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Necropolitics and Biopower in the Pandemic: Death, Social Control or Well–Being

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Every crisis creates its own ways to experience life, and, in some cases, death. The crisis generated by COVID-19 allows us to see the worst of times and the best of times to live and die, but it has also opened up the possibility to imagine better times. The crisis is transforming our ways of envisioning the world and how we live in the it. This is why this is not a health crisis, as some have called it. The COVID-19 pandemic has the potential to become a *civilizational crisis* that could disrupt social relations, the organization of production, the role of states, the path of neoliberal globalization and even the place of humans in history and nature. This chapter will explore these deeper aspects of the crisis of contemporary capitalism, especially how the pandemic made contemporary necropolitics and biopower even more visible.

Necropolitics and the killer phase of capitalism

This crisis has exposed some facets of capitalism that are sometimes hidden behind colonial, racist, sexist or efficiency–driven discourses associated with the ideologies that seek to reduce the size of the state. Firstly, the crisis allows us to clearly see what I define as the *killer phase of capitalism*. This has always been a key characteristic of capitalism, whose techniques of extreme devaluation of life produce bodies vulnerable to marginalization, exploitation and even death. However, things look different when dead bodies fill an ice rink in Madrid or a mass grave is opened in a New York park compared to when the dead are African migrants crossing the Mediterranean or people from Central America whose remains are scattered on the deadly road to the

United States. The level of alarm and awareness of death and vulnerability are heightened when the victims are closer to the centres of power. The 70 military trucks carrying corpses out of Bergamo, a small city in the alpine Lombardy region in Italy, contributed more to the visibility of the lethal phase of capitalism than the burnt bodies in the streets of Guayaquil, the largest city of Ecuador.

These new manifestations of the mortality produced by capitalism have even led to a redefinition of certain public and private spaces. Spaces such as ice rinks or parks, once places for recreation, became mortuaries or cemeteries. Extreme forms of privatization have also started to appear, reflected in the recent expansion of the market for the purchase of private islands, castles, bunkers or large yachts, as a result of the interest of the most privileged in isolating themselves and removing themselves as far from the dead bodies as possible. Dead bodies that are produced by how their companies organize, produce and exploit, and by their ways of doing business and making excessive profits.

Another problematic redefinition of the public brought about by this crisis has to do with the work of criminal organizations (whether they are Mafia, Camorra, maras, cartels or others). In countries like Italy, Mexico, El Salvador or Brazil they have a key role distributing food, medicine, soap and even disinfecting communities abandoned to their fate by governments. These organizations, which play an important role in the contemporary necropolitics, have begun to occupy parts of the public space that states have left empty, especially in vulnerable and impoverished territories, and to solidify their status as de facto powers. This could have serious consequences for democratic governance in the future.

The lethal aspects of capitalism have also been evident in the quasi-eugenic policies of some countries, such as Sweden, for example, which denies access to intensive care to people over 80 years old who are ill with COVID-19 and to those between 60 and 80 years of age with underlying health conditions. Similarly, this phase of capitalism can be seen in the practice of some municipalities in Spain of not taking ill people who live in care homes to hospitals, a policy which has been repeatedly denounced by the families of the deceased.

In the case of Central America, we have the government of Nicaragua, which has decided to adopt a denial position, quite similar to that of Trump or Bolsonaro despite supposedly being the ideological opposite of those governments. Nicaragua has decided to do nothing to resist the pandemic such that whoever has to die just dies.

An important element in these deadly policies is that many of those who were first infected belong to the privileged sectors, with the capacity to travel and take holidays in other countries. However, the virus later spread to those who always suffer the most: the old and weak, the Blacks and Latinos

in the Unites States, the indigenous population and the working people from the most exploited sectors who have now become 'essential workers'.

Recognition for these workers during the pandemic was mainly symbolic. In other words, they have been given a new adjective on the scale of social value and they were applauded in some cities for five minutes every night. But, in general terms, they didn't receive better salaries that reflect the risks they take and the service they provide in keeping civilization going, nor have they received minimum levels of safety equipment in order to do their job under pandemic conditions. They were, and continue to be, still the same 'unworthy' lives that capitalism uses and discards, except that they were elevated in rhetorical terms to the category of 'essential'.

Health systems and biopower

The crisis caused by COVID-19 also reveals decades of neglect in public health systems, the privatization of these systems, the precarization of work and the erosion of labour rights. In fact, the dismantling of public health, privatization and outsourcing of services are some of the main reasons for the high mortality rate.

This is the context for the emergence of a utilitarian discourse of crisis and public institutions management. What needs to be protected, most governments say, is the health system so it doesn't collapse. And some of us were naïve enough to think that it was *life* that had to be protected. It is obvious that to protect life you have to protect the health systems, but the order in and emphasis with which this is spoken about are very striking. This discourse, as outlined in most countries, actually suggests that lockdown measures are not being set up to protect life but to avoid having to treat many people in hospitals and through public health services. The order is to stay at home, and if possible, recover or die there or in a care home, so as not to spend resources on people who are already considered disposable.

The lockdown measures also revealed a homogenizing policy that doesn't take into account inequalities and different types of vulnerability. It is a policy of surveillance and micromanagement of bodies, assuming the existence of a population with equal opportunities, life chances and access to resources. Such a policy will only increase precariousness, hunger and even increase the risk of contagion unless it is introduced alongside redistributive measures that offer a basic income for all of those who cannot afford to go into quarantine or who cannot meet the supposedly altruistic rhetoric of protecting the common good and public health that accompanies the slogan *#StayAtHome*. After the first months of the pandemic, when many countries began to relax their lockdown measures, it was clear that these policies should also recognize that there are groups more prone to contagion and death because

of their material conditions of existence, the ways they move around cities and the types of jobs they perform.

The pressing need for access to healthcare and for competent public services and redistributive policies, which the pandemic has made evident, has generated a renewed demand for welfare states that respond to the different needs of the population and allow for social and economic redistribution (as several chapters in the first section of this book suggest). While these claims are being put on the public agenda, at the same time, the most authoritarian and controlling features of the state are also being reinforced. This means that the crisis is giving new justifications for the implementation of repressive measures and new forms of political and social coercion.

Central America is an example of this. El Salvador's, Honduras's and Guatemala's governments are reviving the repressive repertoire of the past and imposing states of exception. There is a radicalization of the apparatus of biopolitical control, no longer in the name of national security, as in the past, but in the name of public health. The arbitrary arrests of women in El Salvador out getting food simply because they don't have shopping lists or the arrest of a mother accompanying her child to use an outside latrine are examples of the increasing coercion.

The novelty of these situations during the pandemic is that the fear of death or disease makes many people accept these extreme conditions of biocontrol without protest. And they are not only accepting them but also demanding them from their governments. There is even an explicit willingness by some to become an active part of the control mechanisms by reporting people who do not conform to the rules of lockdown. In the case of Central America, people who lived under dictatorships and who were exposed to the repressive powers of the state now submit because of fear to the unprecedented mechanisms of social control. The fear of becoming just a biological entity, bare life, at the mercy of an invisible enemy – a virus – which can be anywhere, seems to unleash more fear and willingness to surrender than the repressive political apparatuses.

Some possibilities for the future

There is justified fear that this crisis could produce more repressive societies, with ultrasophisticated mechanisms of biopower through the use of new technologies, and that we will continue to act as if we were still in 1990, believing in the virtue of neoliberal policies and denying global warming. But the crisis also opens up the possibility of imagining a different future.

In addition to uncovering the lethal phases of capitalism and the potential of neoliberal recipes to set off humanitarian disasters, the pandemic has also exposed other complexities and risks. Firstly, the lockdown measures have created a fairly widespread debate about the nature of the domestic

space. Feminists have been talking about this for centuries, but now, with a large percentage of the population confined to their homes, conversations about the unequal distribution of reproductive work and domestic tasks, family violence against women and the importance of care have entered the mainstream (see Batthyány, Chapter 34 of this volume).

In this sense, the pandemic has helped to undermine the conservative notion of the family and home as spaces of peace, security and harmony, and exposed the persistent sexual division of labour and the centrality of women in life-sustaining care work. This 'discovery' and the visibility of the issue can become the first step in initiating processes of change. The renewed appreciation of care work and other neglected jobs is another unintended consequence of the crisis. Although much of the valorization of these tasks is only symbolic, the crisis could be an opportunity to reaffirm the importance of the objects and resources with use value. In addition, this could be an opportunity to increase our understanding of the importance of the work that allows for social reproduction and of the people who perform this kind of work.

In addition, the crisis could also create opportunities to reindustrialize locally and to promote domestic production, especially since many international trade links have been broken. It is, therefore, an opportunity for policies to disengage from the market logic of neoliberal globalization towards a promotion of national industries and local food production, which would help guarantee food security especially in the Global South (see also Bringel, Chapter 35 of this book).

This crisis has generated renewed demands for welfare states that take care of the commons, implement measures for the protection of the entire population and become agents of redistributive justice, taking into consideration the different manifestations of inequality. This point is fundamental since, until now, many people have considered this discussion to be over. Ever since Margaret Thatcher said, more than 40 years ago, that "there is no society", and Ronald Reagan said that "government is not the solution to our problems, government is the problem", the ideologies of neoliberalism have done everything possible to obscure the importance of states being at the service of the common good. However, the COVID-19 crisis has highlighted the need not only for a type of state that exercises the monopoly on violence and promotes a good business environment but also for a state and society that operate under the principle of solidarity.

COVID-19 has also allowed for a revaluation of science as a service to humanity. After the recent growth of anti-science and anti-vaccine organizations, flat-earth conspiracies, and religious fundamentalist groups that question basic scientific principles, this pandemic has restored the privileged position of science. It seems clear that the pandemic cannot be solved just with vaccines or drugs. It will require policies that promote the

universalization of public health coverage and the reparation of inequalities. However, it is extremely important to reclaim the production of scientific knowledge that is not instrumental in the development of new modes of life.

Finally, the crisis could serve to help us recognize our own vulnerability and fragility and the interdependence of human life with nature and with the life of other species. Perhaps fear will not only lead us to submissively accept the biocontrol measures deployed by many governments but also to question a process of capital accumulation that has become deadly and left in its wake the disappearance of species, territories, cultures and peoples. In sum, this crisis allows us to see that the tragedy is not on the horizon but is here now. Perhaps this diagnosis can also allow us to imagine and generate changes for the construction of a new world.