Veins of Devotion

Jacob Copeman

Published by Rutgers University Press

Copeman, Jacob. 
Veins of Devotion: Blood Donation and Religious Experience in North India. 
Project MUSE. muse.jhu.edu/book/6171.

For additional information about this book
https://muse.jhu.edu/book/6171

For content related to this chapter
https://muse.jhu.edu/related_content?type=book&id=140453
To conclude I begin by reviewing the themes of time-space distanciation and Nehruvian thinking, and demonstrate a significant connection between them. In my discussion of “donor-soldiers” in chapter 6, I noted that blood donation enables Sant Nirankari and Dera Sacha Sauda devotees, from a distance, to play an intimate role in the nation’s military affairs. The distanciating function of blood donation, through which simultaneous convergence and separation is achieved between different entities, is vital here. The potentially fraught commitment of the patriotic devotee of soldierly provenance to the values of ahimsa is made experientially practicable by way of this corporeal system of concurrent intimacy and distance. Indeed, one of the most obvious but important facts about blood donation is that, at the point of transfusion, the donor is present in absentia. This is the case in all countries but has particularly significant implications in India. Like money, which, “owing to the abstractness of its form . . . can exercise its effects upon the most remote areas” (Simmel 1991: 504), anonymous voluntary blood donation enables donors to act in various ways at a distance. A further key distanciation function comes into view in an interesting conjunction with what I have been calling Nehruvian thinking.

Consider now the stanza reproduced above from Donne’s “The Flea.”

Swelling “with one blood made of two,” the blood of the poet and his lady is

MARK but this flea, and mark in this,
How little that which thou deny’st me is;
It suck’d me first, and now sucks thee,
And in this flea, our two bloods mingled be;
Thou know’st that this cannot be said
A sin, nor shame, nor loss of maidenhead,
Yet this enjoys before it woo,
And pamper’d swells with one blood made of two,
And this, alas, is more than we would do.

John Donne, “The Flea”
“mingled” in the flea but the “donors” themselves are present only in absentia. As Paglia remarks, “The couple have somehow vaulted to procreation without sexual intercourse.” With their blood mingling, but at a distance from their own bodies, the flea has become their “weird child” (Paglia 2005), despite the lack of direct sexual contact.

The logic of mixing at one remove conveyed in the poem can, I believe, shed light on Nehruvian thinking and conflicted ideas about caste. Donors and doctors often claim that voluntary blood donation constitutes an active means of transgressing caste distinctions, thereby rendering them irrelevant—biological continuities following blood group rather than caste substance. In broad terms I would call this approach Nehruvian. Throughout my fieldwork, however, I was struck by the fact that many of those who express vigorous anticaste sentiments nevertheless employ “clean caste” cooks and justify having no contact with blood bank cleaners and city sweepers for reasons of hygiene. One bania acquaintance of mine, for instance, who expressed the hope that his blood would be transfused into recipients of a caste other than his in order to show that “we are all one,” declines to eat with the cleaning staff at the school in which he teaches. The donation of blood by those who claim to be anticaste but who nevertheless harbor misgivings about contact with “unclean” caste members appears to allow them to “perform” the anticaste sentiments they profess. What could be more anticaste than mixing one’s substance with that of one from any conceivable jati? And yet this is a mixing at one remove from the donor—blood donation enables nonimperiling contact with others, just as the distanciation function of the flea enabled Donne and his lover to vault to procreation with no “loss of maidenhead.”

I have briefly discussed issues concerning nonimperilling caste contact in order to show that distanciation can be subject to deployments beyond moral dilemmas about violence. There is a more general point, which is that blood donation opens up new possibilities of connective configuration in enabling donors to form relations at one remove. This study has presented just two examples of this—Nirankari and Sacha Sauda soldiering from a distance and “anticaste” mixing at a distance—though there may well be others that I did not encounter directly during ethnographic research. What seems clear is that the time-space distanciation aspect of blood donation permits a “secret sympathy” between variegated conceptions of violence and caste, enabling certain types of blood giver to adhere to and yet to simultaneously disavow martial commitments and caste distinctions. As Laidlaw (1995: 21) notes, logical consistency is “not something which is necessarily there to be found.” Rather, “it takes work to create, reproduce, and maintain it, and it is always partial.” In situations of apparently divergent allegiances, blood donation can facilitate partial and provisional experiential solutions, its properties of distanciation, in certain situations, enabling complex accommodations between different aims and imperatives.
The blood bank’s mediating role ensures that donors and recipients do not meet and is therefore the guarantor of the anonymity which facilitates time-space distanciation. In making blood donation “work” to produce particular effects, it is most often its anonymity that is operationalized. In chapter 7, I explored the nationalist implications of anonymity, arguing that it offers an imaginative canvas that enables donors to prospectively enumerate and thereby conceptually gather together along “community” lines the gift’s possible recipients. Building on Konrad’s path-breaking work on anonymity, I proposed the term “national transilience” in order to draw attention to the significance of anonymous relations of extension and multiplicity in processes of nationalist ideation. Chapter 5 demonstrated a further usage of anonymity as a means to portray conspicuous extraction and benefaction as a secret gift. Anonymity also plays a vital role in the “centrifuge” of directional intentionalities required by the formal conceptual logic underpinning the institutional transition from replacement to a voluntary blood donation system in which blood is donated for m/any rather than for singular, known recipients.

This centrifuge of directional intentionalities connects with and helps bring forth other processes of “widening” through what I called centrifugal alliances. As was seen in chapters 2 and 7, concepts of family are one key area of widening (cf. Harriss 2003). In a further example, chapter 4 demonstrated that Nirankari spiritual expansionism finds a key facilitative structure in the centrifugal pathways of voluntary donation which enable devotees’ viscous love to travel to m/any. The “feedback” in each of these cases of “active not knowing” is the practical provision of materia medica which brings to fruition the formal systemic transition that is under way. This formal transition requires not only the centrifugation of directional intentionalities but is also heavily dependent on temporal centrifugation: voluntary donation requires not one-time extravagant extractions but “widened out,” routinized giving activity.

Chapters 2 and 3 in particular explored questions concerning the morality of widening, with the ideology of voluntary blood donation locating virtue squarely within centrifugal directional intentionalities and the mechanical transgression of community distinctions. It follows that centripetal directional intentionalities, where, for instance, blood is explicitly donated for one community and not another, have attained an ignominious stature of transgression: soon after the extreme sectarian violence that engulfed the state of Gujarat in 2002, a recruiter in urgent need of blood went to a Hindu guru and was provided with 200 donations: “As the camp was finishing [the guru] told me his devotees had requested the blood go only to Hindus. I said, No way! At the same time a Muslim hospital told me they needed blood. I said come and take it. We provided the blood. After 15 days there were 70 Muslim donors at my [Red Cross] blood bank saying that they were ready to reciprocate the help done for them by donating for the Hindus. I said, forget it. I will give the blood to anyone, not
Hindus.” Conversely, shortly after the catastrophic “Boxing Day tsunami” struck the coastal regions of south and southeast Asia in December 2004, an eighty-two-year-old widow from Kolkata was reported to have donated to the relief effort “the Rs 2,001 she was going to spend on her late husband’s annual shradh ceremony.” In distributing the resources earmarked for the memorial rites of her dead husband instead to the needy and unknown victims of a natural disaster, she “centrifuged” her offering from one to many, causing it to resonate with the transition in modes of giving blood which has been the focus of this study.

And yet, as was argued in chapters 1 and 4, centrifugal movements are frequently structured according to centripetal patterns. To take the example of the Nirankari guru, the two sorts of directional movement interlock in a “to” and “through” model, with gifts singularly (centripetally) aimed at the guru by devotees subsequently being multiply refracted by him toward “humanity.” Simultaneously recipient and donor, the guru repersonalizes the gift, even as the formal changeover to a voluntary system seems to depersonalize it. The Nirankari case is a particularly striking example of a wider set of comparable instances in which a specific object is relied upon to facilitate the abstracted gift. In chapter 1, the example was given of a thalassemic child, and death anniversary and birthday donation camps are further cases in which specific personalities constitute the multiply refractive cynosures of donation. The transition to a voluntary system thus reflects Ramanujan’s (1989) claim that while modernization in India can be seen as a movement from the context-sensitive toward the context-free, the context-free is prone to become subject to complex processes of recontextualization (Ramanujan 1989: 55, 57).

In addition to these processes of repersonalization, chapters 2 and 7 focused on analogous instances of refamilialization. The complex and paradoxical trajectory of the relation between blood donation and sacrifice presents a comparable picture. Cohen (2001: 18) has explored prevalent public representations of intrafamilial corporeal sacrifice, such as kidney selling to raise dowry funds, as a means of restoring conventional kinship structures and dependencies seen as under threat from “selfish, Western modernity.” Replacement blood donation similarly centers on familial obligation and sacrifice—especially for the many relatives who are unconvinced of the safety of blood donation but who nonetheless donate their blood. The policy shift to voluntary donation removes these sacrificial flows from what many see as their natural familial domain, and has also necessitated a set of campaigns designed to counter the widespread association between donation and physical peril. Indeed, chapter 1 discussed Delhi recruiters’ attempts to portray donation as a health-enhancing activity through promoting a purificatory, even yogic conception of the activity.

And yet, just as the compelling forces of payment, family, and personal specificity resurface (albeit transfigured) as incubuses within a voluntary mode officially resistant to them, several forms of sacrificial logic retain a powerful
presence within the new system. As was seen in chapters 3 and 6, blood donation as sacrifice for the nation or expression of desh-bhakti is an established theme in donor solicitation. The “freedom fighter” songs frequently played at corporate and educational donation camps are one such example, as are the camps staged in honor of policemen or soldiers considered to have shed their blood for the nation. These camps share with those held in memory of assassinated gurus and politicians a familiar sacrificial template—commemorative blood donation retrospectively bestows on the original death capacities of regeneration, the victim bringing forth new life via the blood donations enacted in his or her memory.

A further distinct but connected dimension of the relation between sacrifice and blood donation came into focus in chapter 6. For one animal rights organization, the life-giving bloodshed of blood donation is enacted on Kali Puja as the substitutive ennoblement of the life-taking bloodshed of animal sacrifice—a practice closely associated with the worship of this bloodthirsty Bengal goddess. Strongly recalling instances discussed in chapter 3 of blood donation as the substitutive ennoblement of instances of “waste” and “extravagance” such as pind-dan and feasting, there is also a sense here in which blood donation joins the lopping of cucumbers and lemons as a consummate reformist practice of nonviolence. But blood donation possesses neither a transparent nor a singular relationship with violence and nonviolence. Even in the instance of Kali Puja it cannot but refer to violence in substituting for it. What I drew attention to in chapter 6 is the mediating, double-edged role of blood donation in the subcontinent through which it has become both an exemplary sign of nonviolence and a means of engaging in violent action at one remove (cf. Pocock 1973).

As was mentioned in chapter 3, classical dan is “officially” a surrogate for both asceticism and sacrifice in the Age of Kali (Parry 1994: 190). That human blood is given on Kali Puja brings sacrifice full circle, with human substance substituting for that of the animals substituting for humans. In a comparable move, there is a sense in which Nirankari and Sacha Sauda rakt-dan, which in various ways translates blood donation into ascetic practice, reclaims the asceticism which dan is meant to imitate. Attempts to donate blood despite being physically unfit to do so (chapter 4), or to give twice at one camp (chapter 5), or three times on consecutive days (chapter 3) suggest a conception of blood donation as an austerity. Self-denying on one level, it is “enlightened self-interest” on another. Inwardly directed forms of asceticism such as these, where “returns” such as blessings and spiritual advancement are key motivating factors, may be considered “centripetal asceticism.” Centripetal asceticism enacted in blood donation contexts endangers transfusion recipients because it propels the medically unfit toward donation, who welcome it as an austerity. This brand of asceticism is evidence, in Strathern’s (1988: 131–132) words, that “intention and
motivation have physiological consequences. The person is vulnerable, so to speak, both to the bodily disposition of others toward him or her and to their wills and desires.” What I wish to emphasize here is that centripetal asceticism appears to conflict with another mode of asceticism that I call “donation asceticism.” I now take further the arguments of chapter 4 in delineating these contrasting modes of asceticism.

“Donation asceticism” refers to the ways in which the doctrine of voluntary donation as formulated by international arbiters of health policy such as the WHO and the Red Cross makes demands on donors, requiring that they enact self-care as the simultaneous care of the other (the transfusion recipient). This brand of asceticism applies and is responsive to the contemporary globalized blood donation ecumene (S. Bayly 2004b: 321; Hannerz 1999) and is encapsulated in the slogan, “Safe Blood Starts with Me,” which, originally formulated by the WHO, has been adopted by various medical authorities and institutions worldwide including those in India. An apparently fairly vapid slogan, possessed neither of dense signification nor particular moral weight, it in fact suggests that donors’ conduct and desires must be subjected to “habits of control and self-surveillance” (Laidlaw 1995: 189). Voluntary donors, so reads the subtext, must abstain from actions such as drug use or sexual promiscuity that might lead to the transmission of infection to recipients. Moreover, the two primary functions of the first World Blood Donor Day, held on 14 June 2004, were to thank donors and to promote healthy lifestyles among them. The French Voluntary Blood Donors Code of Honor, to which I referred in chapter 4, states: “I declare on my honor:—to remain worthy of being a Voluntary Blood Donor, respecting the rules of morality, good behavior, and solidarity with fellow human beings” (Ray 1990: 69).

This French code recalls the formal vows undertaken by initiate renouncers (see Laidlaw 2005; van der Veer 1988: 118–119), and the doctrine of voluntary donation does indeed make ascetic demands on donors, with asceticism defined here as “a regime of self-imposed but at the same time authoritatively prescribed and ordered bodily disciplines” (Laidlaw 1995: 151). In Alter’s (1992: 324) view, “a key symbol of the [classically defined] sannyasi’s world renunciation is his mastery of sensual desire.” Donor-ascetics must similarly control their desires and pledge—implicitly or explicitly—to enact “responsible” corporeal trusteeship. The following example again recalls the renouncer’s vow: when the son of a friend of mine in Delhi turned eighteen he made a pledge (sankalp) to donate blood three times a year until the age of seventy, recognizing that it is was his responsibility (jimedari) to live healthily and take precautions to avert the causes of hypertension, diabetes, or any other disqualifying condition that could make him an agent of the transmission of infection. Foucault’s (1984: 47) term “gift-obligation” draws attention to the interrelation of freedom and diligence characteristic of the care of the self as found in Epictetus’s Discourses, but
something like the same nuanced interrelation is also a feature of the expectations
placed upon voluntary donors. To be a blood donor is to enter a subtle complex
of duty and obligation—one is asked to safeguard that part of oneself which may
become part of another.

The modes of religious asceticism described by Laidlaw (2005) and van der
Veer (1988) differ from donation asceticism in that they are undertaken for the
“centripetal” purpose of self-perfection and subsequent freedom from rebirth.
Donation asceticism, instead, possesses a centrifugal quality: donors engage in
bodily discipline for the protection of the many abstract future recipients
of their donated blood. This can best be understood in proprietorial terms,
since there is a sense in which repeat donors are expected to “renounce” own-
ership of their bodies and instead enact a futurially oriented “distributed own-
ership.” The term “corporeal trusteeship,” employed above, is apt. The trustee
administers another’s property for a specified purpose. Donation asceticism
proposes a corporeal extension of the same idea. Repeat blood donors “admin-
ister” their bodies on behalf of hypothetical future recipients (their bodies’
“owners”). Additional bodily care and defense is required because as repeat
donors, their bodies are no longer only their own. Strathern (n.d.) writes that
“there are diverse ways in which [people] might be said to ‘own’ one another.”
In this instance, the donor’s body is “owned” by a quantity of persons equivalent
to the sum of its future extractions. Donation asceticism reflects one such pre-
viously unacknowledged way in which implicit claims are made by persons on
other persons. (Future recipient “owners” remain, of course, abstract and hypo-
thetical, with claims being made on their behalf by proponents of the doctrine
of voluntary donation.)

Whereas donation asceticism makes recipients central in opening up the
donor’s body to their ownership, the fusion between centripetal, or self-
oriented, asceticism and blood donation conceptually effaces transfusion recip-
ients, with donation enrolled as an austerity “to improve the condition of [the
devotee-donor’s] soul” (Laidlaw 1995: 152). The latter brand of asceticism voli-
tionally “conceals” the very recipients the former is designed to protect. The
issue of recipient concealment was discussed in chapters 4 and 5. And yet, there
need not be a conflict between these modes of asceticism. As was seen in chap-
ter 4, a group of Thai Buddhist monks has configured the relationship between
merit, act, and effect in such a way that foregrounds the enactment of responsi-
bility for vulnerable recipients as the very condition of obtaining merit. Such an
innovative configuration demonstrates how the safety requirements of blood
donation and devotees’ concern with merit might be fruitfully reconciled. It
could in consequence serve as a kind of ascetic template for devotional orders
such as the Dera Sacha Sauda and Sant Nirankaris. What I hope to have shown
here is that juxtaposition of fresh ethnographic data from the corporeal dona-
tion ecumene with the rich anthropological literature on “classical” asceticism
can shed new light on emergent interrelations between biomedicine, asceticism, and responsibility.

A further important dimension of this study has been a focus on the complex intertwinings between blood donation and Nehruvian modes of conceptualization. Chapter 3 considered a photograph of Nehru donating blood, placing it in the context of Nehruvian sacrificial logics. A broadly Nehruvian disparagement of the “bania-fication” of donor solicitation was also discussed, as were depictions of voluntary blood donors as a jati-like minority community. As chapter 7 showed, however, the most striking manifestation of Nehruvian thinking in the blood donation milieu is that which relates to “national integration.” Anthropologists have long been somewhat overawed by and seemingly unable to move beyond the rise in extremist Hinduism. The Hindutva phenomenon is, of course, of critical significance but it is not and has never been the only game in town. In a challenge to the prevailing assumption that the only thing that counts politically in India today is the debunking or overriding of Nehruvian ideals of the secular inclusive nation, the present study has rehabilitated Nehruvianism and secularism as important ethnographic subjects. This has been through a focus on national integration, an aspect of Nehruvian secularism that is often overlooked and which has found a key sanctuary in the emergent Indian ideology of voluntary blood donation.

Anthropologists have over recent years learned the important lesson that ethnographic expectations of integration can come “at the expense of vividly imagined ethical life” (Laidlaw 1995: 389). But this of course should not cause them to overlook vividly imagined indigenous analytics of integration. The Nehruvian integrative tool kit consists of a scenography of gathering and spatial concentration and of the anonymous conditions of donation. Both factors enable modes of enumeration that obsessively locate the diverse sources of the gathered entities (whether conceptual, physical, or both). Powerful correlations are thereby set up with the idea of a multiply composed and yet singularly coherent nation.

This study has been particularly concerned with the ways in which practices of enumeration and calculation operate in ways that move between and across categories of the “spiritual” and the ostensibly scientific or utilitarian. As was seen in chapters 2, 3, and 5, the quantification of seva is an important qualitative aspect of devotional practice and more generally of the ways in which donors envisage their giving. Mass camps are a case in point. Such events of conspicuous extraction produce gargantuan numbers for publicity purposes, but on the level of the individual devotee who wishes to donate twice or thrice, numbers are in an intimate relation with sacrifice and merit. If in such instances the three months meant to elapse between donations acts as a bar to grand extractive gestures capable of building up merit, chapter 2 showed how
Hinduism’s existing calculative repertoire can interact with new blood bank technology to produce a possible solution. This novel conjunction is seen to generate meritorious multiplications not through the giving of more but through the treatment of donated blood in order to increase its destinations. What results is the technological production of merit.

To further demonstrate Indian blood donors’ propensity to treat numbers not as stable objects but as protean conceptual material, I briefly refer to blood bank director Dr. Bhatia’s virtuoso reflections concerning apheresis, a special form of component therapy in which only one component of donors’ blood is removed, the “leftover” portion being transfused into them even as they donate. Since this allows more to be taken of a specific component than is obtainable from conventional donations, recipients in need of only one component can avoid having to have a multiply sourced and therefore riskier transfusion. As Bhatia puts it: “the apheresis donor can donate platelets every 48 hours because platelets get regenerated within 48 hours in the body. So every 48 hours you can donate your platelets, we say subject to a maximum of 24 times in a year.” Apheresis thus enables donors to donate with increased frequency. As was seen in chapter 2, conventional component therapy enables three or four recipients to receive blood deriving from a single donation. Bhatia combines the two arithmetical models of component separation and apheresis to produce an arresting figure of massively expanded gift destinations: “You donate your platelets 24 times per year, so you help or save 24 lives through the apheresis system, plus you donate your blood four times a year—and each of these units gets separated into at least three components; thereby you are helping another 12 lives. So the total you can save is 36 lives in one year. If you donate for about 40 years from 18–60 years of age, 1,200–1,500 people will be saved during the lifespan of a healthy, active, regular voluntary donor.” The figure prior to component separation and apheresis for a lifetime of lifesaving was a comparatively paltry 168.

Consider now a recruitment poster sponsored by the Canara Bank Social Banking Cell, widely displayed before the advent of the new arithmetic of component therapy, which contains the text: “Between the ages of 18–60 you can save 168 lives. How many lives have you saved so far?” The analogy here between saving money and lives suggests possible interrelations between banks of money, merit, and blood. Since units of blood may at the same time be units of merit (see chapter 2), one can “save up” the lives one has saved in the karma bank and also make withdrawals. As a female teacher told me, “simran [remembering God] is like a bank (kosh). You are storing something. You store your good deeds and your simran and you can cash it any time. When you need money you go to the bank, so when you are suffering too much you say to God, Oh help me, and He will say, this person never forgot me, so how can I let him down now?” At a recruitment event staged before Delhi schoolchildren, this overlapping of
varieties of bank was made explicit in a song adapted by a medical student from the film *Mukadar ka Sikander* (The Luck of the Winner):

Do a great contribution of rakt-dan and earn punya.
The whole life we work hard to fill our banks with money,
But if we devote our deeds to punya-karma [meritorious action]
We can fill up our banks with good deeds.

So Bhatia’s numerical emphasis draws attention to the quantitative basis of much seva activity and the related calculability of spiritual credit, but his personal donation theology goes even further. As was seen in chapter 3, Bhatia recently addressed a large gathering of students of the yoga guru Swami Ramdev at which a donation camp had been organized: “You people will probably not think that what Swami Ji is telling you about pranayam [a yogic breathing technique] and meditative posture is like a single act of blood donation, but just do blood donation and you will automatically go into those states. Do it more regularly, do it more regularly, still more regularly, get into apheresis, get apheresis done every 48 hours. Maybe another technique comes up tomorrow where every five minutes you can give something—who knows? Science might develop something where everyday you can give blood and this will be satat dyan [a continuous meditation].” In this prospective regime of total donation, meditation is medicalized, machinic, and unending.

But why should Ramdev’s students reach yogic and meditative states through blood donation? The answer lies in a “metacorrespondence” (Alter 2004: 78) between yoga and blood donation which centers on oneness and the universal. “Meditation,” says Bhatia, “is the method of communicating with the creator. It is a mode to realize the oneness of everything. Blood donation is equal to meditation in this manner: your donated blood goes into many patients.” The high-frequency donation enabled by apheresis and the concurrent distribution to numerous recipients enabled by component therapy radically multiplies the extensional reach of donors, and it is this which generates a sense for Bhatia of a cosmic, universal connectivity and therefore of a kind of technological samadhi. Samadhi, the telos of yoga in which the individual self is united with the universal Self, similarly dissolves oppositions of subject and object, observer and observed (Alter 2004: 95, 100). Further, the narrowing of the interval between donations enabled by apheresis leads Bhatia to envisage no intervals at all, with donation assuming a state of uninterrupted continuousness—this being a further key attribute of samadhi.5 A “reflective practitioner” (Schön 2002), Bhatia’s theorizing of a cosmic yoga achievable through continuous donation and the multiplication of recipients concerns envisaged states of being rather than actual practices. This study too has unabashedly had as much to do with ways of thinking about blood donation as with actual donation activity.
What Bhatia describes are potential spiritual effects consequent on the increased “technicity” of blood. In a related manner, chapter 2 portrayed component separation as a kind of technological supplement to auspiciousness, while chapter 7 noted how the divisibility of singular blood units can be imagined according to nationalist templates of “unity in diversity.” “Technicity” is an analytic term developed by Waldby and Mitchell in their recent work on biological exchange. Their focus is on “the intersection of the material qualities of tissues—their location and function in the body, their durability, their immunological specificity—with the kinds of technology available to procure, potentiate, store and distribute them.” The “complex technical ordering” of tissues in order to make them more prolific amounts, they say, to a kind of husbandry (Waldby and Mitchell 2006: 32–33). The authors’ focus on technicity is apt and a significant contribution, even if the argumentation is somewhat empirically sparse. The present study complements that of Waldby and Mitchell in providing ethnographic specificity concerning the engagements of real people with the husbandry of tissues, demonstrating that the “biotechnical leverage” of such tissues can produce prolific effects for imaginings of spirit and the nation as well as markets. To paraphrase Waldby and Mitchell (ibid.: 30), this study has shown how the human body’s productivity is sutured into and plays a transformative role in relation to religions of productivity and productive national imaginings.

In addition to questions concerning multiple units of blood and merit, multiplicity also arose as a methodological issue: I conducted fieldwork in multiple settings among multiple communities; camps are composed of multiple collaborators and multiple meanings about blood donation are constantly being generated. The donation camp in particular is frequently the locus of extremely interesting juxtapositions; to paraphrase Pinney (2006), individuals who outside the camp might not inhabit the same terrain are here brought within a common epistemological space. A critical part of the theoretical aim of this study has thus been to provide a vocabulary that acknowledges that there exist multiple understandings of blood donation but which at the same time recognizes the bridge of common thought and action which bestows some semblance of order on this plurality. Blood donation is the thing (“boundary object”) which “sits in the middle” of a set of heterogeneous participants (“communities of practice”). The object that unites these diverse constituencies is also that about which they have signally contrasting ideas. “Rationalist” doctors participate in camps cheek by jowl with devotee-donors adamant that their viscous love-imbued blood will foster the expansion of their order. Of course, excessive collection and attempts to donate by the medically unfit cause consternation among doctors, but the production of “bad meanings” is a risk built into solicitation techniques that actively customize donation for appropriation and resignification by extremely diverse communities of practice.
This returns us to the interoperability of north Indian devotional orders and campaigns to promote voluntary donation, the subject of chapters 4–6. I used “interoperability” to describe the ways in which these phenomena interlock and bring each other to fruition. However, the focus has also been on the frequent problematic divergences at the heart of the relationship: what has resulted, perhaps, is disjunctive synthesis. Nevertheless, in working through each other, significant quantities of blood are provided to blood banks for transfusion, while for devotional orders, the collaboration with biomedicine makes available to them a wellspring of new and surprising devotional possibilities from which to shape their religious lives.

What voluntary blood donation procedures offer devotional movements is a harnessable centrifugal directionality and an apparently unambiguous engagement with social utility. Utility-valorizing orders (“religions of utility”) such as the Sant Nirankaris and the Dera Sacha Sauda are committed to spiritual operations that possess a complex but discernible manifestation in a utility irreducible to valueless instrumentality. There do exist, however, ambiguities and counteradaptive tendencies: as was seen in chapter 5, for example, doctors claim the Dera Sacha Sauda smothers utility in its quantitative embrace. But the fact that this movement employs utility as a means to sanction its mode of spectacular religiosity in fact says something about utility’s elevated stature; that is, the power of “utility” is actually demonstrated as a circulating store of virtue in its being employed to sanctify or at least facilitate its own oppositional force.

Chapter 3 explored the exaptation of the gift, arguing that culturally and historically transmitted forms and structures are in the process of being extended into “fresh involvements” (Crease 1997: 222) with utility. The logic of parasitizing is not one of erasure but of insinuation and augmentation. Modes of classical giving reemerge in the forms extended from them. The process is almost one of revelation: recruiters and other interpretive entrepreneurs revisit the “medley” of ancient and extant cultural forms, revealing them to be not only congruent with but active catalysts of utility. Of course, “utility” is a contested category and any definition of it must be provisional. But that provided by Bataille (1985) which sees utility as a signifier of conservation and production is helpfully lucid and resonates with blood donation in several important ways. I would point here in particular to the depictions discussed in chapter 2 of donated blood as an indispensable force of familial conservatism, and to the discussion in chapter 6 of donating blood as a Vishnuite project to help preserve and sustain a populace in imminent danger of calamitous harm.

All this is evidence that utility is far from being a mere abstraction devoid of ethical content and divorced from context. Some of the more dramatic manifestations of virtuous utility are provided by the gurus who induct their devotees into its purview. Building on the “to” and “through” model of gift repersonalization presented in chapters 1 and 4, chapter 6 attempted to locate
more precisely the role played by gurus in Indian blood donation activity and also more widely in Indian society, arguing for an understanding of gurus as gateway figures through which their devotees pass into an osmotically produced modernity. Through the operations performed on identifiably modernist tenets such as utility by the gurus who advance them, such tenets come to be saturated with spiritual significance and amenable to incorporation within diverse sorts of donation theology. Biomedical utility is not just biomedical utility—it is the sum of its interactions with other phenomena: yoga, ayurveda, devotional religion, and different sorts of guru are some of its most significant constitutive elements in its Indian manifestation. The guru as gateway compellingly demonstrates how interaction between religious practice and medical utility may result not in the disenchantment of religion but in the sacralization of utility.

In a noteworthy recent contribution to the study of “sects” in India, Shah (2006) calls for an approach to such religious configurations that would place them in the context of their role in society as a whole rather than more narrowly in “Indian religion.” My focus here on the seva activities of religious movements in the sant tradition would appear to be in line with such an approach, especially since the devotional orders documented here are in the vanguard of the wider phenomenon of the “making social” of the gift—and what is the making social of their seva activities in order that they come to serve many if not a widening out and a movement beyond themselves? This study has delineated the contours of a very particular orientation toward “society” and “humanity” on the part of north Indian sant devotees which attains its dynamism by virtue of a “to” and “through” movement toward and beyond the key intermediary agent and devotional cynosure—the multiply refractive guru.

As a kind of afterthought and pointer for future enquiry, Shah alludes in the final parts of his article to important processes of change under way in the array of Hindu sects. Here lies part of the value of the present study. In attempting to describe and account for the place of devotional movements in Indian blood donation settings and also more widely in contemporary life, I have explored their multiple engagements with utility and ultimately their transmutation into religions of utility. While the main focus of Shah’s article lies elsewhere, on the relationship between sects, renunciation, and caste, Shah (2006: 244) does briefly refer to the contribution of sects to “modern, secular, developmental activities” such as relief work after major disasters, the setting up of hospitals and colleges, and so on. Chapters 3–6 of the present study, however, provided ample evidence that so far as north Indian sant movements are concerned, the donation of blood is hardly a secular activity (though it may buttress “secularism”; see chapter 7). Shah is, though, broadly correct in seeing the pursuit of such development activities as bringing sects into a closer relationship with the state. More accurate, however, would be an understanding that saw the former as substituting for rather than cooperating with the latter. According to Rao
economic liberalization (she calls it “neoliberalism”) in India has created a situation where “the state must continue to assert a protective relationship to its largely poor population while withdrawing from its welfare role in practice.” If this argument were to be accepted—and I believe there are grounds for doing so—then an interesting conclusion would follow. If devotional networks such as the Dera Sacha Sauda and Sant Nirankaris can legitimately be understood as providing services that prior to liberalization would have emanated from state authorities, then one unintended consequence of economic liberalization, it could be argued, is the religious dynamism and efflorescent biospiritual medical creativity formed in interaction with biomedical and other developmental projects that presently marks north Indian “religious society.”

This biospiritual medical creativity—and by creativity I mean striking processes of “carrying forward” in which actors “apply everything that has been culturally and historically transmitted to [them] and . . . wind up acting originally and with fresh involvements” (Crease 1997: 222)—is a “dispersed creativity” (Leach 2004) that occurs at several different levels and locales. As was seen in chapter 6, gurus enact this creativity in shaping various sorts of donation theology, and recruiters too engage in creative acts of customization. But donors as well provide some of the most remarkable instances: donation as a mode of capture or physical austerity, component separation as a technological means of merit production, and so on. This all seems to suggest that biomedicine in its north Indian manifestation is much less a terrain of loss and “cognitive enslavements” (S. Bayly 2004b: 340) than a storehouse of manipulable conceptual material ripe for spiritual expropriation.

But “creativity” is a term much in vogue and requires caution. Osborne (2003: 508, 510) complains that it has become a central doctrine of contemporary global culture, a kind of moral imperative and a form of capital in its own right. The Hindu tradition in India has frequently been described by anthropologists as creative and protean (for example, Babb 1986: 1), and Mazzarella (2003: 282) argues that this presumption is mobilized to justify the imposition of all kinds of social and economic change in India, with Hinduism’s famed versatility pulled into service as a “prophylactic” against all potentially debilitating social transformation. Pinney (2006) too argues persuasively against what he sees as an anthropological affinity with creative reformulation, “heroic man (and his “culture”) [always] break[ing] free from the determinations of technology.”

Several points follow from this. First, whatever the predilections of anthropology at large, much of the existing literature on corporeal donation is highly deterministic, and the multiple parasitings, extensions, and instances of biospiritual creativity that characterize the Indian involvement with blood donation thus present a significant challenge to it. Second, while I am largely sympathetic to Pinney’s argument, what is in essence a theoretical rejoinder
should not blind ethnographers to real cases of creative change. Third, it must be stated emphatically that an acknowledgment of creativity does not preclude due recognition of disciplinary or deterministic processes. Dr. Bhatia’s linking of yoga and blood donation before an audience of Swami Ramdev’s yoga students may have been instrumentally grounded as a means to bolster donations, but that does not mean it wasn’t creative. His pressing of yoga into a fresh involvement with blood donation was both highly innovative and the very means of medical utility’s instrumental advancement.

Finally, my study has at no stage naively celebrated the instances of creativity it has documented. This book has delineated the deployability of gurus’ captive voluntary devotees and recognized that on one level biospiritual medical creativity is indeed a political economy of innovation designed to make Indians bioavailable for extractive purposes. While many examples have been presented of conscientious recruiters eager not only to persuade people to give blood but also to persuade them to give it in the right way, this study has also been unequivocal in acknowledging that many recruiters consider gurus’ devotees convenient donor banks. According to some of them at least, the activation of these donor banks is a shortcut method of acquiring blood where “from the master of discipline [the guru] to him who is subjected to it [the devotee] the relation is one of signalization: it is a question not of understanding the injunction but of perceiving the signal and reacting to it immediately” (Foucault 1977: 166).

And yet to state that recruiters simply appropriate gurus’ devotee bases, with devotees becoming mere “inscription surfaces” (Kittler cited in Pinney 2006) of medical utility, would be to eviscerate devotees’ own experiences and the ways in which they and their gurus employ biomedical procedures as a rich corpus of conceptual substance from which to shape their religious lives. I have sought to keep in view both the deployability of devotees and the nuances of their devotional experience, to recover a space of the biospiritual within the biopolitical, and thereby to treat with due weight and sensitivity the manifold, and yes, highly creative and compelling donation theologies that have arisen around blood donation in India.