Life is a political game stretched between paternalistic institutions and the neoliberal individual. That is how we could paraphrase the book *Games of Life: Czech Reproductive Biomedicine Sociological Perspectives*. Three leading scholars in the Czech research in the field of biopolitics, Iva Šmídová, Eva Šlesingerová and Lenka Slepičková, present the results of their large empirical investigation on assisted reproduction and manipulation with embryos and DNA, as well as medical childbirth practices. Their analysis offers an insightful picture of everyday life in Czech reproductive medicine, in particular the implications the related trust-building process between patients and doctors has for the regulation of this field of biomedicine.

There is a new way to understand bio-power, the authors assert as they open their investigation of the Czech context of one of the most contested fields of contemporary sociological and political research on health and medicine. Through a set of scientific discoveries, such as the possibility of manipulating embryonic cells, biomedical research in general is going through a process of de-corporalisation and rhisomisation (cf. Gottweis 2005; Durnová and Gottweis 2009), which makes these tiny parts into actors revealing for us the ambiguity of the border of life itself (cf. pp. 42 and 44; Kaufmann and Morgan 2005) and thereby governing health care practices at both the individual and collective levels. The border of life itself is at the core of Foucauldian biopolitics, which has grown into a large analytic framework of manifold sociological studies on health and biomedical research that the authors present extensively in the first three chapters of the book. It follows that this border is negotiated by various sorts of actors; the authors focus on scientists involved in the manipulation of stem cells and embryos (Chapter 4); medical experts in the field of assisted reproduction (Chapter 5); on the related boundary between patients and doctors around trust (Chapter 6); as well as on obstetricians as guardians of the status quo in childbirth practices (Chapter 7). The empirically rich material collected between 2011 and 2014 presented in these distinctive chapters is used to explain why, on the one hand, there is widespread acceptance by both medical experts and patients of “the way it is” in the health care discourse of the post-1989 period in the Czech Republic. On the other hand, the analysis reveals how this status quo is embedded in the novel requirements of Western societies, especially that which the authors describe as the current neoliberal shape of governing the individual who requires health care, and who consents to it or contests it.
The ambition of the book is very high, perhaps too high, in its attempt to offer both a broad theoretical foundation that makes such an investigation possible, and a detailed discussion of the empirical results in these particular fields of reproductive medicine practices in the Czech context. Yet the context of its potential readership makes this ambition understandable and is quite revelatory of the standing of scholarship on the sociology of health and medicine and bio-political analyses in this geographical region.

To begin with, *Games of Life* is the first comprehensive work on the bio-political analysis of health care practices in the Czech Republic accessible to an English-speaking readership. Despite remarkable case studies on women’s health (Dudová 2015; Slepičková 2010), science practices (Linková and Stöckelová 2012) and the meaning of the medical profession (Hrešanová 2014), there has hitherto been no work on the overall paradigm of the post-communist transformation of the health care sector from the perspective of Foucauldian studies of biopower or the larger context of STS research in this field. This absence appears somewhat as a paradox, since Czech institutional paternalism, exercised through the communist regime up to 1989, can be seen as almost a perfection of the Foucauldian framework. The authors themselves select a timely quote from Foucault in their theoretical part: “the disciplines of the body and the regulations of the population constituted the two poles around which the organization of power over life was deployed [...] Hence, there was an explosion of numerous and diverse techniques for achieving the subjugation of bodies and the control of populations, marking the beginning of an era of bio-power (Foucault 2010: 162; cited by the authors on page 43).

This quote could indeed be a summary of the main achievements of the communist health care organization. The organization of power in that period was centred around the central planning of paternalistic institutions screening, reporting on the health care of the Czech population, and providing far-reaching obligatory prevention programs disciplining the body. Not the individual, but the collective body was at the same time at the centre of this power organization.

Stunning, then, in this respect, is that the post-1989 development did not break with the paternalist tradition but consolidated it and converted it the neoliberal mould as the authors argue through their examples. Through case studies, the authors show how the relevant scientific and medical knowledge is consolidated in the hands of medical doctors and researchers without any significant contestations or countermovement from the civil sphere. The reader might ask this question throughout the book: so are there really no protests against practices that have triggered recent political debates in Germany, Italy and the UK? Except for the midwifery movement in the context of childbirth (Chapter 7), everything seems to take a linear unifying path towards the perfection of the collective body, this being pertinently evoked by the Foucauldian analyses mentioned at several places in the book (e.g. Brown and Webster 2004; Franklin 1995; Gottweis 2005; Rabinow 1996; Rose 2007; Vermeulen, Tamminen and Webster 2013).

One possible explanation for the persistence of the status quo is the common stereotype that the region is a step behind Western society. But such a view would be fundamentally misplaced in the context of Czech reproductive medicine. The case studies presented by the authors show aptly the extent of services provided in the field of assisted reproduction, and
they report on the very strong commitment of the Czech biomedical research sector to recent developments, among them stem cell research in particular. The country’s progress has been very strong and very fast in recent decades and has freed it, in fact, from ethical claims we know from debates in other countries. The authors label this situation as a modernist legacy (see in particular Chapter 4).

The explanation for the role of this modernist legacy which is offered – rather implicitly – is to be found in market-oriented discourse, which represents a very powerful context of the general Czech post-1989 development. The fact that many of the practices of assisted reproduction are available in private health care establishments, welcoming clients from abroad as well as Czechs, supports the authors’ argument that reproductive technologies, in their way of challenging conventional views on life, reveal to us the transformation of health care from being primarily for the purpose of disease treatment to a medical service in demand by patients. For the institution, this demanded service (to be paid for and therefore to be exclusive) enables a combination of institutional paternalism with very liberal legal regulation of this field of health care. For the individual, it represents an increasing burden of responsibility and the necessity of legitimizing one’s own choices. Yet the political arenas for such legitimizing seem still to be lacking in the country’s health care debates.

The theoretical complexity evoked by this book might disturb some readers familiar with these concepts from the global scholarly debate on genomics, stem cell research and reproductive medicine. However, the extensive work done by the authors is to be read as the portfolio of Czech scholarship in this field, still emergent in Czech social science. In this sense, some readers not familiar with the Czech context more specifically might want to learn more about the historical context in which these practices developed, precisely because analyses of specific Czech cases are rather underrepresented in the Anglo-Saxon scholarship so far.

The authors seem to put the emphasis on the theoretical foundation of their work, thereby setting an honourable stage for upcoming analytical pathways to understand the post-communist transformation of health care practices as a showcase of how institutions transform in times of increasing individualization and commodification. The game of life is more and more in the hands of citizens, and it will be interesting to follow how the Czech paternalist institutions cope with that in the near future.

References


