

This text was written at the end of May 2020 in London, UK. Footnotes were added at the beginning of December as a way to account for the ongoing-ness of the Covid-19 pandemic – its extension in time, shifting dynamics, belated systems of reporting and accountability, the multiple crises embedded in it and varied tactics of resistance it has engendered.

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The Underlying

By Elisa Adami

A slew of new words and expressions has entered our vocabulary in the past few months. Some come with clear-cut angles and marked spatial-temporal boundaries: *lockdown*, *red-zone*, *quarantine*, *self-isolation*, *iso-pod*. Others stretch into a hazy limbo – *furlough* – or combine into oxymoronic pairs – *social distancing*. Vital supplies nestle in unimposing acronyms like PPE, yet the word's handy brevity does not make their shortages any less conspicuous. Meanwhile those who were previously deemed *low-skilled* are overnight upgraded to the status of *key workers* – but do not expect any improvement in pay or working conditions in return!

Unassuming and modest, the adjective *underlying* has started appearing in insistent combination with words such as *health conditions* or *medical issues* (see [Merriam-Webster's](#) automatically selected sentences reflecting current usage). In its new blanket use, *underlying* points to medical conditions, chronic illnesses and disabilities that, in combination with age, we are told, are the real factors determining the death of thousands of people from

the virus. This virus hits disproportionately the elderly and the vulnerable, we are assured. The garb of statistical fact is used here to cloak a eugenic claim, a social Darwinist worldview. The *underlying* singles out a group of people whose death it is meant to make somehow justifiable, socially acceptable and, to some, reassuring.¹ It serves to separate and sort out people along the lines of an ideal, normative scale of health and able-bodiedness, no matter how unreal and murderous that ideal actually is.

In this, the *underlying* is close to the Gallicism *triage*, another word which has seen a recent surge in popularity. In its original meaning, *triage* denotes the act of sorting items, such as coffee beans, according to their quality. In the dictionary of military hospitals, where it has been in use since World War I, it indicates the sorting of wounded soldiers into groups according to the severity of their injuries. In the management of the current pandemic, *triage* or *triage-like* practices were applied in hospitals, care homes and the community at large, to redirect precious but insufficient resources – depleted by more than a decade of austerity – to patients with a greater chance of survival: predominantly young and with no serious underlying conditions.

The idea of a class of people with underlying conditions is close to the notion of *risk group* that [Susan Sontag](#) discusses in *AIDS and Its Metaphors*. The 'neutral-sounding, bureaucratic category', as Sontag writes, inadvertently 'revives the archaic idea of a tainted community that illness has judged'. (46) *Underlying conditions* is a vague expression, indefinite enough to ward off scrutiny, capacious enough to contain whichever 'fault' does not conform with the abstract notion of a perfectly healthy and functioning body. Indicating what lies 'beneath or below' or what is 'basic and fundamental', underlying conditions are invisible, tucked away in deep structures, manifested only in the sudden flare of symptoms – a rash on the skin, a spike in deaths. Like the virus, they are undetectable to the naked eye. Although, in its current use, *underlying conditions* remains specific to medical practice, for it to be truthful, its scope should rather be stretched to include

¹ Observed from the vantage point of December 2020, the consequences of such eugenic policies are chilling. According to an ONS (Office of National Statistics) report that was published on the 18th of September, two thirds of the people who died of Coronavirus in England and Wales from March to mid-July were disabled people. While disabled people make up 16% of the UK population according to the ONS's criteria for self-reporting disability, up to mid-July, they made up 59.5% of deaths. See <https://www.disabilityrightsuk.org/news/2020/september/disabled-people-make-two-thirds-coronavirus-deaths-ons>

all those interlocking structures of discriminations that shape life in contemporary capitalist societies – race, class, work, gender, sexuality, money, education, able-bodiedness, citizenship, geography.²

The language we use, the language we are given, is a mirror of what [Johanna Hedva](#) calls the 'world's ableism'. A pandemic disables 'normal' life; it suddenly makes what was easy, accessible and ordinary, hard, out of reach and odd. Except that such 'normal' life has never been easy or accessible, ordinary or indeed normal for the chronically ill and/or disabled'. The world's ableism', Hedva writes, 'has always been a thing, it's just now getting closer to those who normally don't feel it'. What will we do with this newfound knowledge?

Hedva urges us to confront the ableist biases not just in our everyday language, but in the language we use to protest against it too. Slogans like 'take to the streets' or 'occupy the square' will always exclude those bodies who are too sick to get out of bed. Now that we are all home bound or have been (at least those of us lucky enough to have a roof and able to work from home), it's time to rethink what a revolution could be like. This revolution to come, which is already here, calls for a general strike: stay at home, refuse to work, refuse to go to school, refuse to shop, refuse to pay rent', refuse as much as possible to get sick or make others so'.³ As [Anne Boyer](#) writes: 'demonstrate in [y]our every action that the lives of the vulnerable matter, that the deaths of the sick and the elderly and the poor and imprisoned from this virus are unacceptable'. This revolution is and will be an act of communal care, and care is always inherently revolutionary as it 'demands that we live as though we are all interconnected' – which, of course, we are – thus invalidating 'the myth of the individual's autonomy' (Hedva).

2 In *The Right to Maim: Debility, Capacity, Disability* (2017), Jasbir K. Puar usefully introduces the term 'debility' to complicate the neoliberal discourse of disability rights. Debilitation refers to the biopolitical 'practice of rendering populations available for statistically likely injury', deployed both in the global south and in disenfranchised communities in the global north (xviii). In a context where four-fifths of the world's disabled persons live in the global south, it's crucial to consider the ongoing production of debility through colonial violence, war, occupation, settler colonialism, developmentalism, mass incarceration, environmental racism, and uneven distribution of resources, medical supplies, and basic care. These global inequalities are clearly on display in the nationalist rhetoric imbuing the current race to stockpile Covid-19 vaccine supplies in the global north, as well as in the evident imbalance of access to such resources in other parts of the world.

3 With hindsight, it's clear that this general strike is not something everyone can afford. With a paltry statutory sick pay of £95.85 per week in the UK and lacking other systems of support, even Covid-19 positive workers were de-facto obliged to go to their workplace. The right to refuse is also based on privilege.

There's another word now in vogue, that while pointing to our essential interconnectedness, has been perverted in its preposterous use. *Herd immunity* is a form of indirect protection from an infectious disease that occurs when vaccination rates in a population are high enough that a pathogen stops spreading, so that even individuals who would otherwise be vulnerable, such as babies or cancer patients, are protected. The vaccinated, immune bodies shield and protect the unvaccinated or immunocompromised person. There is a direct, etymological connection between herd immunity and vaccination. The word vaccine comes from the Latin *vaccinus*, meaning 'from cows', as the first vaccine preventing smallpox was obtained by injecting people with the similar but much milder cowpox virus. Herd immunity without a vaccine is slaughter.

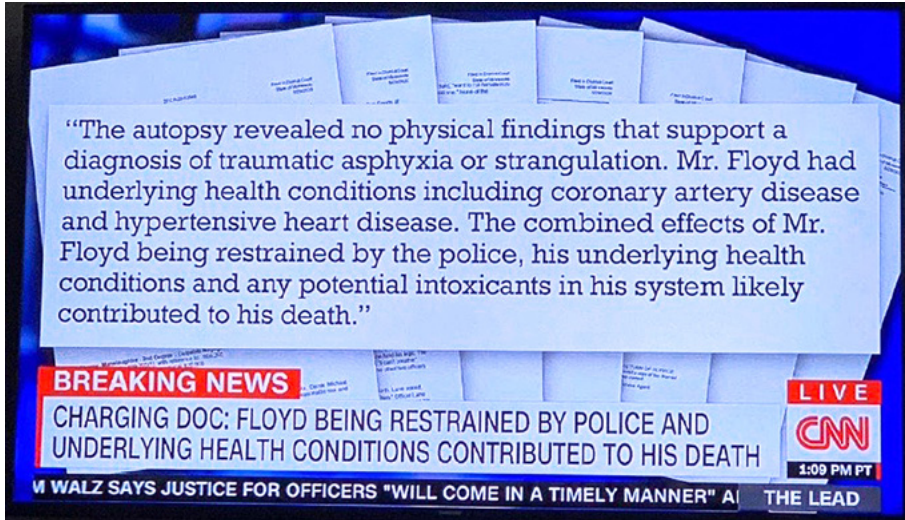
The expression herd immunity, as [Eula Biss](#) observes, is an unfortunate term, in that it's difficult to sever from the image of cattle waiting to be sent to slaughter or from the associate idea of herd mentality. Biss proposes trading the metaphor of the herd for that of the hive, which evokes a networked and interdependent collectivity: 'Honeybees are matriarchal, environmental do-gooders who also happen to be entirely interdependent'. And we are, of course, entirely interdependent too.

This interdependence, that some want concealed, is now in full sight: from disrupted supply chains, to the vital role of postal workers, transport workers and delivery services, from the tangible obligations of care we owe to each other to the spontaneous emergence of mutual aid groups. In the midst of capitalism's hierarchical systems of structural discriminations that show no sign of subsiding, and as governments hastily withdraw already paltry measures to shield vulnerable people, let us, the underlying, continue to build more permanent infrastructures of support and radical care.⁴

4 This is a call to all of us who, to different degrees, are victims of the structural carelessness of neoliberal states across the globe, many of which are already gearing up to undergo another decade of austerity. As Khairani Barokka and Annabel Crowley powerfully argue in their conversation 'Art School in a Pandemic', organized by UAL's Decolonising Arts Institute, this effort should be disability-led; that is, it should not side-line, but centre the work of disabled and chronically ill people and other oppressed and marginalized groups, who for decades have been pioneers in the building of such infrastructures. It should also acknowledge and learn from the rich historical lineage of radical mutual aid groups: from the Black Panther Party's survival program to the caring networks set up during the AIDS crisis. See: 'Artist Researchers In Conversation: Art School in A Pandemic' 10.09.2020, UAL's Decolonising Arts Institute: https://www.youtube.com/watch?v=qhbFMszAsM0&t=3022s&ab_channel=UniversityoftheArtsLondon

Coda

At the time of writing, George Floyd was murdered by a police officer in Minneapolis. Floyd's underlying health conditions were used in the coroner's autopsy as a cover and excuse for what was clearly a case of racialized police brutality.⁵



Breaking News, Charging doc: Floyd restrained by police and underlying health conditions contributed to his death, CNN. Author's Twitter screenshot, 30th May 2020.

Bibliography

Barokka, Khairani and Crowley, Annabel (2020) 'Artist Researchers In Conversation: Art School in A Pandemic' 10.09.2020, UAL's Decolonising Arts Institute: https://www.youtube.com/watch?v=qhbFMsZAsM0&t=3022s&ab_channel=UniversityoftheArtsLondon

Biss, Eula (2015) *On Immunity: An Inoculation*, London: Fitzcarraldo Editions

Boyer, Anne (2020) 'This virus', newsletter March 10th.
Available at: <https://anneboyer.substack.com/p/this-virus>

Gilmore, Ruth Wilson (2007) *Golden Gulag: Prisons, Surplus, Crisis, and Opposition in Globalizing California*, Berkeley: University of California Press

⁵ The killing of George Floyd and Breonna Taylor triggered worldwide a wave of anti-racist protests against police brutality and institutional racism, which was further compounded by evidence of the unequal impact of the Covid-19 pandemic on black and minority ethnic communities both in the US and the UK. 'The right to kill' Black people wielded by US law enforcement with relative impunity lies in a continuum with the 'let die' policy of structural racism that, as detailed by Ruth Wilson Gilmore, exposes Black people to much greater rates of premature death, including Covid-related ones.

Hedva, Johanna (2020) 'Get Well Soon!' Available at: <https://getwellsoon.labr.io>

Puar, Jasbir K. (2017) *The Right to Maim: Debility, Capacity, Disability*, Durham and London: Duke University Press

Sontag, Susan (1989) *AIDS and Its Metaphors*, New York: Farrar Straus And Giroux