightlessness: Testimony and Redress in U.S. Prison Camps Since World War II* (Chapel Hill: The University of North Carolina Press, 2016).
- ³⁷³ Michael Keller and Jason Leopold, “A Guide to Hunger Strikes at Guantánamo Bay,” *Aljazeera America*, September 26, 2013, <http://america.aljazeera.com/articles/multimedia/guantanamo-hungerstriketimeline.html#timeline-event=strike-2002-01-25>.
- ³⁷⁴ Olshansky and Gutierrez, *The Guantánamo Prisoner Hunger Strikes and Protests*, 6.
- ³⁷⁵ Keller and Leopold, “A Guide to Hunger Strikes at Guantánamo Bay.”
- ³⁷⁶ Patrick Anderson, *So Much Wasted: Hunger, Performance, and the Morbidity of Resistance* (Durham: Duke University Press, 2010), 143.
- ³⁷⁷ Olshansky and Gutierrez, *The Guantánamo Prisoner Hunger Strikes and Protests*, 9.
- ³⁷⁸ Olshansky and Gutierrez, *The Guantánamo Prisoner Hunger Strikes and Protests*, 10.
- ³⁷⁹ Tim Golden, “The Battle for Guantánamo,” *New York Times*, September 17, 2006, <http://www.nytimes.com/2006/09/17/magazine/17guantanamo.html>.
- ³⁸⁰ Audrey Gillan, “Hunger Strikers Pledge to Die in Guantanamo,” *The Guardian*, September 8, 2005, <https://www.theguardian.com/world/2005/sep/09/uk.guantanamo>.
- ³⁸¹ Tim Golden, “Guantánamo Detainees Stage Hunger Strike,” *New York Times*, April 9, 2007, <http://www.nytimes.com/2007/04/09/us/09hunger.html?pagewanted=all>.
- ³⁸² Golden, “Hunger Strikers Pledge to Die in Guantanamo.”

³⁸³ Charlie Savage, “Guantánamo Hunger Strike is Largely Over, U.S. Says,” *New York Times*, September 23, 2013, <http://www.nytimes.com/2013/09/24/us/guantanamo-hunger-strike-largely-over-us-says.html>.

³⁸⁴ Twenty-Four Force Fed Captives,” *Miami Herald*, July 17, 2013, <http://www.miamiherald.com/news/nation-world/world/americas/guantanamo/article1950931.html>.

³⁸⁵ Twenty-Four Force Fed Captives,” *Miami Herald*.

³⁸⁶ Associated Press, “Guantánamo Detainees’ Hunger Strikes Will No Longer Be Disclosed by U.S. Military,” *Washington Post*, December 4, 2013, https://www.washingtonpost.com/world/national-security/guantanamo-detainees-hunger-strikes-will-no-longer-be-disclosed-by-us-military/2013/12/04/f6b1aa96-5d24-11e3-bc56-c6ca94801fac_story.html.

³⁸⁷ Michel Foucault, *Discipline and Punish: The Birth of the Prison*, translated by Alan Sheridan (New York: Vintage Press, 1977), 237.

³⁸⁸ For more on the gendered performance of the Irish hunger striker, see Lloyd, *Irish Culture and Colonial Modernity*. In particular, Lloyd thinks through the feminization of the male hunger striker as performative of the sexualized violence that women are always already subjected to both inside and outside of the prison. See also Begoña Aretxaga, *Shattering Silence: Women, Nationalism, and Political Subjectivity in Northern Ireland*, (Princeton: Princeton University Press, 1997). Aretxaga’s text is one of the few feminist ethnographies of the female Irish nationalists held at Armagh prison, where they also participated in The Dirty Protest and hunger strikes. Questions of suffering and vulnerability hold a different valence in this context, particularly with regards to gendered conceptions of hygiene and the place of menstruation throughout The Dirty Protest.

³⁸⁹ Lorna Rhodes, *Total Confinement: Madness and Reason in the Maximum Security Prison* (Berkeley: University of California Press, 2004), 44.

³⁹⁰ Feldman, *Formations of Violence*, 178.

³⁹¹ Lloyd, *Irish Culture and Colonial Modernity*, 154.

³⁹² See Bargu, *Starve and Immolate* for another conception of weaponization. Bargu names the corporeal subjugation of acts such as hunger striking and self-immolation “the weaponization of life.” The weaponization of life brings together the material and the metaphysical in Bargu’s formulation. “The body,” she writes, “is utilized as the conduit of a political intervention,” yet the intervention cannot be simply reduced to the corporeality of the body. In this sense, the weaponization of life presents a paradox whereby the body is a necessary intermediary to achieving certain political ends at the same time that its necessary destruction “defies the distinction between means and ends and obliterates instrumental rationality” (16).

³⁹³ Fletcher et al, *The Guantánamo Effect*, 76.

³⁹⁴ Fletcher et al, *The Guantánamo Effect*, 76.

³⁹⁵ Carol Rosenberg, “Waste Wars: Captives ‘Weaponize’ Bodily Fluids,” *Miami Herald*, June 14, 2011, <http://www.miamiherald.com/latest-news/article1938250.html>.

³⁹⁶ Fletcher et al, *The Guantánamo Effect*, 76.

³⁹⁷ Julia Kristeva, *Powers of Horror: An Essay on Abjection* (New York: Columbia University Press, 1982), 1, emphasis in original.

³⁹⁸ Juana María Rodríguez, *Sexual Futures, Queer Gestures, and Other Latina Longings* (New York: NYU Press, 2014), 141. In particular, Rodríguez is interested in what a racialized and gendered abjection looks like. For her, there is something in fantasies that center one’s own

racial abjection, enabling minoritized subjects such as the Latina femme to imagine new sexual/social futures. For more on racialized abjection, see Darieck Scott, *Extravagant Abjection: Blackness, Power, and Sexuality in the African American Literary Imagination* (New York: NYU Press, 2010).

³⁹⁹ The relationship between capacity, incapacity, and disability is taken up provocatively by Jasbir Puar, “The Cost of Getting Better: Ability and Debility,” in *The Disability Studies Reader*, eds. Lennard J. Davis, 177–184 (New York: Routledge Press, 2013). She suggests, “capacity and debility are seeming opposites generated by increasingly demanding neoliberal formulations of health, agency, and choice” (180).

⁴⁰⁰ Anderson, *So Much Wasted*, 114.

⁴⁰¹ Daniel Summers, “Rectal Feeding Has Nothing to Do with Nutrition, Everything to Do with Torture,” *Daily Beast*, December 10, 2014, <https://www.thedailybeast.com/rectal-feeding-has-nothing-to-do-with-nutrition-everything-to-do-with-torture>.

⁴⁰² Senate Select Committee, *Report on Torture*, 107.

⁴⁰³ Feldman, *Formations of Violence*, 181.

⁴⁰⁴ Lloyd, *Irish Culture and Colonial Modernity*, 153.

⁴⁰⁵ For more on how queerness and anal sex come to be associated with death, see Leo Bersani, “Is the Rectum a Grave?” *October* 43 (1987):197–22.

⁴⁰⁶ For more on the history of tube feedings, see Eric Aadhaar O’Gorman, *Complete Tubefeeding: Everything You Need to Know about Tubefeeding, Tube Nutrition, and Blended Diets* (Scotts Valley, CA: CreateSpace Independent Publishing Platform, 2012).

⁴⁰⁷ Senate Select Committee, *Report on Torture*, 84.

⁴⁰⁸ Carol Rosenberg, “Lawyer: ‘Sodomized’ Guantánamo Captive Recovering After Surgery. Prison: No Comment,” *Miami Herald*, October 13, 2016, <http://www.miamiherald.com/news/nation-world/world/americas/guantanamo/article108484372.html>.

⁴⁰⁹ Rosenberg, “Lawyer: ‘Sodomized’ Guantánamo Captive Recovering After Surgery.”

⁴¹⁰ Nayan Shah, “Between ‘Oriental Depravity’ and ‘Natural Degenerates’: Spatial Borderlands and the Making of Ordinary Americans,” *American Quarterly* 57, no. 3 (2005): 703–725, 707.

⁴¹¹ Puar, *Terrorist Assemblages*, 87.

⁴¹² Marnia Lazreg, *Torture and the Twilight of Empire: From Algiers to Baghdad* (New Jersey: Princeton University Press, 2008), 128.

⁴¹³ Lazreg, *Torture and the Twilight of Empire*, 143.

⁴¹⁴ Lloyd, *Irish Culture and Colonial Modernity*, 151.

⁴¹⁵ Lloyd, *Irish Culture and Colonial Modernity*, 162.

⁴¹⁶ Lloyd, *Irish Culture and Colonial Modernity*, 151.

⁴¹⁷ See Ian Miller, *A History of Force Feeding: Hunger Strikes, Prisons and Medical Ethics, 1909-1974* (New York: Palgrave Macmillan, 2016).

⁴¹⁸ Benjamin, “Critique of Violence,” 298.

⁴¹⁹ “Guantánamo by the Numbers,” *ACLU*, May 2018, 2018,

<https://www.aclu.org/issues/nationalsecurity/detention/guantanamo-numbers>.

⁴²⁰ Reprieve US, “Guantanamo Hunger Striker asks US Courts Save His Life,” *Reprieve*, October 17, 2017, <https://reprieve.org/2017/10/17/guantanamo-hunger-striker-asks-us-courts-save-life/>.

⁴²¹ Lakhdar Boumediene, “I Was Force-Fed at Guantanamo. What Guards Are Doing Now is Worse,” *New Republic*, October 30, 2017, <https://newrepublic.com/article/145549/force-fed-guantanamo-guards-now-worse>.

⁴²² Patrick Anderson, “There Will Be No Bobby Sands at Guantánamo Bay,” *PMLA* 124, no. 5 (2009): 1729–1736, 1733.

⁴²³ Anderson, “There Will Be No Bobby Sands,” 1734.

⁴²⁴ Alexander Weheliye, *Habeas Viscus: Racializing Assemblages, Biopolitics, and Black Feminist Theories of the Human* (Durham, NC: Duke University Press, 2014), 12.

⁴²⁵ Walter Benjamin, *On Concept of History*, in *Walter Benjamin: Selected Writings, Volume 4: 1938-1940*, edited by Howard Eiland and Michael W. Jennings (Cambridge, MA: Belknap Press of Harvard University Press, 2006), 389–400, 397.

⁴²⁶ For more on the temporality of abolition see Stephen Dillon, *Fugitive Life: The Queer Politics of the Prison State* (Durham: Duke University Press, 2018); Angela Davis, *Freedom is a Constant Struggle: Ferguson, Palestine, and the Foundations of a Movement* (Chicago, IL: Haymarket Books, 2016); Lisa Guenther, *Solitary Confinement: Social Death and its Afterlives* (Minneapolis: University of Minnesota Press, 2013); Ruth Wilson Gilmore, *Golden Gulag: Prisons, Surplus, Crisis, and Opposition in Globalizing California* (Berkeley: University of California Press, 2007).

⁴²⁷ *Hunger*. Directed by Steve McQueen. Maple Pictures. 2008.

⁴²⁸ Giorgio Agamben, *Remnants of Auschwitz: The Witness and the Archive* translated by Daniel Heller-Roazen (New York: Zone Books, 2002).

⁴²⁹ For more on the representational politics of *Hunger* see David Lloyd, *Irish Culture and Colonial Modernity 1800-2000: The Transformation of Oral Space* (Cambridge, UK: Cambridge University Press, 2011). Lloyd comments that *Hunger* captures Sands in an “almost transcendental light.” Indeed, Sands’s final moments, are extremely aestheticized and as such, Lloyd argues, “endorses the ethical view of the priest who debates Sand’s decision ... The charge that this sacrilegious act of suicide is borne out precisely in the erasure of its collective aspect” (156). True, *Hunger* at times offers a less balanced portrayal of how the incapacitating conditions inside the prison were experienced collectively, rather than solely by Sands. Such representation risks not only mythologizing individuals, but erases the organization that went into the strike, both inside and outside of Maze.

Also see Patrick Anderson’s *So Much Wasted: Hunger, Performance, and the Morbidity of Resistance* (Durham, NC: Duke University Press, 2010). Anderson brings up a similar critique to Lloyd with regards to the iconicity that can follow individuals after a famous hunger strike. Anderson’s case study is the Turkish death fast of the early 2000s and he notes the particularity of this strike as it was able to avoid romanticizing individuals. He suggests that the coalition and not the individual was “the primary unit of political action and signification.” Rather than mythologize individuals the ways that Bobby Sands, Mahatma Gandhi, and Caser Chavez have been, this strike instead focused on political subjectivity of those incarcerated, enabling the “multiple solidarities epitomized by the Turkish strikers produced and reflected subjects deeply connected to their political community despite the potential for what is essentially a highly individualized consequence of striking: death” (113–14).

⁴³⁰ Carol Rosenberg, “Guantánamo Bay as Nursing Home: Military Envisions Hospice Care as Terrorism Suspects Age,” *New York Times*, April 27, 2019, <https://www.nytimes.com/2019/04/27/us/politics/guantanamo-bay-aging-terrorism-suspects-medical-care.html>.

⁴³¹ See Rosenberg, “Guantánamo Bay as Nursing Home.”

⁴³² For more on the history of hospice see Haider Warrich, *Modern Death: How Medicine Changed the End of Life* (New York: St. Martin’s Press, 2017).

⁴³³ Ann Neumann, *The Good Death: An Exploration of Dying in America* (Massachusetts: Beacon Press, 2016).

⁴³⁴ See Rosenberg, “Guantánamo Bay as Nursing Home.”

⁴³⁵ Lauren Berlant, *Cruel Optimism* (Durham: Duke University Press, 2011), 95.

Bibliography

- Aamer, Shaker. "I Want to Hug My Children and Watch them as They Grow." *The Guardian*, April 20, 2013. <https://www.theguardian.com/world/2013/apr/21/shaker-aamer-guantanamo-bay>.
- Agamben, Giorgio. *State of Exception*. Translated by Kevin Attell. Chicago, IL: University of Chicago Press, 2005.
- Agamben, Giorgio. *Remnants of Auschwitz: The Witness and the Archive*. Translated by Daniel Heller-Roazen. New York: Zone Books, 2002.
- Agamben, Giorgio. *Homo Sacer: Sovereign Power and Bare Life*. Translated by Daniel Heller-Roazen. Palo Alto, CA: Stanford University Press, 1998.
- Aggarwal, Neil Krishan. *Mental Health in the War on Terror*. New York: Columbia University Press, 2015.
- Ahuja, Neel. "Abu Zubaydah and the Caterpillar." *Social Text* 29, no. 1 (2011): 127–49.
- Allen, Scott, MD, and Sarah Dougherty, JD, MPH. *Nuremberg Betrayed: Human Experimentation and the CIA Torture Program*. Physicians for Human Rights, June 2017, <https://phr.org/resources/nuremberg-betrayed-human-experimentation-and-the-ciatorture-program/>.
- American Psychological Association. *Report of the American Psychological Association Presidential Task Force on Psychological Ethics and National Security*. June 2005. <https://www.thenation.com/wp-content/uploads/2015/05/pens.pdf>.
- Anderson, Patrick. *So Much Wasted: Hunger, Performance, and the Morbidity of Resistance*. Durham, NC: Duke University Press, 2010.
- Anderson, Patrick. "There Will Be No Bobby Sands at Guantánamo Bay." *PMLA* 124, no. 5 (2009) 1729–36.
- Anderson, Patrick. "On Feeding Tubes." *Drama Review* 49, no. 3 (2005): 5–9.
- APA Watch: Alliance for an Ethical APA*. "FAQS about NBI 35B (Abridged)." <http://allianceforanethicalapa.com/>.
- "Appeal Filed to Restore Terri's Feeding Tube." *Fox News*, March 22, 2005. <https://www.foxnews.com/story/appeal-filed-to-restore-terris-feeding-tube>.
- Appel, Jacob. "Rethinking Force-Feeding: Legal and Ethical Aspects of Physician Participation in the Termination of Hunger Strikes in American Prisons." *Public Affairs* 26 (2012): 313–35.

- Aretxaga, Begoña. *Shattering Silence: Women, Nationalism, and Political Subjectivity in Northern Ireland*. Princeton: Princeton University Press, 1997.
- Armstrong, David. "Actors, Patients and Agency." *Sociology of Health and Illness* 36, no. 2 (2014): 163–74.
- Asad, Talal. *On Suicide Bombing*. New York: Columbia University Press, 2007.
- Asad, Talal. *Formations of the Secular: Christianity, Islam, Modernity*. Stanford: Stanford University Press, 2003.
- Associated Press. "Guantánamo Detainees' Hunger Strikes Will No Longer Be Disclosed by U.S. Military." *Washington Post*, December 4, 2013. https://www.washingtonpost.com/world/national-security/guantanamo-detainees-hunger-strikes-will-no-longer-be-disclosed-by-us-military/2013/12/04/f6b1aa96-5d24-11e3bc56-c6ca94801fac_story.html.
- Azoulay, Ariella. *The Civil Contract of Photography*. New York: Zone Books, 2008.
- Bargu, Banu. *Starve and Immolate: The Politics of Human Weapons*. New York: Columbia University Press, 2014.
- Bargu, Banu. "Spectacles of Death: Dignity, Dissent, and Sacrifice in Turkey's Prisons." In *Policing and Prisons in the Middle East: Formations of Coercion*, edited by Laleh Khalili and Jillian Schwedler, 241–261. New York: Columbia University Press, 2010.
- Barnett, David. "A History of Hunger Strikes: From the Suffragettes to Guantánamo." *Independent*, December 2, 2018. https://www.independent.co.uk/news/long_reads/gus-hales-hunger-strike-protest-ira-maze-prison-ukraine-suffragettes-guantanamo-a8648936.html.
- Barthes, Roland. *Camera Lucida: Reflections on Photography*. New York: Hill and Wang, 1980.
- Başoğlu, Metin. "Introduction," in *Torture and Its Definition in International Law: An Interdisciplinary Approach*. New York: Oxford University Press, 2017.
- Beauchamp, Tom L., and James F. Childress. *Principles of Biomedical Ethics*. New York: Oxford University Press, 1994.
- Benjamin, Walter. "On Concept of History." In *Walter Benjamin: Selected Writings, Volume 4: 1938-1940*, edited by Howard Eiland and Michael W. Jennings, 389–400. Cambridge, MA: Belknap Press of Harvard University Press, 2006.
- Benjamin, Walter. "Critique of Violence." In *Reflections: Essay, Aphorisms, Autobiographical Writings*, 277–300. New York: Schocken Books, 1986.

- Bersani, Leo. "Is the Rectum a Grave?" *October* 43 (1987): 197–22.
- Biderman, Albert, and Herbert Zimmer. *The Manipulation of Human Behavior*. New York: John Wiley & Sons, 1961.
- Boltanski, Luc. *Distant Suffering: Politics, Morality and the Media*. Cambridge: Cambridge University Press, 1999.
- Boumediene, Lakhdar. "I Was Force-Fed at Guantanamo. What Guards Are Doing Now Is Worse." *New Republic*, October 30, 2017. <https://newrepublic.com/article/145549/force-fed-guantanamo-guards-now-worse>.
- Branigin, William. "Six Gtmo Inmates Hurt in Fight with Guards." *Washington Post*, May 19, 2006. <http://www.washingtonpost.com/wp-dyn/content/article/2006/05/19/AR2006051900605.html>.
- Braun, Lundy. *Breathing Race in the Machine: The Surprising Career of the Spirometer from Plantation to Genetics*. Minneapolis: University of Minnesota Press, 2014.
- Brundage, Fitzhugh W. *Civilizing Torture: An American Tradition*. Cambridge, MA: Belknap Press of Harvard University Press, 2018.
- Butler, Judith. *Frames of War: When Is Life Grievable?* New York: Verso, 2010.
- California Correctional Health Care Services. "CCHCS Hunger Strike, Fasting, and Refeeding Care Guide." July 2013. <https://cchcs.ca.gov/wp-content/uploads/sites/60/2017/08/MassHungerStrikeCareGuide.pdf>.
- Campt, Tina M. "Black Visuality and the Practice of Refusal." *Women and Performance* 29, no. 1 (2019): 79–87.
- Campt, Tina M. *Listening to Images*. Durham: Duke University Press, 2017.
- Central Intelligence Agency. *The CIA Document of Human Manipulation: KUBARK Counterintelligence Interrogation Manual*. La Vergne, TN: BN Publishing, 2012.
- Cerminara, Kathy L. "The *Schiavo* Maelstrom's Potential Impact on the Law of End-of-Life Decision Making." In *The Case of Terri Schiavo: Ethics, Politics, and Death in the 21st Century*, edited by Kenneth Goodman, 78–100. NY: Oxford University Press, 2009.
- Chen, Mel. *Animacies: Biopolitics, Racial Mattering, and Queer Affect*. Durham, NC: Duke University Press, 2012.
- Chernoff, Ronnie, PHD, RD. "An Overview of Tube Feeding: From Ancient Times to the Future." *Nutrition in Clinical Practice* 21, no. 5 (2006): 408–410.

- Chouliaraki, Lilie. *The Spectatorship of Suffering*. London: Sage Publications, 2006.
- Clare, Eli. *Brilliant Imperfection: Grappling with Cure*. Durham, NC: Duke University Press, 2017.
- Constantine, Alex. *Psychic Dictatorship in the U.S.A.* Port Townsend, WA: Feral House, 1995.
- Constitution Project. *Report of the Constitution Project's Task Force on Detainee Treatment*. Washington, DC: Constitution Project, 2013.
- Cresci, Gail, MS, RD, CNSD, LD, and John Mellinger, MD. "The History of Nonsurgical Enteral Tube Feeding Access." *Nutrition in Clinical Practice* 21, no. 5 (2006): 522–28.
- Cruzan v. Dir., Mo. Dep't of Health*, 497 U.S. 261 (1990).
- Davis, Angela Y. *Freedom is a Constant Struggle: Ferguson, Palestine, and the Foundations of a Movement*. Chicago, IL: Haymarket Books, 2016.
- Dayan, Colin. "With Law at the Edge of Life." *South Atlantic Quarterly* 113, no. 3 (2014): 629–39.
- Dayan, Colin. *The Law Is a White Dog: How Legal Rituals Make and Unmake Persons*. Princeton: Princeton University Press, 2013.
- Dayan, Colin (Joan). "Legal Slaves and Civil Bodies." *Nepantla: Views from the South* 2, no. 1 (2001): 3–39.
- Diedrich, Lisa. "Practices of Doctoring: Enacting Medical Experience." In *Rebirth of the Clinic: Places and Agents in Contemporary Health Care*, edited by Christine Ceci and Suzanne Fraser, 143–68. Minneapolis: University of Minnesota Press, 2010.
- Diedrich, Lisa. *Treatments: Language, Politics, and the Culture of Illness*. Minneapolis: University of Minnesota Press, 2007.
- Dillon, Stephen. *Fugitive Life: The Queer Politics of the Prison State*. Durham, NC: Duke University Press, 2018.
- Eban, Katherine. "Rorschach and Awe." *Vanity Fair*, July 2007.
<https://www.vanityfair.com/news/2007/07/torture200707>.
- Esmeir, Samera. *Juridical Humanity: A Colonial History*. Stanford: Stanford University Press, 2012.
- Estabrooks, G. H. "Hypnosis Comes of Age." *Science Digest* (1971): 44–50.

- Estelle v. Gamble*, 429 U.S. 97 (1976).
- Fanon, Frantz. *Black Skin, White Masks*. New York: Grove Press, 1967.
- Feldman, Keith. “#notabugsplat: Becoming Human on the Terrain of Visual Culture.” In *The Routledge Companion to Literature and Human Rights*, edited by Sophia McClennen and Ali Schultheis Moore, 224–232. London, UK: Routledge, 2016.
- Feldman, Allen. *Formations of Violence: The Narrative of the Body and Political Terror in Northern Ireland*. Chicago: University of Chicago Press, 1991.
- Fink, Sheri. “Settlement Reached in C.I.A. Torture Case.” *New York Times*, August 17, 2017. <https://www.nytimes.com/2017/08/17/us/cia-torture-lawsuit-settlement.html>.
- Fink, Sheri, and James Risen. “Psychologists Open a Window on Brutal C.I.A. Interrogations.” *New York Times*, June 21, 2017. <https://www.nytimes.com/interactive/2017/06/20/us/cia-torture.html>.
- Fink, Sheri. “Where Even Nightmares Are Classified: Psychiatric Care at Guantanamo.” *New York Times*, November 12, 2016. <https://www.nytimes.com/2016/11/13/world/guantanamo-bay-doctors-abuse.html>.
- Fiore, Robin N. “Framing Terri Schiavo: Gender, Disability, and Fetal Protection.” In *The Case of Terri Schiavo: Ethics, Politics, and Death in the 21st Century*, edited by Kenneth Goodman, 191–209. New York: Oxford University Press, 2009.
- Fletcher, Laurel E., Eric Stover, Stephen Paul Smith, and Patricia M. Wald. *The Guantánamo Effect: Exposing the Consequences of U.S. Detention and Interrogation Practices*. Berkeley: University of California Press, 2009.
- Foucault, Michel. *The History of Sexuality: An Introduction, vol. I*. Translated by Robert Hurley. New York: Vintage, 1999.
- Foucault, Michel. “*Society Must Be Defended*”: *Lectures at the College de France 1975–1976*. Translated by David Macey. New York: Picador, 1997.
- Foucault, Michel. *Discipline and Punish: The Birth of the Prison*. Translated by Alan Sheridan. New York: Vintage, 1977.
- Fox, Ben. “U.S. Military Limits Media Access to Guantánamo Prison.” *Miami Herald*, December 17, 2015. <http://www.miamiherald.com/news/nation/world/world/americas/guantanamo/article50358355.html>.
- Freud, Sigmund. *Group Psychology and the Analysis of the Ego*. New York: W. W. Norton and Company, 1990.

- Friedman, Uri. "When a Government Declares Memories Classified." *The Atlantic*, June 12, 2015. <https://www.theatlantic.com/politics/archive/2015/06/cia-torture-classified-memory/395657/>.
- Fugh-Berman, Adriane, "Feeding the Comatose Patient." *Washington Post*, June 26, 1990. https://www.washingtonpost.com/archive/lifestyle/wellness/1990/06/26/feeding-the-comatose-patient/25afbd5a-f2a8-41b1-a8e7-b065b07e8949/?utm_term=.60dfc79f037c.
- Gamio, Lazaro, and Carol Rosenberg. "Tracking the Hunger Strike." *Miami Herald*, http://media.miamiherald.com/static/media/projects/gitmo_chart/.
- Gastmans, Chris, ed. *Between Technology and Humanity: The Impact of Technology on Health Care Ethics*. Leuven, Belgium: Leuven University Press, 2002.
- Gillan, Audrey. "Hunger Strikers Pledge to Die in Guantanamo." *The Guardian*, September 8, 2005. <https://www.theguardian.com/world/2005/sep/09/uk.guantanamo>.
- Gilmore, Ruth Wilson. *Golden Gulag: Prisons, Surplus, Crisis, and Opposition in Globalizing California*. Berkeley: University of California Press, 2007.
- Golden, Tim. "Guantánamo Detainees Stage Hunger Strike." *New York Times*, April 9, 2007. <http://www.nytimes.com/2007/04/09/us/09hunger.html?pagewanted=all>.
- Golden, Tim. "The Battle for Guantánamo." *New York Times*, September 17, 2006. <http://www.nytimes.com/2006/09/17/magazine/17guantanamo.html>.
- Goodman, Amy. "Freed Gitmo Prisoner Jihad Abu Wa'el Dhiab Speaks as Pres. Candidates to Debate Terrorism." *Democracy Now!*, September 26, 2016. www.democracynow.org/2016/9/26/exclusive_freed_gitmo_prisoner_jihad_abu.
- Goodman, Kenneth. "Terri Schiavo and the Culture Wars: Ethics vs. Politics." In *The Case of Terri Schiavo: Ethics, Politics, and Death in the 21st Century*, edited by Kenneth Goodman, 1–38. New York: Oxford University Press, 2009.
- Goodnough, Abby, and Carl Hulse. "Despite Congress, Woman's Feeding Tube is Removed." *New York Times*, March 19, 2005. <https://www.nytimes.com/2005/03/19/us/despite-congress-womans-feeding-tube-is-removed.html>.
- Greenberg, Karen. *The Least Worst Place: Guantanamo's First 100 Days*. New York: Oxford University Press, 2009.
- "Guantánamo by the Numbers." *ACLU*, May 2018, 2018. <https://www.aclu.org/issues/nationalsecurity/detention/guantanamo-numbers>.

- Guenther, Lisa. "A Critical Phenomenology of Solidarity and Resistance in the 2013 California Prison Hunger Strikes." In *Body/Self/Other: The Phenomenology of Social Encounters*, edited by Luna Dolezal and Danielle Petherbridge, 47–74. Albany, NY: SUNY Press, 2017.
- Guenther, Lisa. *Solitary Confinement: Social Death and its Afterlives*. Minneapolis: University of Minnesota Press, 2013.
- Hajjar, Lisa. "How the World's Largest Psychological Association Aided the CIA's Torture Program." *The Nation*, May 7, 2015. <https://www.thenation.com/article/how-worlds-largest-psychological-association-aided-cias-torture-program/>.
- Haraway, Donna. "A Cyborg Manifesto: Science, Technology, and Socialist Feminism in the Late Twentieth Century." In *Simians, Cyborgs and Women: The Reinvention of Nature*, 149–82. New York: Routledge, 1990.
- Harkinson, Josh, and Maggie Caldwell. "50 Days Without Food: The California Prison Hunger Strike Explained." *Mother Jones*, August 27, 2013. <https://www.motherjones.com/politics/2013/08/50-days-california-prisons-hunger-strike-explainer/>.
- Hartman, Saidiya V. *Scenes of Subjection: Terror, Slavery, and Self-Making in Nineteenth Century America*. New York: Oxford University Press, 1997.
- Heron, Woodburn. "The Pathology of Boredom." *Scientific American* 196, no. 1 (1957): 52–57.
- Hickman, Joseph. *Murder at Camp Delta: A Staff Sergeant's Pursuit of the Truth about Guantánamo Bay*. New York: Simon & Schuster, 2015.
- Hinkle, Lawrence, and Harold Wolff. "Communist Interrogation and Indoctrination of 'Enemies of the States': An Analysis of Methods Used by the Communist State Police." *Archives of Neurology and Psychiatry* (1956): 115–174.
- Horton, Scott. "'The Guantánamo Suicides': A Camp Delta Sergeant Blows the Whistle." *Harpers Magazine*, March 2010. <http://harpers.org/archive/2010/03/the-guantanamo-suicides/>.
- Howell, Alison. "Victims or Madmen? The Diagnostic Competition over 'Terrorist' Detainees at Guantánamo Bay." *International Political Sociology* 1, (2007): 29–47.
- Hook, C. Christopher, and Paul S. Mueller. "The Terri Schiavo Saga: The Making of a Tragedy and Lessons Learned." *Mayo Clinic Proceedings* 80, no. 11 (2005): 1449–60.
- Hsu, Spencer S. "Judge Again Orders U.S. to Release Guantanamo Bay Force-Feeding Videos." *Washington Post*, October 27, 2015. <http://www.washingtonpost.com/local/public>

safety/judge-again-orders-us-to-release-guantanamo-bay-force-feeding-videos/2015/10/27/6b46bfc8-7cd5-11e5-beba-927fd8634498_story.html.

Hunger. Directed by Steve McQueen. Maple Pictures. 2008.

International Committee of the Red Cross. *ICRC Report on the Treatment of Fourteen "High Value Detainees" in CIA Custody*. February 2007.
<https://www.nybooks.com/media/doc/2010/04/22/icrc-report.pdf>.

Johnson, Joe. "Inmate Strike Sparks Health Risks, Concerns." *Hanford Sentinel*, August 16, 2013. https://hanfordsentinel.com/news/local/crime-and-courts/inmate-strike-sparks-health-risks-concerns/article_b3e9108e-06bf-11e3-96ad-0019bb2963f4.html.

Joint Task Force Guantanamo Bay, Cuba, Joint Medical Group. *Medical Management of Detainees on Hunger Strike*, SOP: JTF-JMG. 2013.

Kafer, Alison. *Feminist Queer Crip*. Bloomington: Indiana University Press, 2013.

Kaplan, Amy. "Where Is Guantánamo?" *American Quarterly* 57, no. 3 (September 2005): 831–858.

Kaufman, Sharon R. *Ordinary Medicine: Extraordinary Treatments, Longer Lives, and Where to Draw the Line*. Durham, NC: Duke University Press, 2015.

Kaye, Jeffrey, and H. P. Albarelli Jr. "Cries from the Past: Torture's Ugly Echoes." *Truthout*, May 23, 2010. <http://truth-out.org/archive/component/k2/item/89725:cries-from-the-past-tortures-ugly-echoes>.

Keller, Michael, and Jason Leopold. "A Guide to Hunger Strikes at Guantánamo Bay." *Aljazeera America*, September 26, 2013.
<http://america.aljazeera.com/articles/multimedia/guantanamo-hungerstriketimeline.html#timeline-event=strike-2002-01-25>.

Khalili, Laleh. *Time in the Shadows: Confinement in Counterinsurgencies*. Stanford: Stanford University Press, 2013.

Klapper, Bradley, and Ken Dilanian. "Senate Report: Harsh CIA Tactics Didn't Work." *Seattle Times*, December 10, 2014. <https://www.seattletimes.com/nation-world/senate-report-harsh-cia-tactics-didnt-work/>.

Kouzminov, Alexander. *Biological Espionage: Special Operations of the Soviet and Russian Foreign Intelligence Services in the West*. London: Greenhill Books, 2006.

Kristeva, Julia. *Powers of Horror: An Essay on Abjection*. New York: Columbia University Press, 1982.

- Landecker, Hannah. "Immortality, In Vitro: A History of the HeLa Cell Line." In *Biotechnology and Culture: Bodies, Anxieties, Ethics*. Bloomington, edited by Paul Brodwin, 53–72. Bloomington: Indiana University Press, 2000.
- Latour, Bruno. "Mixing Humans and Non-Humans Together: Sociology of a Door Closer." *Social Problems* 35, no. 3 (1988): 298–310.
- Latour, Bruno. *Science in Action*. Cambridge, MA: Harvard University Press, 1987.
- Lazreg, Marnia. *Torture and the Twilight of Empire: From Algiers to Baghdad*. Princeton, NJ: Princeton University Press, 2008.
- Lederer, Susan E. *Subjected to Science: Human Experimentation in America Before the Second World War*. Baltimore: John Hopkins University Press, 2007.
- Lee, Martin A., and Bruce Shlain. *Acid Dreams: The Complete Social History of LSD, the CIA, the Sixties, and Beyond*. New York: Grove Press, 1992.
- Leopold, Jason. "Revised Guantanamo Force-Feed Policy Exposed." *Al Jazeera*, May 13, 2013. www.aljazeera.com/humanrights/2013/05/201358152317954140.html.
- Leopold, Jason. "A Guantánamo Prisoner is Buried as New Details About His Death Begin to Surface." *Truthout*, January 11, 2013. <http://www.truth-out.org/news/item/13818-guantanamo-prisoner-buried-new-details-death-surface>.
- Lifton, Robert J. "Chinese Communist 'Thought Reform': Confession and Re-Education of Western Civilians." *Bull NY Acad Med.* 33, no. 9 (1957): 626–644.
- Lipman, Jana K. *Guantánamo: A Working-Class History between Empire and Revolution*. Berkeley: University of California Press, 2009.
- Lloyd, David. *Irish Culture and Colonial Modernity 1800–2000: The Transformation of Oral Space*. Cambridge, UK: Cambridge University Press, 2011.
- Madrid v. Gomez*, 889, F. Supp., at 1146 (N.D. Cal. 1995).
- Malabou, Catherine. *The New Wounded: From Neurosis to Brain Damage*. Translated by Steven Miller. New York: Fordham University Press, 2012.
- Mareiniss, Darren P. "A Comparison of Cruzan and Schiavo: The Burden of Proof, Due Process, and Autonomy in the Persistently Vegetative Patient." *Journal of Legal Medicine* 26 (2005): 233–59.
- Martel, James. *The One and Only Law: Walter Benjamin and the Second Commandment*. Ann Arbor, University of Michigan Press, 2014.

- McCoy, Alfred. *A Question of Torture: CIA Interrogation from the Cold War to the War on Terror*. New York: Metropolitan Books, 2006.
- McClintock, Anne. "Paranoid Empire: Specters from Guantánamo and Abu Ghraib." *Small Axe* 28 (March 2009): 50–74.
- Mehta, Uday Singh, *Liberalism and Empire: A Study in Nineteenth-Century British Liberal Thought*. Chicago, IL: The University of Chicago Press, 1999.
- Mengesha, Lilian G., and Lakshmi Padmanabhan. "Introduction to Performing Refusal/Refusing to Perform." *Women and Performance* 29, no. 1 (2019): 1–8.
- Merleau-Ponty, Maurice. *The Phenomenology of Perception*. New York: Routledge 2014.
- Merleau-Ponty, Maurice. *Humanism and Terror: The Communist Problem*. Translated by John O'Neill. New Brunswick: Transaction Publishers, 1969.
- Miles, Steven. *Oath Betrayed: Terror, Medical Complicity, and the War on Terror*. New York: Random House, 2006.
- Miller, Terri Beth. "Reading the Body of Terri Schiavo: Inscriptions of Power in Medical and Legal Discourse." *Literature and Medicine* 28, no. 1 (2009): 33–54.
- Miles, Steven H., and Allison August. "Courts, Gender, and the Right-to-Die." *Law, Medicine and Health Care* 18, no. 1–2 (1990): 85–95.
- Miller, Ian. *A History of Force Feeding: Hunger Strikes, Prisons and Medical Ethics, 1909–1974*. New York: Palgrave Macmillan, 2016.
- Mirzoeff, Nicholas. *The Right to Look: A Counterhistory of Visuality*. Durham, NC: Duke University Press, 2011.
- Mitchell, Luke. "God Mode." *Harper's Weekly*, August 9–11, 2006.
<https://harpers.org/archive/2006/08/god-mode/>.
- Moqbel, Samir Naji al Hasan. "Gitmo is Killing Me." *New York Times*, April 14, 2013.
<http://www.nytimes.com/2013/04/15/opinion/hunger-striking-at-guantanamo-bay.html>.
- Moon, Claire. "What One Sees and How One Files Seeing: Human Rights Reporting, Representation and Action." *Sociology* 46, no. 5 (2012): 876–90.
- Moten, Fred. "Black Mo'nin'." In *Loss: The Politics of Mourning*, edited by David L. Eng and David Kazanjian, 59–76. Berkeley: University of California Press, 2003.
- Neumann, Ann. *The Good Death: An Exploration of Dying in America*. Massachusetts: Beacon Press, 2016.

- Neumann, Ann. "The Limits of Autonomy: Force-Feedings in Catholic Hospitals and Prisons." *New York Law Review* 58 (2013/14): 305–318.
- Neumann, Ann. "The Longest Hunger Strike." *Guernica*, January 15, 2013. <http://www.guernicamag.com/features/the-longest-hunger-strike/>.
- Norman, Julie. "Five Myths about the Palestinian Hunger Strike." *Washington Post*, April 26, 2017. https://www.washingtonpost.com/news/monkey-cage/wp/2017/04/26/five-myths-about-the-palestinian-hunger-strike/?utm_term=.13c3cbe4d2e4.
- Northam, Jackie. "Guantánamo Detainees Attempted Mass Suicide in 2003." *NPR*, January 24, 2005. <http://www.npr.org/templates/story/story.php?storyId=4464452>.
- O’Gorman, Eric Aadhaar. *Complete Tubefeeding: Everything You Need to Know about Tubefeeding, Tube Nutrition, and Blended Diets*. Scotts Valley, CA: CreateSpace Independent Publishing Platform, 2012.
- Olshansky, Barbara, and Gitanjali Gutierrez. "The Guantánamo Prisoner Hunger Strikes and Protests: February 2002–August 2005." *The Center for Constitutional Rights*, 2005. <http://www.ccr-ny.org>.
- Owens, Deirdre Cooper. *Medical Bondage: Race, Gender, and the Origins of American Gynecology*. Athens, GA: University of Georgia Press, 2018.
- Paik, A. Naomi. *Rightlessness: Testimony and Redress in U.S. Prison Camps Since World War II*. Chapel Hill: The University of North Carolina Press, 2016.
- Paik, A. Naomi. "The ‘Visible Scapegoats’ of U.S. Imperialism: HIV Positive Haitian Refugees and Carceral Quarantine at Guantánamo Bay." *Work & Culture* 4 (2006): 1–22.
- Patel, Shaista. "Racing Madness: The Terrorizing Madness of the Post-9/11 Terrorist Body." In *Disability Incarcerated: Imprisonment and Disability in the United States and Canada*, edited by Liat Ben-Moshe, Chris Chapman, and Allison Carey, 201–216. New York: Palgrave Macmillan, 2014.
- Patai, Raphael. *The Arab Mind*. Tucson, AZ: Recovery Resources Press, 1973.
- Phelan, Peggy. *Unmarked: The Politics of Performance*. New York: Routledge, 1993.
- Plummer, Nancy, R.N. *Tube Feedings*. Indianapolis: Vocational Educational Services, 1983.
- Puar, Jasbir. *The Right to Maim: Debility, Capacity, Disability*. Durham, NC: Duke University Press, 2017.
- Puar, Jasbir. "Inhumanist Occupation: Palestine and the ‘Right to Maim.’" *GLQ: A Journal of*

- Lesbian and Gay Studies* 21, nos. 2–3 (2015): 218–221.
- Puar, Jasbir. “The Cost of Getting Better: Ability and Debility.” In *The Disability Studies Reader*, edited by Lennard J. Davis, 177–184. New York: Routledge Press, 2013.
- Puar, Jasbir. *Terrorist Assemblages: Homonationalism in Queer Times*. Durham, NC: Duke University Press, 2007.
- Plata v. Brown*, Case No. Co1–1351, TEH.
- Ratner, Michael, and Ellen Ray. *Guantánamo: What the World Should Know*. White River Junction, VT: Chelsea Green Press, 2004.
- Reiter, Keramet. *23/7: Pelican Bay Prison and the Rise of Long-Term Solitary Confinement*. New Haven, CT: Yale University Press, 2016.
- Rejali, Darius. *Torture and Democracy*. Princeton, NJ: Princeton University Press, 2009.
- Reprieve US. “Guantanamo Hunger Striker asks US Courts Save His Life.” October 17, 2017. <https://reprieve.org/2017/10/17/guantanamo-hunger-striker-asks-us-courts-save-life/>.
- Reprieve US. “Yasiin Bey Force-Feeding Video Launches Campaign to Support Guantanamo Hunger-Strikers,” July 8, 2013, reprieve.org.uk/press/2013_07_08_guantanamo_force_feeding_yasiin_bey/.
- Rhodes, Lorna. *Total Confinement: Madness and Reason in the Maximum Security Prison*. Berkeley: University of California Press, 2004.
- Rhodes, Lorna. “Panoptical Intimacies.” *Public Culture* 10, no. 2 (1998): 285–311.
- Risen, James. “American Psychological Association Bolstered C.I.A. Torture Program, Report Says.” *New York Times*, April 30, 2015. <https://www.nytimes.com/2015/05/01/us/report-says-american-psychological-association-collaborated-on-torture-justification.html>.
- Risen, James, and Tim Golden. “3 Prisoners Commit Suicide at Guantánamo.” *New York Times*, June 11, 2006. <http://www.nytimes.com/2006/06/11/us/11gitmo.html>.
- Roberts, Dorothy. *Killing the Black Body: Race, Reproduction, and the Meaning of Liberty*. New York: Vintage Books, 1998.
- Robinson, Daniel N. “Schiavo, Privacy, and the Interests of Law.” In *The Case of Terri Schiavo: Ethics, Politics, and Death in the 21st Century*, edited by Kenneth Goodman, 50–77. New York: Oxford University Press, 2009.
- Rodríguez, Juana María. *Sexual Futures, Queer Gestures, and Other Latina Longings*. New

- York: NYU Press, 2014.
- Rose, David. "The Scandal of Force-Fed Prisoners." *Guardian*, January 7, 2006.
<http://www.theguardian.com/world/2006/jan/08/usa.Guantánamo>.
- Rose, Nikolas, and Joelle M. Abi-Rached. *Neuro: The New Brain Sciences and the Management of the Mind*. Princeton, NJ: Princeton University Press, 2013.
- Rose, Nikolas. *The Politics of Life Itself: Biomedicine, Power, and Subjectivity in the Twenty-First Century*. Princeton: Princeton University Press, 2006.
- Rosenberg, Carol. "Guantánamo Bay as Nursing Home: Military Envisions Hospice Care as Terrorism Suspects Age," *New York Times*, April 27, 2019.
<https://www.nytimes.com/2019/04/27/us/politics/guantanamo-bay-aging-terrorism-suspects-medical-care.html>.
- Rosenberg, Carol. "Lawyer: 'Sodomized' Guantánamo Captive Recovering After Surgery. Prison: No Comment." *Miami Herald*, October 13, 2016.
<http://www.miamiherald.com/news/nation-world/world/americas/guantanamo/article108484372.html>.
- Rosenberg, Carol. "Waste Wars: Captives 'Weaponize' Bodily Fluids." *Miami Herald*, June 14, 2011. <http://www.miamiherald.com/latest-news/article1938250.html>.
- Rosenberg, Carol. "Afghan Guantánamo Detainee Uses Bedsheet to Commit Suicide." *McClatchy DC Bureau*, May 19, 2011. <http://www.mcclatchydc.com/news/nation-world/world/article24634870.html>.
- Rupke, Nicolaas. *Vivisection in Historical Perspective*. New York: Routledge, 1990.
- Salim v. Mitchell*, US District Court for the Eastern District of Washington at Spokane.
- Savage, Charlie. "Military Is Waiting Longer Before Force-Feeding Hunger Strikers, Detainees Say." *New York Times*, October 11, 2017.
https://www.nytimes.com/2017/10/11/us/politics/guantanamo-hunger-strikes-force-feeding.html?_r=1&utm_content=buffer6c6bd&utm_medium=social&utm_source=facebook.com&utm_campaign=bufe.
- Savage, Charlie. "Guantánamo Hunger Strike Is Largely Over, U.S. Says." *New York Times*, September 23, 2013. <http://www.nytimes.com/2013/09/24/us/guantanamo-hunger-strike-largely-over-us-says.html>.
- Savage, Charlie, and Julie Hirschfeld Davis. "Obama Sends Plan to Close Guantánamo to Congress." *New York Times*, February 23, 2016.
www.nytimes.com/2016/02/24/us/politics/obama-guantanamo-bay.html.

- Scarry, Elaine. *The Body in Pain: The Making and Unmaking of the World*. New York: Oxford University Press, 1987.
- Scott, David. "The Re-Enchantment of Humanism: An Interview with Sylvia Wynter." *Small Axe* 8 (2000): 119–207.
- Scott, Darieck. *Extravagant Abjection: Blackness, Power, and Sexuality in the African American Literary Imagination*. NY: NYU Press, 2010.
- Senate Select Committee on Intelligence. *The Senate Intelligence Committee Report on Torture: Committee Study of the Central Intelligence Agency's Detention and Interrogation Program*. Brooklyn, NY: Melville House, 2014.
- Shah, Nayan. "Between 'Oriental Depravity' and 'Natural Degenerates': Spatial Borderlands and the Making of Ordinary Americans." *American Quarterly* 57, no. 3 (2005): 703–25.
- Shaker Abdurraheem Amer et al. v. Barack Obama*, 742 F.3d 1023 (D.C. Cir. 2014).
- Silver, Mara. "Testing *Cruzan*: Prisoners and the Constitutional Question of Self-Starvation." *Stanford Law Review* 58 (2005): 631–62.
- Slahi, Mohamedou Ould Slahi. *Guantánamo Diary*. New York: Little, Brown and Company, 2015.
- Snorton, C. Riley. *Black on Both Sides: A Racial History of Trans Identity*. Minneapolis: University of Minnesota Press, 2017.
- Somerville, Siobhan B. *Queering the Color Line: Race and the Invention of Homosexuality in American Culture*. Durham: Duke University Press, 2000.
- Sontag, Susan. *Regarding the Pain of Others*. New York: Picador, 2004.
- Sontag, Susan. *On Photography*. New York: Picador, 1973.
- Stafford Smith, Clive. "Gitmo: America's Black Hole." *Los Angeles Times*, October 5, 2007. <http://www.latimes.com/news/la-oe-smith5oct05-story.html>.
- Summergrad, Paul, M.D., and Steven S. Sharfstein, M.D. "Ethics, Interrogation, and the American Psychiatric Association." *The American Journal of Psychiatry* 172, no. 8 (2015): 706–707.
- Summers, Daniel. "Rectal Feeding Has Nothing to Do with Nutrition, Everything to Do with Torture." *The Daily Beast*, December 10, 2014. <https://www.thedailybeast.com/rectalfeeding-has-nothing-to-do-with-nutrition-everything-to-do-with-torture>.

- “Sweet Tea and Therapy or X-Ray Inmates.” *Telegraph*, March 20, 2002.
<http://www.telegraph.co.uk/news/worldnews/northamerica/usa/1387308/Sweet-tea-and-therapy-for-X-Ray-inmates.html>.
- Spillers, Hortense. “Mama’s Baby, Papa’s Maybe: An American Grammar Book.” *Diacritics* 17, no. 2 (1987): 64–81.
- Stanley, Eric A., and Nat Smith, *Captive Genders: Trans Embodiment and the Prison Industrial Complex* (Oakland: AK Press, 2011).
- Stover, Eric, and Victor Peskin. *Hiding in Plain Sight: The Pursuit of War Criminals from Nuremberg to the War on Terror*. Berkeley: University of California Press, 2016.
- Taylor, Diana. *The Archive and the Repertoire: Performing Cultural Memory in the Americas*. Durham, NC: Duke University Press, 2003.
- Terri Schiavo Life & Hope Network*. “Terri Schiavo’s Story.” <https://terrischiavo.org/>.
- Thatcher, Margaret. “1981 March 5th Speech in Belfast.” Margaret Thatcher Foundation.
<https://www.margaretthatcher.org/document/104589>.
- Thompson, Charis. *Good Science: The Ethical Choreography of Stem Cell Research*. Cambridge, MA: MIT Press, 2013.
- “Twenty-Four Force Fed Captives.” *Miami Herald*, July 17, 2013.
<http://www.miamiherald.com/news/nationworld/world/americas/guantanamo/article1950931.html>.
- Union Pac. Ry. Co. v. Botsford*, 141 U.S. 250 (1891).
- United States Senate, 95th Congress, 1st session (August 3, 1977). “Project MKUltra, The CIA's Program of Research in Behavioral Modification.” *Joint Hearing Before the Select Committee on Intelligence and the Subcommittee on Health and Scientific Research of the Committee on Human Resources* (Report).
- Velasquez-Potts, Michelle C. “Staging Incapacitation: The Corporeal Politics of Hunger Striking.” *Women and Performance: A Journal of Feminist Theory* 29, no. 1 (2019): 25–40.
- Verghese, Abraham, et al. “A History of Physical Examination Texts and the Conception of Bedside Diagnosis.” *Transactions of the American Clinical and Climatological Association* 122 (2011): 290–311,
<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3116347>.

- Visvanathan, Shiv. *A Carnival for Science: An Essay on Science, Technology and Development*. New York: Oxford University Press, 1997.
- Vongkiatkajorn, Kanyakrit. "Why Prisoners Across the County Have Gone on Strike." *Mother Jones*, September 19, 2016. <http://www.motherjones.com/politics/2016/09/prison-strike-inmate-labor-work>.
- Warrich, Haider. *Modern Death: How Medicine Changed the End of Life*. New York: St. Martin's Press, 2017.
- Washington v. Glucksberg*, 521 U.S. 702 (1997).
- Washington, Harriet. *Medical Apartheid: The Dark History of Medical Experimentation on Black Americans from Colonial Times to the Present*. Norwell, MA: Anchor Press, 2008.
- Weheliye, Alexander. *Habeas Viscus: Racializing Assemblages, Biopolitics, and Black Feminist Theories of the Human*. Durham, NC: Duke University Press, 2014.
- White, Josh. "Guantánamo Force-Feeding Tactics Are Called Torture." *Washington Post*, March 1, 2006. <http://www.washingtonpost.com/wpdyn/content/article/2006/02/28/AR2006022801344.html>.
- Wilson v. Seiter*, 501 U.S. 294 (1991).
- World Medical Association. *World Medical Association Declaration of Malta on Hunger Strikers*. October 13, 2006. <https://www.wma.net/policies-post/wma-declaration-of-malta-on-hunger-strikers/>.
- World Medical Association. *WMA Declaration of Tokyo: Guidelines for Physicians Concerning Torture and Other Cruel, Inhuman or Degrading Treatment or Punishment in Relation to Detention or Imprisonment*. May 19, 2006. <https://www.wma.net/policies-post/wma-declaration-of-tokyo-guidelines-for-physicians-concerning-torture-and-other-cruel-inhuman-or-degrading-treatment-or-punishment-in-relation-to-detention-and-imprisonment/>.
- Worthington, Andy. "After Four-Year Legal Struggle, Judges Support Government Claims that Videotapes of Force-Feeding at Guantanamo Must Remain Secret." Andy Worthington, February 4, 2017. <http://www.andyworthington.co.uk/2017/04/02/after-four-year-legal-struggle-judges-support-government-claims-that-videotapes-of-force-feeding-at-guantanamo-must-remain-secret/>.
- Worthington, Andy. "Guantanamo's Hidden History: Shocking Statistics of Starvation." Andy Worthington, October 6, 2009. <http://www.andyworthington.co.uk/2009/06/10/guantanamos-hidden-history-shocking-statistics-of-starvation/>.

Worthington, Andy. "Sami al-Haj: The Banned Torture Pictures of a Journalist in Guantanamo." Andy Worthington, April 13, 2008.

<http://www.andyworthington.co.uk/2008/04/13/sami-al-haj-the-banned-torture-pictures-of-a-journalist-in-guantanamo/>.

Yang, Ina. "How It Works: Putting Humans in Suspended Animation." *Popular Science*, June 3, 2014. <http://www.popsoci.com/article/science/how-it-works-putting-humans-suspended-animation>.

"Yasiin Bey (aka Mos Def) Force-Fed under Standard Guantanamo Bay Procedure—Video."

Directed by Asif Kapadia. *The Guardian*, July 8, 2013.

<http://www.theguardian.com/world/video/2013/jul/08/mos-def-force-fed-Guantanamo-bay-video>.