FIELD NOTE

Narrative Infrastructure

How a biotech company could become the lens through which people understand their own bodies.

Consumer behavior isn't rational choice, and it isn't impulse. It's narrative maintenance, the ongoing work of protecting the story a person already believes about themselves. Biotech has never applied that logic to the body, which is where the story starts.

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Two years ago, I fell down the narrative psychology rabbit hole trying to answer a simple question: were customers actually being "apathetic," or was it something else? What I found shifted how I view behavior entirely. People walk around inside self-constructed models of reality. Changing those models takes safety, plus a prediction error precise enough to matter. Accept that premise and consumer behavior stops looking like rational choice or emotional impulse. It starts looking like ongoing narrative maintenance, interrupted by occasional revision. None of what follows requires proving that this is literally how the brain works. It requires only taking the premise seriously enough to follow its strategic implications, the way any working model earns its keep: by what it lets you see that you couldn't see before.

Traditional segmentation, demographics, psychographics, even behavioral data, tries to describe who someone is. Narrative psychology asks a more useful question: what story is someone living inside? That story determines what they notice, what they want, and, crucially, what they can't even see as an option. A woman who carries a deep narrative of "I'm the responsible one who holds everything together" doesn't just prefer certain products. She perceives the world through that template. The meal kit service, the family calendar app, the understated luxury handbag are not expressions of preference. They're props in an ongoing production. She's not choosing them for their features. She's choosing them because they confirm her predictive model of who she is.

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This is why so much consumer research finds that people can't reliably explain their own purchasing decisions. They'll give you a rational post-hoc account, but the actual driver was narrative coherence: does this purchase fit the story I'm telling myself about my life?

Donald Winnicott, a British pediatrician and psychoanalyst, introduced the concept of the "holding environment," a space of such predictability, privacy, and emotional safety that a person can risk lowering their defenses. The

brands that generate the deepest loyalty are doing exactly this. Apple doesn't just make good hardware. It creates an ecosystem so consistent, so aesthetically predictable, so controlled in its sensory experience, that customers feel held. Within that safety, they'll try new product categories they'd never risk with an unfamiliar brand: a credit card, a headset, a car. The holding environment lowers the cost of prediction error.

This also explains why brand trust, once broken, is so hard to rebuild. The damage runs deeper than disappointment. It's a rupture in the holding environment, which pushes the consumer's predictive system back into defensive mode, favoring old, survival-weighted templates. "I knew I couldn't trust them" becomes a reversion to a deeper, older story.

A biotech company trying to do this faces a fundamentally different challenge, but also a deeper opportunity, because biotech touches the body, and the body is where the predictive model originates.

The first thing to understand is that biotech companies almost universally introduce themselves through the wrong frame. They lead with mechanism: "We have a novel mRNA platform" or "Our antibody-drug conjugate targets HER2." This is the equivalent of Apple leading with chip architecture. Nobody's life story has a chapter called "My Relationship With Semiconductor Design."

Apple entered the cultural narrative through a story about what kind of person you could become. The famous 1984 ad didn't mention a single specification. It said: the world is oppressive conformity, and this machine is how you break free. That's a narrative intervention. It identified a dominant cultural story, institutional control, and positioned itself as the prediction error that forces a model update: you have agency, and here's the tool that proves it.

A biotech company would need to identify an equivalently deep cultural narrative and position itself as a revision of that story rather than a treatment for it. The most obvious candidate right now is biological fatalism, the deeply held cultural belief that your body is a ticking clock, that aging is decline, that a serious diagnosis means your story is ending. That narrative is the predictive model most people carry. When they feel a lump, a pain, a cognitive slip, their brain constructs reality through that template: this is the

beginning of the end.

A biotech company that positioned itself as the permanent revision of that narrative, "the story you've been told about your body is wrong, and we're the proof," rather than "we treat disease X," would be operating at the level Apple operates at.

But that kind of model updating requires safety before precision. People don't revise deep narratives under threat. They rigidify. Models are a culmination of identity and perceived legacy, so they're protected at exceptional cost. This is biotech's biggest structural problem: most people encounter biotech companies for the first time when they're terrified. A diagnosis, a clinical trial recruitment email, a doctor's mention of a new therapy. The patient's predictive system is already in full defensive mode, defaulting to its most threat-weighted templates.

Apple built its holding environment years before it needed customers to take risks. The retail stores, the packaging, the Genius Bar all created a space of such sensory consistency and interpersonal warmth that customers felt safe enough to abandon their existing technology narratives ("computers are confusing and hostile") and try something unfamiliar.

A biotech company serious about narrative infrastructure would need to build its holding environment long before the moment of diagnosis. That means becoming a trusted, consistent, recognizable presence in people's lives when they're healthy, when their predictive systems are relaxed and open to updating, or as they reach the age thresholds where biological risk shifts from abstract to real. Millions already wear devices that spit out raw metrics. A biotech holding environment doesn't just collect metrics, it interprets them. That could look like a consumer-facing health platform, a wearable, a home diagnostic, a content ecosystem. The key is that it has to feel like a relationship, not a product.

Winnicott's holding environment is defined by predictability, consistency, and the sense of being known. The company would need to know you, specifically: your biology, your patterns, your risks, and reflect that knowledge back to you in a way that feels like being seen rather than surveilled. The line here is delicate: the data must act as a stabilizing mirror,

not a generator of ambient anxiety. If early monitoring feels like an alarm rather than an anchor, the holding environment collapses back into a threat state before it even begins.

Then, when the moment of medical need arrives, the prediction isn't "I'm entering the terrifying world of institutional medicine." The prediction is "the company that already knows my body is now going to help me." No catastrophic update is required, because none of the updating was deferred to this moment. It happened continuously, in small increments, for years before the diagnosis ever arrived. The relationship doesn't rupture and reform. It deepens.

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Apple's product launches are, in predictive processing terms, calibrated prediction errors. They're surprising enough to force a model update ("I didn't know I needed spatial computing") but delivered within a holding environment so robust, the launch event ritual, the familiar aesthetic, Tim Cook's steady presence, that the surprise feels exciting rather than threatening. The model updates smoothly: this is what comes next in my Apple story.

For a biotech company, the equivalent of a product launch is a clinical milestone: a trial result, an FDA approval, a new indication. Currently, these events are communicated through press releases aimed at investors and physicians. They enter the public narrative, if at all, through news coverage that frames them in the language of institutional medicine: "Drug X showed a 34% improvement in progression-free survival in a Phase III trial."

For most people, that framing confirms an existing model: biotech is an opaque institutional world that speaks a language they don't understand. No update occurs. The information bounces off. It's inaccessible, and so it gets disregarded by the population that needs to understand it most.

A biotech company operating at Apple's narrative level would treat each clinical milestone as a chapter in a story the public is already following, because the holding environment was built first. The announcement wouldn't

be "our drug hit its endpoint." It would be the next beat in an ongoing story about what's becoming possible for human bodies, delivered in a controlled, ritualized, sensorily consistent way that signals safety even as it introduces surprise.

Here's where biotech has an opportunity Apple never had. Apple became the lens through which people perceive and interact with information, communication, and creative work. But the body remained outside that lens. You use your iPhone to navigate the external world, but your relationship with your own biology is still mediated by a twentieth-century narrative: you get sick, you see a doctor, the doctor consults institutional knowledge, you receive treatment, you hope for the best. Your body is something that happens to you.

A biotech company that successfully inserted itself into the predictive model at Apple's depth would change how people perceive their own biology in real time. The internal generative model that constructs your experience of your own body would run, in part, through this company's platform, data, and narrative.

This is what makes continuous diagnostics, genomics, and longitudinal health data so strategically important. Not as products, as narrative infrastructure. If a company is the reason you know your inflammatory markers are rising before you feel anything, it has inserted itself into your predictive model at the perceptual level. You experience your body differently because of that relationship. Apple achieved something similar with information: a permanent restructuring of how reality gets constructed.

Apple's implicit goal, despite the liberation rhetoric, is to make your model more rigid: to make "I'm an Apple person" feel so natural that switching becomes a narrative impossibility.

A biotech company pursuing this strategy would face the same tension in a domain where the stakes are life and death, which adds real complication and depth. If a company can become the predictive model through which someone understands their own body, it takes on an obligation Apple doesn't have: the model has to actually be accurate, updateable, and in the patient's interest rather than the company's.

The moment a company becomes the lens through which someone perceives their own body, it acquires a kind of power that isn't covered by FDA regulations or corporate ethics codes. It operates below the level of informed consent, because it shapes what a person is capable of noticing, wanting, and fearing in the first place. If that power is used to lock the user into a proprietary black box, it degrades into bio-paternalism. When a system is genuinely integrated and deeply trusted, the patient chooses to stay on their own. You don't capture them in a closed ecosystem, they capture themselves through the sheer coherence of the narrative. Even so, the holding environment only remains ethical if the data and narrative are handed over as transparent, open agency, giving the individual total freedom to read and export their own code.

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Holding that kind of power without corrupting it, or corrupting the person, isn't a business strategy question. It's a clinical ethics question, and the closest working model for it already exists.

Worth being explicit here: Winnicott built the holding environment for the clinic, not the marketplace, and everything above extends his construct as a lens rather than a literal transplant. But the lens holds, because that model is the relationship between a therapist and a patient. A good therapist becomes deeply embedded in a client's predictive system. The client starts to see themselves through the therapist's eyes, to hear the therapist's voice when making decisions, to use the therapeutic relationship as a template for how relationships can work. That's not a side effect of good therapy. It's the mechanism. The holding environment works because the client internalizes it.

The entire ethical structure of therapy exists to make sure that power serves the client's autonomy rather than the therapist's needs. Winnicott was explicit that the holding environment exists to be outgrown. The therapist holds the client so the client can eventually hold themselves. The goal isn't a permanent relationship of dependency. It's a temporary one that rewires the client's generative model toward greater flexibility, after which the client no longer needs the therapist to construct reality accurately.

A biotech company that wanted to sleep well at night would need to internalize this as its foundational ethic: your goal is to become unnecessary. Not in the trivial sense of "we hope to cure the disease," but in the deeper sense that every interaction with the patient should increase that patient's capacity to understand and navigate their own biology without you. The predictive model you're helping build inside the patient should end up being theirs, not yours. You're the scaffolding, not the building.

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This immediately clashes with standard venture logic that fetishizes recurring revenue and forced platform lock-in. But true alignment in human health requires an economic engine built on cured outcomes and transferred agency, not long-term biological captivity. Apple wants you to need Apple forever. A biotech company operating with therapeutic ethics would measure success partly by how well patients can make informed decisions about their health, including decisions to leave your ecosystem entirely.

That's the harder ambition, and the more permanent one. The Apple of biotech is a company people can't imagine leaving. The company that actually matters is the one people don't need anymore, because it did what a good holding environment is supposed to do. It gave them the story, then let them own it.