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Source: *Feminist Formations*, Summer 2013, Vol. 25, No. 2, Special Issue: Feminists Interrogate States of Emergency (Summer 2013), pp. 107-128

Published by: The Johns Hopkins University Press

Stable URL: <https://www.jstor.org/stable/43860688>

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How to Survive Contagion, Disease, and Disaster: The “Masked Asian/American Woman” as Low-Tech Specter of Emergency Preparedness

Clare Ching Jen

This article approaches post-9/11 public health anxieties as human-technology-border agitations. Face masks and narratives of un/masking function as key components in the discursive production of emergencies. Incongruities—of “what is human,” “what is technology,” “what is un/natural,” and “what is native or invasive”—surface as unsettling specters and take the form of the “masked Asian/American woman.” Government, science, and mainstream publications deploy her as part of emergency-preparedness pedagogy and performance. The masked Asian/American woman as an analytic construct, in an intersectional and transnational feminist science studies approach to analyses of public health anxieties, can provide insight into: neoliberal gestures of self-defense and individual responsibility; representational biopolitics of the global economy; gendered labor mobility across borders; configurations of monsters and ghosts during states of emergency; and health justice for women and immigrant communities. She is a low-tech specter of emergency preparedness. At best, her hauntings—spooky, tormenting, and, at times, comically bizarre—call upon the public to examine and challenge public health inequalities.

Keywords: Asian American women / boundaries / face masks / feminist science studies / infectious disease / neoliberalism / public health anxieties / self-defense / technology

This article focuses on the “masked Asian/American woman” as a low-tech specter of emergency preparedness. It argues that the maintenance of neoliberal

©2013 Feminist Formations, Vol. 25 No. 2 (Summer) pp. 107–128

governance is sustained by discursively produced states of emergency.¹ Such exigencies have influence as they circulate through historically and culturally charged meanings of gender, sexuality, race, citizenship, and nation. The masked Asian/American woman is a human-technology-border figure: she serves as a haunting and, at times ghoulish and bizarre, harbinger of futile defiance. Fringe humor has increasingly colored the construction of emergency states since 9/11. Government, popular science, and mainstream media begin to frame “face masks and narratives of un/masking” as self-referential, irreverent curios. While this postmodern irony may serve to blunt the intensity of seemingly omnipresent, yet survivable apocalypses, it still barter in largely unchallenged economies of sexism, heterosexism, racism, and nativism. I pose the masked Asian/American woman as a productive analytic in intersectional and transnational feminist science studies approaches to interrogating states of emergency.

Face masks and narratives of un/masking function as key components in the discursive production of emergencies. Government, science, and mainstream publications deploy face masks and their narratives in several ways: as technological artifacts, as emergency-preparedness pedagogy and performance, and as striking visual representations that do affective work. Face masks and narratives of un/masking signal discursive border agitations that churn significations of gender, sexuality, race, citizenship, and nation. These agitations serve to reify uncertainties over boundary maintenance. For example, as low-tech physical barriers, masks outline the human body as distinct from its external environment; however, as particulate filters, they merely punctuate the fungibility of these boundaries. Addressed by feminist science studies scholars, such boundary work labors to differentiate oppositional categories: human versus nonhuman animal; animal-human (organism) versus machine; physical versus nonphysical; natural body versus invasive foreign body (Haraway 1991; Sontag 2001; Subramanian 2008). In “public health anxieties,” the incongruities of “what is human,” “what is technology,” “what is un/natural,” and “what is native or invasive,” surface as unsettling specters.

This article analyzes representations of gendered and racialized mobility across real and imagined transnational borders in discursively produced public health anxieties. It considers such anxieties as social-cultural phenomena in need of critical analyses. These are events and/or situations deemed worthy of urgent media attention by scientific experts, government agencies, and the lay public. Emerging infectious diseases—compared to other public health concerns like racial-ethnic health disparities, chronic disease, reproductive health concerns, and endemic infectious diseases—are portrayed, especially in the mainstream news media, as more spectacular objects of concern.

Primarily, I analyze government, science, and mainstream media coverage of the 2002–03 multi-country outbreak of severe acute respiratory syndrome (SARS). I also draw from a number of texts, including Maggie Silver and colleague’s *Preparedness 101: Zombie Pandemic* (2011), a graphic novella aimed

to educate the public on disaster preparedness; Centers for Disease Control and Prevention's (CDC) "Wedding Day Survival Guide" (2012), published on its Public Health Matters Blog (but since removed [see below]), intended to inform the public on the usages of emergency kits; and the *New York Times* 2012 coverage of sun-protective ski-masks, increasingly used by beach-faring Chinese women (Levin). From the SARS discourse, a trio of un/masked human figures—masked Asian/American women, "masked white American citizens," and "unmasked white masculine experts"—emerges as a principal visual representation.

The slash (/) between "Asian" and "American" deliberately marks the blurred boundary between belonging and not belonging to the nation as a "perpetual foreigner" or "model minority" (Kang 2010; Palumbo-Liu 1999). For example, how stable is birthright citizenship—as a claim to belonging to the nation-state—when the Cable Act of 1922 stripped US citizenship from US-born women of Asian descent upon marriage to an alien man of Asian descent? The photographs I analyze are mostly taken of Asian women in Asian countries and published for a US audience. I use "Asian/American women" as a transnational construct in two ways. First, I use it literally to refer to women of Asian descent—without regard to citizenship, immigration, and/or documentation status—who are located within the US geopolitical boundaries and/or engaged with immigration policies to cross US borders. In this first case, the slash makes visible the instability of citizenship via legal processes. Second, I use Asian/American women symbolically to refer to the transfer of Western imaginings of Asian women to Asian American women. This use builds on Sumi Cho's ideas:

colonial and military domination are interwoven with sexual domination to create the "great western [sic] male fantasy." Military involvement in Asia, colonial and neocolonial history, and the derivative Asian Pacific sex tourism industry have established power relations between Asia and the West that in turn have shaped stereotypes of Asian Pacific women. Through mass media and popular culture, these stereotypes are internationally transferred so that they apply to women both in and outside of Asia. (2000, 535)

The Orientalist imagination makes little distinction between Asian women and Asian American women, and I use the slash to make visible this stereotype transfer. Fear of masked Asian women—as risky contagion to the US public—transfers into fear of masked Asian/American women. During the 2002–03 SARS outbreak, there were only seven confirmed SARS cases in the United States (CDC 2003a). Although the United States experienced far fewer SARS cases compared to other countries, the mainstream media successfully expanded fear in the public's imagination of "Asian bodies in Asia" to include a fear of "Asian bodies in the United States."

Our understandings of the masked Asian/American woman challenges neoliberalism; she is the model neoliberal subject who simultaneously succeeds

and fails. In terms of racialization, Asian/Americans succeed as model minorities, but remain perpetual foreigners. Asian/American women are particularly successful as gendered, sexualized, and racialized model minorities; as a “lotus blossom,” she is more obedient and submissive than her overly feminist white sisters (Cho 2000). Additionally, by engaging in low-tech and highly visible gestures of self-care—masking and unmasking—the Asian/American woman performs privatized responsibility in the midst of risk: she succeeds as a model neoliberal citizen. Yet, racialized as culturally different, she cannot help but fail: she is part of a masked, perpetually foreign, and potentially lethal yellow horde.

Furthermore, I contend that she carries gendered cold war-era US civil defense into the post-9/11 era in which highly commercialized forms of low technology target women’s and girls’ current empowerment narratives—as a choice to purchase gendered, self-defense products. This reinforces women’s status as victims, while obfuscating underlying sources of harm and injustice. According to Wendy Brown, the neoliberal citizen is a rational autonomous subject who makes calculations of costs, benefits, and consequences in a pursuit of self-care as individualized consumer and entrepreneur (2005, 37–59). While hailed as empowering and in the spirit of liberal democratic individualism, responsible gestures of self-defense are ultimately futile in enacting visions of justice; they fail to address systemic and societal factors beyond maximizing individual good. As a low-tech specter of emergency preparedness, the masked Asian/American woman spectacularly succeeds and fails as a neoliberal subject; her hypervisibility evinces neoliberalism’s promise of failure.

SARS as Public Health Anxiety

As a novel form of upper respiratory infection, SARS spread to twenty-nine areas around the globe from fall 2002 to summer 2003 (WHO 2005). In its beginning stages, this pandemic spread rapidly and had a high mortality rate, generating fears among health and medical experts that a sequel to the influenza of 1918 had arrived (Bollett 2004). In March 2003, the World Health Organization (WHO) declared SARS a “worldwide health threat,” and 10 percent of flights between Asia and the United States were canceled (Lee, Murphy, and Zhao 2003). In April 2003, President Bush issued an executive order that added SARS to the list of communicable diseases for which the federal government could impose quarantines (“Bush Order Allows SARS Quarantine” 2003). In Congressional hearings, the public was urged to “self-police themselves” with respect to SARS symptoms as their “obligations as good citizens” (US Senate Health, Education, Labor and Pensions Committee 2003). Economically, the San Francisco Chinatown Chamber of Commerce reported a 30 percent decline in neighborhood businesses during the height of the SARS crisis (Yeung 2003). Other reports cited a 90 percent drop in business revenues compared to the

previous year in the San Francisco and New York Chinese American communities (Lee, Murphy, and Zhao 2003). Frustrated Chinatown business owners blamed this drop on the public's "imagined association" of SARS infection risk with Chinatowns (Yeung 2003). How can we understand the complexities of this "imagined association" that underlies the public's fear of SARS infection?

This article provides a multidimensional response. First, it approaches public health situations, such as the 2002–03 multi-country SARS outbreak and its responses and representations, as Foucauldian discourses, and it conceptualizes them as discursively constructed public health anxieties. They comprise aspects of social reality that demand deconstruction for social justice purposes. Second, a transnational feminist interrogation of gender, race, and public health anxieties in the media opens analytical possibilities in realms of Asian/American representation, women's health justice, and citizenship. Supplementing Foucauldian and transnational feminist approaches, a feminist science studies perspective provides insight into the representational biopolitics of gendered and racialized mobility across real and imagined transnational borders.

Excellent work, with an important central focus on the transnational body politics of Latina/o immigrants in HIV/AIDS discourses, is already moving in this direction (Ruiz 2002). I advocate a similar urgency to examine the representational, transnational biopolitics of Asian/American women in the SARS discourse, among other instances of public health anxieties. According to Raka Shome, the "media constitutes a central site upon and through which global inequities are being staged today" (2006, 257). Public health, as a representational and material site for gendered and racialized discourses, is an examined area of scholarship; however, much of this work is from a medical history perspective that does not take into account transnational feminist concepts, such as Asian/American woman, or feminist science studies concerns, such as interrogations of risk politics and natural/culture divides. Furthermore, this existing scholarship heavily focuses on the nineteenth century. Entanglements of "race, health, and citizenship" are necessary concepts for more fully understanding how immigrant communities are constructed as "public health menace[s]," as Nayan Shah demonstrates in his history of the Chinese American community's experience in nineteenth- to mid-twentieth-century San Francisco (2001, 11). Advancing the analytic construct of the Asian/American woman into a transnational feminist analysis of more contemporary public health anxieties in the media provides insight into the representational labor of new forms of visual discourse, including digital media and technoscientific images. This advancement allows us, as Shome states, to "examine the new gendered imaginations that are being articulated in globalization and how they reproduce many of the earlier colonial logics of colonialism *and* enact new ones" (2006, 257; emphasis in original).

Masked Asian/American Woman

The masked Asian/American woman emerges as a principal visual configuration of the SARS crisis. Photographs and images of masked Asian women far outnumber any other visual depictions of the lay public. Her image serves as not only documentary evidence in actual news stories, but also as a visual component in news-media advertising. As a human-technology figure, she is a commodification of SARS risk and responsibility. A print advertisement for MSNBC.com in *Newsweek* is an exemplary illustration. A professionally attired and masked Asian woman is in a crowd of other masked Asian women. The possible setting is a subway car during rush hour. As the only figure who meets the reader's gaze, she is the focus of the photograph. She holds a cell phone to her ear. The copy reads: "Be the first to know when the next big story breaks. Go to MSNBC.com and sign up for breaking news alerts via MSN messenger, your email or mobile device. It's easy and free. So is streaming video—24/7 on MSNBC.com. All backed by the power of NBC news. No wonder it's America's top choice for breaking news."² The masked Asian woman, as a visual symbol, is used as an advertising image to market mainstream news media to the US public. In what context could this image persuade *Newsweek* readers in the United States that they should access real-time news about the SARS outbreak? The advertised product provides a solution to a public health problem—risk of SARS infection—that is visually represented by this masked Asian woman. As a human-technology figure she embodies the SARS risk to the US public, at the same time representing an emerging public health ethic that values one's individual responsibility to prevent SARS transmission either through containing one's bodily risk to others, or by protecting one's susceptibility to risks posed by others. Photographs of Asian women in masks are emblematic of this emerging public health ethic of risk and responsibility.

The masked Asian woman simultaneously embodies SARS risk and responsibility. On March 21, 2003, *Science* published a photograph featuring an Asian woman in an airport, whose masked profile serves as the image's central focus. The caption identifies the scene as a "flight risk" and the masks as protective gear to "ward off an infection from a mysterious agent" (Enserink 2003a, 1822). This can be interpreted in two ways: first, at the literal level, the masked Asian woman responsibly protects herself as she is about to engage in the risky activity of flying while a new, mysterious disease runs rampant; however, at a symbolic level, this flight risk refers to the masked Asian woman herself—she is the "mysterious agent." Close contact with "a person with a respiratory illness and travel to a SARS area" was a CDC diagnostic criterion for suspected SARS cases (CDC 2003b). For the US public, this masked Asian woman in Hong Kong's airport embodies the risk of SARS infection—she is a risky subject.

In another photo published in *Science* on July 18, 2003, the masked Asian woman is the central focus of the image (Enserink 2003b). The reader observes

her standing in a crowd of other masked Asian figures. The masks obscure individuality and subjectivity and create unidentifiable Asian masses—an Asian “horde” of potentially lethal bodies. Surveillance personnel scan her forehead with a noncontact infrared thermometer. Authorities screen her for SARS symptoms, such as a high temperature, in order to identify SARS cases and contain risks of transmission across borders. Border authorities employ visual technology to produce an otherwise invisible measurement. She is framed as a potentially risky, yet salvageable subject.³

This characteristic, that the mask hides a risky and dangerous secret, calls forth comparisons to the Orientalized trope of the veiled woman. As disciplining technologies-accessories, un/masking and un/veiling operate according to an Orientalist mentality. They symbolize the Other’s feminized cultural difference as inscrutable and secretive—as unknowns hidden behind veils and masks. The drive to penetrate the veil and mask is a masculine colonialist project. US feminists and Middle Eastern and North African women have interrogated discourses of women’s veiling and unveiling as instrumental in Orientalist, nationalist, imperialist, women’s rights, and feminist enterprises (Ahmed 1982; Enloe 1990; Lazreg 1998; Nusair 2008; Oliver 2007; Yegenoglu 2003). Western imperialism deploys the veiled Muslim woman as symbolic of women’s oppression in “backward” Islamic nations; it justifies military interventions in the name of women’s liberation, and it evidences success by unveiling Muslim women. Isis Nusair’s (2008) analysis of US government documents on Abu Ghraib demonstrates the ways that Orientalist tropes of veiling and unveiling undergird US military abuses. While a far cry from the sexualized violence at Abu Ghraib, the US government upheld similar Orientalist tropes during the global SARS emergency. As one example, the Congressional-Executive Commission on China held a committee hearing titled “Dangerous Secrets: SARS and China’s Healthcare System” (2003) in which politicians and scientists charged the Chinese government with a lack of transparency, hiding SARS cases from WHO investigators and irresponsibly exposing the globe to danger. Additionally, scientific and mainstream publications painted China as backwards in its closer proximity to nature—that is, people’s nearness to livestock as a suspected path of original SARS transmission.

The masked Asian/American woman is Orientalized. She signifies China’s inscrutability, its feminized weakness, its uncivilized proximity to nature, and its riskiness and irresponsibility. The West must penetrate her mask to uncover what “dangerous secrets” lurk beneath. As reported in the *Bulletin of the World Health Organization*, “China’s failure to admit the true extent of the SARS outbreak drew severe criticism from governments and from WHO’s Director-General,” and that “it took two months . . . for China, under mounting international pressure, to allow WHO epidemiologists to enter Guangdong province” (WHO 2003, 626). The masked Asian/American woman serves as a binary opposition to the West’s masculine courage, advanced development,

expertise, authority, and responsibility; gendered, raced, and sexualized, she is culturally different and in need of liberation from the Chinese government's backwardness. The West penetrates her mask as a step toward rescuing her, and the world, from SARS risk.

Furthermore, masking and unmasking play central roles in gendering the un/masked Asian woman as a protective mother in the midst of a public health crisis. As an example, *Time* shows a mother holding her child, and both are masked. The caption reads: "A mother takes precautions in Hong Kong" ("What Next? Killer Pneumonia" 2003). In contrast, a *Los Angeles Times* photo depicts an Asian mother/child pair, but they are both unmasked; the caption reads, "UNMASKED: A mother and her child attend an event celebrating the end of SARS transmissions in Taiwan. Residents began doffing their masks, which had become ubiquitous" (Piller 2003). This unmasking symbolizes a celebratory end to the fear of SARS. In these examples, the visual presence of a mask and the acts of un/masking illustrate the masked Asian woman's role as a good, protective mother. These heteronormative images promote a "salvageable" foreignness particular to racial formations of Asian/Americans as "good," perpetual foreigners and model minorities (Espiritu 2003; Lowe 1996). Asian/American women, in particular, are the most salvageable as a gendered, racialized, and sexualized model minority. As argued by Cho, just as the dominant culture uses stereotypes of Asian Americans to discipline African Americans, it uses stereotypes of "submissive" and "obedient Oriental women" to discipline white "liberated career women" (2000, 535).

In these examples, masks and un/masking are central to assessments of risk and responsibility. The masked Asian/American woman—as a human-technology-border construct—represents a responsible risky and at-risk subject. Photos and their accompanying captions discursively construct her through several main frames: she simultaneously consumes emergency-preparedness technologies as she is consumed by US readers in advertisements; her identity as risky border-crossing subject is produced via biomedical and defense technologies that make visible what is normally invisible to the naked eye; and she is a good, protective mother. Furthermore, *masking* as an analog to *veiling* operates according to an Orientalist trope that genders, races, and sexualizes the masked Asian/American woman as in need of Western liberation via penetration. Risky subjects pose threats of SARS infection and transmission to at-risk subjects. These designations—of risk and at-risk, of responsibility and irresponsibility, of native and invasive—pivot upon human-technology-border significations of gender, race, and nation.

Face Masks and Narratives of Un/Masking

According to CDC and National Institute for Occupational Safety and Health (NIOSH), face masks and respirators originated in the 1900s to shield miners

from dust and gases, protect soldiers from wartime chemical agents, and protect firefighters from airborne particulates and carbon monoxide (CDC 2009). Today, forms of respiratory protection remain regulated as personal protective equipment for workers, particularly in certain industries, including shipyard employment, construction, and longshoring (OSHA n.d.). The impetus to standardize respiratory protection, however, expands beyond workers in hazardous occupations and enlisted soldiers in war zones. The post-9/11 landscape is a composite of discrete, yet related states of emergency, inhabited, in part, by ordinary citizens, who are resigned in their readiness to survive threats and defend the homeland. Responsible citizens engage in government-endorsed preparedness practices like formulating family disaster plans and assembling basic disaster-supplies kits comprised of food, water, medications, masks, duct tape, and plastic sheeting (FEMA n.d.).

Daily existence for this newest incarnation of the paramilitary survivalist takes place in post-9/11 minefields of existing and emergent infectious disease outbreaks, terrorist attacks, and natural and human-made disasters. Even mundane biological processes of breathing can be hazardous to everyday human health. When compared to more advanced, even futuristic defense-oriented technologies, such as Israel's Iron Dome missile shield (Shanker and Broad 2012) and genetic-based techniques to prevent diseases (Lister Hill National Center for Biomedical Communications et al. 2013), the face mask can be considered a form of low technology. Low technologies require lesser degrees of scientific specialization and usually lower costs to develop, manufacture, and procure; moreover, they are commonly available to the public and relatively inexpensive. As consumers of low-tech defense, individuals can protect themselves from natural and human-made threats to health and safety. Lay populations can purchase rudimentary dust masks, along with duct tape, plastic sheeting, two-way radios, whistles, and pepper spray, at local discount markets. Recommended by the federal government, emergency kits are largely comprised of ordinary items that can serve multiple utilitarian purposes.

Government, science, and mainstream publications deploy face masks, its imageries, and its narratives in multiple ways: they are technological artifacts, recommended as risk countermeasures by authorities in public health, government, labor, and industry; in addition, through striking visuals and peculiar storytelling, the face mask takes on an oddly humorous sheen, one inflected by both comedy and horror genres, as part of emergency-preparedness pedagogy and performance. In turn, potent imagery of masked Asian/American women does affective work—that of, according to Avery Gordon, “hauntings,” which conjure “ghostly matters.” Specifically, potent imagery of the un/masked Asian/American woman is felt as:

[a] seething presence, acting on and often meddling with taken-for-granted realities, the ghost is just the sign, or the empirical evidence . . . that tells

you a haunting is taking place. The ghost is not simply a dead or a missing person, but a social figure, and investigating it can lead to that dense site where history and subjectivity make social life. The ghost of the apparition is one form by which something lost or barely visible, or seemingly not there to our supposedly well-trained eyes, makes itself known or apparent to us, in its own way, of course. (2008, 8)

The un/masked Asian/American woman arises as a seething presence of unsettling incongruities—namely, what is human, what is technology, what is un/natural, and what is native or invasive? This article works toward recovering and making visible her lost history and subjectivity.

Face masks as technological artifacts are posed in news articles as tools for infection control. Public health authorities, industry and union spokespeople, and governments are usually referenced and/or quoted. The following is an example: “Anyone suspected of having SARS should wear a surgical mask around others, and visitors should wear masks, [Dr. Hildy] Meyers [medical director of assessment and epidemiology for the Orange County Health Care Agency] said. After having contact with a SARS patient, people should wash their hands and disinfect items the patient has touched” (Gottlieb 2003). Mask use is advised for both risky and at-risk subjects by public health authorities; it is requested by labor unions, and is mandated by certain governments. The *Los Angeles Times* provides a brief history of surgical masks as tools for infection control. It notes that the “precedent for self-protection with masks dates to the great influenza pandemic of 1918, when people in the street covered their noses and mouths with fabric. In fact, San Francisco city leaders fined and jailed anyone who wasn’t wearing one” (Allen 2003). Masks were originally designed to protect ill patients from the germs of healthcare workers, but are now also used to “contain infection,” such that patients’ “microbe-loaded droplets” are caught before dispersing in the air (*ibid.*). The discursive construction of face masks, in other words, as a technology of SARS infection control is legitimized; it indicates an adherence to technology, a belief that science and its tools are useful against threats from Mother Nature and unscrupulous political regimes.

Recently, CDC has published two emergency-preparedness education guides. As a graphic novella, *Preparedness 101: Zombie Pandemic* (Silver et al. 2011) capitalizes on popular culture’s current fascination with supernatural figures, such as zombies, vampires, and werewolves. It features a young couple, Todd and Julie, who live with their dog in a spacious Victorian house. On this night, CDC alerts the public about a rapidly spreading outbreak of “zombie virus.” The reader learns about proper shelter practices—Todd and Julie spend the night in their basement—and about assembling the necessary components for an all-hazards emergency kit—including face masks. While the news-media coverage of the graphic novella was of amused appreciation, the reception of CDC’s second endeavor—“Wedding Day Survival Guide”—was far less warm,

and it has since been removed from the government website. According to National Public Radio's *Shots—Health Blog*, this latest survival guide used the summer's wedding season, instead of a zombie pandemic, as the state of emergency (Hensley 2012). Instead of zombies signifying an apocalyptic end to humankind, "bridezilla" stepped in as the disastrous figure: "Emergencies could range from a tear in your wedding gown, tornado, health issues, monster-in-laws, or bridezilla on the loose" (qtd. in Smithsonian.com 2012). "You never know when Bridezilla might pop up . . . Be supportive and have some bottled water from your emergency kit and a box of chocolate on hand" (qtd. in CBCNews: Community 2012).

In these instances, government-initiated preparedness campaigns center pedagogical attention on the proper assemblage of emergency kits. Their attempts at comedy-horror make sense as self-referential and irreverent references to the US Department of Homeland Security's ridiculed pronouncements that Americans ought to purchase duct tape and plastic sheeting as part of modern-day civil defense. Residents in the Washington, D.C. area heeded Department Secretary Tom Ridge's announcement by briskly purchasing these forms of low technology (Kelly and Hamilton 2003). However, as evidenced in John Tierney's 2003 *New York Times* article "Ridge Gets the Joke, but He Hasn't Lost His Focus," television comedians and comedy troupes mocked these government recommendations as ridiculously futile and alarmist.

Tangentially related, yet more than incidentally entwined in this textual and visual web of masks and un/masking, the *New York Times* published "Beach Essentials in China: Flip-Flops, a Towel, and a Ski Mask" in its Asia Pacific section (Levin 2012). Levin reports on an emerging trend among Chinese beach-going women who fear the facial tanning of their fair skin, privileged as a sign of middle-class feminine beauty. The growing fad is to wear neon-colored ski masks made out of stretchable swimsuit material. Levin's article includes a number of visually striking photos featuring masked Asian women. In the first one, the reader sees two ghoulish figures thigh-deep in water; they are attired in swimwear, including pink and aqua ski masks that completely obscure their faces, except for small eye, nose, and mouth openings. This is especially unnerving, given the beach-going context where bodies are expectantly visible; to have the body exposed but not the face is disquieting. The caption reads: "On the beach in Qingdao, China, a risk of being confused with Subcommander Marcos is a small price to pay for sun protection" (ibid.). US popular culture's current fascination with comedy-horror figures—zombies, vampires, and bridezillas—colors this variation of the masked Asian/American woman.

In these comedy-horror-laced, government emergency-preparedness guides, zombies and bridezillas stand in for terrorist attacks, hurricanes and nuclear disasters, functioning as less apparent human-technology-border figures. They get by on their science-fiction/horror cache and distract the public from serious consideration of the masked Asian/American woman as a similar character,

albeit with a major difference: she has a material existence and thus has more to lose.

In the SARS discourse, the masked Asian/American woman similarly haunts the public's imagination. Masks are striking visual objects of dueling *technophilia* and *technophobia*. As objects of technophilia, face masks, which are part of daily attire in areas affected by SARS, were commodified as voguish fashion: face masks, "many of them boldly and stylishly decorated . . . [were] sported everywhere on the streets of Hong Kong" (Mestel 2003). They were as "essential as shoes" and "have become something of a fashion statement, bearing colorful prints or designer logos" (Shih 2003; Stellin 2003). In *Newsweek's* cover story "The Mystery of SARS" (2003), journalist Claudia Kalb narrates SARS-related vignettes from around the world: for example, "[i]n Hong Kong, only . . . 100 people turned up to ogle Qianlong porcelain at a Sotheby's cocktail party—the first major social event in weeks. The party normally draws hundreds in Manolos; last week's guests accessorized with paper masks." She analogizes face masks to high fashion heels as the new "must-have" women's accessory. The cover story also reported that the "only luxury goods flying off shelves are fake Louis Vuitton surgical masks" (Carmichael, McGinn, and Theil 2003). Contributing to this discursive construction are visual images of Asian women accessorized and geared in designer face masks.

Face masks are also objects of technophobia. In articles written in the first person, the oppositional binary of the "masked face" versus the "naked face" cues the reader to the speaker's feelings of "fear" versus "relief." In "Fear Goes Global," *Los Angeles Times* reporter Mitchell Koss, traveling from Los Angeles to Hong Kong to report on SARS, uses masks as striking visual cues:

All the airport taxi drivers [in Hong Kong] were wearing masks. One of them took us to our plush but now reasonably priced—and largely empty—hotel, where masked personnel checked us in. I was beginning to wonder whether I was even supposed to sleep in my mask when a masked maid confided that the staff had been ordered to wear masks so as not to scare any guest who might have become afraid of naked faces. (2003, M6)

The journalist frames in close-ups the myriad of masked faces he encounters in his travels from the West to the Far East. The Hong Kong hotel staff directive—"ordered to wear masks so as not to scare any guest who might have become afraid of naked faces"—is juxtaposed with the following science-fiction/horror imagery: "It was beginning to feel as if we were in a low-budget science fiction movie. There were minimal special effects—cheap surgical masks—and a monster that you couldn't see: the virus. Even without a menacing soundtrack, it was hard to escape the sense that something was out there. Lurking. Waiting to attack" (ibid.). Koss situates masked faces as harbingers of a dueling technophilic/technophobic future that perhaps has already arrived as the "new normal." He depicts a moment when what is considered *human* and what is considered

technology have merged to the untenable point where the naked, unmasked human face becomes terrifyingly unnatural.

The boundaries between natural human biology and technology have blurred. That Koss frames this scenario as frightening contributes to a conflicted technophilic/technophobic SARS discourse that prominently features face masks and narratives of un/masking. The masked human figure, or human/technology figure, signifies this terrifying though normalized moment of resignation where one's susceptibility to risk—one's status as an at-risk subject—and, in turn, one's embodiment of risk—one's status as a risky subject—are uncertain. This uncertainty is unsettling, but a tangible and accessible action is close at hand: by masking, an individual can take responsibility for one's own health, and, in turn, for global public health. However, this resolves very little in terms of safety and survival. The masked Asian/American woman, as a ghostly figure, haunts these instances of post-9/11 emergency states.

Gendered Low-Tech Accessories as Neoliberal Self-Defense

Contemporary neoliberal survival builds on historical origins in the gendered, heterosexualized, raced, and classed dynamics of cold war civil defense. Laura McEnaney (2000), Tracy C. Davis (2007), and Melvin E. Matthews Jr. (2012) frame national security practices of today's War on Terrorism, such as heightened airport surveillance and federal intrusion into library lending records, as regenerations of 1950s national security efforts. Civil defense technology, when marketed to women and girls, transforms into "neoliberal self-defense." In this section, I illustrate several examples of neoliberal technologies couched in women's "empowerment." Low-tech self-defense plays upon a gendered consumer's fear of threats to her bodily integrity. As an example, 1970s US university feminists organized whistle campaigns to raise rape awareness on college campuses (Bevacqua 2000). The whistle, like an emergency kit's duct tape, has multiple applications as a tool. Feminists creatively transformed an inexpensive, ordinary item into a grassroots symbol of the feminist anti-rape movement. Now, rape whistles decreasingly symbolize political organizing; instead, they have been appropriated as depoliticized risk-reduction tools. Universities ubiquitously distribute rape whistles as part of an incoming coed's orientation kit. Additionally, Mace Security International's "Defense for Her" product line includes Mace Hot Pink Pepper Sprays. Here is how the company describes its product: "Pink just got Hotter! Mace Hot Pink Pepper Sprays come in a wide variety of models for those who prefer to carry their choice of personal defense in stylish pink . . . You can safely DEFEND YOURSELF" (2013; emphasis in original).

As another example, in September 2012, Clandestine Development, LLC, the makers of "LifeLine Response," released the self-described "first and only personal safety mobile app." Its promotional video frames the viewer—you—as "Jane Doe," the ideal consumer who finds use in the mobile app: "Perhaps

you can relate to these videos when you find yourself without the protection of friends, daylight, or security professional, you may be a vulnerable target of lurking predators. *Empower yourself with LifeLine Response*" (Clandestine Development; emphasis added). In an interview, Clandestine Development founder Peter Cahill explained the impetus behind LifeLine Response: "Becoming a father changes your perspective on things . . . We really think we can make a significant chunk in the reductions of rape" (Klimas 2012). In these examples, women—as gendered neoliberal citizens—are uniformed in low-tech, fashion-like accessories, like rape whistles, purse-sized pink pepper sprays, and personal-safety mobile apps, in order to protect themselves from omnipresent risk. Through the power of consuming low-tech accessories as self-defense, they "empower" themselves as women. Furthermore, the companies and organizations that make available these forms of consumer-oriented personal protection assert themselves as paternal and professional protectors of women's safety.

The exigencies in these above "states of emergency" play upon a profit-oriented narrative: a certain type of gendered, classed, nationalized, and raced body is vulnerable to trespass by sexualized threats and industrial toxins. Empowered consumption is not only legitimized as gendered neoliberal self-defense, but it is urgently demanded and expected as a woman's privatized responsibility. However, this script reverses when the vulnerable body is an Asian/American woman laboring in service work.⁴ Immigrant women's health-advocacy organizations, along with women's health and labor scholars, focus on occupational health hazards endured by Asian immigrant women working in the nail-salon industry. Nail products contain chemicals, with potential adverse health effects, including irritation to the upper respiratory system (Gorman and O'Connor 2007; NAPAWF 2008; Roelofs et al. 2008). In Cora Roelofs and colleagues' interviewer-assisted survey of Boston Vietnamese American women nail technicians, 90 percent reported wearing a mask at work. Qualitative responses include "We know chemicals are dangerous, the owner tells us to wear mask"; and "Owner said you should wear mask so you will not inhale liquid smell" (2008, 358). At the same time, Miliann Kang's fieldwork reveals that nail-salon workers face challenges when attempting to engage in self-protective practices: "customers not only are unaware of health risks but also object to their service providers' attempts to protect themselves by using masks and gloves . . . Jenny Park said, 'When I first wore them [masks], they [customers] asked if I had a cold and suggested that if I did, I [should] go home and take a break'" (2010, 224). The masked Asian/American woman as a sign of disease helps illuminate why mask use in service relations is so charged.

Rosalind Gill examines the overlaps and convergences of neoliberalism and postfeminism. She posits: "Could it be that neoliberalism is *always already gendered*, and that women are constructed as its ideal subjects?" (2008, 443; emphasis in original). Gill states that "[t]o a much greater extent than men, women are required to work on and transform the self, to regulate every aspect

of their conduct, and to present all their actions as freely chosen" (ibid.). In tracing present-day US emergency preparedness, it is evident that contemporary neoliberal survival builds on historical precedents in the gendered, heterosexualized, raced, and classed dynamics of cold war civil defense. It is also akin to depoliticized risk-reduction practices that spur gendered consumption and obscure systematic oppressions. Face masks, rape whistles, Hot Pink Pepper Spray, and mobile personal-safety apps may seem to be unlikely companion pieces, yet all are gendered, low-tech accessories for the neoliberal citizen—a citizen who accepts the privatization of preparedness, and disciplines herself to survive. In failure, victim-blaming ideologies prevail.

Privatization of Protection: Neoliberalism's Promise of Failure

According to McEnaney: "self-help shifted the financial burden for readiness from the state to the individual, mandating that *consumer-citizens* purchase the tools of survival (such as shelter)" (2000, 7; emphasis added). Similar assessments of proposed public health and Homeland Security legislation echo McEnaney's evaluation of cold war civil defense privatization. On October 23, 2001, CDC released its first draft of the Model State Emergency Health Powers Act. Accordingly, state governments were given the authority to declare a "state of public health emergency," during which public health personnel could also order citizens to submit to mandatory examinations and treatment. If citizens refuse to submit, they would be subject to either quarantine or criminal punishment (Annas 2002). This, along with President Bush's executive order, invoked fears reminiscent of the forced quarantining of Chinese Americans and the razing of Chinatowns during early twentieth-century plague outbreaks in San Francisco and Honolulu (McClain 1988).

Wendy K. Mariner, George J. Annas, and Leonard H. Glantz (2005) connect civil-liberty infringements during times of new epidemics to national security issues. During national emergencies, overreacting occurs and constitutional rights are infringed upon, in violation of established law. The authors warn against the nation's seeming complacency to give up certain liberties in order to ensure safety and security (2005, 587). Coercive measures have historically targeted those least able to defend themselves—namely, immigrant groups, disadvantaged minorities, the poor, Chinese women sexualized as prostitutes, and venereal disease carriers. Contemporary anti-terrorist laws continue this trend by targeting marginalized groups. Mariner and colleagues fear that state legislatures, facing limited funds, will "turn to laws that restrict personal liberty as a substitute for providing the resources necessary for positive public health programs that actually prevent disease and improve health" (588). Furthermore, this dangerously "shifts responsibility for protecting the public health from the government to individuals and punishes those who are least able to protect themselves" (ibid.). The authors advocate a public health ethic committed

to equity, rather than civil-liberty infringements delivered under the guise of responsible neoliberal citizenship.

While scholars in public health regularly address the incidence and prevalence rates of chronic illnesses, they could also help to frame this paramilitary conversation about *self-help defense* and *self-defense*. Former Rockefeller Foundation president John Knowles wrote “The Responsibility of the Individual” (1977), a classic treatise on the US citizen’s moral imperative to manage personal health behaviors. Sylvia Tesh (1981) and Kenneth R. McLeroy et al. (1988) assess Knowles’s stance as contributing to victim-blaming ideologies that stunt the effectiveness of health-promotion programs and practices. As an intervention, McLeroy and colleagues argue that an ecological model that systematically encompasses more than the individual level of health behavior to address interpersonal, institutional, community, and public-policy factors allows both experts and the public to move beyond victim-blaming and toward improved population health. Within this public health framework, the self-help defense—as promoted during the cold war—and self-defense—as adapted during our post-9/11 era—concentrate on Knowles’s individual responsibility as moral duty. However, these acts of individual moral responsibility are not “empowering choices.” To use Iris Ofelia Lopez’s (2008) concept of “constrained choices,” the empowering choice to mask, carry Hot Pink Pepper Spray, or use a mobile personal-safety app already signals the failure of neoliberalism. These decisions are based on limited options. Privatization, at the cost of the public good, leaves constrained options concentrated at the individual level and disparately disadvantages marginalized populations. Society’s most vulnerable subjects, who succeed as model neoliberal citizens, actually gesture to the failed promise of liberal democracy—which is neoliberal governance.

Implications for Transnational Feminist Justice

How can feminist research approach human-technology-border emergencies that manifest as public health anxieties? Deploying the masked Asian/American woman as an analytic construct highlights the ways in which practices of risk containment and individual responsibility become inadequate gestures of gendered and raced “citizenship” during times of national (in)security.

In July 2008, US Citizenship and Immigration Services (USCIS) mandated the human papillomavirus (HPV) vaccination for women and girls ages 11–26 seeking legal permanent residence or immigrant visas. Ultimately, as of December 14, 2009, feminist advocacy work successfully effected this federal mandate’s reversal. In making sense of this victory, Yeung and Allen (2009) articulate what can be considered a US-based, transnational feminist approach to women’s health justice. They challenge mandated restrictions on personal liberties as substitutes for accessible, positive public health programs. In other

words, responsibility shifts from the government to the individual in protecting the nation's health, such that immigrant women's bodies and pocketbooks disparately bear this public health burden. Furthermore, such putative impacts target immigrant women and girls who are among the least able to cope with the nation's lack of affordable healthcare resources.

In this instance, the process of "becoming a new American" symbolically masks the Asian/American woman. She can fulfill her individual responsibility as a model neoliberal citizen by symbolically "choosing" to mask herself; that is, to submit to mandatory HPV vaccination in order to contain her risk as a sexualized public health threat to the native US population. The prospective immigrant woman faces a constrained choice to submit to substantial financial and time burdens, as well as unknown long-term side effects and efficacy. Otherwise, she can pay a mandatory waiver fee of \$565 if she opposes the vaccine based on belief or moral convictions; she can delay her application until she passes out of the age range for mandatory vaccination; or, finally, she can decide not to pursue her immigration application (NAPAWF et al. 2009). As an individual-level public health "choice," the HPV vaccination, like face masks, is a decision based on limited options; to unmask her is to unmask the discursive production of states of emergency that target and constrain certain bodies and mobilities.

The use of the masked Asian/American woman to advocate for a transnational feminist justice, attends to the occupational, sexual, and reproductive health rights of Asian women as transnational labor within the US context. In addition to continued scholarship on immigrant women who work in the beauty-related service industry, these conversations are not limited to Asian women. High concentrations of Latina immigrants and Mexican women are similarly located in low-wage employment, such as in the garment industry and the *maquiladora* system straddling the US–Mexico border (Fuentes and Ehrenreich 1983).⁵

The masked Asian/American woman, as an analytic construct—in an intersectional and transnational feminist science studies approach to analyses of public health anxieties—can provide insight into neoliberal gestures of self-defense and individual responsibility, representational biopolitics of the global economy, gendered labor mobility across borders, configurations of monsters and ghosts during states of emergency, and health justice for women and immigrant communities. She is a low-tech specter of emergency preparedness. Her hauntings—spooky, tormenting, and, at times, comically bizarre—call upon us to examine and challenge public health inequalities.

Acknowledgment

The author thanks her colleagues and reviewers for their suggestions.

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Notes

1. Following Wendy Brown (2005), I use *neoliberalism* to mean contemporary political, economic, and cultural projects that discipline subjects as being solely responsible—largely through practices of consumption—for individualized pursuits of success, prosperity, equality, and happiness.
2. The advertisement appeared in the May 5, 2003 issue of *Newsweek* (vol. 141, p. 55).
3. I am grateful to one of the anonymous reviewers for this connection.
4. Once again, I appreciate an anonymous reviewer's suggestion to make this link.
5. Annette Fuentes and Barbara Ehrenreich detail US corporate "offshore sourcing" practices in their *Women in the Global Factory* (1983, 6). Incentivized by Western development policies, third world countries established attractive economic zones for US and multinational corporate manufacturing and assembly. In these zones, Western companies pay far lower wages for "low-skilled, labor-intensive jobs" and avoid environmental and safety regulations. *Maquiladoras* refer to factories, largely located along the US–Mexico border, which employ high proportions of women workers who frequently labor in unsafe conditions, for little pay, and with little job security and worker dignity. See *Women in the Global Factory* for an historically rich account of globalization's impact on women workers.

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