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THE BIOPOLITICS OF TRAUMA

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Biopolitics and trauma after 9/11

The popularity of the signifier 'trauma' in the wider culture indicates the continuing relevance of the study of extreme violence and suffering. At the same time, the currency of the term in strongly politicized contexts is a strong reminder that designating certain events and experiences as traumatic, far from being a mere academic exercise, not only reflects but also shapes contemporary power relations. Contemporary identities are increasingly being articulated around experiences and memories of what Wendy Brown has called 'insistently unredeemable injury'. One consequence of this state of affairs is that trauma studies' principled commitment to instances of suffering and woundedness may very well end up contributing to 'a politics of reclamation that seeks to avenge the hurt even while it reaffirms it' (Brown W. 406). Nor is this danger a matter of identity politics alone: the first decade of the new millennium witnessed how the events of 9/11 fuelled new forms of violence that could not avoid perpetuating cycles of violence and resentment that were already at the basis of those events. Here also, the drive to eradicate the effects of suffering ends up reaffirming the logic of violence.

In her book, *Precarious Life: The Powers of Mourning and Violence* (2004), Judith Butler investigates this proximity between 'injurability and aggression', and wonders whether 'the experiences of vulnerability and loss have to lead straightaway to military violence and retribution' (xii). Butler's obvious answer is that they do not: when the reaction to the loss of certain (say, American) lives takes the form of massive aggression against other (say, Iraqi or Afghan) lives, this reaction is fostered by complex mediating processes that qualify certain forms of life as worthy of recognition and affective investment, even as they render other lives both 'unthinkable and ungrievable' (xiv). The juncture of trauma and violence, in other words, is always undergirded by multiple acts of 'framing', an aspect Butler foregrounds in her

later book *Frames of War: When is Life Grievable?* (2009), which in many ways complements the project of *Precarious Life*. Still, if *Frames of War* mainly focuses on how the mass media 'frame' different experiences and events in very different ways, it also implicitly interpellates trauma studies. The 'framing' of 9/11 as a traumatic event, and of cultural and artistic responses to it as reflections of a post-traumatic condition, has become a popular academic occupation in the last decade in the fields of literary, cultural, as well as social studies. As such, trauma studies can hardly avoid the question whether the current state of the world does not belie its commendable ethico-political commitment, monumentalized in Cathy Caruth's foundational (and easily ridiculed) assertion in one of the field's inaugural texts that '[i]n a catastrophic age ... trauma itself may provide the very link between cultures' (Caruth 11).

Butler's emphasis on 'precarious' or 'grievable' life suggests one reason why trauma studies' ethico-political agenda has proven harder to substantiate in the new millennium than Caruth could have anticipated in 1995. It testifies to a widespread shift in the analysis of power from the domain of culture to the problematic of life, or from a politics of recognition to a discourse of biopolitics. Of course, the notion of life that is at stake in this shift is notoriously unstable, maintaining (while subverting) multiple relations to notions such as the (non)human, death, individuality, and the body. This instability is illustrated in Butler's attempts to theorize the idea of 'vulnerability'. At one point, she points to 'a primary and unwillful physical proximity with others', 'a condition of being laid bare from the start' that precedes the formation of the 'I' (Butler 2004: 26, 31). At other moments, she links this vulnerability and exposure to processes of globalization (xiii). And while this 'primary vulnerability to others' is said to define our humanity as such (as we 'cannot will [it] away without ceasing to be human' (xiv)), at other moments she declares that this 'common human vulnerability ... emerges with life itself' (31). While Butler seems to be unable to make up her mind about whether the contemporary vulnerability to trauma is an index of global connectedness, or rather of life or human sociality as such, she strongly affirms that it is a liability that '[n]o security measure', not any 'radical forms of self-sufficiency and unbridled sovereignty' can defend us from (xii–xiii). A failure to adequately mediate the aftermath of trauma only perpetuates cycles of violence or retraumatization, yet our exposure to trauma is inescapable.

Butler's work invites us to locate trauma in relation to the inevitability of encroachment and contagion, on the one hand, and the task of securing life from such exposure on the other. By foregrounding this tension, trauma, and discourses of trauma, are resituated within the context of biopolitics. While the biopolitical tradition can be traced back as far as 1920 (Esposito 2008: 16–17), current discussions usually refer back to a series of lectures that Michel Foucault delivered at the Collège de France between 1974 and 1979, in which he deployed the term to 'designate what brought life and its mechanisms into the realm of explicit calculations and made knowledge-power an agent of transformation of human life' (Foucault 1979: 143).¹ Biopolitics names the processes and apparatuses through which life itself has increasingly become a target of power since the eighteenth and nineteenth centuries. Foucault famously developed an analytic of disciplinary power to make up for the

insufficiency of the traditional framework of sovereignty to account for the operations of power since the eighteenth century. This disciplinary power in its intensified form becomes biopolitics; while disciplinary power (which emerged from the seventeenth century on) already differed from sovereign power in that it did not presuppose 'the physical existence of a sovereign' but rather 'a closely meshed grid of material coercions' (Foucault 2003: 36), biopolitics, rather than *replac[ing]* disciplinary power, instead 'dovetails into [disciplinary power], integrate[s] it, modify[es] it to some extent, use[s] it by sort of infiltrating it' (242).² Biopolitics does not depend on overt displays of power—that was (or, as Butler and others maintain, remains) the prerogative of sovereign power—but rather on the apparatuses of 'governmentality', which Foucault defines as 'the ensemble formed by institutions, procedures, analyses and reflections, calculations, and tactics that allow the exercise of this very specific, albeit very complex, power that has the population as its target ...' (Foucault 2007: 108). Biopolitics and governmentality are dedicated to the care of life: they 'endeavor to administer, optimize, and multiply [life], subjecting it to precise controls and comprehensive regulations' (137). Biopolitics, in other words, also consists in a policing of trauma. By situating trauma within this biopolitical horizon, this chapter makes clear that trauma not only names a threat to life, but also functions as a technology that sustains and optimizes it.

Agamben: biopolitics as sovereignty

Biopolitical institutions such as safety measures, insurance, and hygienic regulations address the vulnerability that is an essential aspect of (especially modern) life in order to equilibrate and regulate the accident and contingency that afflict life. Still, in the current critical theoretical climate, the articulation of trauma and biopolitics tends to evoke less such decidedly unspectacular governmental technologies than lurid images of torture, genetic surveillance, or the horrendous plight of stateless refugees. These images are compiled, and connected through a re-thinking of Foucault's work on biopolitics, in Giorgio Agamben's academic blockbuster *Homo Sacer: Sovereign Power and Bare Life* (1998). *Homo Sacer* not only famously theorized the camp as the 'biopolitical paradigm of the modern', it also decisively enriched the critical imagination by launching figures such as the *homo sacer* and the *Muselmann* as iconic instances of traumatized subjectivity. Agamben's influence on discourses of trauma and biopolitics cannot be overestimated; still, the differences between Foucault's and Agamben's accounts of biopolitics make it possible to bring into relief a number of limitations of Agamben's intervention, which resonate with recent developments in the field of trauma studies.³ Before I start sketching out a more productive account of the juncture of biopolitics and trauma, I briefly focus on three such limitations.

Near the beginning of *Homo Sacer*, Agamben remarks that Foucault's work on biopolitics 'never dwelt on the exemplary places of modern biopolitics: the concentration camp and the structure of the great totalitarian states of the twentieth century' (4). Agamben's own project theorizes biopolitics by departing from a

number of exemplary sites and figures,⁴ yet this emphasis on the intermittency and extremity of biopolitical phenomena distorts one of the key aspects of Foucault's account. For Foucault, biopolitics counts as an 'intensification' of disciplinary power because it is no longer linked to specific locations—such as the asylum, the prison, or the hospital—but rather manages to infiltrate every aspect of our private lives; it is a capillary power that disguises itself as mere management or bureaucracy and regulates populations by imperceptibly saturating the field of everyday life (Nealon). By reconnecting biopolitics to sovereignty, and by understanding the sovereign (following Carl Schmitt) as 'he who decides on the exception',⁵ Agamben obscures the fact that biopolitics operates by eschewing the displays of power that are the prerogative of traditional sovereignty, and is instead dispersed through the different realms of everyday life. It obliterates, in other words, the fact that biopolitics, and the traumas it generates, have become a vital structure of contemporary existence.

A second problem with Agamben's reterritorialization of biopolitics (to the camp) is that it ends up reinstating the centrality of the Holocaust for the analysis of trauma. In his book *Remnants of Auschwitz* (2002), the third part of the *Homo Sacer*-project, Agamben perfects the fit between the biopolitical tradition and the Holocaust by launching the figure of the *Muschmann*, which he picks up from the work of Primo Levi, as 'the final biopolitical substance to be isolated in the biological continuum', that is, as an emblem of the closest that life can come to death (85). By borrowing the figure of traumatized subjectivity from Levi's account of the bare life of exhausted, stunted, and sputorous camp inmates, *Remnants* cements the association between the Holocaust and trauma. Even if this association is not problematic in itself, and can even function as a catalyst for the comparative imagination and for a better understanding of terror and suffering (Rothberg), it does run the risk of impoverishing accounts of the workings of trauma if it obscures the ubiquity of extreme violence and suffering in other domains. Achille Mbembe, among others, has insisted that the plantation and the colony are two such sites that tend to be overlooked by critical theories that focus on the Holocaust, and that slavery 'could be considered one of the first instances of biopolitical experimentation' (21). Agamben's 'extreme European exceptionalism' pre-emptively empties a consideration of the role of colonial encounters and racial violence in the production of biopolitical trauma (Rothberg 62–3).

Agamben's Eurocentrism and his exclusive reliance on peculiarly lurid instances of biopolitical violence also—and this is a third limitation—contribute to a consolidation of a limited understanding of trauma that recent critical work has increasingly begun to challenge. Trauma studies have long been dominated by the idea—which can be traced back to the psychoanalytical tradition that informed this field—that trauma is essentially a sudden and punctual event that afflicts the subject from without. This notion all too easily assumes a solid and stable sense of self that is simply not available to many disenfranchised groups, and thus fails to account for the detrimental effects of the 'ongoing and sustained dynamics of social injury and deprivation' that affect the lives of non-dominant groups suffering from social injuries such as 'racism, misogyny, homophobia and economic exploitation' (Moglen 151, 159). Already in Caruth's seminal collection *Trauma: Explorations in*

Memory (1995), Laura Brown coined the notion of 'insidious trauma'—a term that conjures biopolitics' capillary and invisible mode of operation—to refer to 'the traumatogenic effects of oppression that are not necessarily overtly violent or threatening to bodily well-being at the given moment but that do violence to the soul and spirit' (Brown L. 107; see Craps and Buelens 3–4).

While attention to such 'incessantly quotidian trauma' (Cheah 196–200) has primarily informed attempts to articulate trauma studies with postcolonial realities, an account of trauma that recognizes the pervasiveness of invisible biopolitical operations in everyday life can take this decolonizing tendency one step further, and also bring into focus the extent to which structural trauma undergirds contemporary metropolitan life. Mika Ojakangas has argued that the exemplary subject of biopolitics is not the *Muschmann* or the *homo sacer*, but rather 'the middle-class Swedish social democrat' (27), whose life is imperceptibly molded by state as well as non-state apparatuses that strive for that life's maximization and optimization. In the rest of this chapter, I propose an account of the interrelations between trauma and biopolitics that finetunes the widely accepted idea that trauma emerged with the advent of modernity by locating its emergence in nineteenth-century Europe—in a time and place, that is, that also saw the consolidation of biopolitics. When Roger Luckhurst notes that trauma is a concept that emerged 'as an effect of the rise, in the nineteenth century, of the technological and statistical society that can generate, multiply and quantify the "shocks" of modern life' (19), he underlines the concept's involvement in the infrastructures of biopolitics. In order to explain how this involvement not only mobilizes trauma as a technology for the optimization of life, but also threatens to fuel cycles of retraumatization, I turn from Foucault to the work of the contemporary Italian philosopher Roberto Esposito. In a trilogy that consists of *Bios: Biopolitics and Philosophy* (2008), *Communitas: The Origin and Destiny of Community* (2009), and *Immunitas: The Protection and the Negation of Life* (2011), Esposito both adjusts Foucault's account of biopolitics and locates it in a larger frame by presenting biopolitics—and, implicitly, trauma—as modern instantiations of a fundamental tension between the dynamics of community and immunity.⁶ Reading Esposito's account of biopolitics as a theory of trauma makes it possible to bring into focus the biopolitical challenge to contemporary trauma studies, one of the institutions that modulate the circulation of the signifier 'trauma' and assure (or proscribe) the attainment between that signifier and particular events and experiences. As I show, it reminds trauma studies that, especially in an age of globalization, they always risk strengthening 'immunity' tendencies that perpetuate rather than minimize trauma.

Foucault: the birth of trauma out of the spirit of governmentality

Near the end of *Society Must Be Defended*, from his lecture series at the Collège de France from 1976, Foucault (2003) notes that biopolitical apparatuses and strategies emerged in order to safeguard the health and the productivity of the population. By shifting perspective from the individual to the people, they dissolved

idiosyncrasies and deviations in a calculus of probabilities that allowed them to strive for 'overall states of equilibration or regularity' and to provide compensations for inevitable individual variations (246). Biopolitics, Foucault writes, is 'not individualizing, but, if you like, massifying ... directed not at man-as-body but at man-as-species'—man, that is, as a mass or a multitude (243). In order to optimize the health and productivity of the people, biopolitics deploys two closely connected kinds of technologies. First, there are provisions and measures that attempt to prevent the loss of vital capacities, and that install 'security mechanisms ... around the random element inherent in a population of living beings so as to optimize a state of life' (246). Still, the massive processes of mobilization, dislocation, and industrialization that define modernity render a foolproof prevention of accidents and injuries impossible. This is why biopolitics counts on statistical measures to 'tame' these contingencies by making them part of a calculus of probabilities. This project has been described as an '*arithmetique [of] the future*,' a process which 'subject[s] the future's contingency to the order of a calculable and intelligible archive' (Athanasios 144), so that we can 'note constants and regularities even in accidents' (Foucault 2007: 74). On the basis of such knowledge, biopolitics can more surreptitiously influence and optimize the lives of the people—not by disciplining bodies, but by regulating populations (Foucault 2003: 250).

That biopolitics is 'massifying' rather than individualizing does not mean that it does not intervene in the construction of modern subjectivities. In *Security, Territory, Population*, from his lecture series from early 1978, Foucault (2007) traces the biopolitical concern with the health and the well-being of the population back to a Christian tradition of what he calls pastoral power. He notes that the Church's concern with individual salvation relied on 'knowing the insides of people's minds ... exploring their souls ... making them reveal their innermost secrets' (Foucault 1982: 214). Depending on analyses and techniques of reflection and supervision to acquire 'a knowledge of conscience and ability to direct it', pastoral power 'is linked with a production of truth—the truth of the individual himself' (214). In a secularized world, such power and care are no longer mobilized in order to acquire salvation, but morphs into a—collective as well as individual—concern for 'health, well-being, ... security, protection against accidents' (215). Biopolitics can be understood as a pastoral power that has 'spread out into the whole social body' and has taken the form of 'individualizing "tactic[s]"' deployed by institutions such as the family, medicine, education, and psychiatry' (215). The pastoral genealogy that Foucault traces for modern power signals that biopolitics not only operates through the biological life of the population, but also through technologies of subjectivation, both individual and collective. Biopolitics mobilizes the institutions of governmentality to produce both 'technologies of the self' and 'political technologies of individuals'; while the former concern 'the ways in which subjects relate to themselves as ethical beings', the latter shape the ways individuals recognize themselves as parts of society (Lemke 9–10).

Foucault's elaboration of biopolitics as a crucial dimension of modern power makes it possible to fine-tune the familiar connection between trauma and

modernity and to situate trauma within a biopolitical horizon; his emphasis on the pastoral dimension of biopolitics, moreover, sheds light on the functioning of trauma in contemporary technologies of subjectivation. The emergence of trauma is famously linked to advances in industrialization that produced machines that, in their turn, led to the proliferation of train and factory accidents. Trauma emerged as part of a (biopolitical) vocabulary to map, predict, and regulate the proliferation of physical accidents and psychological damage that modernity incited. It was part of a discourse of shocks and sudden excitations that, even if they had no ostensible physical cause, manifested themselves in the psyche. Trauma was from the beginning a 'medico-legal' problem, as early medical theories of nervous shock were closely connected to the issue whether sufferers with no palpable bodily injuries could yet demand compensation (Luckhurst 24). Importantly, such compensation did not depend on the ability to assign guilt or responsibility, as trauma was soon given over to 'an insurance system where responsibility was not an issue' (25). Trauma, Roger Luckhurst writes, 'develops from the rise of the statistical society', which, as Foucault's account of biopolitics elaborates in great detail, abstracts 'larger orders and regularities of behaviour' and makes the notion of trauma a vital part of a systematic endeavour to take care of the life of the people (25–6). Already in the nineteenth century, trauma was part of the bureaucratic management of the life of the people; it served to name some of the calamities that befall modern life in order to be able to secure the productivity of that life. This emphatically does not mean that biopolitics always aims to *avoid* individual traumas at all cost: what matters is that vital capacities can be mobilized, even if this maximization of capacities goes at the expense of individual bodies; reduction of individual trauma counts for less than the massifying management of trauma (Goldberg and Willse 280–81).⁷

Foucault's work also indicates the ways in which trauma figures in contemporary technologies of subjectivation. His analysis of pastoral power, as a comprehensive guidance of individual life that is intent on securing knowledge of the inner truth that defines the self, resonates with the place of trauma in what Mark Seltzer has called contemporary 'wound culture'. In this wound culture, the self's relations to itself as well as to (certain sectors of) society are increasingly determined by infinitely rehearsed and strongly cathected experiences of woundedness. Seltzer writes that '[t]he notion of the public sphere has become inseparable from the collective gathering around sites of wounding, trauma, and pathology ... to the extent that trauma serves as another name for the subject in wound culture, it holds the place of a sociology premised on the wound' (24). The crypto-pastoral urge to discover the truth about one's life by locating an individuating trauma is then complementary with the drive to publicly confess that trauma: both reflect a condition in which trauma mediates the self's relation to itself as well as to society.⁸ Institutions such as psychotherapy and psychoanalysis—but also a vast library of self-help books or, why not, literature—have come to assume a pastoral role by allowing the contemporary self to take care of its well-being by managing its relation to certain traumas.⁹ This deployment of trauma is continuous with the nineteenth-century

bureaucratic and statistical codification of trauma. Anticipating Roberto Esposito's account of biopolitics, to which I turn in the next section, we may well wonder whether the recent rise of trauma as a technology of subjectivation has not spread an increasing sense of vulnerability, to the point where it begins to counteract the ability of biopolitical technologies to secure life against accidents and suffering. Esposito's work explains how such a sense of excessive exposure and powerlessness may incite further violence *against* life rather than offer a protection *of* life.

Esposito: biopolitics, community, immunity

While Foucault's work helps to put the emergence of the notion of trauma into perspective, it fails to explain how the biopolitical regime in which this emergence is located ends up subverting its goal of optimizing life and begins generating further traumas. Roberto Esposito's *Bíos* takes Foucault to task on precisely this point. His critique takes off from the hesitation in Foucault's work between an understanding of biopolitics as a set of technologies of subjectivation (a politics of life) and the idea that biopolitics limits and consumes life (a thanatopolitical assault on life) (31–2). For Esposito, Foucault fails to reconcile his silent conviction that 'life is stronger than the power that besieges it' with the reality of the modern 'mass production of death', and his work does not explain how it is possible that 'a power of life is exercised against life itself' (39). Esposito proposes a different account of the link between politics and life that at the same time establishes biopolitics as a quintessentially modern phenomenon. His key conceptual operation consists in folding politics and life back into the foundational tension between the notions of *communitas* and *immunitas*. For Esposito, community is emphatically not a substance that is 'the ethnic, territorial, and spiritual property' of its members (Esposito 2009: 3): he notes that the Latin *communitas* refers to something 'public' that begins precisely where the proper ends; it has, moreover, three further meanings that are all associated with the term *munus*, which indicates the idea of obligation. In the last of these meanings, which Esposito considers crucial, *munus* signifies a gift, and more specifically a gift that demands an exchange in return (4–5). In the last analysis, *communitas* points to a gift that never properly belongs to anyone and that asserts itself as a relation of mutual obligation. It is a relation of reciprocal exposure that constitutes the self as such a relation.

For Esposito, modernity is the name of the project that countered *communitas* by developing a massive apparatus of immunization. *Immunitas* is that which deactivates the mutual obligation that characterizes *communitas*; the subject who enjoys *immunitas* has received a *dispensatio* and is exempt from the obligation incurred through the gift. Esposito traces a philosophical genealogy of the ways in which modern thought has mobilized notions such as sovereignty, personhood, property, and liberty in order to shield the individual from the risk of contagion by the unpredictable effects of *communitas*.¹⁰ These notions make it possible for individuals to be 'bordered in such a way that they are isolated and protected', and that they are freed from 'the "debt" that binds them one to the other ... exposing

them to the possible conflicts with their neighbor, exposing them to the contagion of the relation with others' (13). Esposito recognizes that processes of immunization are crucial for the preservation of life; unlike Butler, for instance, who seems to envision a response to contemporary trauma through the recognition of a shared bodily vulnerability, he is aware that such intensified exposure will only end up inciting further—and potentially more violent—calls for immunization (Campbell xiii). The notions of community and immunity are properly inseparable, yet it is only in modernity that immunization begins to constitute society's 'most intimate essence' (Esposito 2008: 55). Modernity emerges with the diminishment of natural and transcendental protection, and this 'tear ... in that earlier immunitarian wrapping ... determines the need for a different defensive apparatus of the artificial sort that can protect a world that is constitutively exposed to risk' (55).

It is remarkable to what extent the account of the constitutive tension between *communitas* and *immunitas* dovetails with the common understanding of trauma as, in Roger Luckhurst's words, 'a piercing or breach of a border that puts inside and outside into a strange communication' (3)—even if Esposito's work already indicates that such a breach is the very condition of the (impossible) separation between inside and outside. The *munus* that defines Esposito's notion of *communitas* is described as 'loss, subtraction, transfer' (Esposito, *Communitas* 5); it is a 'violent loss of borders' that is not perceived as 'painless' (8). *Communitas* generates subjects that are 'cut by a limit that cannot be interiorized', as this limit signals their 'exposure to what interrupts the closing and turns it inside out: a dizziness, a syncope, a spasm in the continuity of the subject' (7); it is 'a contagion provoked by the breaking of individual boundaries and by the reciprocal infection of wounds' (xxx). This comes remarkably close to Freud's seminal assertion, in *Beyond the Pleasure Principle* (1920), that '[w]e describe as "traumatic" any excitations from outside which are powerful enough to break through the protective shield'. Freud continues that such an event 'is bound to provoke a disturbance on a large scale in the functioning of the organism's energy and to set in motion every possible defence measure' (quoted in Luckhurst 9). Reading Esposito from the perspective of trauma studies, we can see that he grafts his account of biopolitics (to which I turn presently) onto a dynamic (the relation between *communitas* and *immunitas*) that is structured very much like the scenario of traumatic encounter. A better understanding of the relations between this dynamic and its modern instantiation as biopolitics can make crucial adjustments and additions to our customary understanding of trauma and biopolitics.

Importantly, immunization does not consist in the outright exclusion or negation of community. In order to master the excessive and contagious dimensions of community, the process of immunization 'homeopathically' includes what it excludes; it 'reproduces in a controlled form exactly what it is meant to protect us from' (Esposito 2011: 8).¹¹ Immunity and community are 'at the same time juxtapose[d] and connect[ed]', in a relation in which the latter is 'the object and content' of the former (9). The process of immunization is 'a strategy ... of outflanking and neutralizing' the expropriative effects of the trauma of community

(8). This interconnectedness of the expansive power of community and the limiting operations of immunization also accounts for Esposito's response to the unresolved hesitation in Foucault between an 'affirmative and productive' notion of biopolitics, on the one hand, and a 'negative and lethal' one on the other (Esposito 2008: 46): for Esposito, biopolitics names the attempt to protect and contain the expansive powers of life in order to secure it against the vulnerability and exposure that defines it. In biopolitics' immunizing operations, the negation of life 'doesn't take the form of the violent subordination that power imposes on life from the outside, but rather is the intrinsically antinomonic mode by which life preserves itself through power'; biopolitical immunization 'subjects the organism to a condition that simultaneously negates or reduces its power to expand' (46).

The immunitary nature of biopolitics makes it possible to reread Freud's classical scenario of traumatic encounter. For Freud, the traumatic disturbance of the organism leads to what he calls 'the problem of mastering the amounts of stimulus which have broken in and of binding them, in the psychical sense, so that they can be disposed of' (quoted in Lackhurst 9). This 'binding' of traumatic stimuli famously takes the form of a 'repetition compulsion', in which the subject constantly relives traumatic scenes in the hope of belatedly processing unassimilable experiences. While this phenomenon famously led Freud to posit the existence of a death drive, a biopolitical reading makes it possible to understand repetition compulsion as a homeopathic strategy through which life manages to contain—rather than deny—its self-defeating drive toward excess and expansion, even as it continues to depend on that drive.¹² It illustrates 'the structurally aporetic character of the immunitary process' which, 'unable to directly achieve its objective, ... is forced to pursue it from the inside out' (*Immunitas* 8–9). Repetition can only develop into the healthy process of 'working through' if working through (*durcharbeiten*) is understood as a more productive and more successful way of containing—rather than cancelling—trauma. This biopolitical perspective also makes it possible to see trauma discourses (and trauma studies) themselves as technologies that mobilize the negativity of trauma in a mitigated form for the sustainment of life.

Esposito's work also enables us to pose the question of the ethico-political stakes of trauma studies in a new way. Why is it that the immunization strategies that organize modern life—and to which trauma, as my account of Foucault's work in the previous section suggested, is inescapably linked—have so fatefully led to excessive violence against life? And why is it particularly the last two decades that have seen such destructive cycles of violence and traumatization? Esposito notes that the events following 9/11 can be defined as 'immunitary crises', as 'an explosion of the mechanisms of the victimary sacrifice that extends like a spill across the entire society, inundating it with blood' (Esposito 2009: 17). Esposito's immunitary framework substantiates Butler's (and others') intuition that the post 9/11-upsurge of trauma constitutes a displaced response to globalization. For Esposito, 'that global contamination that is globalization' maintains a 'structural as well as symbolic affinity with the features ... [of] the originary community' (Esposito 2013a: 6; 2009: 15). It isn't so much a space as it is a non-space in the

sense that, coinciding with the entire globe, there is no outside and therefore no inside either' (Esposito 2009: 15). Globalization deactivates the immunization process that separates inside from outside, and ceaselessly exposes the subject to communication, contagion, and contamination. The ensuing perception of vulnerability incites a violent upsurge of immunization measures that upsets the tenuous homeopathic equilibrium that previously managed to mobilize trauma for life, and now unleashes it *against* life.

The process of globalization not only occasions immunitary crises, it is itself also a consequence of an inversion in the biopolitical dynamic. For Esposito, globalization 'expresses the decisive closure of the immunitary system on itself', as it is 'the immunization driven to a sole principle of the regulation of individual and collective life in a world made identical with itself' (Esposito 2013b: 14). It reflects a condition in which immunization no longer works to shield life from accident and contingency, but in which immunitary technologies have begun to generate danger and risk in order to perpetuate themselves: 'It is no longer the presence of risk that demands protection, but the demand for protection that artificially generates the sensation of risk' (Esposito 2009: 14). In a society-wide generalization of the standard procedures of insurance companies, 'risk is artificially created in order to control it', and 'this mechanism of reciprocal strengthening between risk and insurance' ends up reinstating the contagious and violent logic of *communitas* (in the guise of globalization), thus inciting an uncontrollable immunitary reaction (Esposito 2013b: 8). Immunization technologies have begun to generate the traumas they were meant to contain. Esposito's work powerfully suggests that contemporary trauma studies must locate their ethico-political commitments within this biopolitical horizon.

Conclusion: trauma studies as an immunitary technology

In her book *Trauma and the Memory of Politics* (2003), Jenny Edkins draws on the example of Foucault to argue that trauma needs to be considered as a 'situated social practice': 'what experts or academics do when they analyse, categorise and write about memory and trauma', she writes, 'has just as much of a practical effect as other forms of social action' (44). Foucault's and Esposito's accounts of biopolitics have made clear that trauma studies ponders, negotiates, and circulates trauma in a context that is inevitably affected by biopolitics. This tradition guides the inscription of trauma in contemporary subjects' relations to themselves and to society, while it also explains how a concern for violence and suffering always risks inciting a further escalation of terror and pain. The dynamic Esposito lays bare explains that a denial of the need for security and defense is the surest way to provoke an inflation of immunitary violence. One of the defining features of trauma studies in the last two decades has been its consistent avoidance of such a denial. While different postmodernist, poststructuralist, and postcolonial discourses tend to prescribe and celebrate the sufficiency of a rhetoric of contagion, singularity, exposure, irruption, and so on, trauma studies underlines how this vocabulary is implicated with

suffering and pain. As such, it insists that a position of unprotected exposure to contagion and contamination is not a livable option, and that life requires care if it is not to undo itself.

Near the end of *Immunitas*, Esposito notes that it is possible to conceive of immunity not as an apparatus that ruthlessly defends the self against anything that befalls it from the outside, but rather as a technology that regulates the self's multifarious relations to the outside that defines it and that always crosses it. In this broader conception of a 'common immunity', tolerance and defense both count as strategies for managing the self's involvement in the outside world. The immune system, in other words, can be conceived as 'an amplifying box of a difference that involves us' (Donà 65). It is the task of the immune system to modulate the self's experience of alterity in a way that prevents an explosion of immunitary violence. The immune system is reconceived as an instrument of alteration that operates in an 'open system of self-definition' (Tauber quoted in Esposito 2011: 169), and that regulates the self's relation to its outside. Esposito gives the example of the relation between mother and foetus—an emblem which can serve as a powerful correction of the tendency to read the *homo sacer* or the *Muselman* as the sole icons of biopolitical trauma. During pregnancy, the mother's immune system not only helps to protect the foetus, it also protects the mother's body against its tendency to immunize itself against the foetus. Here, it is precisely the difference between foetus and mother that allows the foetus to grow, and that at the same time protects the mother against autoimmune diseases during pregnancy.¹³ This example shows that 'difference and conflict are not necessarily destructive' (171), and that the immune system is a strategy for managing the destructive and productive aspects of the self's relation to its world. From this biopolitical perspective, trauma studies can be considered as an immunitary technology—a technology that can manage the self's relation to the world and that aims to provide a position of sustainable exposure. As an immunitary device, trauma studies is a form of memory work that is crucially involved in preventing the future repetition of disaster in the service of a life that cannot be abandoned to itself.

Notes

- 1 Foucault uses the terms 'biopolitics' and 'biopower' without systematically differentiating between them. Michael Hardt and Antonio Negri do introduce a systematic distinction when they argue that biopolitics mobilizes the powers of life to resist biopower's attempt to gain power over life (Lemke 3–5).
- 2 The historical and conceptual relations between the different forms of power Foucault distinguishes remain a matter of debate. Wendy Brown notes that Foucault does not mean to imply that governmentality (which is one dimension of biopolitics) 'chronologically supersedes sovereignty and rule' (quoted in Butler, *Precarious* 60), as if the sovereignty of law was no longer a matter of concern. In an analysis on which I draw here, Jeffrey Nealon has recently theorized biopolitics as an 'intensification' of disciplinary power, and has underlined that biopower today is less the domain of the state than of global finance capitalism. See especially the second chapter in Nealon. For the unstable place of sovereignty in Foucault's account of biopolitics, see Esposito (*Bíos* 32–44).

- 3 There is no shortage of comparative studies of different accounts of biopolitics—often focussing on Foucault and Agamben, but also comparing their positions to those of, especially, Hardt and Negri and Deleuze. For Agamben's reading of Foucault, see especially Genet; Ojakangas.
- 4 For Agamben's discussion of such a 'paradigmatic' mode of thinking, in which historical phenomena are deployed in order to enlighten an encompassing historical and theoretical context, and which he explicitly links to Foucault, see the first chapter in Agamben, *The Signature*.
- 5 Butler's account of Foucault and Agamben (Butler, *Precarious* 50–67) also ends up reasserting the claims of sovereignty, and reducing governmentality to a name for those aspects of sovereign power that cannot be reduced to the law.
- 6 Esposito's *Bíos* was published in Italian in 2004, *Immunitas* in 2002, and *Communitas* already in 1998.
- 7 If we emphasize biopolitics' targeting of vital capacities rather than its focus on either the individual or the people, it becomes possible to understand biopolitics as a phenomenon that radically ruptures the horizon of the individual, the social, and the human. For Donna Haraway's work as a critique of the residual humanism of Foucault's emphasis on the body as a biological fact rather than a field for the inscription of sociocultural codes, see Esposito, *Immunitas*, 203–10. My focus on trauma highlights the individualizing complement to this radically de-individualizing tendency of biopolitics. See, however, Goldberg and Willse for an exploration of the interface of trauma and such a more radical understanding of biopolitics.
- 8 As has often been noted, the codification of post-traumatic stress disorder in the American Psychiatric Association's *Diagnostic and Statistical Manual of Mental Disorders* in 1980 cannot be told apart from 'an essentially political struggle by psychiatrists, social workers, and others to acknowledge the post-war suffering of the Vietnam War veteran' (Leys 5). PTSD is essentially a 'socio-political category' (Luckhurst 62) that, as Ruth Leys remarks, creates a type of person that people can imagine themselves to be and on the basis of which they can claim certain benefits (6). Again, trauma appears to be a crucial biopolitical category.
- 9 In his alternative genealogy of trauma, Fritz Breithaupt traces trauma back to eighteenth-century German and Austrian empirical psychology, which he sees as 'less a science for understanding the human mind than a technique for transforming human beings' through the development of technologies of 'self-observation' (80, 82). Breithaupt's angle, like the biopolitical perspective that I adopt, makes it possible to see that contemporary trauma, far from being 'the wound that prevents the self from being a self', is the very 'condition of the possibility of the self' (98).
- 10 For Esposito, Foucault's work on biopolitics not only oscillates between a productive biopolitics constituting a return to the paradigm of sovereignty or rather only emerges at the disappearance of the sovereign model (*Bíos* 40–41). For Esposito, sovereignty is to be understood as a manifestation of the tension between *communitas* and *immunitas*, a tension that, as I emphasize below, is inherent in life itself; therefore, sovereignty is simply 'the most powerful response to the modern problem of the self-preservation of life' (57).
- 11 Massimo Donà calls this a relation of 'excluding inclusion' or 'including exclusion' (58). This risks confusion with Agamben's notion of the 'inclusive exclusion', which names the relation between the sovereign decision, on the one hand, and bare life as the object of the sovereign decision that excludes it, on the other.
- 12 To phrase this differently, the biopolitical perspective suggests that Freud's thermodynamic conception of the living organism is inadequate to account for the modern politics of life, in that it is unable to grasp that life depends on the interiorization of something external. As Goldberg and Willse note, biopolitics addresses life 'not as a closed, homeostatic system, but rather as an open, turbulent system' (281).
- 13 Near the end of *Bíos*, Esposito in a very comparable way opens a number of suggestive trajectories that should make it possible to break with the 'thanatopolitical' tendency of

biopolitics: Merleau-Ponty's notion of the 'flesh', which breaks with the imagery of the body in order to reveal 'the tissue of relations between existence and the world' (160); the notion of birth, and finally the idea of the norm as 'the immanent impulse of life' (194) that Esposito borrows from Spinoza and Deleuze.

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