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Making Bodies Kosher: the Politics of Reproduction among Haredi Jews in England. By Ben Kasstan. New York: Berghahn Books, 2019. ISBN 9781789202281

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Ben Kasstan's *Making Bodies Kosher* (2019) offers a compelling insight into how Haredi Jews in Manchester negotiate biomedical interventions, bodily governance and social boundaries. A timely ethnography, Kasstan's work carefully addresses the ways in which Jewish minorities mediate their encounters with the world around them through positioning the body as a 'terrain of intervention'. With a unique methodological approach of utilising archival documents from the nineteenth and early twentieth centuries in conjunction with ethnographic material, *Making Bodies Kosher* provides the reader with an accessible yet theoretically rich body of research.

Kasstan's introductory chapter provides an in-depth historical background of the Haredi Jewish population of England and Manchester, paying particular attention to the ongoing confluence of culture, faith and healthcare. As a rapidly growing ethno-religious minority with fertility rates at almost three times the level of the general population of England, Haredi Jews are described as a 'minority of a minority' (p. 3). Accompanying Haredi resistance to secular education, employment, engagement with the internet and mainstream media is the idea that they are a 'hard to reach' group (p. 13). This phrase, used predominantly within public health discourse, is used to describe populations that are considered to be resistant to medical services.

A careful focus is placed on maternity and infant care as unique spaces in which Haredi Jews are constantly navigating medical interventions that are seen to contest local systems of bodily protection and *halakhha* (Jewish law) (p. 2). This specific context is framed through the use of Foucault's theory of Biopolitics (2006) and Roberto Esposito's (2015) work on public health engagement as a strategy to preserve collective life. For Foucault, public health interventions form a salient strategy of what he termed 'governmentality', or the various forms of control that are applied to co-opt subjects into being 'governeable' (Kasstan 2019, p. 11). In the context of the Haredi Jews of Manchester, Esposito's theories of immunity aptly illustrate how the groups' anxieties over bodily autonomy and self-protection are a reaction to enduring attempts of the state to 'assimilate foreign bodies' and a subsequent desire to maintain immunity from the external world (p. 12).

Resisting the use of the word 'community' to describe the Haredim of Manchester, Kasstan instead utilises the concept of the 'social body' as a more accurate reflection of the socially constructed nature of the individual (p. 6). Moreover, he argues that public health interventions cannot be

understood separately from historical and social constructions of the body, particularly in regards to ethno-religious minority groups (p. 8). Through this Kasstan highlights the ongoing political power exercised over and within Haredi Jewish groups in the United Kingdom and its implications for biomedical care.

A key strength of Kasstan's ethnography is his thoughtful problematisation of popular narratives surrounding Haredi Jews. In addition to critiquing the definition of 'community' or Haredim as a 'hard-to-read' group, Kasstan offers an insightful critique into the term Ultra-Orthodox (p. 4). Used commonly within both academic and non-academic Jewish discourse, the term is frequently attributed to Haredi Jews and has largely obscured a number of complex socio-religious differences between Haredim and other Jewish groups. Nonetheless, the term lends to perceptions of a 'monolithic ultra-Orthodox community', which Kasstan argues has the effect of minimising and romanticising Jewish minority groups.

Chapter one of the ethnography cleverly contextualises these critiques as Kasstan provides a rich ethnographic snapshot into the shifting social dynamics of Jewish groups in Manchester (p. 50). Key influences on the shape of the community include broad demographic changes and internal fragmentation, leading to a degree of polarisation and, in some cases, religious and political radicalisation. Further, through the use of vignettes from Haredi participants, Kasstan reinforces the dynamic nature of Haredi Judaism in Manchester and the subsequent push towards self-protection and immunity from a rapidly changing external world. I found myself wanting to hear more from Mrs Gellner, Mr Dror and the other participants, as these vignettes were somewhat lost in the prominence of Kasstan's theoretical analysis woven throughout the chapter.

Utilising both archival and ethnographic material, chapter two sees Kasstan further illustrate the ways in which healthcare can function as a 'frontier-zone' in the quest for bodily governance (p. 96). Continuing his critique of commonly used misnomers, Kasstan argues that largely idealised and romanticised perceptions of minority populations within biomedical discourse can paint them as the 'intended beneficiaries' or more explicitly, 'targets' of medical intervention (p. 97). Importantly, this provides further context to the notion that Haredim are hard-to-reach, as their resistance to biomedical care is perceived as non-compliance rather than acts of self-determination. Further, Kasstan reinforces the importance of recognising the dialectic relationship between Haredi Jews in Manchester and the public health service. As he argues, biomedical interventions in the region are adapted by the Haredim to both ensure they are kosher and protect the 'life of the social body' (p. 99).

With a specific focus on maternity and infant care, chapter three utilises more of Kasstan's insightful participant vignettes to illustrate the ways in which Haredi parents and doulas navigate the highly politicised

domain of maternity care and obstetrics (p. 147). Namely, how do Haredim of Manchester participate in an area of care that is seen to be most at odds with *halachic* law? In this context, Haredi doulas serve as a kind of ideological bridge between Haredi parents, the NHS and subsequently the outside world through their advocacy for halachic interventions. Moreover, maternity carers emerge as significant gatekeepers of the social body for Haredim, acting on NHS services to ‘make bodies kosher’ and prevent the diffusion of potentially negative reproductive interventions (p. 151). One area where this ethnography could be strengthened, I believe, is in a more careful examination of gendered identities within the Haredi community, particularly in regards to maternity care. An analysis of how Haredi women negotiate the reproductive care space, with a specific focus on gendered experiences of public health care, could potentially strengthen Kasstan’s theoretical exploration of how bodies are ‘made’ kosher.

Kasstan’s compelling ethnography is rounded out in chapter four as he examines the complex area of childhood vaccinations. Far from a homogenous group, he illustrates the varied nature of Haredi standpoints on childhood immunisations and willingness to engage with NHS vaccination schedules (p. 205). Namely, how do Haredi Jews navigate the world of immunisations whilst simultaneously pursuing immunity from the external world? Esposito’s theories on *immunitas* and *communitas* are thus utilised by Kasstan to illustrate the social tensions of individual and public bodily protection within which vaccinations are embedded (p. 207).

The impactful nature of Kasstan’s ethnography on the discourse of medical anthropology and Jewish studies more broadly cannot be underestimated, particularly during a time when a global pandemic is having far-reaching social, political and economic impacts on minority populations. *Making Bodies Kosher* not only problematises largely taken-for-granted rhetoric surrounding minority ethno-religious people, but urges the public health sector to reflect on how these misinformed ideas can exacerbate inequities within the system. Further, its timely nature and accessible analysis make it a must-read ethnography for those concerned with ethno-religious minorities, culturally-specific healthcare and Jewish studies more broadly.