

BIOPOLITICS TODAY

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Abstract. *In political theory biopolitics is a term that denotes a qualitative shift in politics in which life becomes the central object of its interest. However simple the assumption is, in practice the shift has many consequences that escape the usual categorization and examination. Moreover, the answer to the question ‘what is the biopolitical?’ constantly evolves, which means that biopolitics today is not the same biopolitics that we saw thirty or forty years ago. Furthermore, studies indicate that biopolitics is a concept that is highly dependent on the culture within which it is practiced. All of this together makes biopolitics a phenomenon that requires constant attention, elaboration and study. The aim of this article is to summarize the main areas of research on biopolitics, present the main contemporary biopolitical dilemmas and to propose few authorial categories that may be useful for further studies within the field.*

Keywords: *biopolitics, population management, biopolitical ideologies, risk management.*

Introduction

In political theory biopolitics is a term that denotes a qualitative shift in politics in which life becomes the central object of its interest. However simple the assumption is, in practice the shift has many consequences that escape the usual categorization and examination. Moreover, the answer to the question ‘what is biopolitical?’ constantly evolves which means that biopolitics today is not the same that we saw thirty or forty years ago. The first author to use the term was Michel Foucault, for whom it was about governing populations. Biopolitics, in his writings, meant a practice that relies on the collection and use of statistics concerning the biological factors of a population, including the number of births, deaths, incidence of diseases, etc. Foucault’s concept is still valid nowadays, although it is based on the assumption that biopolitical management is a concern solely of the state. Another important field of biopolitics was identified after the *Roe v. Wade* court case on abortion in the United States. Although the procedure was legalized after the case finished, many social objections have followed

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the court's decision. One of the results was the birth of bioethics – the branch of philosophy that deals with the rightness of actions concerning the human life, e.g. abortion, *in vitro* fertilization (IVF), euthanasia, organ donation and transplantation, human enhancement, and so on. The next step was the development of biopolitics – understood as policy that legally regulates bioethical issues. Although its basic assumption seems to be the same as Foucault's – that biopolitics is put into practice by the state – in this case there was a role played by social movements. Their actions to either liberalize or prohibit the biotechnological services (abortion, IVF etc.) combined with the reactions of politicians and traditional political standpoints have led to the emergence of new kinds of political thought that I call biopolitical ideologies. The concept seems to be appropriate for contemporary biopolitical practice, especially because many forms of it bear ideological stigma and resemble ideological conflict rather than the struggle for practically useful or beneficial solutions, at least from the point of view of public rationality. Finally, the last and simultaneously the most modern form of biopolitics discussed in this article is connected with more individualistic forms of engaging in biopolitical practice. It bounds the term with the semiotics of the body and managing risk concerning one's individual health issues. The first idea is connected with individual governing the body in such a way as to make it an expression of some ideas (e.g. being a member of a community), whether these are taught, imposed or expressed independently. The second idea is a result of developing awareness of health issues and individual ways of dealing with them either within or

Outside a community (e.g. nation, self-help group, family etc.). In considering these topics I also try to politicize these practices and make them a part of formal biopolitics. While discussing the three areas of biopolitics I additionally indicate that biopolitics is a concept that is highly dependent on the culture within which it is practiced. All of this together makes biopolitics a phenomenon that requires constant attention, elaboration and study. Therefore, the aim of this article is to summarize the main areas of research on biopolitics, present the main contemporary biopolitical dilemmas and to propose few authorial categories that may be useful in further studies within the field. The question that drives the article is following: what are the most important fields of biopolitics today? I propose to answer this below.

Governing Population

The first meaning of biopolitics discussed in the article concerns the post-modern interpretations of the term coined initially by Michel Foucault and further developed by his intellectual successors including Giorgio Agamben, Michael Hardt, Antonio Negri and Roberto Esposito. Although there are differences between their ideas, some substantial and common premises can be found in them. Firstly, the authors offer, as I call it, an impersonal account. They connect biopolitical practices with body-related aspects such as health, longevity, birth and death rate, race, relations of blood, etc. In other words, they are interested in

how the *human body* is entangled in power relations and, therefore, they focus on life's physicality.¹ The impersonal account is therefore a standpoint that focusses primarily on the investigation of the political behavior of policy makers, especially their attitudes and beliefs about human beings and the ways of its living. In this sense biopolitics is oriented towards mere survival and the realization of such actions as will foster that goal. To be precise, it is necessary to mention that survival, especially in Foucault, concerns the biological dimensions of a population. It depends on normalizing statistical indicators that describe the current condition of public health.² Interestingly, this kind of biopolitics is purely pragmatic, despite its normative character. Each deviation from this approach to biopolitics makes it susceptible to ideological influence. For example, according to Agamben, a biopolitical modality, biopower, is the capacity to decide which lives are political (deserving a protection and care) and which are not. The second type is the so-called bare life, a biomass that is not a part of a community or other group, does not have any rights, and is subject to the will of anyone who does have membership of a community and the attendant rights. It can be used for any purpose, including its destruction.³

That leads us to the second similarity. Many authors emphasize the positive aspects of biopolitics consisting in its collectivizing potential (it is present in practice, for instance, when people discover their biological similarities and form communities on this basis). However, a much more important characteristic was identified by Makarychev and Yatsyk who recognized that a biopolitics focused on governing a population also has a totalizing potential.⁴ It may be observed in a situation in which some people do not meet the criteria of existing norms, e.g. infected people who spread epidemics or people who are not sporty enough to fit the desired image of society, and so on, dependent on the requirements of the current biopolitical project. The category of exclusion is a gateway through which it is possible to marginalize undesired people, considered as an obstacle on the way to achieving the desired society. In the past it was realized negatively in the form of eugenics. The biopolitics of population today heads in another, more positive direction. It depends on promoting norms and supporting initiatives and organizations that spread them across the society.⁵ As such, it resembles positive discrimination that is implemented with the express intention of creating or selecting obedient bodies.⁶ Is this a part of biopolitics today, I claim that it is, although it is not possible to fully explain this offering only an impersonal account. The phenomenon of the proliferation of norms is much more complicated.

¹ C. Blencowe, *Biopolitical Experience: Foucault, Power and Positive Critique*, Palgrave, New York, 2011.

² M. Foucault, in P. Rabinow (ed.), *Michel Foucault. Ethics, Subjectivity and Truth*, Penguin Books, New York, 1994, pp. 73-80.

³ G. Agamben, *Homo Sacer: Sovereign power and bare life*, Stanford University Press, Stanford, CA, 1998.

⁴ A. Makarychev, A. Yatsyk, *Biopolitics and National Identities: Between Liberalism and Totalization*, in "Nationalities Papers", 2017, 45(1), pp. 1-7.

⁵ M. Podniesiński, *Prawda i władza. Myśl Michela Foucault w latach 1956-1977*, Universitas, Cracov, 2012.

⁶ O. Timofeeva, "Топор коров" [Cats' Brattle], in "Novoe Literaturnoe Obozrenie", 2013, 119(1), retrieved from: <http://nlobooks.ru/node/3237>.

The Semiotics of the Body

The carrier of norms mentioned in the previous paragraph is, unsurprisingly, the human body. Interestingly, promoting norms does not have to be the result of political coercion. People often pass them on by using themselves willingly. They believe in the sovereignty of the body and use it to express collective ideas. In these cases, however, they often misunderstand what the body's sovereignty is and in fact, extend the state's biopolitical programme. Does that mean that the human body is ultimately owned by the state? To some extent, yes, but on the other hand these processes show that it becomes a contested territory. It lies somewhere between the individual's and the state's sovereignty and "moves" towards them either in the acts of submission or disobedience. A person who reproduces national norms (e.g. by wearing tattoos with national symbols, flags, etc.) devotes the body to the interests of the state, simultaneously losing at least part of their agency in favour of normalization or becoming its element.

A phenomenal counterexample is Pyotr Pavlensky, a Russian performer who used his body as a medium for political messages, but against the state. He submitted his body to suffering and disgrace to demonstrate that a repressive machine, the state, can do nothing to him.⁷ He made himself an exception, a being beyond the state's regulations and legal order. This shows several things. First of all, Pavlensky's biggest achievement is demonstrating that reclaiming the body is possible through resistance towards hegemonic biopower. When normal modern politics is moving from territoriality to corporeality, there is a need for more biological representations such as blood, body, organism, etc. The whole imposed corporealization and medicalization of politics and political object of interest (population) may be reversed, addressing this on their own terms.

It is necessary to mention that Pavlensky-like disobedience or resistance does not have to be an individual act. More often it takes collective forms. In these cases, people do not use their bodies directly, but rather treat the body as the site of conflict.⁸ They struggle with governments to acquire rights to make sovereign decisions. The best example are all types of feminist movements that fight for abortion rights, transhumanist movements fighting for enhancement rights, and so on. The common thing is that they want to make the body the subject of their own decisions. Many techniques are used for that purpose, including protests, social campaigns or even putting the message on their bodies, acting publicly and publishing photos or videos of from such actions. The semiotics of the body is in these and similar cases a means of expression but also a tool of struggling for political aims. In this sense, biopolitics today focuses not so much on the productive aspects of human bodies, but on their performative and expressive

⁷ V. D. Mendeleevich, *The extraordinary case of Russian performance artist Pyotr Pavlensky: Psychopathology or contemporary art*, in "Transcultural Psychiatry", 2018, 0(0), pp. 1-17.

⁸ M. Goldberg, *Wojny reprodukcyjne. Pleć, władza a przyszłość świata*, Wydawnictwo Czarna Owca, Warsaw, 2011.

functions. There is however, a broader context to these actions. It is the struggle for political interests which on the one hand can be pragmatic, i.e. a part of the game, but on the other hand may be strongly ideological.⁹

Bioethics and Biopolitics

Ideology and biopolitics intertwine when the normative dimension meets the pragmatic one. In the case of biopolitics it happens when it is understood as a policy that deals with bioethical cases. The latter are normative simply by nature – they try to answer questions like, “What should we do in a given situation?”, “What is the right or good thing to do?”. Although biopolitical questions add a pragmatic and rational dimension to it (considered from the perspective of public rationality), sooner or later they have to confront the fundamental (bioethical) questions. When it happens, it turns out that policy makers use or propose predefined answers on which they base further solutions. An example is the issue of abortion. To answer the biopolitical question “Should abortion be legal?” requires a prior answer to the more fundamental, bioethical, one: “Is abortion, morally right?” If a policy maker replies that abortion is never morally right or justifiable because a human life is sacred, so a human being possesses rights from the moment of conception to the moment of death, we can assume that his answer to the biopolitical question will also be ‘no’. To some extent we can predict political behavior because knowing the bioethical arguments we can compare them with political values, claims and interests, and obtain, as I call it, biopolitical ideologies. I claim that these are the major part of biopolitics today for at least two compelling reasons. First of all, every biopolitical issue refers to the question of human nature. Having some views on that matter makes us the holders of broader biopolitical worldviews. Another argument is more empirical and refers to the countries in which some procedures, e.g. abortion, are almost completely prohibited and even then, there is strong social activism against them. Poland serves as a perfect example here, because since 1993 abortions are legal only in three cases (the mother’s life is endangered, the pregnancy is a result of crime or the child’s health is in danger)¹⁰ and the number of legally performed procedures is, compared to years when it was fully allowed, low¹¹ – yet still the *pro-life* movements constantly fight for a complete abortion ban. It is hard to point out why they do that for any other reason than the ideological one. All of that makes biopolitics today a normative battle between moral values, beliefs and convictions. In more political categories, we can say that this kind of biopolitics may even lead to the emergence of new types of cleavages

⁹ For more see B. Plotka, *Biopolitics, Ideology and Citizenship*, in “Journal of Contemporary Central and Eastern Europe”, 2018, special issue on biopolitics, in print.

¹⁰ Which makes the law from 1993 a so-called “anti-abortion law”, see F. Girard, W. Nowicka, *Clear and Compelling Evidence: The Polish Tribunal on Abortion Rights*, in “Reproductive Health Matters”, 2002, 10(19), pp. 22-30.

¹¹ U. Nowakowska, M. Korzeniowska, *Women’s Reproductive Rights*, in U. Nowakowska (ed.), *Polish Women in the 90s*, Women’s Rights Center, Warsaw 2000.

such as *pro-life* vs. *pro-choice*, *pro-life* vs. antinatalism,¹² transhumanism vs. bioLuddism,¹³ but mainly: bioconservatism vs. bioliberalism. Although the verification of this hypothesis would require more research, it seems that some conditions for the existence of such cleavages are already met, e.g. when it is convenient for a government, it revives the division between proponents and opponents of some bioethical issue instrumentally.¹⁴ It additionally underlines that the ideological conflict is one of the most vital parts of biopolitics today, although often there is an overlooked gap within that fight. Not surprisingly, this is everyday practice.

Biopolitics as Risk Management

Nikolas Rose discussing concepts such as biosocialities and biocitizenship have noticed that they are connected with the growing self-awareness of biological processes and medical self-organization among people.¹⁵ He claims that “the actual or potential patient must try to understand his or her depression (or other disease – B. P.), to work with doctors to obtain the best program of medical care, to engage in self-techniques to speed the process of recovery”.¹⁶ This shift from being a passive to an active patient is why many ethicists postulate the need for the political control of medical services (some of them may cause controversies, such as abortion, surrogacy, cognitive enhancement, etc.). On the other hand, in the age of the Internet there are multiple ways to get access to them despite legal obstacles. All these possibilities can be reduced to two general scenarios. In the first one people may decide to submit themselves to the care of public organizations, e.g. doctors. In the second one, they become more responsible for their health and engage in acts of calculation and choice. Rose connects the second scenario with organizing hope understood not as wishing and anticipating, but as a psychological resource: a postulated “certain achievable and desirable future, which requires action in the present for its realization”.¹⁷ There is, however, a problem with that definition. It is indistinguishable from a goal. If the last dimension of biopolitics escapes the previous interpretations (as governing population or ideological battle) and is closer to what we could call the regime of the self, it cannot be based simply on realizing aims. If it could, then it would not be distinctively different from the other forms of living. Considering that in the matter of health people become

¹² D. Benatar, *Better Never to Have Been: The Harm of Coming into Existence*, Oxford University Press, New York, 2006.

¹³ See J. Hughes, *Citizen Cyborg. Why Democratic Societies Must Respond to the Redesigned Human of the Future*, Cambridge, 2004.

¹⁴ M. Ziegler, *The New Negative Rights: Abortion Funding and Constitutional Law after Whole Woman's Health* (March 9, 2017). FSU College of Law, Public Law Research Paper No. 832. Available at SSRN: <https://ssrn.com/abstract=2930054> or <http://dx.doi.org/10.2139/ssrn.2930054>.

¹⁵ N. Rose, *The Politics of Life Itself: Biomedicine, Power, and Subjectivity in the Twenty-First Century*, Princeton University Press, Princeton, NJ, 2007.

¹⁶ *Ibid.*, p. 143.

¹⁷ *Ibid.*, p. 148.

enterprising individuals making complex choices about their bodies and life, and that the choices depend mainly on choosing between medical means and services (sometimes even experimental ones) that can have an unpredicted influence of the people's condition, the biopolitics of the self is based not on organizing hope, but on managing the risk.¹⁸

In the age of mass media and intense information flows we can often find contradictory reports, e.g. that abortion may bring positive result for a woman, as well as that it causes a post-abortion syndrome for her; that children born thanks to the *in vitro* method are healthy, as well as that they are genetically burdened and live shorter lives than naturally born ones, etc. Regardless of which of them are true, we need to consider that individual predispositions may also influence the final outcome of using certain medical supplies or services. In other words, although we expect some desired outcome, it is always a matter of probability. We cannot fully predict if taking a medicine will lead to recovery or will cause even worse symptoms. This is why managing risk requires the constant broadening knowledge about the possible effects of medicines and services. The process itself may be a form of resistance against paternalistic public health policy. However, there are cases that contradict this trend. A good example is the case of Depo-Provera (a hormonal contraceptive method used also as a part of menopausal hormone therapy).¹⁹ Women who used it suffered from very unpleasant consequences for their health and sued the medicine's manufacturer. In other words, when assessing the individual risk, the women failed, and then turned to the state for help. That shows us another dimension of biopolitics of risk. It involves not only people but ultimately also government which has to counteract the failed assessments of individuals or organizations. Such a presentation of the issue makes this kind of biopolitics much more dynamic and unplanned. It requires constant data actualization, probability calculation, and adjusting policy in an *ad-hoc* way. The question is – is that the main direction that biopolitics follows today?

Summary

Instead of a normal summary I propose to consider the question which of these identified trends in biopolitics is dominant? I argue that there is no easy answer to that question, because all of them intersect at least at some points and then balance, stimulate or displace each other. For example, organ donation and transplantation from brain-dead humans may be supported by the state for the pragmatic reason of maintaining a population's health, ideologically fought against by activists believing in the inviolable integrity of the human body, and practiced by individuals beyond and in spite of this intellectual framework if they considered the attempt worth the risk. It is possible that these individuals may appeal to the state for help if their assessments were wrong and the procedure

¹⁸ W. Green, *Contraceptive Risk. The FDA, Depo-Provera, and the Politics of Experimental Medicine*, New York University Press, New York, 2017.

¹⁹ *Ibid.*

failed. The state may reply in the form of direct, *ad hoc* support or adjust its policy (on a pragmatic or ideological basis) to prevent such events in the future, which can then be met by further ideological opposition, and so on. As we can see in the above example, all forms of biopolitics discussed in this article intersect and are more or less visible in contemporary practice. That poses a difficult task for researchers who first of all need to properly identify what kind of biopolitics they are dealing with in any given case. Then, there is a need to constantly investigate and update theoretical categories used for scientific categorization. Therefore, one can study the new techniques of governing a population, new types of biopolitical thought and ideologies, biopolitical practices of the self, the role of all three in emerging regulations and policies, and much more. One thing is sure – biopolitics is one of the most vital parts of contemporary politics and its changes cannot be overlooked, especially by political scientists.

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