

WORDS BEYOND THE PANDEMIC: A HUNDRED-SIDED CRISIS

Coord.: José Reis
A collective work by CES

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Centro de Estudos Sociais
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BODY AND RISKS

Rui Gomes

Safety is a symptom of 18th-century biopower. Making death an object of unease, disciplinary power concerned itself with survival, with prolonging life and protecting public hygiene. Affiliated to new political technologies of the body, it extended its action to the whole population with regard to such issues as birth, fecundity, old age and the control of endemics. The issue of safety is an old one and cuts across various spheres of life – from the body to the environment, to road safety and financial risk – but now the responses have been anchored in prevention and in personal accountability for the control of risks and health. Over the last 25 years, prudential socialisation has created a mentality conducive to swift compliance with all the confinement measures following the COVID-19 pandemic. In many cases, these paved the way for the State's exceptional measures, which are typical of health authoritarianism and ultimately gave specialists extra power.

Alongside the safety brought about by new technologies, which reduce the fears that used to characterise corporeal existence, there has been an increase in the uncertainties related to the risks looming in the future. The greatest risk of all was made plain by the amplifying effect that the variability of pre-existing health conditions tends to have on the probability of sickness and death. In the end there will be, in addition to the statistics of the infected and the dead, a curve for risk inequality: the poorer will have died more, minority ethnic groups will have been more seriously

affected by mortality rates, the most vulnerable will have been the first to lose their jobs and fall below minimum subsistence levels, and the situation of those with already precarious housing conditions will only have gotten worse. “Letting live” and “leaving to die” will have resonated throughout the crisis.

The alternative is to establish participatory policies and care for others, valuing the National Health Service, public health and all social organisations that, through their intervention, recognise the asymmetric prevalence of health risks according to social groups and the living and working conditions provided to them, and promote solidarity towards the most vulnerable.

A part of salutogenic discourse is based on the metaphor of body *contamination*, intensifying both our susceptibility and aversion to bodily decay. The diseased, the old, the contaminated and those with marks of physical decay on their bodies tend to be excluded or neglected. It is important to limit prudential social practices that subject bodies to an unprecedented degree of risk monitoring. Insurance companies, experts and politicians will extend safety to ever larger domains of life, amplifying not only administrative control policy of and individualised thinking on risk, but also the responsibility for controlling it. A new notion of public space is at stake here, where the figure of the *public body* and care for the other can assert themselves.