Charis Thompson offered a wide-ranging discussion around the question: how can we respond to social justice questions in stem cell technology and biology? In particular, she focused on the local context of California’s 2004 Proposition 71 and its aftermath. The full title of Prop. 71, California Stem Cell Research and Cures Act, immediately raises a series of questions about science and justice by conjoining the terms ‘research’ and ‘cures.’ Thompson suggested that ‘cure’ is often paired with its antonym ‘prevention’ and it is necessary to pull these terms apart to ask what it means to spend vast amounts of money on cures and so little on prevention. As health and medicine become ever larger portions of the economy it is increasingly common to biomedicalize everything and grow the bench to bedside pipeline in which publicly funded research and technologies are privatized. Tying research and cure together suggests that everything that is worthy of research is also worthy of a cure, laundering market value into debates about public good. Likewise, the market value of cures create exception cases of orphan diseases and their activist communities, who often come to stand for ‘the public.’ In other words, market logic creates a type of semi-excluded public whose political role is to argue for making markets broader and more powerful.

In this context, philanthropy becomes a public hero for ‘giving back’ a small amount of the capital that has been accumulated by the wealthy. This model of philanthropic capital limits thinking about justice and medicine, particularly as it merges with developing states to make medicine nearly free and ‘gives back’ intellectual capital. Philanthropic capital has pushed out models for medical technology that reject intellectual property altogether—we lack models for cures without the transmission of standard intellectual property regimes or other ways of breaking the link between markets and medicine.

Thompson also argued that Prop. 71 represents a discourse that everything needs to be cured—it’s text and it’s backers produced a very long list of diseases that could be cured by stem cells. This is problematic because it presumes that we know in advance what is wrong with people and needs to be cured. She suggested that we get to the discourses of curing too cheaply because not everything can or should be cured. In many cases, our built environments are too restrictive for a range of human embodiments and this may be a more fruitful and just target for intervention. Biomedicalizing all non-normal embodiments suggests that what it is to be different is to be waiting to be turned back into normal.

Thompson stated it is also necessary to interrogate standard bioethics discourses for problematic assumptions about social justice. For instance, biobanking for research—essentially saving bits of bodies indexed to their provenance and procurement—is often framed in altruism. Yet the folks that move bits of other people’s bodies around make substantial money from it. Likewise the differences between the populations that are
present in biobanks and forensic databases are remarkable. What are effects of having
one type of population in the research biobanks controlled by corporations and
universities and another population present only in forensic biobanks controlled by the
state?