

Coronashock capitalism: the unintended consequences of radical biopolitics, writes Stefan Ecks

2020 is a significant year for the social sciences. Not only because COVID-19 changed how we think about global connectedness and local distancing. By some strange coincidence, 2020 also marks the 100th anniversary of Max Weber's death. He was only 56 years old when he died in Munich on June 14th, 1920. Weber was one of millions of victims of the Spanish flu pandemic that followed the First World War. Between 1918 and 1920, this strain of influenza killed up to 100 million people, more than the 40 million attributed to WWI. Some places were so severely hit that all social and economic activity collapsed. In Western Samoa, then under British rule, 95% of the population got infected and 22% died within a few weeks (McMillen 2016: 91-92). The Spanish flu was unusual both for its staggering death toll and for the demographics of its victims: "healthy young people in the age interval 15-40—not frail patients, nor children or elderly" (Karlsson, Nilsson & Pichler 2014: 1).

Weber was working on his great *Economy and Society* when he died. No other sociologist was as attuned to the gap between the intention of action and its consequences in the long run. The founders of Protestantism did not intend to create secular capitalism, and yet this was the accidental outcome of the Reformation. In his last years of life, Weber also wrote much about the economic impacts of WWI. But he never wrote about the economic shock of the flu pandemic. In 1919, Weber was part of the German delegation to Versailles. He anticipated that the Treaty of Versailles would spell the ruin of the German economy (Radkau 2009). Meanwhile the scale of the

economic damage of losing millions of people in their healthiest years was hardly noticed. In Germany, the authorities censored press reporting about the death toll (Witte 2003). Weber might have written about the pandemic if he had had the same flood of news that we have about COVID-19 (Engelmann 2020). The economic consequences of the Spanish flu were never studied in detail, either in Weber's time or since. The Great War drowned out historians' recognition of the flu.

How is the COVID-19 pandemic affecting the economy? In terms of GDP and stock market performance, COVID-19 is an all-out disaster for capitalism. The world is staring at the worst recession in nearly a century. Businesses are going bankrupt and people are losing their jobs at catastrophic rates. In the UK, one million people made new jobless claims within two weeks of the country's lockdown coming into effect. Compare this to the 2007-08 financial crisis: back then, one million people lost their jobs over three years after the downturn (Financial Times, April 2, 2020).

The economic disaster is *not* caused by COVID-19 itself. The 1918-1920 flu pandemic and the 1980-1990s AIDS pandemic strained economies because these viruses killed people of working age. The current economic disaster is entirely caused by the biopolitical response to the virus. Governments opting for strict lockdowns are putting population health above economic wealth. In Asia, Europe and the US, governments are "deliberately inducing one of the most severe recessions ever seen" (Tooze 2020). Government attempts at stalling the health disaster accept that this does unfathomable harm to the economy.

In a recent reflection on COVID-19, Bruno Latour argues that we are not witnessing a new form of politics but a rerun of nineteenth-century "statistics" in the sense of "population management on a territorial grid seen from above and led by the power of experts" (Latour 2020). He holds that COVID-19 made an older form of politics return: "we are collectively

playing a caricatured form of the figure of biopolitics that seems to have come straight out of a Michel Foucault lecture” (Latour 2020). Foucault characterized biopolitics as “focused on the species body, the body imbued with the mechanics of life and serving as the basis of the biological processes [...] Their supervision was effected through an entire series of interventions and *regulatory controls: a bio-politics of the population*” (Foucault 1978: 139; emphasis in original). Biopolitics justifies interventions by whether they enhance the health of the population. Foucault never clarified if biopolitics takes health as supreme value, or if enhancing health is just a means to enhancing wealth. We should distinguish two modes of biopolitics, moderate and radical. In moderate biopolitics, health is enhanced in order to enhance wealth. This is what Foucault described. But the response to COVID-19 is far more drastic. When population health becomes the supreme value and economic wealth becomes subservient it, biopolitics turn radical. I agree with Latour that what we are seeing is biopolitics. I disagree with him that this is a “return”: instead, we have never seen biopolitics on such a scale. 2020 is the birth year of radical biopolitics.

Previously it looked like economic wealth would always trump population health. The “return” of biopolitics comes long after neoliberalism seemed to have displaced it. In the 2000s, when neoliberalism was the only game in town, it appeared as if governments had ceased to rule over life and death. Back then, Nikolas Rose argued that liberal governments do not “claim—or are given—the right, the power, or the obligation to make such judgements in the name of the quality of the population” (Rose 2006: 254). In neoliberalism, individuals are to take responsibility for their own health while the state is “no longer expected to resolve society’s need for health” (Rose 2001: 6). Arguably governments never ceased to exercise power over life, at any point. But biopolitics were moderate, and easily subsumed by neoliberal economic policies. Now, coronashock has induced a radical turn.

Both the US and the UK are currently run by right-wing parties. Both the US and the UK dithered and delayed their responses to COVID-19. Both governments only turned to radical biopolitics when the exponential spread of the infection became a “tsunami” threatening to make health systems collapse. From January until the beginning of March, both Trump and Johnson declared their countries would “stay open for business.” Both denied that COVID-19 was much to worry about, and both failed miserably in preparing for the coming wave of infections. In neoliberalism, governments are not meant to disrupt the market for the sake of health. Dominic Cummings, the UK prime minister’s chief adviser, perfectly summarized the strategy: “protect the economy, and if that means some pensioners die, too bad” (cited in Walker 2020). Similar arguments were made in the US (e.g., Katz 2020). Letting the virus “run its course” while protecting the economy is a neoliberal response. Moderate biopolitics do not threaten wealth. Free movement and free markets are more important than saving lives. If there is something like “neoliberal eugenics” (Comfort 2018), they are not about “making live” but about “letting die.”

The vast majority of people who are dying with the coronavirus are older than 65 years and most have multiple chronic health conditions. Sharon Kaufman’s *Ordinary Medicine* (2015) shows the bioethical dilemma of how unevenly resources are allocated: older people take the most drugs, they receive the most treatments, they have the most complex multimorbidities, and they use up 90% of healthcare resources. Johnson and Trump initially responded to COVID-19 in a neoliberal mode: people are dying every day of natural causes, let them. COVID-19 mostly kills people deemed to be a burden on healthcare and welfare. From a neoliberal point of view, most COVID-19 victims are economically expendable. But the threat of skyrocketing death rates forced both governments to take a u-turn into radical biopolitics. Even pro-market governments opted for shutdowns and enacted tax-funded stimulus programs

larger than any intervention since WWII. Even neoliberals could not put economic profits over population health any longer. Sticking to the neoliberal script would have been political suicide.

Radical biopolitics cannot last long because the economy is hurting too much. True to form, Trump tweeted on March 23: "WE CANNOT LET THE CURE BE WORSE THAN THE PROBLEM ITSELF" (emphasis in original). What will come after the lockdown? The corporate sector will try to recuperate lost profits. Corporations are already calling on governments to bail them out with public money, in the same way as during the financial crisis 2007-2008. COVID-19 might also turn into an occasion for "disaster capitalism" (Klein 2007). Vincanne Adams (2020) argues that COVID-19 can be read as disaster capitalism because it exposes pre-existing inequalities and because it threatens the profiteering of industries in its wake. In the short run, radical biopolitical interventions are an unmitigated disaster for capitalism. In the long run, the catastrophic consequences of radical biopolitics could be used to justify sweeping pro-market reforms and to slash welfare and social security.

It could also happen that COVID-19 becomes the springboard for alternative politics. It might be "a portal, a gateway between one world and the next" (Roy 2020). Klein (2007) is wrong to imply that neoliberals have a monopoly on shocks. COVID-19 is a shock for everyone, and the shock can be channeled into other politics. Socialized health care and universal basic income have become far more plausible. Governments' decree that citizens must self-isolate show that health can never be privatized. Adams (2020) hears her daughter say that, if "people with COVID-19 are going to get free tests and free hospitalizations and the government was going to send checks to fill in the gap for missed wages, then it might make [US Americans] think that [socialism] actually could work." Instead of bailing out polluting industries, a Green New Deal

might look like a better way to restart the economy. Dolphins are swimming in Italian ports and sea turtles are hatching on Brazilian beaches. The coronavirus has achieved a greater reduction of carbon emissions than decades of environmental politics.

Max Weber was cremated. In 1920s Germany, cremation was still rarely practiced among Protestants and strictly forbidden to Catholics. There was a heated contemporary debate about cremation. An argument made in favor was that it helped Nature. The experts believed that cremation would “enrich the carbon dioxide content in the atmosphere and thereby promote the growth of vegetation” (Radkau 2009: 549). They thought that burning human corpses could bring new life to plants. This morbid little detail of Max Weber’s death may give you hope: perhaps death can be turned into life, maybe the disaster can be a portal. It may also make you despair: how could the experts ever be so wrong? How can the consequences of social actions be so drastically different from what they were intended to achieve?

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References

Adams, V. (2020). “Disasters and Capitalism ... and COVID-19.”

Somatosphere, 26 March 2020.
<http://somatosphere.net/2020/disaster-capitalism-covid19.html/>

Comfort, N. (2018). "Can We Cure Genetic Diseases without Slipping into Eugenics?" In *Beyond Bioethics: Toward a New Biopolitics*, eds. O. K. Obasogie & M. Darnovsky. Berkeley: University of California Press, pp. 177-185.

Engelmann, L. (2020). "#COVID-19: The Spectacle of Real-time Surveillance." *Somatosphere*, March 6, 2020.
<http://somatosphere.net/forumpost/covid19-spectacle-surveillance/>

Foucault, M. (1978). *The History of Sexuality, Volume 1: An Introduction*. New York: Pantheon Books.

Karlsson, M., Nilsson, T., & Pichler, S. (2014). "The Impact of the 1918 Spanish Flu Epidemic on Economic Performance in Sweden: An Investigation into the Consequences of an Extraordinary Mortality Shock." *Journal of Health Economics* 36: 1-19.

Katz, D. (2020). "Opinion: Is Our Fight Against Coronavirus Worse Than the Disease?" *The New York Times*, March 20, 2020.

Kaufman, S.R. (2015). *Ordinary Medicine: Extraordinary Treatments, Longer Lives, and Where to Draw the Line*. Durham, NC: Duke University Press.

Klein, N. (2007). *The Shock Doctrine: The Rise of Disaster Capitalism*. New York: Metropolitan Books.

Latour, B. (2020). "Is this a Dress Rehearsal?" *Critical Inquiry*, March 26, 2020.
<https://critinq.wordpress.com/2020/03/26/is-this-a-dress-rehearsal/>

McMillen, C. W. (2016). *Pandemics: A Very Short Introduction*. Oxford: Oxford University Press.

Radkau, J. (2009). *Max Weber: a biography*. Cambridge: Polity Press.

Rose, N. (2001). "The Politics of Life Itself." *Theory Culture & Society* 18, no. 6:1-30.

Rose, N. (2006). *The Politics of Life Itself: Biomedicine, Power and Subjectivity in the Twenty-first Century*. Princeton: Princeton University Press.

Roy, Arundhati. (2020). "The Pandemic is a Portal." *Financial Times*, April 3, 2020.

Tooze, A. (2020). "Coronavirus Has Shattered the Myth that the Economy Must Come First." *The Guardian*, 20 March 2020.

Walker, P. (2020). "No 10 Denies Claim Dominic Cummings Argued to 'Let Old People Die'." *The Guardian*, 22 March 2020.

Weber, M. (2019). *Economy and Society*. Cambridge: Harvard University Press.

Witte, Wilfried. (2003). "The Plague That Was Not Allowed to Happen: German Medicine and the Influenza Epidemic of 1918-19 in Baden." In *The Spanish Influenza Pandemic of 1918-19: New Perspectives*, eds. H. Phillips & D. Killingray, pp. 49-57. London: Routledge.