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Biopolitics to Molecular Biopolitics: From Michael Foucault to Nikolas Rose

Sabina S, Department of Philosophy, University of Calicut, Kerala. email: sophiasabi@gmail.com

Abstract

Biopolitics introduces the innermost core of politics which is almost limited in body and life. It is not politics in the strict sense of the term. Instead, biopolitics requires a systematic knowledge of life and living beings. Biopolitics constantly shifts meaning in his texts. It refers to a specific political knowledge and new disciplines. For Foucault, life becoming biopolitical means, living beings enter into a new domain of political strategies and this movement was something radically new in human history. On the one hand, biopolitics assesses how the regulation of life processes affect individual and collective actors and on the other, it gives rise to new forms of identity. A new form of biological citizenship is formed by this. By following Foucault, recent studies of biopolitical processes focus on the importance of knowledge production and forms of subjectivation. The paper focuses the move from biopolitics to molecular biopolitics, where life itself is molecularized and this marks the beginning of a new era by changing the prevailing paradigms of human health and identity.

Keywords: *Biopolitics, Biological citizenship, Molecular biopolitics, Biosociality, Subjectivity*

Introduction

The analytics of biopolitics has its starting point in the theoretical perspective outlined by Micheal Foucault. The Foucauldian notion of biopolitics conceived body as an informational network rather than a physical substrate or an anatomical machine. For him, biopolitics takes hold of and controls all the phenomena of life exploring, the quality of population, reproduction and human sexuality, familial relations, health and disease, birth and death etc. According to Foucault, life has become the focus of an infinite amount of both micro and macro management strategies, which optimize health and thereby prolong life (1994e, 341). It is through particular disciplines that individuals are subject to both surveillance and modification strategies. As Foucault argued, the one thing that has become paramount in the modern age is life itself which can be managed and promoted through certain technological

developments, both anatomo-political and bio-political strategies throughout the population. Foucault himself claimed that medical power is at the heart of a society of normalization (1989, 197).

Medicines created new modalities of power and institutions and new discourses take hold of human life by shaping, organizing and extending it to a new level. The questions concerning disease and health were not only pertained to bioethics, but it entered into a new form by governing human life with all its capacities. In the *Birth of the Clinic*, Foucault identifies a break between old medicine in the eighteenth century and new medicine in the nineteenth century. Medicine is no longer characterized by the value of health, but by that of normality (40).

As Foucault pointed out medicine became a power to be used upon patients. Societies regulated this generalization of different pathologies and medicines penetrated in every sphere of life. The medical expansion resulted to change the status of life because medicines remained as an important part to maintain life in all its forms. Every form of life, body and its organs became a target of medicines. As a result, new kinds of risks arise with the medicalization of life and the multiplication of therapeutic interventions. Doctors documented patient's histories and treatment of illness. There was the facility to monitor the birth, hygiene rates of the population. Thus a new system and technology of power through medicine was carried out. Medicine thus developed a set of criteria to delineate normality and healthy. Today it is impossible to imagine a single aspect of life which is not identified by the medical domain.

One of the most influential reworking of the term 'biopolitics' comes from Nikolas Rose and Paul Rabinow who present their views by pointing out that the vital character of living human beings is to have life and not death as their *telos*. Rationalities, strategies and technologies of power in the twentieth century focused on the management of collective life and health. This became a key objective of governmentalized states and novel configuration of health and hygiene. In particular, the fundamental aspects of contemporary biopower manifest in biotechnologies and biosciences manufacture our understanding of life itself. In different ways, each have argued that biotechnologies allow for a novel view of life, one which Rose depicts as an "emergent form of life" characterized by trends such as viewing life at the level of the molecular rather than the organic, optimizing life through treating susceptibility rather than disease, and enhancing capacities rather than simply restoring health (Rose, 2007).

Molecular Biopolitics

Nikolas Rose notion of 'molecularization' means, a style of thought, of contemporary medicine which envisages life at the molecular level as a set of intelligible vital mechanisms among molecular entities, that can be identified, isolated, manipulated, mobilized, recombined in new practices of intervention which are no longer constrained by the apparent normativity of natural vital order (*The Politics of Life Itself*6).

Rose used the term molecularization to determine one's relation to oneself through the molecular phenomena which work at the molecular level. A new science directly links between what we do and how we conduct ourselves and what we are. The strategies, technologies and management of life now come under the area of medicine. In the words of Rose, "Medicine has been central to the development of the arts of government; not only the arts of governing others but also the arts of governing oneself (*The Politics of Life Itself*28). Thus health became central to the *telos* of living for many human beings. people come to experience themselves and their lives basically in biomedical terms.

Molecular medicine marks the beginning of a new era by changing the prevailing paradigms of human health and identity. The configuration of knowledge, power and subjectivity in human genome variations among populations is understood both as individual and collective human identities and also how we individually and collectively govern these differences. According to Rose,

The new molecular knowledge of human difference is being mapped out, developed and exploited by a range of commercial enterprises, sometimes in alliance with states, sometimes autonomous from them, establishing constitutive links between human differentiation and biovalue. New kinds of biosocial associations and communities increasingly define their citizenship in terms of their rights to life, health and cure and these active biological citizens demand that the particularities of their conditions be given weight in genomic biomedical research and the development of therapeutics (*The Politics of Life Itself* 185-186).

Biomedicine visualizes life at a molecular level and viewed body as a systematic whole. Here highly sophisticated techniques and experimentations intervened upon life. For this laboratory acted as a kind of factory for the creation of new forms of molecular life. Apart from this, the visualization procedures also made life amenable to think from the molecular level. In addition to X Rays and medical films, a lot of

screening devices made the interior organic body visible. Mammograms, ultrasounds, fetal images, and many other scans which operate through digital simulation made life more visible at its molecular level. Here organs were mobilized and were stored for becoming more potent and as objects of commodification. Also, the elements of reproduction like eggs, sperm and embryos, became separable from the human body and stored and mobilized to other bodies.

Molecular biopolitics concerns the ways in which molecular elements of life is mobilized, controlled and combined into processes which did not exist early. Life was molecularized and this molecularization was not merely a matter of framing explanations at the molecular level, instead, it was a reorganization of the gaze of the life sciences, their institutions, procedures, instruments and spaces of operation. Thus molecularization became central to the thought style of contemporary biology and hence to the practices and politics of contemporary biomedicine (Rose 62-63).

Subjectivation and Biosociality

Foucault points out the historical constitution of subjectivity in relation to the social practices, set of values, principles and codes for living. Subjectivity emerges from and is shaped by historical and culturally located experiences. What we take ourselves to be, becomes the affects of who we are. It is part of how we constitute ourselves. It is a matter of thought determining our being or our self-understanding in connection with more concrete practices. Mark J. E. Kelly in his article, 'Foucault, Subjectivities and Technology of the Self', remarked, that for Foucault, Subjectivity is not merely the passive product of impersonal historical processes, as one might have thought from his earlier accounts of the "subjection" of the subject in relation to power. Rather, he insists that the subject constitutes itself, a process that called "subjectivation," that is, using the techniques available to it historically, and doubtless under the influence of myriad factors outside its control (513).

The individual becomes the political subjects in accordance with relationships and interferences between different forms of the subject. As Foucault says, undoubtedly there are relationships and interferences between these different forms of the subject; but we are not dealing with the same type of subject. In each case, one plays, one establishes a different type of relationship to oneself (EW1, 290). Here, subjectivity is taken to be something that varies according to what one might call a social role. This implies that subjectivity is something that can be put on or removed like clothing. Foucault does not imply that our subjectivity instantly changes with our role. In order to take on a new role we have to constitute ourselves

in a different way. The notions of techniques and practices of the self imply that we have to learn how to constitute ourselves in certain ways in order to do so. Even though our situation affects our self-constitution, a new situation does not mean that all our practices change instantaneously. We acquire our practices which are habitual. Even though subjectivity is relative to practices, practices are themselves repeated habitually over time which implies continuity in subjectivity. Foucault is not talking about the transcendental quality of consciousness that has traditionally been identified as subjectivity. Rather, for him, subjectivity is identifiable purely with consciousness as an understanding that relates to a particular way of constituting ourselves. His position is that it is the way we relate to our consciousness that varies. Consciousness is not separable from historical conditions that lead us to relate ourselves in different ways.

By the second half of twentieth century, medicines took an active role in shaping subjectivities and thereby maximize and enhance vitality. Rabinow coined the term 'biosociality' to characterize new forms of collective identification that took shape in the age of genomics (*The Politics of Life* 23). He extended the concept with respect to Foucault's biopolitics. According to Rabinow, we are confronted with a new understanding of social relationships through biological categories. According to him, in the future this new genetics will cease to be a metaphor for modern society and will become instead a circulation network of identity terms and restriction loci around which and through which a truly new type of autoproduction will emerge, which I call "biosociality". If sociobiology is culture constructed on the basis of a metaphor of nature, then in biosociality, nature will be modeled on culture understood as practice (*From Sociobiology to Biosociality* 241).

The concept of biosociality stands in contrast to the concept of socio-biology to capture a "new" kind of social interaction as a consequence of developments within genetics etc. (Gibbons & Novas 2008, Rabinow 2008). Within the social and cultural sciences much attention has been dedicated to understand how the reclassification of many diseases shapes individual, as well as collective, identity formation and to explore the implications of genetic knowledge for how individuals understand themselves or relate to others. Moreover, another objective was to explore how these "new" identities might, through patient organizations create new relationships between scientific experts and lay-people by bringing forward new ways of knowledge production within the medical sciences.

Molecular biopolitics thus paved way for a sort of biological citizenship which is both individualizing and collectivizing. In individualizing, each individuals shape their relation with themselves in terms of knowledge of their somatic individuality. One identifies his own responsibilities for the health and illness of the body. In collectivizing, there would be a commonality of a shared somatic or genetic status. Such biosocial groupings generally share an identity. In the words of Rose, “The forms of citizenship entailed here often involve quite specialized scientific and medical knowledge of one’s condition: one might term this “informational biocitizenship”. They involve the usual forms of activism such as campaigning for better treatment, ending stigma, gaining access to services, and the like: one might term this “rights biocitizenship”. But they also involve new ways of making citizenship by incorporation into communities linked electronically by email lists and websites :one might term this “digital biocitizenship”(*The Politics of Life Itself* 135).

As Foucault pointed out, Greeks used some techniques to identify an aspect of the person to be worked on, they problematize it in certain ways, they elaborate a set of techniques for managing it and they set out certain objectives or forms of life to be aimed for (Foucault 1985). By means of biosociality, the biological life of the individual and collective subjects became the matter of the state. The state has to regulate and safeguard the whole sequence of developments from registration of births and deaths, to hygiene, production and marketing of pharmaceuticals. Here contemporary biomedicine renders the body to be visible, intelligible, calculable and manipulable at the very molecular level. The social citizens having their own biological trait gradually started to develop novel relations with medical specialists, clinics, and with the medical knowledge that cured their illness. Thus the body which involved in this process became a target for medical practices. The role of state was to engage in the measures for preserving and managing the collective health of the population, and to make health and life more safety. Biosociality entered into a new domain where the biological citizenship was enacted by means of demands upon state authorities. Thus, Rose assumption that the growth of biological and genetic knowledge along the technological practices emerge from the boundary between biology and society.

Conclusion

We cannot say that by twentieth century biomedicine has simply changed our relation to health and illness. But it has helped to make us the kinds of people we have become. This historical transformation in the self and the subject was identified and analyzed by means of increasing individualization and reflexivity. In the contemporary biopolitical era, individuals have become somatic individuals. Thus as

somatic individuals, human beings' individuality is experienced, judged and articulated upon themselves through the language of biomedicine.

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