

## **Lung Disease and Luck: On the Critical Limits of Contingency**

This paper explores a neglected bodily heritage of a key concept in cultural studies: contingency. For many thinkers in cultural studies, such as Judith Butler, Foucault and those interested in genealogy, contingency is understood in temporal terms as events that could have been otherwise. This tradition understands contingency to have subversive political implications, arguing that it allows us to understand seemingly natural categories - such as race, sex, and religion - to be the product of undetermined historical events. Because such categories could have been otherwise, the argument runs, they still could be otherwise. Thus, contingency at once critiques the status quo and holds open the possibility of a better, less restrictive future.

Yet speaking about the contingency or necessity of history in sweeping terms obscures the reality of suffering on the ground by those whose lives were upended by contingency. Paradoxically, a concept meant to hold open hope for the marginalized becomes yet another theory of meta-history that flattens the lived experience of suffering bodies. Accordingly, this paper seeks to reground contingency in the specificity of human experience by returning to a neglected understanding of contingency that claims we feel most acutely the fragility of contingency through the body's vulnerability to the external world and the passions as they ambush the soul.

In order to flesh out the stakes of this alternative, bodily conception of contingency, this presentation focuses on the work of contemporary philosopher Havi Carel on the phenomenology of illness. In 2006, at the age of 35, Carel was diagnosed with a degenerative lung disease that came with a prognosis of death in ten years. Between the first and second editions of her book, new medication was developed that arrested the course of her disease, allowing Carel to become a mother. When reflecting back on these developments in the preface to the second edition, Carel ended by voicing her awareness of her own contingency: "But I am also deeply conscious of the precariousness of life and the extraordinary luck that brought about the two events. I remain acutely aware that it could have been otherwise."

Placed in the context of Carel's book, there are three reasons why her bodily infirmity opened her to a greater awareness of her contingency. 1) The rapid onset of her illness meant she was constantly straining to do activities out of sheer, bodily habit that were no longer in her power. Thus, in every movement she was thrown up against the knowledge of how different her life could have been, had she never fallen ill. 2) The diminishment of her powers also altered her experience of space. She was constantly forced to grapple with the gap between the distances she used to be able to traverse easily and her new, affective experience of the same space insurmountably far or steep. 3) Her horizon of lived time contracted. Thus, desires that had seemed modest in her previous life, such as the wish for a child, suddenly seemed unreasonably dependent on good fortune.

The paper ends by suggesting Carel's experience of illness at once expands our understanding of contingency and pushes against any easy narrative of its revolutionary potential.

**Bio:**

Dr. Liane F. Carlson received her PhD in philosophy of religion from Columbia University in 2015. She is currently Stewart Postdoctoral Fellow and Lecturer in Religion at Princeton University. Her research interests include the philosophical and theological history of Critical Theory, with particular emphasis on German Romanticism, phenomenology, the limits of the critical power of history, the problem of evil, and the intersection of religion and literature.