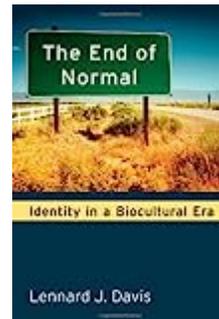




Lennard J. Davis. *The End of Normal: Identity in a Biocultural Era.* Ann Arbor: University of Michigan Press, 2014. 168 pp. \$75.00 (cloth), ISBN 978-0-472-07202-6; \$30.95 (paper), ISBN 978-0-472-05202-8.



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In *The End of Normal: Identity in a Biocultural Era*, Lennard J. Davis explores issues of identity and disability from a biocultural perspective attentive to the imbrication between culture, society, politics, medicine, and biology. Rich in arguments that unsettle discourses hegemonic in disability studies, *The End of Normal* is framed by a preface that introduces the book as originating from an interdisciplinary viewpoint particularly apt to interrogate disciplinary truisms. As Davis suggests, “Within one profession truths are often quite clear. But those truths ... are less apparent to those in other disciplines” (p. viii). At the same time, Davis’s questioning extends to his own previous theorizing and to contentious issues in society, culture, and medicine, which we encounter refreshed in this book by his characteristically nuanced speculations that pointedly eschew straw men.

The first chapter, “The End of Normal,” engages with the idea of “diversity” from a disability studies perspective. For Davis, “diversity is the new normality” within a neoliberal context ready to accommodate identities defined by the possibility of choice and exclusive of disability and of the fixity disabled bodies are associated with (p. 1). In the second chapter, “Dismodernism Reconsidered,” Davis returns to the concept of “dismodernism” that he developed in order to think about the relation-

ship between postmodernism and disability while disassembling “fantasies of wholeness and completion” that remain a feature of the postmodern imaginary (p. 16). After responding to critics of dismodernism, Davis reaffirms the importance of a dismodernist optic as key to a rebuttal of theories that refuse to acknowledge uncertainty as a fundamental aspect of identity. Davis continues to revisit his previous theorization of a disability identity in the third chapter, “Disability in the Media; or, Why Don’t Disabled Actors Play Disabled Roles.” Here he problematizes in relation to the tendency for nondisabled actors to be cast in disabled roles his original advocacy of a “flexible and malleable sense of identity in relationship to disability” (p. 31). Rather than contending that any actor should be able to play any kind of part, Davis adopts the opposite stance on the basis of the way in which the former position perpetuates ableism by allowing relief of the discomfort disability produces in audiences and by ghettoizing disabled actors.

The fourth chapter, “Depression and Disability,” denounces the medicalization of certain forms of depression as grounded in a medical model that is complicit with corporate interests through the prescription of drugs and underpinned by flawed ideas of depression as a clinical identity. From a biocultural perspective, Davis

argues for an approach that pays attention to how the imagining of depression is rooted in culture and valorization of happiness, and concludes by speculating as to what disability studies could contribute to a rethinking of depression in relation to social context and barriers. The fifth chapter, "Stumped by Genes: DNA, Disability, and Prosthesis," applies the biocultural perspective to genetics and examines the relationship between genetic and medical research and a eugenicist rationale, alongside the recent development of drugs tailored to racial groups. The sixth chapter, "Diagnosis: A Biocultural Critique of Certainty," considers the ontological status of "diagnosis" and the ways in which this is imagined as a process accompanied by an aura of certainty that is rooted in the scientific approach itself.

Chapter 7, "A Disability Studies Case for Physician-Assisted Suicide," approaches theorization of physician-assisted suicide (PAS) in disability studies from a perspective that takes on hegemonic positions in disability studies that constrain productive debate in the field. In calling out the "truism that you can't be for disability and for PAS along with euthanasia" (p. 95), Davis both acknowledges the presuppositions of such positions and foregrounds how important tenets in disability studies—the rights to independence and privacy—predicate the opposition stance on PAS. The eighth chapter, "Transgendered Freud," turns a biocultural perspective on fem-

inist anti-Freudianism in reclaiming Sigmund Freud as an early proponent of a gender continuum. The ninth and the tenth chapters present the biocultural manifesto and reflect on its uses for the purposes of education respectively. The former chapter, "The Biocultures Manifesto (cowritten with David Morris)," argues that in the current era there is a need for a biocultural sensibility to appreciate how culture and history are inextricably linked to biology. The latter chapter asserts the necessity for this to be disseminated in society as the prerequisite for the full participation of an educated citizenry in public debate.

It is precisely Davis's argument for the overcoming of the humanities/science division, as well as his prefiguration of an imagination free of this in each chapter, that make *The End of Normal* essential reading in both disability studies and the burgeoning field of medical humanities. Davis's analyses are greatly enriched by their political rationale and the refusal of certainty in theorization. If Davis's reputation as a contrarian is confirmed by *The End of Normal*, the book demonstrates the need for the kind of rigorous contestation such a stance affords for all disciplines, and in particular for disability studies and medical humanities on the basis of their unique potential to think culture and biology together at a time when their imbrication underpins contentious issues in society and politics.

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