NEOLIBERALISM is commonly understood in terms of the expanding global influence of disembodied market forces and rationalities. However, unlike the invisible hands and competitive calculations it unleashes on the world, neoliberalism's implications for health are neither intangible nor abstract. Instead, they are materially embodied in ways that are deeply consequential for life and death (Navarro 2007). Evoked in book titles such as *The Deadly Ideas of Neoliberalism*, *Dying for Growth*, *Sickness and Wealth*, *Infections and Inequalities*, *Pathologies of Power*, *Blind Spot*, and, in the aftermath of the 2008 financial crisis, *The Body Economic: Why Austerity Kills*, neoliberalism and associated forms of inequality, austerity and precarity have been tied by health scholars to a vast variety of embodied suffering, disease-vulnerability and low life expectancy right across the planet (Rowden 2009; Kim et al. 1996; Fort et al. 2004; Farmer 2001, 2005; Keshavjee 2014; Stuckler and Basu 2014). Rallying against these lethal links, a gathering of the World Social Forum in Tunis in 2015 recently concluded that today's global crises in health, health services and social protection are “in fact the consequence of neoliberal politics globally” (WSF 2015). Meanwhile, amidst all the crises, individuals are also now routinely told that their health is simply their own responsibility, a form of resilience that will only endure if they invest in it with the same individualistic and entrepreneurial prudence that is the trademark of personalized neoliberalism more generally (Brown and Baker 2012). As a result, all sorts of embodied health challenges – hunger and obesity being two especially physical examples – are repeatedly recoded as personal management problems even as they embody neoliberal socio-economic developments in society at large (Carney 2015; Guthman 2009).