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 unredemable 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 retribution 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 reenactment 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 Power 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 *Porous 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 unqualified 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 say [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 measure, or any “radical forms of self-sufficiency and unbridled sovereignty” can defend us from’ (xix–xxiv). 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 rearticulated 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 calculation and made knowledge–power an agent of transformation of human life’ (Foucault 1979: 143). 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 replacing disciplinary power, instead ‘dovetails into [disciplinary power], integrate[s] it, modifies it to some extent, use[s] it by sort of infiltrating it’ (242). 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’ (157).

Biopolitics, in other words, also consist 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 hygiene 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 Mauerpunkt 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. Before I start sketching out a more productive account of the juncture of biopolitics and trauma, I briefly focus on these 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 exemplar sites and figures, 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 fabric of everyday life (Nealon). By reconnecting biopolitics to sovereignty, and by understanding the sovereign (following Carl Schmitt) as ‘he who decides on the exception’, Agamben obscures the fact that biopolitics operates by effacing 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 trauma it generates, have become a vital structure of contemporary existence.

A second problem with Agamben’s return to biopolitics (to the camp) is that it ends up reinsating 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 _Mittelmann_, 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 st grupus 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 theorists 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-empts 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, mysogyny, homophobia and economic exploitation’ (Moglen 151, 159). Already in Canth’s seminal collection _Trauma: Explorations in Memory_ (1995), Laura Brown coined the notion of ‘inhibitive 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 Buels 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 metabolic life. Mika Ojakangas has argued that the exemplary subject of biopolitics is not the _Mittelmann_ 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 finesse 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 underscores 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 _Bis: Biopolitics and Philosophy_ (2006), _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. 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 prescribe) the attenuation 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 ‘inmunitary’ tendencies that perpetuate rather than minimize trauma.

**Foucault: the birth of trauma out of the spirit of govermentality**

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
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 _Bios_ 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 besets’ 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_. 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 “debts” 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 xii). 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 ‘fear... in that earlier immunization... 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 1); it is a ‘violent loss of borders’ that is not perceived ‘as pointless’ (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’ (500). This comes remarkably close to Freud’s seminal assertion, in _Beyond the Pleasure Principle_ (1920), that ‘we 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 he turns 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).1 Immunity and community are ‘at the same time juxtaposed[ed] 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.
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 traumatic crises, it is itself also a consequence of an inversion in the biopolitical dynamic. For Esposito, globalization 'expresses the decisive closure of the immunization 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 accidence 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 communities (in the guise of globalization), thus inciting an uncontrollable immunitary reaction (Esposito 2013b: 8). Immunitary 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 immunitory violence. The immune system is reconstituted 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 sacers or the Malcontents 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. 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 immunitory 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 immunitory 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, Performativity 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 (Bios 32–44).

3 There is no shortage of comparative studies of different accounts of biopolitics—often focusing 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 Geneviève Chikangangi.

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, Performativity 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.


7 If we emphasize biopolitical 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 upsets 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 inscriptions of sociocultural codes, see Esposito, Immunitas, 203–10. My focus on trauma highlights the individualizing complement to this radically de-individualizing tendency of biopolitcs. See, however, Goldberg and Wilke 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 (Lemke 3). PTSD is essentially a ‘socio-political category’ (Lockhurst 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 Brechtaupt traces trauma back to eighteenth-century German and Austrian empirical psychology, which he sees as ‘a science for understanding the human mind than a technique for transforming human beings’ through the development of technologies of self-observation’ (80, 82). Brechtaupt’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 and a lethal understanding of the term, it also suffers from an inability to decide whether biopolitics constitutes a return to the paradigm of sovereignty or rather only emerges at the disappearance of the sovereign model (Bios 40–41). For Esposito, sovereignty is to be understood as a manifestation of the tension between communists and immunitics, 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 ‘exclusion inclusion’ or ‘including exclusion’ (58).

12 This risk 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.

13 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 intertortation of something external. As Georgeanne Wilkie notes, biopolitics addresses life ‘not as an enclosed, homoeostatic system, but rather as an open, turbulent system’ (281).

14 Near the end of Bios, Esposito in a very comparable way opens a number of suggestive trajectories that should make it possible to break with the ‘chamánopolitical’ tendency of
biopolitics: Merleau-Ponty’s notion of the ‘flash’, which breaks with the imagery of the body in order to reveal ‘the tissue of relations between existence and the world’ (180); the notion of birth; and finally the idea of the norm as ‘the immanent impulse of life’ (194) that Espósito borrows from Spinoza and Deleuze.

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