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Abstract

This article is a reflection on the concepts of biopower and biopolitics. Mapping some of the main approaches to this topic, the paper highlights a tension between policies that seek to encourage and potentialize life and individuals excluded and left to die. The article involves two main concerns: one that questions the existence of biopolitical frameworks that end up producing bodies and subjectivities as mere fruits of the exercise of power and control, and, thus, are circumscribed by them; and another that questions how to read this scenario in the tropics. While contemplating these concerns, the text then reflects on the possible limits and potentialities of this conceptual framework.
Keywords: Biopower, biopolitic, AIDS, colonial difference, coloniality.

Resumo

Este artigo busca refletir sobre os conceitos de biopoder e biopolítica. Mapeando algumas das principais abordagens sobre o tema, o texto destaca uma tensão entre políticas que incentivam e buscam potencializar a vida e pessoas excluídas e deixadas para morrer. O artigo se volta então para dois tipos de inquietações: uma que indaga sobre a existência de quadros biopolíticos que acabariam por produzir corpos e subjetividades meramente como frutos de exercícios de poder e de controle, sendo, por conseguinte, a eles circunscritos; outra que pergunta de que maneira ler essa história nos trópicos. Em seguida, pensando nessas inquietações, o texto reflete sobre os possíveis limites e as potencialidades desse quadro conceitual.
Palavras-chave: Biopoder, biopolítica, Aids, diferença colonial, colonialidade.

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For Otávio Velho

In the last chapter of "*La Volonté de Savoir*" (*The Will to Knowledge*, 1978) Michel Foucault speaks about an era in which death no longer bludgeons life. The "threshold of biological modernity," he said, lies exactly where life enters history, ushering in "the era of biopower" (p. 140). Foucault describes modernity within the inseparability of biological life and political life – politics directed towards the government of life. Following the connotations conferred by Foucault, the concepts of biopower and biopolitics have become central in the social sciences and humanities; for some though, addressing them has become the most urgent challenge of contemporary thought.

Initially, I will seek to map some of the principal formulations of biopower and biopolitics, without attempting to be exhaustive, a position justified by the large number of commentators on the subject, including Lazzarato (2000), Fassin (2000, 2006a, 2006b), Pelbart (2003), Lemke (2011). Then I will turn to two essential concerns: one that inquires about the existence of biopolitical frameworks that end up producing bodies and subjectivities as mere fruits of the exercise of power and control and, thus, are circumscribed by them; and the other that asks how we should read this scenario in the tropics. While contemplating these concerns, the text reflects on the possible limits and potentialities of this conceptual framework.

Make live and let die

Michel Foucault outlined the main contours of the discussion concerning biopower and established a new way to theoretically explore the tension

between make live and let die (Lemke, 2011). Chronicling the unusual appearance of sex as a founder of identity and hence the intelligibility of the modern individual, Foucault (1978) argues that power, which once struggled to avoid death, begins to focus on the production, regulation and maintenance of life. A productive power emerged that simultaneously controlled and generated that which it regimented. Thus, the power of death related to sovereign power was concealed by the administration of bodies and by the calculative management of life. Mechanisms of power that would eventually be directed toward the body and life, involving everything that helps proliferate and strengthen the species. The concept of biopower marks the moment in which power begins to invest in life. This process occurs through an anatomo-politics of the human body (maximizing its strengths to integrate it into efficient systems) and a biopolitics of the population, focused on the species body. A body that is imbued with the mechanisms of life: birth, morbidity, mortality, longevity, among others (Foucault, 2003 and 2008).[1] The importance given to health, demographic and urban policies in the eighteenth century is the first step towards a biopolitical characterization that penetrates the social spheres, through a process of the "governmentalization" of life.[2] – a process that extends from pastoral power to its confession techniques; from the reasons of State, to the knowledges of the police. Thus, biopower is a relatively streamlined set of actions developed by authorities to intervene in the sphere of human vitality: birth, development, disease and death. Life, then, assumes strategic importance.

Notwithstanding this history of a modernity that moves away from death and that ruptures with the era of epidemics, Foucault still alerts us to the existence of death practices patrolling this very modernity. Everything occurs

1 In his book *Society Must Be Defended* (*Il Faut Défendre La Société*), in which he imagines a succession of knowledge-power regimes, Foucault (2003, p. 243) stated, "After the anatomo-politics of the human body, established in the course of the eighteenth century, we have, at the end of that century, the emergence of something that is no longer an anatomo-politics the human body, but what I would call a 'biopolitics' of the human race." For Foucault, the power that emerged was not directed at the individual body, but at the "total mass" affected by the processes of life (birth, death, illness). Biopolitics deals with the population as a political problem and addresses the biological processes of the man-species, seeking to secure over these not discipline, but regulation (Foucault, 2003, pp. 239-264).

2 Governmentality is the object of studying forms of government. Foucault intended to encompass several dimensions of the modes of governing: the set of institutions, processes, analyzes, calculations and tactics that permit the exercise of power over the population, the tendency to manage the predominance of this type of power; a process that leads from a legal and administrative status to a state of population control and security (Castro, 2009, p.188-193). Regarding the concept, see Gordon (1991), Mallette (2006), Rabinow (1999b), Rabinow & Dreyfus (1995) and Dean (1999).

as if the proliferation of forms of control and the maintenance of life are simultaneous to the processes of exclusion, of the creation of abject others, and even of attempts to extirpate parts considered undesirable. Thus it is an ambiguous movement: a juncture in a life that must be protected at all costs, the invention of others that threaten life, and the emergence of lives that do not deserve to be lived. Thus we live in a time when there is overvaluation and protection of life, while at the same time there are areas where people are left to die. Thinking on a global scale, it is interesting to recall that together with the growth in health policies, mass vaccination, innovations in science that provide people with quality of life and health, over the last few decades, we have endured conflicts such as Rwanda, Yugoslavia, Liberia and Sudan. The 1990s have come to be known as the decade of large-scale violence, characterized by an excess of anger that produced a creativity of degradation and violation: bodies maimed and tortured, people burned and raped, women disembowelled, children mutilated, sexual humiliation of all types, as Arjun Appadurai (2009) warned us.

Biopolitics, thus, presents irreconcilable aspects: it either produces subjectivities or death; it either turns the subject into its own object or the objective, it is either life politics or politics concerning life (Esposito, 2004). This "ineffability", as Esposito would have it, led theoreticians to diverse pathways, either signalling that nowadays the concept of biopower signifies its productive character, or highlighting that one of the principal characteristics of contemporary biopolitics is the production of the *homo sacer*. Perhaps it is this tension in and around life that proportions such distinct positions as those observed in the formulations of Agamben (2004a and 2004b) and the criticisms of these formulated by Rabinow and Rose (2006).

The concept of biopower in dispute

Agamben argues for a close relationship between the three figures he considers central: sovereign power, *homo sacer* and the state of exception. Sovereign power establishes the limits between life that deserves to be protected and that which can be killed; life enters the political game, sheltered and empowered, or simply exterminated. The sovereign is simultaneously both within and outside the legal system, since it has the capacity to establish the state of exception. *Homo sacer* – the individual who can be killed without this death

constituting a crime or a sacrifice – emerges from the inversion of the sovereign figure. This relationship between sovereignty, the state of exception and *homo sacer* is the very foundation of the organization of bodies in the West.

The most striking feature of modern life, for Agamben, is that the state of exception is increasingly becoming the rule, making the line that delimits the border between life worth living – and that, therefore, should be protected and encouraged – and bare life, with no guarantees and exposed to death, tenuous and unstable. Unlike Foucault, Agamben affirms that biopolitics did not emerge with modernity, rather it is at least as old as sovereign exception, given that since then, biological life has been placed at the centre of its calculations. The modern State merely clarifies the link between power and bare life, since biopolitics has existed since humans separated themselves from the animals and since biological life extended to political life (Fassin, 2006b). Agamben shows that the core of biopolitics is the distinction between *zoe*, the simple fact of life common to all living beings – biological life – and *bios*, a way of living inherent to an individual or group, in which humans segregate themselves from animals, often qualified as political life. The dualism between *zoe* and *bios* form the fundamental categorical pair of Western politics. A characteristic of modernity is the growing confusion between *zoe* and *bios*.[3]

If Agamben defines the basis of the relationship between sovereign, *homo saber* and the capacity of the former to institute the state of exception, Rabinow and Rose (2006) argue that these are extraordinary times, and the fundamental characteristic for defining biopower cannot be determined in the present. Indeed, biopower in contemporary States specifies a relationship between the power to make live and let die; what distinguishes and defines it are "strategies to govern life." In an attempt to map these strategies, Rabinow and Rose highlight the following dimensions: the appearance of new modes of individualization and conceptions of autonomy associated with the right to health, life, liberty and the possession of forms of happiness (understood in bodily and vital terms), the emergence of new types of patient groups and individuals who define their citizenry in terms of their rights; the outbreak of new circuits of bioeconomy; large-scale capitalization of bioscience and a mobilization of its elements into new relationships of exchange, establishing constitutive connections between life, truth and value.

3 For a critical reading of the work of Agamben, see Lemke (2011).

With these dimensions in mind, Rabinow and Rose define biopower as truth discourses concerning the vital nature of human beings; a set of authorities considered competent to speak that truth; strategies of intervention in collective existence in the name of life and health; modes of subjectivation, in which individuals act on themselves in the name of life or individual or collective health. Rabinow and Rose show us the emergence of biosocialities, new forms of subjectivation, or how science can potentialize life.

In a book on the "The Politics of Life Itself," Nikolas Rose (2007) defines biopolitics as strategies specifically related to human vitality, morbidity and mortality; the ways in which authorities and interventions are established that are defined and legitimized as the most effective and appropriate. For Rose, biopolitics is currently related to the work of biotechnology laboratories in the creation of new phenomena (and pathologies), to the computational power of devices that link clinical histories with genomic sequences, to the marketing powers of pharmaceutical companies, to the regulatory strategies of research, bioethics, and drugs and food surveillance committees, and to the pursuit of profits involving all of these.[4]

Regardless of these differences, it should be emphasized that a reading of biopower focused only on the potentialities of science, which is not supplemented by other attentive readings of forms of governing life over bodies (Fassin, 2000), can omit frameworks like those I came across in my ethnography. Moreover, there are many moments in which science is called to sustain that which is a biologically better life and how to make it more powerful – a process that makes one life more powerful, but that can be consubstantial with death for lives considered biologically worse (Foucault, 2003). The complexity of the politicization of life and the tension between make live and let die can be accompanied by the quantity and variety of theoretical approaches, which range from, as Fassin duly pointed out (2006a, p.40), the horizon of the laboratory and bioinformatics, clinical immunology and genetic sequencing, assisted reproduction and cancer therapy, studied by Rabinow (1999), Napier (2003), Rapp (2000) and Löwy (1996), to camps of refugees and deportees, to social protection and to welfare programs, as analyzed by Agamben (2004a), Bauman (1998), Malkki (1995) and Agier (2002).

4 Rose (2007) closely examines two crucial dimensions of contemporary biopolitics: the biological molecularization of human phenomena, and the centrality of the idea of vitality.

Given this context, how do we perceive situations like those I studied? Is a definition of biopower that obscures moments in which parts considered abject are relegated to death even possible? Is there a way to elude the tension that I perceived in my ethnography which placed that which is the most modern form of prevention and maintenance of life next to people who perceived themselves as the "junk of the world" (Pereira, 2001, 2004, 2008) and for whom health policies have no effect? How can we escape the antinomy that places life that is protected beside excluded lives that circulate around death?

Immunization paradigm

The AIDS epidemic brought significant changes in social relations, in forms of perceiving social differences, in the conceptions of health and illness, making us understand how a virus can transform society. The fear of contagion and the millennial terror of epidemics have intensified. The concept of miasma provided the conditions for the interruption of exchanges, because the metaphor of contagion – which is a trope of circulation – revives aseptic ideals that seek the symbolic cutting of one individual from another in an attempt to avoid possible contamination. The psychic trauma arising from pestilence and epidemics, reactivated by AIDS, encountered the potentially guilty and intensified the need to avoid proximity with likely sources of infection. The operation of locating the contamination in the "other" accrues mainly from the quest to understand the epidemic and to identify the contaminators. The deviant behaviour of the "other" makes the contagion intelligible, providing safety and distance from which to confront the trauma of the AIDS pandemic (Pereira, 2004).

Responses to the epidemic were diverse and it would be extremely simplistic to reduce a complex scenario of State policies, the emergence of laws and norms and the mobilization of civil society in the fight against AIDS to a manifestation of aseptic ideals or fear of contagion (Bastos, 1999). However, there is no way to avoid these aspects, which are embedded in the wider context of biopolitical devices, especially in scenarios like that of Brazil.

AIDS has mainly victimized the disadvantaged sectors of Brazilian society. Structures of inequality and social oppression have been exploited

to leave millions of people in situations of acute vulnerability.[5] In Brasilia, for example, someone in this situation is referred to the shelter where I developed my research, which I will describe more fully in the next section. In my ethnography (2004), I was able to narrate how the symbolic cut occasioned by the advent of AIDS and extreme poverty drove nearly two hundred people to a process of social asepsis that removes the impure and undesirable parts, making it possible to group the homeless and those who roamed hospital corridors, health services, prisons and other correctional facilities, in one institution.

The centrality of notions like contagion and immunization in understanding the AIDS epidemic in Brazil is what led me to the work of Esposito (1998, 2002 and 2004), which continues to reflect on the "enigma of biopolitics."[6] According to the author, we live moments of immediate superposition between politics and *bios* that form a double movement: the politicization of life and the biologization of politics – a process that places life at the centre of the political game, but produces thanatopolitics. Esposito reminds us, for instance, that it was Foucault who asked the question, "Why does a political life threaten to translate into a death practice?" To try to answer this enigma, Esposito formulated the idea of the "immunization paradigm": a tendency to protect life from risks implicit in the relations between men and women, to the detriment of the extinction of community ties. To defend preemptively against contagion, a portion of evil is injected into the body that you want to protect.

The invasive circumstances of contagion entreat measures of immunization. This configuration forms a key device of modernity: there are risks that must be identified so that protection measures can be developed, such as immunization. Esposito argues that if immunization is common to all eras and societies, only modernity institutes it as structure, establishing the immunization paradigm as central. The immunization device operates on the assumption of confronting the existence of evil and ends, in this movement, by reproducing the very evil that it aims to prevent. In social immunization,

5 See Biehl (2005, 2007). João Biehl addresses similar themes to those I have been developing in this article. Among the differences in approach, perhaps the main one is my appropriation of the theory of coloniality in thinking on biopower and biopolitics in the tropics – a question that I intend to develop at another time.

6 The journal *Diacritics* devoted a special issue to Esposito (v. 36, no. 2, 2006), with articles that provide an overview of the Italian philosopher's work, that has hardly been explored in Brazil.

life is guarded in a way that may even deny the possibility of its existence (Campbell, 2006; Castiel, 2010).

The nucleus of Esposito's proposal approximates, for example, that which I recorded in my ethnography: terror contemplated as the interruption of exchanges, the centrality of the fear of contagion in everyday life, the feeling of the impossibility of relationships, occasioned by a certain type of social asepsis, risk as a habitual language (Pereira, 2004); and ultimately, the use of terms such as terror, fear, dread, misgiving as a language of affections to discourse on the impossibility of creating ties and the rupture of exchanges. The fear of contagion segregates, in various spheres, including in hospitals, and the segregation is constituted as terrifying. The differences between what I described and the formulations of the author of *Bios* are numerous; however, the main issue resides in the mode of perceiving biopolitics: while Esposito speaks of an immunization paradigm, i.e. some sort of universal claim, my aspiration was merely to register a grammar that related the interruption of exchanges to a language of affections. Furthermore, I endeavoured to understand what emerged from this tension between the absence of the State, on the one hand, and the medical-therapeutic actions for AIDS patients, on the other.

The theories mapped in this text formulated proposals that when solicited to focus on the reality I had tried to describe and analyze in previous works (Pereira, 2003, 2004, 2008), produced a certain dissonance. This situation generated concerns on which I intend to dwell, albeit briefly, and with no intention of exhausting the issues: 1) the first concerns the idea of a biopower that is exercised over agents, inciting and controlling them in all spheres, i.e. the presupposition of power transcendently acting on overly standardized beings who are perceived homogeneously; 2) the second is related to notions of modernity that are inferred from the authors previously mentioned, as well as possible ways of reading, here in the tropics, this scenario of a time when death begins no longer to bludgeon life.

Wanderings

In 1998 and 1999, I conducted an ethnography in a shelter for AIDS patients in which ex-prisoners, ex-prostitutes, homeless people, transvestites, people abandoned or evicted from their homes, users of injected drugs and alcoholics

lived in a situation of confinement. Throughout the fieldwork, I repeatedly heard the term "terror": the internees were referring to the life they led between the shelter that received them and the hospitals; even while discussing their illnesses, they repeatedly and insistently used the term and the semantic field that it evoked. The narratives of the internees consisted of enunciates that composed a picture of isolation, loneliness and lack of communication. I suggested in my ethnography (Pereira, 2004) that terror presented itself to internees as a systematic form of the breaking of relationships of gifting: the impossibility of creating ties, due to the disruption of gifting situations, especially in people who needed these ties to survive, evoked a state of stupor. It was the extreme ruptures in these kinds of relationships that could be characterized as one of the most prominent faces of suffering and terror.

I examined the processes through which terror was inscribed on the bodies, and became aware of the consciousness of these internees, occluding the horizon of meaning around them. I sought to present the strategies and methods of discipline used by the authorities in the institution,[7] placing the focus of exposure on the description and analysis of the bodily manipulation of the internees, and on the examination of discourses in which the constant theme was the imminence of death. The internees presented no forms of resistance regarding the cure, and the medicine and health services produced a field of amplified suffering. This plot ultimately formed a space of suffering, in which everyone was inserted – patients, institution authorities and health professionals.

I also accompanied these internees in their itineraries around hospitals and health services, particularly at the University Hospital of Brasília (HUB). In the hospital environment, I came face to face with public policies directed towards the epidemic, which comprised knowledge of prevention practices, involved the etiology of the disease and drug therapies and culminated in the general dynamics of the epidemic. It was this experience that brought me closer to the structure and methods of the "fight against AIDS" in the country and made me aware of the history of this disease.

If along the Esplanade of Ministries, public policies against AIDS in Brazil were being planned, and if in the city centre, health professionals handled sophisticated forms of management and drug distribution, on the

7 I use the terms refuge, shelter and institution interchangeably because these are the expressions most commonly used by my interlocutors (Pereira, 2004).

outskirts, on a farmstead on the margins of a satellite town of Brasilia, lived people for whom the policies had no effect. They were individuals living with HIV whose disease received no follow-up and who survived without assistance or direct intervention from the State. The struggle for forms of protection against the epidemic, policies to prevent contamination, actions in favour of life, like those declared in hospitals and divulged by public policies, stumbled across people excluded and relegated to death.

This abandonment and the exclusion proceedings were perpetrated concomitantly with the actions of State, which formulated and orchestrated preventive practices, adherence to antiretroviral treatment and free medication distribution. The existence of a refuge like this demonstrates that there is a zone where public policy is unable to enter or simply has no effect. When faced with the incapacity of reasonable therapeutic practices for 'those people', a doctor once told me: "Since reality cannot be changed, it's about saving those who can be saved, or taking care of those who can be cared for." Efforts directed towards 'those people' were useless. Not that treatment was refused the internees of the shelter, indeed, they roamed the health services of the Federal District, but, it was known that "they don't adopt care practices or adhere to the treatments." Therefore, "nothing can be done." "They are there to die," pronounced many health professionals, using a phrase I heard endlessly for more than two years. Performatizing a tension between making live and letting die, prevention policies, medications and forms of management sat side by side with people for whom such measures and actions never arrived, left to fend for themselves in a shelter for AIDS patients.

As I mentioned above, one of the concerns refers to the design of biopolitical frameworks that involve all relationships and control everything. Such a view ends up preventing an approximation to the complexity of the lived experience itself. Thus, a homogenization of the variation in individuals occurs, a product of certain design strategies that are merely an exercise of power and control, and which ignore the complexity and historicity of the agents. At least that was what I learned from Eduardo, one of my interlocutors. I want to talk a bit about him, of how I found him in a shelter for AIDS patients and our unexpected meeting not long after my fieldwork ended.

Eduardo told me his story as an internee of the refuge where I did my fieldwork. He was a puny man of 35, with light-coloured eyes, who had

travelled around Brazil, passing through several cities until he arrived at Brasilia. Born in Praia Grande, on the coast of the State of São Paulo, he was raised on the streets, in an unusual situation: he was kidnapped by his father when he was six. His father intended to use him to beg on the streets, because Eduardo was beautiful and had light-coloured eyes, features that facilitated this activity. Moreover, the father taught him petty theft. For six years he travelled around cities and only at the age of twelve did he return to live with his mother in São Paulo.

She put Eduardo in school and started to impose hygiene practices and rigid rules of behaviour. He, did not adapt, however, and returned to live on the streets when he was about 17 years-old. He told me once peremptorily, "That life was not for me." The mismatch caused constant running away, until he decided not to return. Eduardo described an itinerant life: moving from town to town, roaming the streets, "wandering erringly in the great big world of my God." And it was during this walking that he became infected with HIV; a contamination he attributed to roadside cabarets and the use of injected drugs. The contours of his life were described at the time as "vagrancy": as a perennial meandering, enveloped in excesses and errors.

The infirmity eventually weakened him. When I first met him, he was unable to walk, was half his normal weight, a condition aggravated by various opportunistic infections, including tuberculosis that he had contracted at the time. It was as the "junk of the world" that he introduced himself. "I'm the leftovers," he told me several times, underlining what seemed to be his definition: "human leftovers." In this same conversation, he insisted on telling me the dramatic story of his first night at the shelter that housed him: other internees eventually made him sleep outdoors, fearful of being contaminated with tuberculosis. He had often slept in the open, but to imagine that his illness and his ailing body would cause so much horror? "I am what the rejects reject," he concluded.

The story of Eduardo – much more complex than I could hope to describe here –narrates something about exclusion and about intimate relationships between contagion and isolation that enabled his life and practices of exchange (of bodies, fluids) to be transformed into the condition of segregation and distance. Trying to understand biopolitics today involves understanding what processes construct a shelter for AIDS patients like the one that I studied and that enable a story like Eduardo's. What does it mean to understand

how a country that stands out in the fight against AIDS (public policy, technology, universal and free distribution of antiretroviral drugs, spectacular international fights to break patents, among others) creates these abject others, who see themselves as the "junk of the world."

However, this is not the entire story of Eduardo. One year after the end of my fieldwork, I bumped into him at the door of the HUB. Although he was in a hurry, I asked him to talk with me. He wove brief remarks concerning the people I had met and with whom I had lived during my research and offered information concerning the progress of the institution that had housed him. That's when I realized that we were walking, away from the hospital, and already crossing the street, toward the blocks of the North Wing. There, an unusual itinerary began, that I had been unable, for various reasons, to follow until then. This itinerary allowed me to perceive dimensions that were unachievable in research focused on institutions (in the refuge or hospitals), like the one I had conducted.

That day, Eduardo walked the streets with resourceful assurance. He obtained money for his immediate needs: asking for money on the street, in bars, at the bakery, modifying his body posture accordingly. Immediately, he acquired a circumspect tone, returning to a peaceful countenance when speaking with me. He knew restaurateurs and, as time passed, he "hustled" two "takeaways," which were our lunch. He recognized the grammar of the city, walking fluidly in the "between-blocks" of Brasilia, inventing pathways. He wielded a vocabulary of slang with which he developed communication so rapidly and specifically that I got lost in their modulations. And so I spent the day walking through the North Wing, in a sense, cutting it diagonally.

Whoever observed Eduardo on that walk, along that crooked itinerary, could see a "bare life," relegated to its own devices. But he, despite the penury, was more. Eduardo had found an "*in-between*" that my ethnography, I repeat, concentrated on institutions, could not follow. This invention of a possible precarious *in-between* allowed him to slip away, slide down, seep out. In these itineraries, Eduardo was not just the target of drug therapies, nor exclusively the object of a medical power that controlled everything, nor was he only the "junk of the world" dumped in a shelter for AIDS patients, nor only a denuded life exhibiting its precariousness and irrelevance in a social landscape already overly saturated, much less the simple product of an immunization system that wanted to prevent the contamination and

pollution of abject beings. Perhaps, since he was all of this, he was *more*. A *more* that made him escape that day, conforming to my last image of him: walking the streets, wandering in his intricate and unpredictable itinerary. "Where are you going Eduardo?" I asked. "I'm going where my legs will take me, wandering erringly through this great big world of my God," he repeated. And smiled.

"The crossing is dangerous," said Guimarães Rosa, "but it is life." Ha, it is life, Eduardo seems to teach us, that is crossing, unable to cling exclusively to the powers that conform to it, to the biopolitics that want to achieve everything. Eduardo makes up a crossing with its dangers, uncertainties, escapes, flights, vacillations; in his wanderings. The terms used by him – and by many of my interlocutors[8] – are significant: go astray, vagrancy, flee, escape and err. If the language of affections was used to describe how AIDS patients are transformed into the "junk of the world," as I have shown in my ethnography (Pereira, 2004), the terms used to describe these moments of *in-between*, moments of wandering, are those of displacement, of movement. Taking this semantic field seriously could lead us to conclude that subjectivities are also located in that which exceeds and escapes the norms, and that even under the action of biopowers over bodies and souls, something always slips, seeps and escapes.

Modernities

The theories on biopolitics alluded to in this text appear to revolve around the definition of modernity. As we have seen, if Foucault (1978, 2003 and 2008) thinks modernity is linked to the entrance of life in history, for Agamben (2004a and 2004b), modern biopolitics does not arise with modernity, since the modern state only elucidates and highlights the link between power and bare life; the most striking feature of modern life is that the state of exception is becoming the rule. Esposito (1998, 2002 and 2004), in turn, argues that it is precisely in modernity that the immunization paradigm is established as structure. The discussion of biopower and biopolitics is therefore consubstantial with the understanding of what modernity is.

8 Only after the fieldwork was I able to understand the importance of mobility and transit for many of my interlocutors, which explains, for example, the population variance in the shelter – which at certain times, meant up to 50 fewer people (Pereira, 2004).

Notwithstanding, who is included and who is outside of these conceptions of modernity? And yet, do not these theories, with their assumptions of modernity, in effect discourse about themselves while universalizing their own theoretical assumptions?

When he related modernity to an age where death no longer bludgeons life in the West, Foucault was aware of the Eurocentric character of his narrative (Butler, 2001).[9] In the same paragraph that says, "Western man was gradually learning what it means to be a living species in a living world, to have a body, conditions of existence, probabilities of life, an individual and collective welfare," Foucault (1978, p.142)[10] also remembers that "outside the Western world, famine exists, on a greater scale than ever; and the biological risks confronting the species are perhaps greater, [...]" (p.143). Contemplating these unequal contexts, we may ask: and in Brazil, what are the historical social conditions regarding the era of biopower in the West?

Unable to dwell too much on this historical social context, I would simply like to remember that when it comes to health, Roberto Machado et al. (1978) argued that the Portuguese administration was not characterized by the organization of social space in the pursuit to combat the causes of illness, acting rather negatively. In fact, concludes Machado, health had not formed part of the colonial project. Until the arrival of the Portuguese Court in Brazil, asserted Escorel and Teixeira (2008), the few existing medical doctors attended only the highest strata of the population of large cities. Only from 1808, were the first public health authorities created in the country, tasked primarily with licensing and monitoring the records of those who dedicated themselves to the healing arts and with inspectorships to prevent new diseases from arriving in the coastal towns (Gurgel, 2008). By the mid nineteenth century, faced with several epidemics, a centralization of imperial power occurred that undertook a reform of the health services; during this period, however, state action in health care was limited to the hospitalization of the severely ill in lazarettos and makeshift infirmaries and admission of the insane in the Hospice instituted by the Emperor. Hospitals were the

9 Biopower and biopolitics are linked to the idea of governmentality. And, here also, the approaches of Foucault on the theme do not refer to forms of government outside a Western context. Governmentality thus appears as a product of modern Europe (Inda, 2005, p.12). See also Pels (1997).

10 Butler (2001) challenges this "illusory construction" of death being expelled from Western modernity, left behind as a historical possibility, as something foreign to the West. It is, she says, a "ghost story to liberate modernity from death" (p. 13).

responsibility of philanthropic entities. By the beginning of the twentieth century, nothing much had changed since the end of the Empire.[11]

However, the most frightening data are those concerning the living conditions of blacks. Richard Miskolci (2012, p.9) indicates that, in 1872, "life expectancy in Brazil was 27 years, but only 18 for slaves." If a slave, from a group of forty, survived ten years of work, he would notice that all the others had been killed by disease, torture or suicide. In general, official proposals regarding health care for slaves were rare; and fewer still were accompanied by measures that were not even fulfilled (Porto, 2006). Ângela Porto (2006) found that concerns for medical care for the slave labour force were nonexistent. Considering this scenario, in these parts, there was no way of contemplating that which Foucault envisaged for the West when setting out a definition of biopower: probabilities of life and health.[12]

It is true that Foucault was not a historian – though his material and his manner of working were historical – rather he was a genealogist (Rabinow, 2011). However, the juxtaposition of these histories, these disparate frameworks, reminds me of the text by Edward Said on *Mansfield Park*, by Jane Austen.[13] The narration of the work of Austen is situated between the eighteenth and nineteenth centuries. Said (1989 and 1993) affirms that the narrator in *Mansfield Park* explores the everyday life of a social order imagined to be perfect, depisting the moral landscape that sustains it. The commitment to verisimilitude in the description of English society – with its class divisions, marriages of convenience, futile people and others who are ambitious and of little character – causes slavery to emerge in the narrative, albeit timidly: while the characters discuss how to transform that provincial mansion into an idyllic place, the master of the house has to travel hastily to the Caribbean in order to quell a slave rebellion on one of his plantations. Life in *Mansfield Park* is sustained by slavery. Said then concludes that, even as the holder of supposedly universal values, the colonizers cannot remove what is impure or ugly from their narratives.

11 This article only traces a very general overview of health in the period in question. The characteristics described here, however, are present in virtually all the literature on the period, as observed in: Bertolli Filho (1996), Freire (1989), Miranda (2004), Porto (2006), Gurgel (2008). For a discussion on medicine and medical institutions, see Luz (1982, 1986).

12 For a more detailed discussion on the slave system health, see Porto (2006) and Figueiredo (2004).

13 I owe José Jorge de Carvalho for reminding me about Said's text. Indeed, this entire part of the text, even when not explicitly mentioned, owes something to the instigating article by Carvalho (1998).

The works of the empire, argues Carvalho (1998), "are born monstrous," because they cannot eliminate the semiotic trail of the dominated group. Proposing an analytic movement similar to Said, we can place the bodies with probabilities of life in the West and juxtapose these with black bodies in the tropics. But to what extent and in what manner are the first bodies related to precarious bodies of the tropics?

Postcolonial studies warn that the historical social framework delineated in the West is a product of the close relationship established with Others not considered modern. This confrontational relationship with their Others is actually constitutive of Western modernity (Mignolo, 2003). Life was able to arise in Western history because the West emerged in a particular conformation: modernity is the product of the possibilities that open to the "centrality" of Europe and the allocation of other cultures as its "periphery" (Dussel, 1992, 2005). Colonial enterprise is a prerequisite for the formation of Western modernity, by conferring cumulative advantages that produce a superiority, largely the fruit of the accumulation of wealth and knowledge (Quijano, 2005).

Thus, the entrance of life in history in the West occurs under, and is a condition of, the colonial action itself. Read from here in the tropics, Western modernity itself arises under the sign of colonization, a dramatic framework in which the emergence of life and the power of producing life in the West were born under the mantle of exploitation. Health and life expectancy in the West are not only simultaneous with precarious bodies of the tropics, but dependent on them.

The history of Foucault concerning the emergence of life in history and formulations that followed it – like those of Agamben, Esposito or Rabinow – do not seem, however, to address closely these connections between Western modernity and colonial practices, accomplishing a systematic silence concerning a fundamental aspect of the constitution of modernity. It is also interesting to note the limited mention of race in the work of these authors, especially if we compare them to Quijano (2005), for example, who assigns race as the central hub of his entire theory, even sustaining the racialized dimension of notions of modernity. This discussion refers us to Stoler's (1995) assertions on race and colonialism in Foucault, which I will discuss a little later.

However, unless someone creates an inventory of the scant references to the colonial question by these authors, it may be more productive to

perceive this silence as linked to their involvement in their sociocultural contexts; this silence is attributed to the limits of immersing oneself in the dilemmas of western modernity.[14] The perception of these authors intimately tied to their historical social contexts means the manner of understanding the theories is altered, since given this condition the theories appear to be local products, intimately involved in private dilemmas. The concepts of biopower and its presuppositions of modernity, in its various forms, are, despite their universal pretensions, theories anchored in private, local, provincial histories.[15]

It is this locality that produces a certain distance from alternative ways of perceiving modernity itself – these are a "privilege of the periphery" that permit the postulation, as Otávio Velho (1997) has sustained, that modernity is produced simultaneously and contemporaneously in several locations, in a multiplicity of modes of relationship between the past and present. "Alternative modernities" arise from these complex production processes that place the relationship between tradition and modernity in question, and that lead to the perception of aspects that are not seen as modern, or are understood as incompletely modern, as specific formations of modernity (Giumbelli, 2006). Viewed from down here, modernities thus appear in a plurality of manifestations, constituting not a singular structure, rather a set of knowledges, of discursive practices with various modes of manifestation, always presenting themselves through their variants and versions (Velho, 1997, 1998 and 2010). This leads us to conclude that: a) a biopolitical configuration, with its assumptions of modernity, is far from being an established given structure, conformation or paradigmatic concept, rather it is an open space that needs to be cartographed; b) discoursing on biopolitics implies always questioning from where you are discussing it, because, though some live modernity under the emblem of triumph, others live under the sign of suspicion and of pursing (Chatterjee, 2004).

14 However, it is worth noting that these authors maintained a certain distance from discussions on colonialism, even though a solid post-colonial literature existed.

15 On this point, Connell (2010) argues that much of what circulates as "universal theory" is strongly rooted in the sociopolitical experience of Europe. The individual experience emerges as a generic concept, acting on spaces conceived as peripheral – such spaces where the universal theory is tested and refined, but that never emerge as a locus of reflection.

Final notes

The concerns – or set of questions and problems – that I have presented in this paper are not intended to signal the inadequacy of the concepts of biopower and biopolitics. Admittedly I have inquired about some of their probable limits: the conception of transcendent power that obliterates the agency of the subjects; Eurocentrism and silencing in the colonial context; the presumption of a single modernity, with universal pretensions. But there also are ways to avoid these traps.

The first way is related to the possibility of contemplating life beyond biopower. Eduardo's story tells us something of modes of inhabiting the world, narrated through powerful metaphors of displacement, of wanderings. Many researchers have invoked Deleuze to indicate that, rather than an exclusive focus on rigid abstract fields, perhaps it would be better to perceive society as something that flows and escapes, composed of "lines of flight" and that turns to subjectivities that exceed, resist and evade. But, even Foucault could be thought of in this sense. In a text in which he comments on the work of Canguilhem, Foucault (1994) makes life appear as something that is capable of error. He removes life from the field of consciousness to encounter it on the edge of the illness and anomaly, "with an intensity against which the course of mundane existence pales" (Giorgi & Rodríguez, 2009, p.33). Contrary to the arrangements of biopower over life, the notion of "life as error" acquires an affirmative sense. And here again, I record the itinerary that I followed with Eduardo and his displacements, between error and wanderings. Wandering is related to displacement and to error. "Erring" means walking aimlessly, peregrinating, roving and making mistakes. Wandering is, according to Aurélio's Dictionary, the quality, condition, or habit of wandering. Whereas errant is one who errs, who strays; a bum; a vagrant, a nomad, a wanderer. The semantic field that involves transitions between these terms transits between fault, error, deviation and crossing. In the relationship with error and deviation – which is not individual or collective; which is body but exceeds it – the virtuality of the living makes it possible to think of alternative ways of inhabiting the world.

The second form examines about how to relate below the line of the Equator with these theories of biopolitics. Ann Laura Stoler (1995) also signalized Foucault's Eurocentrism, elaborating a narrative in which sex heralded the end of the era of the reign of death with the emergence of biopower, but

hardly addressed colonial, imperial and racial issues. Stoler makes us aware of the power of Foucault's analysis, despite this silence. Executing a movement similar to that which I tried to accomplish here, she inquires whether the racial and sexual configurations of the empire were constitutive rather than peripheral and responds in the affirmative, concluding that race and sexuality share their emergence with the bourgeois order in the early nineteenth century. Stoler then questions whether, in the context of the Europe of the 1970s, Foucault could have written a history of racism in a political environment in which racial identity had no political force, and in which no strategic space for race existed (p.23). Stoler's movement, therefore, is to provincialize Europe, placing Foucault's formulations (and limits) in their historical social context; and from this place, provincialized, the author of *Discipline and Punish* (*Suveiller et Punir*) helps us contemplate the intricate relationships between race, sexuality and colonial difference.[16] Stoler's movement is that of rupture and recovering Foucault.

Indeed, the challenge that these forms put forward is to break with a thought – the transcendent form of power that controls everything, and that is anchored in a vision of modernity guarded by universal abstracts produced by Western modernity – and simultaneously "recover"[17] its power. Thus, the problem is not that my interlocutors do not have something of *homo sacer*, nor that hyperpreventive practices (Castiel, 2010) do not mimic Esposito's immunization paradigm, much less that we should pay no attention to strategies for governing life or for "emerging forms of life" (Fischer, 2003). The problem is in taking these theories as simply "applicable" to realities other than those that produced them, decontextualizing them from their locale of enunciation. And the great provocation is to utilize these concepts, while subverting them, from shared/interlaced stories originating in the (post) colonial context – the colonial difference as part of the definition of biopolitics. It is, therefore, about breaking with Eurocentric hegemony and making the most of the concepts formulated there.

Biopolitics (and biopower) then emerges as a vast field to be studied through ethnography. Clearly it is not enough to add local stories and stir. It is important that the experiences from down here affect, in the strong sense

16 On the proposal to provincialize Europe, see Chakrabarty (2000).

17 I use the terms "rupture/break" and "recover" considering the analysis of Otavio Velho (2012) in the work of Stoler (1995).

of the term, the conceptual framework itself, and thus, it can be modified, transformed. The challenge resides in verifying how these theories with their power and limits, which are being handled by us, can be renewed, rewritten, recreated from the margins and, to use an expression that is dear to us, devoured, here, in the heat of the tropics.

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