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Critical Exchange

Politics in the Time of COVID

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The severe acute respiratory syndrome coronavirus, or SARS-CoV-2, is the name of the virus that causes the disease COVID-19. First detected in Wuhan, China, in December 2019, its rapid spread led the World Health Organization to declare a pandemic in March 2020. It is one of the seven respiratory coronaviruses and exhibits high infectivity and pathogenicity (Zhan *et al.*, 2020). COVID-19 has caused severe economic disruption globally and, depending upon government and industry response, wreaked serious damage and destabilized nearly all institutions, public and private, global, and national. This is the worst and most consequential pandemic in a century or more.

Against this background, this Critical Exchange for *Contemporary Political Theory* reflects on the effects of SARS-CoV-2 and COVID-19 on human politics and our social relations. Oft written and said during this pandemic is that the virus and our response to it reveals something 'real' about the world: 'the virus is a neutral actor'; 'it does not choose its victims'; 'it only does what viruses do.'

Of course, viruses do 'act' in accordance with their viral trajectory: dormancy, infection, movement through host bodies, and, in the case of the coronaviruses, across species. Warfare metaphors are cast broadly from our politicians and scholars, calling for all defences to be raised and troops deployed against this invading threat to our health and well-being, both economic and physical.

COVID-19 has claimed over 3 million deaths globally with numbers rising as India enters a second wave and other countries are seeing an increase in more transmissible variants that could lead to less effective vaccination rollouts. The US has suffered almost as many losses from COVID-19 than it did in the Civil War, its bloodiest war to date: 582,486 deaths as of the end of April 2021. Of course, global COVID-19-related deaths still pale next to the world wars of the last century, but the duration of the outbreak and the potential endemic threat of the virus are unknown.

But is a war against the virus the correct call to arms? War metaphors are often deployed in social and health issues to stimulate quick action and response to a pressing problem. Certainly, public health measures are needed swiftly, and all sectors of society must be ready to work together for the best response to a viral outbreak. In my book *The Microbial State: Global Thriving and the Body Politic*, I critique the war metaphor when applied to the microbial world. It reduces the complexity, interdependence and depth of host–microbe experiences. Viruses are not only 'enemies'; they can be indispensable to human health and wellness. Some are protective phages that destroy harmful bacteria, and others defend humans from pathogenic viruses. 'The war metaphor and its focus on the attack and defense role of the immune system…obfuscates the equally important examples of cooperation, altruism, and coevolution of different species and their relation to the human immune system' (Fishel, 2017, p. 52).

We can now see, over a year into the pandemic, what responses have worked better than others, what actions taken provided the most benefit, and what responses

and actions did not contain the virus or the disease. But are we in a battle against the virus, or is it against the already existing human systems that put some more at risk than others, that see some populations as expendable? With whom or what are we at war?

This critical exchange endeavors to theorize a body politic that is not called forth by a war metaphor against SARS-CoV-2 and the disease COVID-19, but rather it shows how this virus inhabits the same spaces, flows across the same borders, and infects bodies and bodies politic that are already sick and failing. This virus does not enter bodies, neighborhoods, communities, and nations that are blank slates, but those that already struggle under existing violent and oppressive assemblages: fascist, racist, misogynist and white supremacist lines of flight across bodies, countries, and the planet. The assumed neutrality of the virus and its infection patterns are a scapegoat for other kinds of violence: infection and death rates are far from random and neutral. State responses (or lack thereof) have exacerbated already existing economic, political, and health inequalities.

Simply put, the virus may not discriminate by nationality, race, class, or gender, but the political and social systems that increase vulnerability and exposure to the virus most certainly do. Some of us are more at risk than others. This is evidenced by the stark differences in mortality when accounting for race and class, both nationally and globally: the origin of novel coronaviruses as caused by ecological destruction and nonhuman animal abuses; the high infection and mortality rates for people of color, immigrant communities, and the so-called 'front line workers.' If there is a war, then it is this one that needs to be theorized, not the one turned against SARS-CoV-2, or the previous viruses like middle east respiratory syndrome (MERS) or avian influenza (H5N1).

I will begin this series of interventions by highlighting the environmental origin and impact of zoonotic diseases, and what these facts can tell us about an ecologically informed political response to COVID-19 and other pandemics looming over the horizon, should the same destructive human behavior continue.

The spread of this novel coronavirus is presumed to have begun in bats and was then transferred through farm animals and other wildlife hosts to humans. This, and other outbreaks of zoonotic disease, is in part due to land-use change that increases environmental stressors in the form of wildlife distribution and the creation of novel contact opportunities that can lead to zoonotic spillover and eventual human infection (Plowright *et al.*, 2021). The authors of a study on the origins of the virus refer to this as land-use spillover, or 'infect-shed-spill-spread cascade.' The decline in wetlands and forests due to human use and intrusion have brought wild animals closer to livestock, thus facilitating the spread of zoonotic viruses (Plowright *et al.*, 2021). Wild animal consumption and trade are also inferred to be responsible for human infection.

Beyond the environmental origins of COVID-19, there are also connections between the environment and infection rates. In studies in Italy and China,

researchers have found connections between high air pollution areas and increased COVID-19 transmission (Coccia, 2020; Zhu *et al*., 2020). Findings from Italy suggest that to minimize the risk of future pandemics like COVID-19, industrialized cities cannot exceed 48 days over the limits set for PM10 or for ozone (Coccia, 2020). Similarly, the study from China found that governments and publics should direct their attention to regions with high concentrations of air pollutants and that reducing pollutants could be a useful way to control infection (Zhu *et al.*, 2020).

More broadly, climate conditions affect the intermediate vectors and the physiological conditions, immune response, and crowding in potential viral hosts and these factors increase the risk of epidemic disease. Worldwide climate changes could also affect the mutation of viruses. Evidence on these factors is lacking and needed (Zhan *et al.*, 2020). In other words, there are serious and increased latent health risks from SARS-CoV-2, and understanding the environmental behavior of this virus aids in preventing or controlling resulting epidemics or pandemics (Zhan *et al.*, 2020).

These scientific studies have highlighted that calls to action should focus on collaborative research and proactive strategies and, as Coccia found in the link between air pollution and infection rates, a 'comprehensive strategy to prevent future epidemics similar to COVID-19 has to be *also* designed in environmental and socioeconomic terms, that is also based on sustainability science and environmental science, and *not only* in terms of biology, medicine, healthcare and health sector' (2021). There are information gaps and scarcity of data and 'a clear need for combined experimental, field, and modelling studies' to understand land use-induced spill over (Plowright *et al*., 2021).

The entangled character of our existence on the Earth – humans and nature have never been separate – certainly illustrates this in the case of COVID-19 and points a way towards preventing suffering in the future. The pandemic has shown that 'disparities and social inequities have been implicated in the spread of infection,' that 'understanding the outbreak, spread of infection and the overall structure of society' is an imperative moving forward (Hashimoto *et al*., 2021), but also that the viral/inequality nexus should not overshadow viral/pollution nexus in further studies.

In other words: that COVID-19 is a serious disease caused by a zoonotic virus should not be buried under other analyses of the virus and of what this pandemic might reveal about our social, political, and economic relations. We cannot forget that SARS-C0V-2 comes from both human intervention into, and abuse of, the natural environment. The human risk of contracting and transmitting COVID-19 is exacerbated by already existing environmental damage. SARS-C0V-2 is also about our ecological relations.

In my research with Anthony Burke, we have named this forgetting, or backgrounding, of the natural world in which we are situated the 'sovereign ban of

nature.' We write in our forthcoming book *The Ecology Politic* that this ban encompasses a systematic blindness to the nonhuman that betrays a deep, pervasive, and foundational logic to western political humanism. It renders all nature as 'natural resources' that are given to states as their inalienable rights under international law. There are many examples of this laying hold, of and abandonment of, the nonhuman and the natural systems necessary to life on earth: deforestation, overfishing, soil degradation through industrial farming techniques, pollution, and overuse of fossil fuels. This ban has caused untold suffering, death, and degradation to the nonhuman that, in our present politics, is invisible.

Again, it is helpful to query: with whom are we at war? One can certainly answer that we exist in an ongoing war against nature and that this violence visited upon the nonhuman is a constitutive element of all human politics. If Michel Foucault productively extends and upends Carl von Clausewitz's dictum to the notion that war is politics by other means (Foucault, 2003), and if warfare is the general model for all relations, then why should the nonhuman escape? This sovereign ban of nature can be understood as a kind of settler-colonial war of invasion and domination at a global scale against the nonhuman and any nonliving material humans have named valuable. It is this war that has brought us to this point.

If we return to the warfare metaphor with the lens I have presented here, we can put a finer point on the power of this metaphor. It is possible to declare that humans are engaged in a genocidal and omnicidal war of attrition against ourselves and against the planet and its biodiversity. It is a crime against humanity (and biodiversity) of the highest order. Our human legal term ecocide has only claimed destruction of nature as a crime in times of war, but COVID-19 and its origins, and the overlaps with other issues of environmental degradation, show that human treatment of the planet is also an 'inhumanity' of the highest order: a brutal disregard of the billions of other species with whom we share the planet. This should put into clear relief the need for positive interventions across all sectors of human activity: the focus on human inequality, suffering, and oppression must be supplemented by a sharper appreciation of how human exploitation and ill-treatment of the nonhuman and our shared living spaces brought about these pandemic tragedies. Environmental and social responses need to be undertaken concomitantly to recreate a world that is healthier and more just for all beings on it.

Each of the contributions in this Critical Exchange seeks to find these places of intersectional tension in the human and more than human experience of the pandemic. Voelkner and du Plessis open with how the biological might resist the biopolitical. The postgenomic body is not a Cartesian one: human bodies are highly permeable to their environment and are always entangled in complex relations internal and external to the body. Just as the SARS-CoV-2 virus enters an already existing field of complex political, economic, and social relations, the human body is always already filled with human–animal–microbial relations. Disease is result of

complex multispecies interactions, the human immune system, and specific socio–ecological interactions. And importantly for potential paths of resistance, health is also a result of these interactions. This radically relational conception of life pushes the biomedical understanding into the biocultural; therefore, biopolitics are not wholly making live and letting die, but also of differential vulnerabilities. Their biocultural reading of the pandemic forces us to think of this pandemic as an ecological disaster that goes beyond human intrusion into nature as it stems from our very separation of ourselves from that nature.

Fletcher and McKnight draw us out of Voelkner and du Plessis's microview to a situated exploration of how the pandemic has exposed the systemic effects of race in the United States as a field of negotiation and contestation. The sidewalk – who gives way and who controls this public place of encounter – is used as an exemplar to demonstrate how COVID-19 already presents configurations of Whiteness and Blackness. In this pandemic, the giving way of space can be seen as an opening, or potential for, change and resistance despite its resemblance to the past politics of racial differentiation. Viral risk forces a rethink of *how* we share the sidewalk. They take this insight to remind us that biopolitics fails to account for how racial difference creates vulnerabilities through disparities in health care access, safe living conditions, and safe working environments.

Krishna provides an embedded and robust discussion of how the pandemic creates what he terms 'morbid intersectionality.' State capacity, belief in health care as a right rather than a commodity, and the ratio of lives that matter and those that do not work to ensure that minoritized and marginalized sections of society suffer more from 'natural' disasters like pandemics. Krishna analyzes *zoe*, or bare life, and *bios*, the qualified life within the *polis*, and their overlap with this pandemic and the deaths that have occurred. In other words, a prediction of casualties due to COVID-19 can be had by looking at how much overlap there is between *zoe* and *bios*. Krishna demonstrates this insight through India and Brazil contrasted with countries like Singapore and New Zealand: those that are viewed as unworthy of full national belonging have highest death rates. He takes a further step to connect these overlaps to historical legacies of colonialism and conquest that have created *zoe* and *bios* at the planetary scale.

Valdés turns our attention to how SARS-CoV-2 as a political actor threatens to shift and move political antagonisms from historical understanding of 'we' and 'them' as defined by Carl Schmitt. While Fletcher and McKnight reflect on the space of the sidewalk, Valdés highlights the facemask and its role in the creation of the friend/enemy distinction. The facemask embodies the inability to locate a threat in an easily defined 'other' by the medical fact that facemasks are not a signal that shows that the wearer is a threat, but rather they subvert the wearer into a caring relationship with those around them. You do not wear a mask to protect yourself, but rather to protect others from the threat that may be inside you. This implies a subversion of the Schmittian relationship, and feminist approaches clarify the

potential of this moment to shift to one focused on care and protection, rather than threat creation and response.

Finally, Shomura offers what this pandemic might teach us about our mistakes, our politics, and how to survive and be nourished in these times. He again takes us to where biopolitics meets this pandemic and asks a question posed by the other contributions to this Exchange: how are some figurations of life advanced over others? He gently shows us that many forms of life have opened up during this pandemic, and while there is cruelty and disregard, we have also witnessed new forms of care and mutual aid. Life is also an emergence of worlds, and it is our political task to foster what serves us and to imagine other forms of survival – especially those which are communal and reach for futures that could be.

This Critical Exchange brings together thinkers who show, or lay bare, what this virus and the disease have done to our planet, humans, and nonhumans so as to trace and clarify its profound intersectionality. They ask us: To look at that which is already there and the ways in which we refuse to think through the already present war against the planet and most of the people on it. To theorize in ways that turn us differently towards the world and address the trauma and wounds that this virus has joined.

<div align="right">Stefanie R. Fishel</div>

Microbial resistance to biopolitics? Biocultural emergence and differentiated vulnerability

> That a resistance to what is known today as biopower – the control, regulation, exploitation, and instrumentalization of the living being – might emerge from possibilities written into the structure of the living being itself, not from the philosophical concepts that tower over it; that there might be a biological resistance to the biopolitical; that the bio- might be viewed as a complex and contradictory authority, opposed to itself and referring to both the ideological vehicle of modern sovereignty and to that which holds it in check: this, apparently, has never been thought (Malabou, 2016, p. 429).

Inspired by this provocation from Catherine Malabou, we examine how to think COVID-19 as a biological resistance to the biopolitical. Malabou has detected a split between symbolic and biological life that characterizes western political philosophy and the critical scholarship that relies on its legacies. Describing what she calls an 'antibiological bias of philosophy,' Malabou (2016, p. 431) she shows how, in western philosophy, 'symbolic life is that which exceeds biological life, conferring meaning upon it.' The symbolic is always understood as external to, or in excess of, the brute materiality of biological life. According to Malabou, 'biology always appears, for philosophers, as an instrument of power, never as an

emancipatory field or tool' (Malabou, 2015, p. 38). Such philosophy tends to place potentials for resistance in nonbiological definitions of life that exceed the scientific notions of life, and the biological remains understood as predetermined and genetically programed, deprived of meaning. However, biological life 'creates or produces its own symbolization' (Malabou, 2015, p. 43), and the science of the living being should 'unsettle the equation between biological determinations and political normalization' (Malabou, 2016, p. 432). The living being does not simply perform a program, Malabou writes; rather the biological must be thought of as a space of interaction and transformation.

It should be noted that this split that Malabou has detected within western philosophy between biological and symbolic life is not the same split as the one Krishna in this Critical Exchange detects between what he labels *zoe* and *bios*, or the one Shomura detects between mere life and more life. Rather, Krishna's and Shomura's splits (in this Critical Exchange) are akin to what we label differential vulnerabilities, namely the ways in which states or governments differentially distribute death, and as such, all three Contributions express similar critiques of global biopolitics.

By distinguishing between genetic and postgenomic biological life, between biocultural readings of the body and how it is sickened by SARS-CoV-2 viral strains, we affirm what Malabou suggests; yes, the biological does in fact resist the biopolitical. However, we offer a more pessimistic reading of what this resistance entails, namely that it is not *a priori* the 'emancipatory field or tool' that Malabou (2015, p. 38) invokes.

Biomedical and public health orthodoxy, and consequently biopolitics, traditionally understands health as a predominantly biological matter in which external microbial agents such as the SARS-CoV-2 viral strains infect the healthy human body comprising an uncontaminated, fixed, and ontologically prior, biological core, the genome. The genetic body is a Cartesian figure, insofar as the bounded body, that is the result of its genes, shields the genome from an external microbial environment.

At the beginning of the twenty-first century, however, postgenomic ideas encapsulated in the emerging science of epigenetics are demonstrating that the biological body is not external but highly permeable to its environment. Epigenetics is beginning to redefine the genome as a complex matter of chromatin, a flexible macromolecule into which DNA is folded, that when changed, e.g., by environmental prompts, also alters the capacity to read DNA sequences. It is, in Meloni's words, a 'regulatory architecture' onto which the social and biophysical environment registers (2018, pp. 21–22). This 'excitable' epigenetic 'scaffolding' of DNA challenges the ontological assumption of the latter's priority and enclosure. Crucially, it also challenges how we understand biological memory. In molecular genetics, DNA is described by a linear string of information which represents the genetic 'programme' of a living organism, rendering genetic

memory linear. The three-dimensional chromatin wrapping of DNA, whose folding, looping, or entangled form matters to the way genes are expressed, however, renders epigenetic memory curvilinear (Meloni, 2018, pp. 21–22).

Thus, in a postgenomic reading, biological life is not bounded and predetermined but is permeable and malleable in its entangled 'becoming,' contingent on evolutionary, environmental, and social processes. Indeed, epigenetic scientists have begun to demonstrate how the spatial and temporal situatedness of environmental impacts, including toxins, stress, and socioeconomic status, are inscribed in the epigenome, illustrating the way 'the environment gets inside the body' (Landecker and Panofsky, 2013, p. 339).

The postgenomic body is always spatially and temporally situated in a complex environment of relations internal and external to the body. Recent gene sequencing has revealed a myriad of microbes including bacteria and viruses in, on, and around the human body. These microbes comprising the human microbiome, whose make-up and dynamics are increasingly shown to be involved in human health, are helping scientists understand better, among other causes, the causes of infectious diseases. In contrast to the germ theory of disease that links a specific microbe to a specific disease, an ecological theory of disease finds that microbes are not essentially pathogenic. Rather, disease is the outcome resulting from complex multispecies relations between the human immune system and the microbial environment around the body configured by specific socio-ecological 'situations.' Conceptually, a disease situation emphasizes the political as well as ecological relations shaping human–animal–microbial interactions that might lead to patho-genesis – or the emergence of disease such as COVID-19 (Hinchliffe *et al.*, 2016, pp. 13–16). While much remains unclear, nonetheless modern biomedicine is undergoing a far-reaching reassessment of the role of microbes in human health (Lorimer, 2017).

A postgenomic, epigenetic, and microbiomic reading of the pandemic leads us to consider how cues of (violent) histories and multispecies environments are folded into the coating of the genome, giving rise to the differentiated vulnerabilities to COVID-19 pathogenesis. That environmental phenomenon manifests itself in complexly situated bodily (epigenetic) changes inconceivable to, and thus challenging for, biopolitics. This leads Malabou to argue that the bio is emancipatory. She prompts us to think further about the (viral) resistance to biopolitics.

In the humanities and social sciences, these postgenomic advances have prompted medical anthropologists Guthman and Mansfield to suggest that we are witnessing not just 'the molecularization of life' but also 'the environmentalization of the molecule' (2013, p. 491), where the environment is taken to comprise a myriad of diverse elements, including the chemical, microbial, health systems, patterns of nutrition, access to water, etc. This permeability of the body has variously been theorized as a socionatural, biosocial or biocultural hybrid to denote

the sum of biophysical and cultural forces and factors which together constitute all life. The deep reciprocal shaping of living organisms and environments has led to an eschewing of the conjunction 'and' in grammatically binding the body and the environment, since this presumes two *a priori* distinct phenomena coming together (Frost, 2016, p. 18). To counter the tendency to think that there is a gap between body/environment, physicist and critical feminist theorist Karen Barad speaks of intra-acting *naturecultures*: matter and meaning are constituted in their entanglement. She writes,

> To be entangled is not simply to be intertwined with another, as in the joining of separate entities, but to lack an independent, self-contained existence. Existence is not an individual affair. Individuals do not preexist their interactions; rather, individuals emerge through and as part of their entangled intra-relating (Barad, 2007, p. ix).

Barad's (quantum) conception of entanglement professes a deeply relational ontology in which everything, human–animal–microbial–mineral is ontologically enfolded.

Health is the result of biophysical and social elements of 'natureculture' intra-actions. In this way, the differentiated vulnerability to COVID-19 can be understood as a consequence of varied biocultural contexts. Thus, we reflect on SARS-CoV-2, specifically as viral strains enabled by the vital-lethal biocultural milieux formative of them, as constituting the bio which demonstrably exceeds the biopolitical. We understand these biocultural naturecultures as bringing together the bio and the cultural in intra-active (radically relational) ways which resist biopolitics. We argue that this bio is succeeding in escaping biopolitics, because the biopolitics that is globally operationalized in the pandemic is premised on an imaginary of life (the bio) that is biomedical rather than biocultural. In this way, the SARS coronavirus 2 embodies a biological, that is to say, biocultural resistance to biopolitics, as there is no ontologically separate 'bio.'

As Foucault noted, biopolitical techniques of power not only seek to optimize and normalize life, but also act as factors of segregation and social hierarchization, resulting in relations of domination. The political response, Foucault writes, to these procedures of power, resistance to biopower, if you will, is a reclaiming of the right to one's body, and to health and happiness beyond the oppression and alienation that comes about with biopower. Resisting biopolitics is about making room for life that is not 'normal.' Rather than worrying about increased surveillance and disciplinary confinement with panoptic characteristics, however, Daniele Lorenzini (2020) asks for a rethinking of the role of biopolitics during our current pandemic so that we notice the racism in the hierarchization of exposure to death. Biopolitics should not be reduced to a mere matter of making live and letting die, but should be seen as a politics of differential vulnerability that is structurally dependent on, and actively produces, inequalities.

In this pandemic, those who resist biopower most effectively are those who refuse the biopolitical state's efforts to keep them alive by refusing to follow the pandemic guidelines of wearing a mask, keeping a distance, self-isolating, and so on. These people reclaim their bodies such that they can be infected, and infect others, which is in stark contrast to those who want to follow, but are unable to follow, these same guidelines due to their employment and housing situations. The fact that resisting biopolitics is not always a progressive move highlights how biopolitics is not always detrimental to everyone. Being governed by the optimizing, rather than by the necropolitical aspects of biopolitics is a privilege, and refusing to receive the care one is entitled to just highlights this privilege. Because there are many faces to biopolitics, depending on which bodies it governs, there are also many ways of resisting biopolitics. One cannot assume that any resistance to the biopolitical will resist its racist character.

A biocultural reading of the pandemic, such as the one we introduced above, emphasizes that the pandemic is first and foremost an ecological disaster. Not because of the connection between deforestation and zoonotic diseases, although that is part of it, but because there is no split between human bodies and 'nature.' Biopolitics is focused on the optimization of certain populations, but it is also part of an overall system (the system that has led to the Anthropocene) that is fundamentally destructive to life. As Mbembe (2020, p. 60) puts it, 'In its dank underbelly, modernity has been an interminable war on life.' Biopolitics is inept at optimizing diversity, be it biodiversity or diversity in human communities. In the end, taking global ecologies into account, this means that biopolitics is ill equipped for keeping the human species alive, precisely because it optimizes only some, selected, life, and this is fundamentally not how life optimizes itself. Rather, life optimizes itself through what Deleuze and Guattari call 'unnatural participation,' namely co-becoming of heterogeneous elements, rather than merely linear or filiative reproduction. Trying to escape this fact of life creates a dilemma:

> Keeping the world at a distance will become the norm so as to keep risks of all kinds on the outside. But because it does not address our ecological precariousness, this catabolic vision of the world, inspired by theories of immunization and contagion, does little to break out of the planetary impasse in which we find ourselves (Mbembe, 2020, p. 61).

In not appreciating more the kind of relationship it is possible to sustain with surrounding ecologies, we may be missing the moment to become together in ways that all can flourish. Insofar as the biological resists biopolitics, and perhaps, if we broaden Malabou's idea, that the ecological resists biopolitics, this resistance will have its most extreme consequence in devastating ecological disasters. The human will not endure if there are no other species around. This is a fundamental symbolism of the biological to which western philosophy (in its split between the symbolic and the biological) and western medicine (in its focus on one body at a

time, not on relationalities of bodies and ecologies) is still largely blind. And this blindness might well affect us all, with the obvious caveat that biopolitics is structured such that some will die before others.

In his writings about the pandemic, Mbembe has also taken a decidedly ecological view. He writes that the pandemic makes it clear that we cannot escape the biological, and he criticizes the illusion that the human body should be able to escape its biology via digitization:

> … just as there is no humanity without bodies, likewise, humanity will never know freedom alone, outside of society and community, and never can freedom come at the expense of the biosphere (Mbembe, 2020, p. 60).

Similarly, to Shomura (in this Critical Exchange), the difference between mere life and more life hinges on community. Connecting the body and its freedom, inexplicably to the social, community, and biosphere, is congruent with readings of the pandemic that foreground biocultural entanglements. The illusion that Mbembe alludes to (a split between biological and digital life) is akin to the split that Malabou has detected in western thought, between the symbolic and biological. However, also in Mbembe's view, does not this weight of the biological, and of the symbolism it itself creates, then parcel out a road for emancipation? Instead, it points to the perils of the Anthropocene. Taking ecology into account, it is anthropocentric to assume that resistance to biopolitics would always benefit human bodies. Resistance to biopolitics is not, as Malabou alludes to, *a priori* emancipatory. Instead, some human bodies might well die due to a biological resistance to biopolitics, without this entailing that other human bodies are then saved. This is the case both in and out of pandemics. In our ontological enfolding, we appeal to an ethics of becoming together.

<div align="right">Nadine Voelkner and Gitte du Plessis</div>

COVID and race in the US

The COVID-19 pandemic has exposed the everyday politics of race and its systemic effects in ways that belie the popular assumption of racial progress in the United States, but COVID also generates openings for novel practices of resistance and change. For this Critical Exchange we highlight the everyday negotiations of race politics, from both sides of the color line, using the ordinary practices of sharing the public space of the sidewalk. We then turn to the broader national discourse pertaining to the unequal effects of the virus across racial communities and the disparate access to health care and virus mitigation strategies. Both the ordinary, face-to-face encounters and the national-level COVID-inflected race politics exhibit the changing sameness of race as a field of continuous negotiation and contestation. Our side-by-side writing reflects formally the tension we highlight

in this Contribution: the shared and divergent ways in which we, the authors, experience race also informs the ways in which writing together happens.

How race happens: the sociality of the sidewalk and COVID

In this section we illustrate each author's experience of the public space of the sidewalk. The risk of viral infection nuances our discussion of how practices of race change and remain continuous in everyday life.

Utz McKnight: My father described what walking on the sidewalk in downtown Richmond, Virginia, was like as a young Black boy in the 1950s. No eye contact, no words of greeting, or physical proximity was permitted by a Black person if a White person was encountered while walking on the sidewalk. He was required to step off the sidewalk upon their approach, or otherwise be at risk of a violence and social condemnation. This was not a choice, nor subject to a difference of belief, but was defined as a process by which social geography described what it meant to be White or Black. When he described this to me more than four decades later, my father did not use the language of choice, but of absolutes, of naming a thing for which there was no mitigation beyond the requirement of a constant social segregation that meant exclusion and inequality.

The reservation of guilt and shame, the culpability for danger and immorality, the possibility of threat was always defined by the idea of Whiteness and its attachment as a value to someone in the moment, yes, but also as an ongoing continuous politics. To be Black was to be a subordinate, and the solution of any encounter between races was always developing new forms of exploitation, the means for reconstituting and reminding participants of a necessary racial difference. In the time of COVID, what becomes possible is to ask of those who refuse to share a sidewalk if the risk of illness and the concept of social distancing can mitigate the idea of racial difference that otherwise continues to be described by social geography.

Andrew Fletcher: Recently, while walking in my neighborhood with my partner and infant son, we encountered a group of about seven or eight White, skinny, shirtless (and maskless) teenage boys jogging towards us and taking up the entire sidewalk. The ability to work from home, and access to retiree-parent childcare, have allowed us to exercise extreme caution since the outbreak of the virus, and so we do our best to avoid coming within even ten feet of anyone outside of our 'COVID social bubble.' We hurriedly crossed the street to accommodate the runners and their description of vulnerability. But the moment we arrived on the opposite side of the street, we saw someone else walking towards us at a casual pace, this time a young, masked Black man. Again, worried about a potential exposure to the virus, and as soon as traffic allowed, we rushed back across the street, having just missed the herd of joggers. We continued with our walk, but it occurred to me in that moment that our tense shoulders, the panicked looks up and

down the street, and zigging and zagging to avoid any other people do not exist in a vacuum or outside of a racialized history defined through the use of the sidewalk and the idea of the pedestrian (Farge, 2019).

The white teenagers did not change pace; to them, we were in *their* way – they asserted authority over the social space of the sidewalk. This was a form of acquisition, of defining for us how we should describe our common social space. The 30-something man across the street was in no hurry, and he obviously saw us, but we came to his side of the street and then quickly quite literally ran away from him. Nonetheless, the real viral risk we were responding to could just as easily be seen as a description of a Whiteness that requires the definition of a supposed Black 'risk,' as fear. The differences between the two logics, racial and COVID-mitigation, are conjunctive, and we can see that one is also potentially parasitical on the other, demonstrating how racial difference develops through a politics of a changing sameness. The availability of the perception of racial difference by the social activity – the intractable residue, if you will, of the historical possibility of the consolidation of racial difference on the sidewalk – is enough to identify a new capacity in the event of COVID; this new capacity brought about by COVID does not replicate the old race politics (the acquisitive and aversive politics of the runners) but rather facilitates a novel way of sharing the sidewalk through which the lone Black man and my White family navigate a new unevenly shared risk, which we acknowledge through our deference to him in the moment.

Considering both authors' experiences side by side, the present material conditions of our sharing the sidewalk are irreducible to those of the pre-COVID past. We can no longer take for granted the simple practice of sharing the sidewalk, because now the responsibility for and to others is an everyday political negotiation focused on the mitigation of viral risk. Whereas old race-logic and/or COVID-denial have allowed for the refusal of this new possibility from occurring to some, the moment of walking between and across the race and COVID logics in the example of crossing of the street illustrates a new potentiality, despite the seeming similarity to past practices of race. This deferential action is of course contingent, and so insufficient beyond this moment, but it nonetheless exemplifies the kind of opening-up of possibility for change, resistance, and community that takes place in everyday social practices. Such openings allow for the refusal to accept the terms for racial social distance while being cognizant of the invidious legacy of racial differentiation as a function of the occupation of geographic space.

Vulnerability and racial difference

In *And We Are Not Saved*, Derrick Bell discusses a limit to the investment in racial equality by those who define themselves as White in the US (Bell, 1987, pp. 162–177). In the narrative, the children of the most prosperous White families in the country suddenly contract an unanticipated illness that turns their skin amber.

As this 'Amber Cloud' spreads among only the White elite, the children are shunned and, whether from the illness or from this ostracism, begin to act differently. Where before they were confident, attentive, and positively social they became withdrawn, insecure, suspicious, and lethargic. In the chronicle, it is obvious to the public that this illness has expanded the psychological impact of racism on those children who otherwise would not have this experience. A mix of psychological therapies and drug treatments is developed after considerable government investment in a cure. When in the narrative Black community leaders and politicians argue that this newly discovered cure for the effects of racism should also be given to Black youth throughout the country, this possibility is rejected by the government, claiming that the cure is simply too expensive and impractical, and that Black youth are undeserving.

From this example, Derrick Bell argues that even when a description of difference is elided, and a solution to a public emergency is sought, society will not only maintain the distinction of race in spite of what it does to everyone, but the description of a common threat will be turned into a new limit to racial reasoning, a changing same.

So too in the real-world example of the COVID pandemic, the fact that infection is a threat to everyone, and vaccines are a solution, does not appreciably change the determination that a racial distinction must be preserved between those who receive the vaccine first, the concern with morbidity and severe illness from community spread, and the introduction of mitigation procedures. Black and Brown people in the US have been disproportionally impacted during the pandemic. Nowhere is there an argument for addressing this problem as a priority for the government's intervention to inhibit the spread of COVID. Instead of acknowledging how racial differences in health care provision, housing stock, income, education, and location in the labor force determine the risk of infection, this idea of differential morbidity (or intersectional morbidity) and severe illness is left undetermined, vague in its cause, if not attributed to something biological-racial that has yet to be scientifically identified. Instead of acknowledging and acting on the evidence of extreme racial inequality, such that Black and Brown people are dying from COVID at much higher rates than White people, the government has, similar to the Amber Cloud chronicle, sought to mitigate the pandemic's impact on those who benefit from the racial hierarchies that persist in all aspects of US society.

In fact, in hindsight it seems obvious that a calculation was made for many months in 2020, during the last presidential administration, that the risks of death and severe illness were low among Whites and elites just because of the absence of the effects of racial inequalities on their lives. It was argued publicly that those who had access to the best health care, good jobs, housing, and excellent public services could avoid what was occurring perhaps as close as one block away in a city, due to racial housing segregation. Whiteness was itself a currency, if properly maintained as a distinction to always define a difference, in the war against COVID. The

claims about COVID being a hoax and that a maskless mitigation strategy was effective enough, were not therefore ignorance of science or baseless politicking.

In the context of an awareness and acceptance of the enduring and comprehensive impact of racial differentiation in US society, the expectation of being able to minimize the impact of the pandemic on elites, and on those deserving in the racial hierarchy, seems, if not reasonable, at least logical. Trump was explicitly arguing for a race science, based on the idea of desert and human differences, which his administration sought to implement in other policy avenues. COVID thus became mobilized in the racial politics that described even death by COVID as a consequence of a necessary racial inequality, as a description of making America 'great again.'

The vulnerability of Black and Brown populations to COVID is a product of the processes by which exclusion from quality health care, safe living conditions, and a supportive working environment institute racial difference. Instead of collapsing this idea of collective material relations of supposed racial difference, we wish to point out the possibility for a refusal and forgetting that develops alongside, and in conjunction with, the individual description of risk in the event of COVID. This counter-politics provides the potential to mitigate the reproduction of racial differences in the time of COVID.

Given the immediacy of this threat to life of a population, it is hard to think of a more important measure of how biopolitics fails to fully account for how race develops, forcing us to eschew the definition of racial difference as located in a decision procedure and an explicit calculus of collective bargaining through which difference is realized. The reification of difference as a slippery signifier or name is constantly being foretold, anticipated, sought out as a resolution to inequality and injustice; simultaneously, the status of racial difference as definition is under dissolution, threatened with erasure unless distributive mechanisms, described as techniques, processes, and regulations exist to provide direction. We often confuse the goal of these practices, the coherence of racial categories of collective difference, and the impossibility of their comprehensive realization. Thus the naming racial difference, and its constant signification as a form of obscurantism, is an attempt to close off the refusal of exclusion and forgetting that is a politics working against the coherence of racial difference – a politics that we must develop amidst our constant imbrication in the description of race in our lives.

As with the popular discourse around the Flint, Michigan, water crisis, and similar to the description of policing and the killing of Black people, it has not yet proven possible to fold the disproportionate death rates of Black people into a description of Black culpability in the public conversation about the event of COVID. This should signal for us the advent or continuation of a counter-politics in US society which asks the question about what justice requires in the context of racial differentiation. At this moment of the pandemic, the salience of the description of racial difference at every stage of human life remains still too

obvious to obfuscate, as Derrick Bell depicts in the chronicle, where Black inequality is described as still necessary.

COVID politics

To address the spread of the virus in Black communities would require dismantling the economic blueprint, literally and figuratively, for racial exclusion. But this is how most Americans experience race and what marks race socially – where you live and where you work – and what type of health care you receive. If we think again of the sidewalk example, it is not whether we share the sidewalk, but how we do so that matters. Whereas the mask can lead to the failure to recognize the other as having a fully human face and thus soul (Wittgenstein, 2009, p. 189e), it also represents an acknowledgement of the risk that I, as a potential virus-carrier, pose to the other (see Valdés in this Critical Exchange for a discussion of the self's threat to the other). Mask-donning is a behavior that acts *as if* the 'other' demands my care and concern. Since the mask protects others more than myself, it represents the potential for a more other-centered politics in spite of the ways that it gets absorbed and reframed in new logics (e.g., from the logic of acquisitive Whiteness and segregationist race politics to a COVID-inflected race politics) and so perpetuates a changing sameness; but there is likewise the *changing* sameness – the moment of the arrival of the 'other' on the scene, the Levinasian 'face' – that opens up new possibilities through its infinite demand on me to be radically otherwise than I have been so far (Levinas, 1998b, pp. 290–291).

The problem is that, as we see in the Amber Cloud narrative by Derrick Bell, even if we continuously create new ways to mitigate our own threat or risk to the other, we must also open avenues of care that avert the needs and pain for which we are not the direct cause, but are nonetheless responsible (Levinas, 1998a, p. 10). The constancy of mitigation efforts is located in the need to continuously lessen the threat of the virus and its variants (as informed by the latest research on the virus and its demographic effects), but this constant need is addressed through evolving strategies and practices (e.g., masking, double-masking, vaccine breakthroughs, new CDC guidelines about safety post-inoculation, etc.). These amount to a changing sameness that is embodied through now-everyday practices which intertwine with race's evolving description over time and circumstance.

Similar to the lawsuits on behalf of the victims of the Flint, Michigan, water crisis, and in the protest movement for Black lives in the summer of 2020, the response to COVID within the Black and Brown communities is to organize to change the conditions that define inequality, in this case the provision of health care to their communities. The exploitative processes by which health care is provided to these populations, the unequal services and access to resources that define racial difference, are themselves challenged by the community efforts to distribute the vaccine, to care for those severely ill, and to provide the resources required for safe

mitigation social practices. Increasingly, Black and Brown communities have coalesced around this idea of safety and vaccine provision, and as a consequence, they potentially change a local description of unjust health care access. Public campaigns to reassure potential vaccine recipients of the safety and necessity of the vaccine, as well as efforts by local elected officials, pastors, and school professionals to make sure their community is not excluded from vaccine distribution, have lately been at the center of this challenge to the existing description of adequate health care, which otherwise reproduces racial inequality. In the same way, how we work together to manage the spread of the virus in the context of the sidewalk changes the description of racial difference; it allows for the possibility that we turn towards a definition of equality on the sidewalk, even in the act of turning away to mitigate the spread of the virus. Doing so provides for a future where racial difference is not constantly reproduced as a function of a demand for authority through which to define acceptable activity and difference, where virus mitigation realizes change.

<div align="right">Andrew Fletcher and Utz McKnight</div>

Intersectional morbidity: selective death in pandemic times

The ability of a society to contain COVID-19 hinges on three interrelated components: state capacity; a widespread belief that public and individual health is a right and not a commodity; and the ratio between those regarded as worth saving versus those whose deaths do not matter. In this brief comment I focus on the interaction of these three factors to produce morbid intersectionality, that is, the overwhelming percentage of poor, racially, or ethnically minoritized and marginalized sections of society among those afflicted by and/or dead due to the so-called natural disasters such as pandemics.

All the decisive breakthroughs that led to the sharp increase in longevity in human lives from the early twentieth century onwards (public sanitation, antibiotic drugs, vaccination programs, safety standards in food and drug production, separation of drinking water from sewage in urban areas) were consequences of public policy. They had little to do with market competition or the private sector. This history is deliberately forgotten with the resurgence of market fundamentalism since the 1970s, often termed the rise of neoliberalism. International variations in state capacity are largely a legacy of colonialism: countries that were among the premier colonizers in the nineteenth and early twentieth centuries established institutions capable of effective intervention while those who were colonized are, by and large, marked by inefficient states that are simultaneously overstaffed (in terms of personnel) and underdeveloped (in terms of capacity). The erstwhile communist bloc of nations, for the most part, did develop efficacious states. Indeed, it was the newly formed Soviet Union that created the world's first public health

system in the aftermath of the Spanish flu pandemic that laid waste anywhere between 50 million and 100 million people in the concluding year of the Great War (1918). The members of an egalitarian ideology that regard public health as a right still prevails in some of them, such as China and Cuba, while it has been eroded in those seduced by neoliberalism (Russia, to name one).

A likely predictor of the pandemic's casualties in a society is the degree of overlap between those merely existing and those enjoying the full rights of citizenship, or, one might say, between *zoe* and *bios*. Cutting through a formidable thicket of philosophical and semantic debate since the publication of Giorgio Agamben's *Homo Sacer* (1998), I understand *zoe*, here, as mere or bare life, or natural life common to humans, animals, to anything that lives, and *bios* as qualified life, a valued life specific to a spatiotemporal community, a full form of citizenship or *bios politikos*. The greater the overlap in the two categories the better that society is likely to be in addressing the pandemic; the less the overlap between the general category of *zoe* and the subset of *bios*, the larger the casualty rates.

To crudely illustrate, countries like India and Brazil are examples of societies with a great mismatch between *zoe* and *bios*. On the other hand, Taiwan, Singapore, New Zealand, Iceland, and Vietnam have done extraordinarily well, in part because the overlap between *zoe* and *bios* is very high in such societies. As always, macro numbers can conceal much – nearly all of Singapore's positive cases were among migrant laborers who fell outside the purview of that city-state's formidable health care system. Since they were viewed as a transient population their health was not even monitored. Even when it was eventually addressed, it was more because of the danger of contagion than because of any concern for them as human beings. A similar pattern of disproportionate susceptibility to COVID-19 and early morbidity therefrom characterizes New Zealand's Maori underclass or Taiwan's aboriginal peoples. Across the world, COVID-19 exposure and deaths are highest among segments of society regarded as unworthy of full national belonging.

To understand the historical legacies that have produced *zoe* and *bios* on both a planetary scale (first versus third world) and within national societies (class, ethnic, gender, religion, and other schisms), one could chart the process from where one lives. In my case, that would be on the island of Oʻahu in the Hawaiian archipelago.

In his meticulous demographic study 'Before the Horror,' David Stannard (1989) established that the pre-contact population of the Hawaiian Islands was between 800,000 and 1 million. In just 25 years after contact, the native population had been reduced by fully 50%, and a century later their numbers were about 50,000. As much as 94% of native Hawaiians perished due to pandemics. Today their descendants have the highest per capita rates of poverty, incarceration, drug addiction, homelessness, mental illness, and early mortality. Predictably, native Hawaiians are among those most severely impacted by COVID-19. Apocalyptic disease is not something waiting to happen to the indigenous inhabitants of these

islands; it has ravaged them since the arrival of Captain Cook to these shores in 1778.

If I widen the lens out eastward from Hawaii to North and South America, a similar magnitude of mass extermination due to prior pandemics can be charted. The indigenous populations of the new world were reduced to a small fraction due to disease that swept across their peoples. The ones who survived into the present are among the most indigent and most susceptible to the latest pandemic. Within a decade of the 'discovery' of the new world by Columbus, the first ships carrying Africans across the Atlantic were on their way as the era of chattel slavery commenced. The descendants of the survivors constitute a racialized underclass across North and South America – and are predictably on the frontlines in terms of casualties from the latest pandemic.

While settler colonialism in the new world produced a chromatically bipolar division between *zoe* and *bios*, there was a more variegated production of distinctions in Afro-Asia due to western colonial rule, but with similarly devastating effects. Consider Mike Davis's (2002) estimate of up to 60 million preventable deaths in Asia and Africa due to the so-called famines in the second half of the nineteenth century. Davis highlights the fact that, like pandemics, climate change (shifts in El Niño currents made drought more likely in the second half of the nineteenth century) is not a recent phenomenon for much of the planet, but one already constitutive of a catastrophic past.

Davis points out natural disasters were a necessary but insufficient condition for the colossal death toll. Colonial rule in the political realm, and an ideology of laissez-faire or statist nonintervention in the economy, completed the trifecta necessary for mass death. In other words, it was the social and political distinction between *zoe* and *bios* made by colonial regimes across Afro-Asia in the second half of the nineteenth century that accounts for the 60 million deaths – not 'nature' or the caprice of an unseeing God. You thus had the obscene paradox of people dying of starvation by the hundreds of thousands in one part of a country like India, while neighboring regions continued to export food and cash crops, and in still others food grains were eaten by rodents or rotted away in storage due to lack of 'demand,' i.e., due to the poverty of those marked for death.

The parallels with the profiles of casualties in the current pandemic are inescapable. In both instances pre-existing conditions, such as poverty, malnutrition, race, class, and gender; the prioritizing of markets over (certain) humans; and state failures due to their being beholden to narrow interests of investing classes, constitute the biggest reasons for death. In both time periods, pandemics worked as accelerators of intersectional morbidity under the cover of 'letting nature take its course.' China's assiduousness in combating the virus does not extend into Uyghur concentration camps; the hyper-efficient Israeli state has essentially abandoned the Palestinians; Bolsonaro's regime in Brazil has been brazen about its complete disregard for the lives of those in the Amazon; Modi's callousness towards migrant

laborers, religious minorities, and the poor epitomizes the Indian middle class's genocidal mentality; and in the US scant attention is paid to the impact of the virus on largely brown-black incarcerated populations or refugees. What appears to be state failure is more accurately assessed as state sabotage of those already deemed worthy of extinction (see Fletcher and McKnight in this Critical Exchange).

Despite the ravages of neoliberalism in recent decades, western states remain the gold standard of state capacity and democratic inclusiveness. This reputation is built upon a selective vision: the treatment of racial minorities, indigenous peoples, the indigent and marginalized sections never figure adequately in the audits of their efficacy or performance. The consolidation of the welfare state in the west, especially in the decades immediately after the Second World War, powerfully underpinned its self-anointed monopoly on liberalism, human rights, and democracy. Economic success and liberal democracy were attributed to the unique genius of such societies, one that others would do well to emulate, as modernization theory suggested.

Yet, analyzed from a global and contrapuntal perspective, the western liberal democratic welfare state owes less to autochthonous attributes and more to planetary and interconnected processes. From this vantage, the welfare state of the west is a transient institution: it was subsidized by the super-exploitation of populations through colonialism and is sustained by the neocolonial control exercised by their governments and corporations over the prices of primary commodities and by perpetuating debt crises in the third world.

A rich tradition of radical political economy starting with Karl Marx, through Leon Trotsky, Samir Amin, Frantz Fanon, Walter Rodney, Eric Williams, Amiya Bagchi, Utsa Patnaik, Cedric Robinson, Ruth Gilmore, Cheryl Harris, Angela Davis, Robin Kelley, David Harvey, and many others has argued that racialized capitalism suffused the planet, producing and reproducing the binary of zones of growth and underdevelopment across regions and within nations. Western welfare states were not so much epitomes of civilization and liberal democratic polities as they were products of outsourced barbarism to distant theaters without and to colored minorities within.

To suggest that neoliberal austerity and declining state capacity account for the inadequate response of the US and UK to the pandemic is to obfuscate the crucial intersectional patterns of morbidity. Black communities in the US have seen a tremendous expansion of the state into their lives under neoliberalism, rather than a retreat. The costs of the huge expansion of prisoners, of policing technology and personnel, of redlining and the war on drugs, dwarf anything expended on blacks during the war on poverty or on welfare in the aftermath of the civil rights movements. Nor is the alleged retreat of the state under neoliberalism reflected in shrinking military budgets or in ending the endless war on terror against colored populations everywhere. As in the nineteenth century, state-sponsored

intersectional genocide is transmuted into either natural disaster or the regrettable but inevitable culling of the weak in a market society.

COVID-19 is but one facet of a larger existential crisis that humans have brought about through political, economic, military, and scientific practices since at least 1492. Our anthropocentric hubris blinds us to the fact that the Earth does not owe us an existence any more than it does to any other species. Now, for the first time, we are faced with the prospect that *zoe* and *bios* may finally coincide on a planetary scale – but unfortunately not for the survival of all, but rather for our collective extinction. That fate, however, is not to be confused with the unlikely extinction of a planet whose multiple life forms may, for all we know, thrive in our absence. Even if this pandemic is eventually tamed, I very much doubt there are ways out of the larger existential crisis we find ourselves in as a species.

<div align="right">Sankaran Krishna</div>

Political bonds after COVID-19

Following the legal theorist Carl Schmitt (2007), whose controversial doctrine argues that the friend/enemy distinction is the ontological and existential condition of all politics, we can consider antagonisms as a central element in how political relationships are created in liberal democracies. In this doctrine, antagonisms are traditionally inserted into a game of signifiers governed by the signifiers 'we' and 'they.' These signifiers play the roles of friend and enemy by developing a master narrative that shapes the 'they' as a threat to the harmony that characterizes the 'we.' I claim that the appearance of SARS-CoV-2 and the ensuing pandemic can be understood as a moment in which a new political actor appears and threatens existing political relations, since it can shift and move political antagonisms in ways that differ from those that have been commonly or historically understood, thus changing how such antagonistic relationships are established and implying that new coalitions or alliances are possible. However, the threat posed by a pandemic differs from others as the nonhuman is not easily coded into existing anthropocentric politics. This Contribution explores how political relationships have been constructed, following this Schmittian schema of friend/enemy over the first months of the pandemic and considering how the pandemic itself may serve to rethink them from a feminist standpoint. Facemasks will serve as the vehicle for this analysis.

By departing from the affirmation that current political relationships are articulated around the Schmittian structuring relationship of friend/enemy, there are at least two different outcomes from the emergence of a threat. Firstly, it may dislocate the political frame – understood as the friend/enemy distinction that structured political relations – and involve the creation of new alliances, by defining the virus as the 'they,' and a broad and abstract conception of society as

the 'we.' In this sense, the emergence of a nonhuman threat could cause the strengthening of social relationships. Solidarity, altruism, and 'all for one' kind of actions would develop in facing an 'enemy' that is neutral, that does not differentiate between classes or races, as a virus may not 'choose' its victims. The virus would enter this play of signifiers as something which erases differences between long-term enemies and which could create novel coalitions based on a response to an external threat. As a matter of fact, this 'humanist' outcome has had little and only short-term impact due to earlier antagonistic divisions and splits of the social previous to the COVID-19 pandemic. Thus the apparition of the threat may not completely dislocate the political frame in the long term. As Andrew Fletcher and Utz McKnight argue in this Critical Exchange, the pandemic's humanist outcome is frustrated by prior social inequalities that are being reinforced by this pandemic situation.

Secondly, the pandemic has clear medical and health consequences. However, although a virus may inhabit any body, the truth is that there are significant differences in the exposure of bodies to the virus. On the one hand, bodies are connected and interdependent. Thus, bodies fundamentally rely on each other (the fact that the virus is contagious illustrates this interdependence) and also rely on external health infrastructures (to which not everyone has equal access). The interdependence and inherent precarity of bodies imply a need for care networks. The current unequal distribution of care and reproductive work shows an unequal distribution of the responsibility of the interdependence of bodies (see Krishna, in this Critical Exchange). As a matter of fact, care and reproductive work are mainly developed by women and people of color (POC). In the current context, this unequal distribution predisposes women and POC to contagion as they are usually contracted as carers or are caretakers in the home. Also, short-term health issues are not the only consequences that spring from the health effects of COVID-19. Long-term health issues will affect those who have recovered, which implies that, although governments of countries that lack free and universal social security may pay hospital bills for people affected by coronavirus, long-term health issues will not be covered by urgent funds and will likely increase debt in low-income populations.

Further, a year into the pandemic, lockdowns have long-term consequences on the economy. This could also strengthen social tensions between classes, races, countries, or age gaps as COVID-19 infection rates will increase social and political tensions due to intranational and international differences in supporting communities during the lockdown. Unequal distribution of bodily interdependence, health infrastructures, economic support, etc., lead us to a second outcome characterized by a tensioning of political relations that may imply social fragmentation.

The probability of a negative outcome of the pandemic defies the idea of an abstract and solidary 'we' in front of a threatening and viral 'they.' The potential

fragmentation of society as the 'we' has pushed states to impose a master narrative able to govern how the signifiers 'we' and 'they' were established after the apparition of a new threat. The state needs to be able to locate the threat in order to govern political relations at a time when there is an evident scarcity of resources (remember the scarcity of facemasks at the beginning of the crisis) and when it needs the population to comply with its restrictions of fundamental human rights. To see how political relations may be modified in light of the recent apparition of a threat, we need to locate ourselves at the beginning of the pandemic, a moment characterized by a dire lack of resources and proper knowledge about the parameters of contagion. Two different stages characterized the beginning of the pandemic.

During the first months of the pandemic, the general opinion of experts and population was that carriers were symptomatic, which allowed us to locate the threat on the 'other,' understanding the 'other' as the one that coughs or has a fever. In other words, we could easily recognize the threat of the 'other'; the threat was embodied, which allowed individuals to locate the signifier 'they.' Moreover, over the first months of the pandemic, facemasks were not readily available. I do not have symptoms. Therefore I do not need to wear a mask. But, if someone coughs near me and does not follow social distance recommendations, she becomes an easily identifiable threat.

Nevertheless, this initial scenario changed once it was confirmed that there are asymptomatic carriers of the virus. This signaled a radical shift in how the threat was located as there are no symptoms that would allow individuals to see to whom the signifier 'they' could be applied. Furthermore, you may be a carrier of the virus and transmit it to the vulnerable, putting their lives at risk, not just your own. In this scenario, a strong sense of anxiety appears, as the threat does not have a bodily dimension: you cannot easily locate the threat in another person. Furthermore, this anxiety dramatically increased due to the lack of facemasks and other PPE in many countries.

The most common thought regarding the division between 'we' and the threat has been as follows: there is an embodied threat, and I must protect myself from it. Thus I wear a facemask. In political terms, we can read: there is a threat outside of me, in the body of another, and I must protect myself. Thus, the political relationship is the Schmittian one of friend/enemy in which I must protect myself from the others. As a matter of fact, this thought is also visible in those people who affirm that they do not wear the facemask as they do not care about infecting themselves. This second decision also rests on the idea that the threat inhabits the 'other' as these subjects do not see how by not wearing a mask and not knowing if they are infected, they are also putting at risk the health of those wearing basic cloth facemasks. They do not see the threat they may be to the other but only act like the threat is outside of them.

The individual capacity to locate the threat in an embodied other and to create enemies at the individual level (that may shift a previous 'they') radically defies governments' capacity to locate the threat. The creation of enemies within society hinders government's task to create an abstract 'we' based on the entire society and to create a 'they' embodied in a nonhuman 'neutral' threat and thus to be able to impose rigid restrictions that limit fundamental human rights. Thus governments decide to impose a master narrative based on warfare, in which 'we' as a whole have to fight a 'they' that is unembodied, a nontangible threat that asks for difficult decisions such as lockdowns and mobility restrictions.

However, I argue that there is a feminist alternative to political relationships after the pandemic that implies the subversion of the Schmittian relationship. This subversion questions the warfare narrative and offers a different way to create an empathic and co-responsible attitude towards the other. The use of surgical facemasks serves as an allegory of how political relationships based on the idea of antagonisms can generate a feminist paradigm that facilitates intersectional politics based on what we define as politics of care and prevention.

Although there has been significant controversy and confusion over the use of facemasks, a certainty has become clear: basic cloth face masks and surgical ones are not used to protect the wearer from the infected 'other,' but rather facemasks prevent the wearer from infecting others, which reverses the antagonistic political relation in productive ways. The Schmittian relationship locates the threat outside; the relationship it establishes is a struggle against an external enemy. In contrast, this Contribution offers a different reading, in which, by understanding ourselves as potential threats to others, we go from antagonistic relations to coalitional bonds.

Lack of knowledge about facemasks led people to think that they had to wear facemasks to protect themselves from the threat of the embodied virus. However, the division between the 'we' and the 'they' that surgical facemasks establish is the inverse one. When we translate surgical facemasks' functioning to political terms, we find a division between the 'we' and the 'they' that does not place the risk outside the limits established by the facemask, but inside. That is to say, the threat does not reside outside but is instead inside of me: 'I must wear a mask as I may be a potential threat to someone.' Thus there is a radical shift in how the threat is situated, and the relationship friend/enemy is subverted by understanding that the 'other' is not my enemy, but I may become an enemy, a threat, to the 'other.' It is a situation of reverse antagonism. The productive question then becomes the following: what is the feminist dimension of this reversed political relationship, and how can it help articulate a much-needed intersectional politics in these times?

Current divisions within the feminist movement spring from debates over the definition of feminism's political subject. Trans-exclusionary and racist ideas try to erase nonwhite people and trans people's gendered struggle by reproducing the dichotomy of gender and denying peripheral cosmogonies and ideas on gender, thus reducing antagonism to the threat of 'male' (they) over 'female' (we). For the

feminist movement to achieve an inclusive and intersectional political subject, it needs to depart from the idea of inverse antagonism so that it allows us to include the idea of privilege, along with that of oppression, as central categories of intersectionality.

The idea of intersectionality as a worldview – as opposed to a static ontological position – allows us to observe and analyze political relationships from a different perspective. Here I follow in the footsteps of Kimberlé Crenshaw, who conceptualized intersectionality as an active understanding of the world and our actions in it. Some voices in white feminism have appropriated the term and interpreted it as an ontological position characterized by the intersection of oppressions. This appropriation brings along a crucial risk: by adopting intersectionality as a static ontological status – that is to say, avoiding questioning whether intersectionality is situated, and therefore whether my oppression and privilege are dynamic and dependent on the context, we avoid analyzing how women, as an oppressed subject, may also deploy violence and become a threat to other subjects. By way of example, as a white cis woman, I am more exposed to sexual violence than a white cis male, but I also need to recognize my superior position while facing a situation in which I may represent a threat to another, for example, a black male gay refugee in the Mediterranean coast.

While traditional feminist readings on antagonism have pivoted around the sole axis of sex and/or gender, a broader and intersectional approach to antagonism is much needed. I claim that for feminist politics to put life at the center, it needs to embrace reverse antagonism. The idea of reverse antagonisms is based on the affirmation that political relations rely on antagonism; nevertheless, by acquiring the inverse position, if feminist agents are aware of their potentiality as threats, they will articulate a political theory and praxis that embraces intersectionality. That is to say, by adopting the facemask paradigm, feminist currents can adopt a position that allows them to think of themselves as privileged subjects and ask themselves which lives they are defining as feminism's political subjects and how political antagonism is to be understood. In other words, while certain branches only understand one static, nonintersectional antagonism between male and female, reverse antagonism helps us understand intersectionality, plural antagonisms and the threat of the 'we' over the 'others,' while also changing the governing signifiers 'we' and 'they' and the hegemonic conception of the threat as being outside.

Reverse antagonism can help us see how antagonisms do not only refer to relationships in which I refer to the 'other' as the threat but also refer to political bonds in which I must assume the potential risk I pose to other intersectional subjects and so establish networks of care and co-responsibility in which I acknowledge my privilege and threat, and prepare the grounds, not for antagonist struggle, but coalitional bonds. We can perceive how we become a threat to others in specific contexts. Furthermore, adopting the idea of reverse antagonism within this conception of intersectionality allows us to see how responsibility and empathy

need to inform political relationships and subvert the classical Schmittian antagonism. Furthermore, the centering of these elements allows us to reverse the denial of bodily interdependence.

The facemask paradigm thus introduces a new feminist political relationship that presupposes self-analysis, i.e., a political self-critique that articulates bodily coalitions. This coalition would imply a collective response to the horrible consequences of this pandemic by those suffering disproportionately from the effects of this crisis. Thus, precarious subjects could establish bonds that create a political coalition by putting shared vulnerability at the center of the political struggle. Not only has the virus made visible the inherent vulnerability of bodies, but it has also exposed how my own body could become a threat to the 'other' by functioning as a means of contagion. To think of political relationships as inverse antagonism allows for a politics of care and precaution towards the 'other.'

Alicia Valdés

Theory in survival time

I mistook the prompt for what the COVID-19 pandemic might *teach* about politics, rather than what it might show or tell. Fortunately, the pandemic has forced a reckoning with mistakes. They illuminate that failure has potential, that falling apart is a tendency internal to life, and that the quieter, softer parts of ourselves have not been nourished, may never have been nourished, yet may prove to have been vital for survival all along…

Of course, show-and-tell is a kind of teaching wherein students role-play as teachers. It is an activity most common at a formative age when youth are not only learning, but also learning how to learn. This invaluable mode of being, unfortunately, is often packaged as a developmental stage before making a difference 'in the real world,' which is to say, being productive in late capitalism.

For many, the COVID-19 pandemic is a time for action, not thinking. Politicians, business owners, university administrators, and so many more have scrambled to make pandemic life approximate 'normal life.' Students must learn, workers must work. The rush to get back on track to an interrupted future closes down the time for thinking. Stopping to think is supposedly a marker of privilege and gross negligence of people who are suffering, dying, and desperate for help.

Yes, theory can be lofty. And yes, it can disregard real struggles. This is surely true when the pandemic is seized as a chance to spin old theories into the genre of omens. But perhaps theory is necessary when the world crashes against the rocks of the new – when 'Something in the world forces us to think,' as Gilles Deleuze (1994, p. 139) was fond of saying.

For Deleuze, thinking is a rare event. When the world is stable, it can be navigated with mere recognition. Only when the snug fit between subject, object,

and concept is torn apart does thinking commence. One might say that we are tasked with learning how to learn. Thinking happens only when the world falls apart or is revealed to have been in chaos. It initiates a reconfiguration of the self.

If so, then the COVID-19 pandemic is an exceptionally thinky time. Theory is not a luxury but an inevitability. This is so especially for survivors of racial capitalism and settler colonialism who have had to think all the time: how to gather food, how to balance too many jobs, how to balance none, how to fend off cops, how to run, how to move through another wave of grief in a vast sea of mourning. The pandemic has dragged more people into this, intensified precarity for those already there, and thrown up new hardship, too. It is a time of protracted unraveling for some, another episode of never having access to fantasies of wholeness for others. It is a time of 'crisis ordinariness,' a slow burn that promises to erupt (Berlant, 2011, p. 10).

Gloria Anzaldúa helps us to understand how the minoritized calibrate to a rickety world. She elaborated *la facultad* as a kind of nonconceptual thinking that is exquisitely attuned to shifts in ordinary life. One stays on high alert for impending violence. The signs are everywhere: a particular look, a certain tone of voice. Yet this is not mere recognition. While *la facultad* begins with 'anything that breaks into one's everyday more of perception,' it ultimately 'deepens the way we see concrete objects and people; the senses become so acute and piercing that we can see through things, view events in depth, a piercing that reaches the underworld' (Anzaldúa, 1987, p. 61). While Deleuze distinguished between recognition and thought, Anzaldúa blurred them. *La facultad* is vital for efforts to survive deep, dangerous uncertainty.

'The one possessing this sensitivity is excruciatingly alive to the world' (Anzaldúa, 1987, p. 60). What could it mean to be excruciatingly alive to the deathly world of COVID-19? Here's a thought: The COVID-19 pandemic is not only a time of death but also of life, immense life. Early 2020 saw the unusual appearance of nonhuman animals in spaces emptied of human presence: Hanauma Bay in Hawai'i, for instance. The aquatic ecosystem of the popular tourist destination has long been damaged by heavy traffic, garbage, and coral-damaging sunscreens. Yet when the tourist industry ground to a halt due to the closure of transpacific travel, something remarkable happened. For months, there was a colorful explosion of fish, sea turtles, and monk seals along with the rapid regrowth of coral. This happened elsewhere in Hawai'i, too. Kanaka Maoli (Native Hawaiians) were able to intimately reconnect with a life that is hard to access when settler capitalism marches on (Goodyear-Ka'ōpua, 2020).

Mass rewildings like this draw attention to life beyond the human. I am not parroting the ecofascist refrain of 'humans are the virus.' That would be to mistake subjectivity under extractive capitalism for humanity and to erase Native peoples who have long fostered healthy relationships with the natural world. Instead, my point is to withdraw anthropocentric, which is to say racist and colonialist,

frameworks of life. As Anna Tsing writes in a different context, 'Without Man and Nature, all creatures can come back to life.' (2015, p. vii)

I offer a different thought: All creatures were not really dead but living a secret life that has become vividly palpable. The COVID-19 pandemic has made it easier to sense forms of life that are inching out of their usual cover, beckoning us to other worlds…

Meanwhile, there has been a spike in think pieces about the use of biopolitics to explain the pandemic. Here I am more interested in biopolitics as a regime of truth than an analytic concept. Resonant with Nadine Voelkner and Gitte du Plessis's Contribution to this Critical Exchange, I ask: How have the institutions and theories of biopower advanced particular figurations of life at the expense of others? How might the truth-effects of biopower be dispelled by elevating other figurations of life?

Biopolitics plots life in relation to death, whether in spectacular acts of killing or in zones of heightened risk, unhealthiness, or reduced life chances. Life is held to be a quality of some entities but not others. Deleuze (1997) offered an alternative: 'a life' is not a corporeal property or biological feature. 'A life is everywhere, in all the moments a certain living subject passes through and that certain lived objects regulate… This indefinite life does not itself have moments, however close together they might be, but only meantimes, between-moments' (Deleuze, 1997, p. 5). A life is immanence itself, an in-folding of bodies into an event that changes all. It is not the opposite of death. Its exteriority is its own future forms.

Countless forms of a life have been opened as the novel coronavirus has circulated through bodies, across borders, in public discourse, through social institutions. COVID-19 has solicited ruthless austerity and cruel disregard. It has also opened networks of mutual aid, new forms of care, and reimaginations of sociality. A life is not 'good' or 'bad.' At stake in a life is the potential emergence of worlds. The political task is gauging which should be fostered, and how.

Investing in this notion of life may be pointless, even callous. 'The life worth living is not necessarily found within these zones of maximal potential,' Elizabeth Povinelli insists, 'because the zones create such reduced conditions of life that the political desire for them to spawn or foster alternative worlds can seem naive at best and sadistic at worst' (2011, p. 128). The abandoned may not live long enough to inhabit the alternative worlds discerned by those in life-sustaining conditions. States of emergency may be states of emergence, but for whom? Do theories of life otherwise redress distributions of death? Or do they intensify them?

My aim is to relax the notions of life enforced by modern biopower: not to dispense with, but to relax. Staying alive is important, especially for those abandoned to death. Yet the prolongation of biological life alone may not be convivial to survival.

Giorgio Agamben (1998) has observed that mass lethality follows the delineation of biological and political life. Yet, he has not elaborated enough how this

biopolitical separation boils down life to mere survival – or survival to mere life. Biopolitics separates the 'what' and 'how' of life. Various needs, desires, and practices are deemed to be excessive even if they are vital for endurance. This disallowance is extermination that does not appear as killing. For example, settler colonialism depends upon the construction of settler society just as much as direct murder (Wolfe, 2006). The fallout of separating mere life and more life typically lands on racialized and Native peoples, though no one is fully spared.

The COVID-19 pandemic calls for other forms of survival. Bonnie Honig argues that while emergency politics reduces survival to staying alive, 'survival… carries promisingly plural meanings, connoting not just the mere life to which emergency seeks to reduce us, but also the more life – *sur-vivre* – of emergence' (2009, p. xviii).

The COVID-19 pandemic has underscored that survival is communal. It is the unequal, shared labor of persisting together. It is reaching out, dropping by, feeding each other, nurturing each other, holding vulnerability in common. It is collectively thinking through the immensity of it all. Survival is generating the more life that is mere life, together.

The labor of survival is conceptual and material, for it advances figurations of life that are disallowed by biopower. It is the processing of affect in creative adaptations: how a body feels about, withdraws, leans into the world, leans into others. It is, to pilfer from Marx (1988, p. 107), the senses operating as theoreticians to manage intensified discomposure.

Yet survival is not only a reaction to what threatens life. It is experimentation with minor needs, desires, and longings. It is not only about staying afloat. It rides the surge of life where biopower would have us see only death. Survival is not securing a place in the world but the direct pursuit of other worlds. Sometimes, there are clear visions, but survival is typically moved by intuition. The body reaches far into the future as conscious awareness and sociopolitical conditions lag behind. The aim of theory in survival time is to close the gap.

It may seem that my second mistake has been to discuss what the COVID-19 pandemic can teach about *theory*. Yet, life in the pandemic is a dense overlap between the theoretical and the political. So here is what the pandemic might teach us about politics that is theory that is politics:

- Don't let death captivate the senses. That is a stultifying effect of biopower. Without forgetting death, foster sensitivity to minor forms of life that flow around, through, and within us:
- Tend to desires that are disallowed by power. Inject them into the here and now. Push for social and political infrastructure in which they could flourish;
- Explore speculative thought and experimental action. Let intuition lead us to the selves and communities that could be;
- Learn how to learn again.

The COVID-19 pandemic has made clear the unlivability of the world anchored by racial capitalism and settler colonialism. Many of us already knew this. The epistemic conditions of that world did not sustain many of us then, and they certainly will not do so now. Thinking is now, as it was then, vital.

Theory in survival time is not thinking-about but thinking-around. Rather than reflection at a distance, it is deeply intimate with a world in disarray. It neither explains nor predicts but intervenes and inflects. Theory in survival time makes big claims on thin ground, for its highest fidelity is to futures that could be. It is patchy, loosey-goosey, crude.

Theory in survival time is raw thought in motion, ordinary praxis with extraordinary vision. It cuts the epistemic life support of failed systems of power. It nourishes the more life that is mere life. It is speculative, for it allies with the untested, the dismissed, the wildly imaginative. Yet it is thoroughly pragmatic. Its value will be measured, not in the world that failed many of us, but in worlds that could be, that are in the making now, that we are learning to make now, together.

Chad Shomura

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