

Contagious Care: Towards a More-than-antimicrobial Citizenry

Commentary

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Abstract

The Covid-19 pandemic has brought upon an unprecedented wave of antimicrobial approaches to managing public health. As Western states dangerously flirt with antimicrobial biopolitics of control, populations begin to embody a fear of the microbial other. This commentary piece posits that healing the visible and invisible wounds left by this virus will require communities to foster more-than-antimicrobial forms of citizenry, which the author suggests might emerge from a practice of microbial co-healing. Through this perspective, people can safely and somatically exchange bodily microbes in a non-paternalistic and probiotic approach to treating and preventing illness and disease. By materialising and spatializing such a practice in the form of a *Microbial Bathhouse*, the author makes the case for a novel and alternative form of co-healing based off of mutual health and embodied knowledges, one which seeks to pull the world out of its current state of dysbiosis.

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1 - Such as fecal matter transplants or industrially produced probiotic supplements, for example.

Living in times of virulent fear leaves marks on the body, traces of microscopic trauma folded into the flesh reflecting an embodied fear of the microbial other. It's a fear that runs deep, one that has forever altered our *somatic phronesis*, the embodied knowledges built from our socio-cultural experiences of health.

With the world in a state of dysbiosis, ways of living and being in the West have quickly tipped to reflect the antimicrobial approach of public healthcare institutions, an ongoing Pasteurian strategy that's had the effect of imbuing our *somatic phronesis* with an antimicrobiality of sorts. We now know the choreographies of social distancing well, our bodies naturally leaning and veering away from one another without thought. With this unconscious fear deeply enmeshed within our behavioral responses, we find ourselves performing a new form of citizenry, one that is intrinsically antimicrobial.

Although essential in keeping one another safe during the global pandemic, antimicrobial citizenry has affected our ability to trust in the flesh of others, limiting collective bodily practices of care. This mistrust of the microbial other masks a significant fact about ourselves; that we are inherently microbial beings, ones built on multispecies interdependency and vulnerability (Margulis, 1998; Haraway, 2016).

In order to rebuild this understanding of ourselves, once the pandemic's dust settles, a collective healing of our being together *microbially* will have to take place. In a post-pandemic world, antimicrobial citizenry as the sole arbiter of relating to one another will do more harm than good, reproducing the very conditions that tipped the world into dysbiosis. If we are to fundamentally shift these conditions, our microbial interdependency needs to be the point from which we renew our relations to each other and our bodies. By re-shaping these relations, we may build resilient, probiotic practices of health that lead to more-than-antimicrobial forms of citizenry.

Microbial co-healing

Our bodies contain the means for one person's health to become another's, the basis from which a reimagined practice of care – that of microbial co-healing – operates. It does so by looking at the microbiome – the living amalgam of microbial bodies in and on us – as the point from which health can be shared. Through rituals that enable the safe and somatic giving and receiving of the microbiota of different regions of the body (and of different people), microbial co-healing provides a communal approach to diversifying the microbiome that's far more personal, experiential, and embodied. This represents a rather seismic shift from how our current Western healthcare institutions operate, with practices of paternalism, isolationism, and depersonalisation often defining how medicine and pharmacology produce knowledge, care relations, and practices of healing (Tronto, 2013; Illich, 2010). As an alternative to current novel microbiome therapies¹ derived from these systems, this



Fig. 1 - The Microbial Bathhouse. Courtesy of Ronald Smits/ Design Academy Eindhoven.

more-than-antimicrobial practice of healing centers somatic phronesis at its core (Wischmeyer et al., 2016), empowering people as both response-able caregivers and care-receivers. The microbial other becomes a co-healer at both microscopic and macroscopic scales, positioning them as a living remedy instead of a virulent threat. Just as microbiome transplants require a healthy, diverse, and thriving community of critters to flow from one host to another, so too does healing the microbial fear of the other require the healing properties of a community. It requires building trust in the flesh of others, *with* others. With strict public health

Fig. 2 - Designed
with the needs of the
body's microbes in
mind, the bathhouse
is kept between
35 and 37 degrees
Celsius and at a 60%
relative humidity.
This creates a favour-
able environment for
microorganisms to
travel outside of the
body, and provides
a warm, sauna-like
space for co-healing
with others. Courtesy
of the author.



measures still in effect across the globe, how may we work towards creating the architectures of mutual health that support a right to microbes?

The case for a Microbial Bathhouse

At first glance, the idea of a space designed expressly for swapping microbes seems outrageously dangerous. Yet, if done correctly, not



Fig. 3 - Microbes from the respiratory tract are collected during a ritual of giving. Each co-healer has their own reusable spout they insert into a glass vessel. The two compartments contain a broth that suits a large range of anaerobic and aerobic bacteria. Courtesy of the author.

only can microbial co-healing encourage a healthy microbiome, it can also rewire the fear of the microbial other through embodied practice. As such, *The Microbial Bathhouse* situates co-healing as a therapeutic endeavor, one that makes space for activating bodily actions that imprints the notion of trust and healing into the idea of the microbial other.

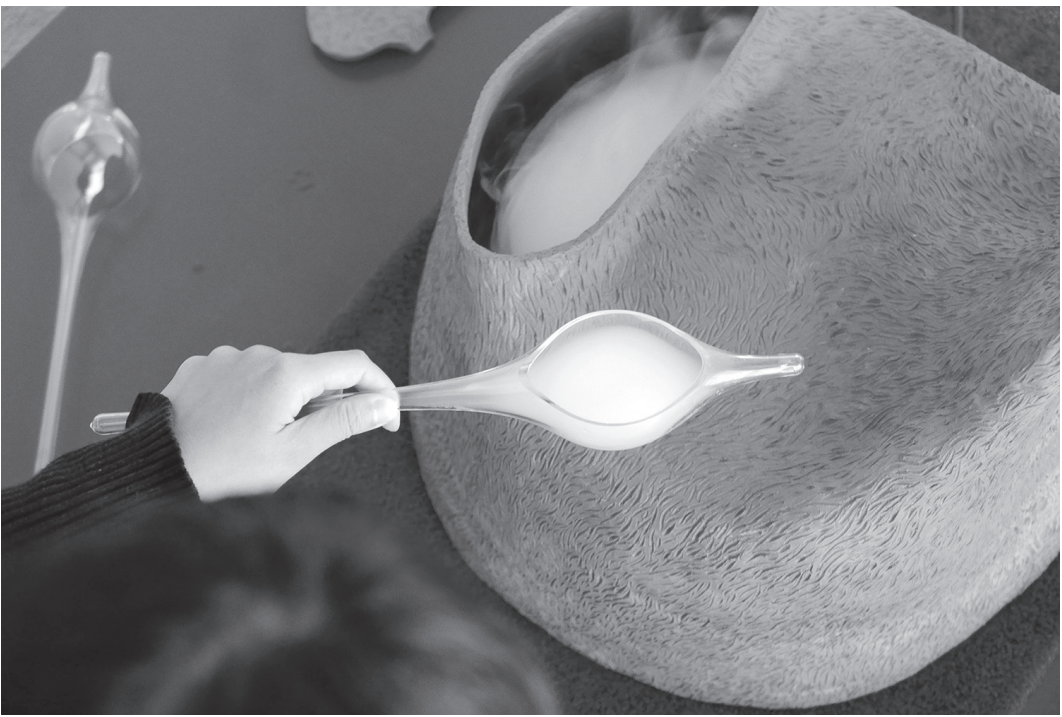


Fig. 4 - The microbial liquid is transferred into a ceramic vessel and then transformed into a fine particulate that can be inhaled. During the receiving ritual, co-healers scoop up the microbial steam with a special spoon that is designed to hold mist. Courtesy of the author.

Heated at a temperature favoured by the human body's microorganisms, the sauna-like space of the bathhouse proposes a highly sensorial and intimate medical experience through the collecting and sharing of co-healer's microbes. Here, the collective practice of 'microbial grooming' serves social, recreational, hygienic, and medicinal purposes. Supported by artefacts of care that depart from the common sterile aesthetics of Western medicine, the spatial and material conditions of the bathhouse materially experiment with the architecture of the body as a site for our becoming together, carving out space for more-than-antimicrobial healthcare to grow.

Co-healers engage in the ritual of giving and the ritual of receiving microbial matter from the respiratory tracts, shaping anew their embodied relationship to someone else's microbe-filled breath and a more-than-antimicrobial citizenry. No clear delimitation exists for who is the caregiver or receiver; co-healers sit around an assortment of vessels that facilitate the non-hierarchical exchange. From vessels containing microbial broth that collect microbes via exhalation, to amplification carafes that enable microbes to multiply safely, to ceramic vessels that transform collected microbial fluid into a soft steam for inhaling microbial mist, objects from *The Microbial Bathhouse* form a new typology of medical apparatus that actively encourages us to engage with our *somatic phronesis*, our microbes and each other. It is a bathhouse designed to embody the values of microbial health and mutual aid.

As Western states dangerously flirt with a microbial-based biopolitics of control, a control which creates embodied mistrust of microbial others, a spatialized practice of co-healing that supports a resilient community of



more-than-antimicrobial beings is critical to healing some of the marks the pandemic will leave. Let this be a microbial renaissance, one in which a contagious sort of care can heal and hold us beyond the wounds of a virus.

References

- Haraway, D. J. (2016), *Staying with the Trouble: Making Kin in the Chthulucene*, London, Duke University Press.
- Illich, I. (2010), *Limits to Medicine - Medical Nemesis: The Expropriation of Health*, London, Marion Boyars.
- Margulis, L. (1998), *Symbiotic Planet: A New Look at Evolution*, New York City, Basic Books.
- Sagan, L. (1966), *On the Origin of Mitosing Cells*, "Journal of Theoretical Biology", vol. 14, n. 3, pp. 225-274.
- Tronto, J. C. (2013), *Caring Democracy: Markets, Equality and Justice*, New York, New York University Press.
- Wischmeyer, P. E., McDonald, D., Knight, R. (2016), *Role of the microbiome, probiotics, and 'dysbiosis therapy' in critical illness*, "Current Opinion in Critical Care", vol. 22, n. 4, pp. 347-353.

Fig. 5 - Co-healers inhale tiny droplets of mist, helping the rich and diverse collection of microbes to travel into the respiratory tract. This process, of transplanting a collection of different lung microbiota, helps to diversify the microbiota as a preventative health measure and as a supportive therapy for chronic respiratory diseases. Courtesy of the author.