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On the medicalisation of global politics: a conversation with Roberto Esposito

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Abstract This article explores the intertwining of politics and medicine by analysing how medicine has become politicized, and politics medicalized, as well as the effects of these dynamics on subjectivity, politics and the social. Rather than starting from a fixed research question or hypothesis, this work takes the form of a collaborative enquiry that "allows something to emerge" through social interaction. It unfolds through a series of encounters and reflections with renowned philosopher Roberto Esposito, whose thought has significantly influenced the social sciences and humanities and informs the core themes of this Special Issue. First, the article engages with the role of immunitary practices and metaphors in political life. Second, it enquires into the relationship between medicalized responses to political phenomena and the increasing individualization and desocialization these bring forth. Third, it explores how the protection of life is often accompanied by thanatopolitical consequences. By highlighting these issues, the dialogue seeks to transcend negative biopolitics and open new avenues for future research and the development of affirmative political life.

The Covid-19 pandemic has significantly affected global politics (as indicated by the rise of vaccine nationalism and the extension of state emergency powers) and everyday interactions (as shown by the breaking up of social relations and the creation of "Zoom communities"). It has also promoted sharp distinctions between subjectivities (e.g., healthy *vs.* sick or vaccinated *vs.* antivaxxers), thus fostering a growing interest within the discipline of International Relations (IR) in questions relating to the intertwined nature of

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politics and health (Friedmann and Marton 2025; Park and Seo 2025). A scholar who has significantly engaged with such questions long before the Covid "event" is the Italian philosopher Roberto Esposito, whose work has had an exceptionally wide impact on political theory, philosophy, sociology, and the humanities (Viriasova and Calcagno 2018). So far, however, his work has only left a marginal imprint on IR and Security Studies (see also Little and Vaughan-Williams 2017). This is surprising as even a partial glimpse into Esposito's oeuvre reveals a multiplicity of intersections with the concerns of the international. As recently remarked by Franke, 'Ostensibly, there should be much that brings Esposito and IR theorists together ... [as] ... Core topics taken up in his writings fuel standard debates in the field, and his claims in these regards are provocative if not menacing. Also, as one of the most influential thinkers on contemporary debates over biopolitics, there is a built-in attraction for Esposito's work ... ' (2018, 201). Some of the exceptions are Dillon and Reid's analysis of global liberal governance (2001), Vaughan-Williams notion of "immunitary borders" (2015), Bell's study on hybrid warfare (2012b), Debrix and Bader's engagement with horror in world politics (2012), Riemann's conceptualization of Private Military and Security Companies pace Esposito's work on sacrifice (2014), Weinfurter's engagement with regulatory emergency measures after COVID-19 (2023), as well as others borrowing aspects from Esposito's oeuvre (e.g., Nordin 2016; Burke 2013). In this article, we provide an outline of some of his works' key tenets, specifically exploring how Esposito's rethinking of biopolitics provides fruitful avenues for researching and conceptualizing the medicalization of/in global politics.

In Esposito's work, as will become evident in the subsequent discussion, the concept of "medicalization" defines the relationship—constantly shifting and mutually influencing—between medical and political practices that emerges in modernity. This relationship, as he himself explains in the interview below, is multifaceted, that is, it is constituted on various levels: it operates on a discursive level, as demonstrated by the theoretical-political lexicon of modernity—from Hobbes's *body politic* to the biological concept of the *nation-as-birth*; but also, and above all, on a practical level, where the control of life and of the social body—albeit in different forms—is a product both of Nazifascism and of consumerist neoliberalism.

Faithful to the Foucauldian lesson, which understands biopower as a productive construct subject to constant genealogical transformation, Esposito, however, does not limit himself to highlighting its negative and, so to speak, thanatopolitical aspects, as much of the literature inspired by the French philosopher has done (e.g., Dillon and Neal 2008; Mbembe 2019). On the contrary, he places at the centre of his reflection the possibility of an *affirmative biopolitics*—a 'politics no longer *over* life but *of* life' (Esposito 2013b, 77)—which represents the true analytical focus of the Italian philosopher and what distinguishes him from French critical theory. By rethinking biopolitics through the categories of *immunitas* and *communitas*, Esposito shows how our societies, both domestically and internationally, are traversed by exclusive tensions and closures, but also by communal forces through which lives can open up to a *bottom-up* multiplicity grounded in "the positivity of existence", and not in a presumed, and ontologically impermeable, political essence.

This article emerged out of virtual interactions with Roberto Esposito in the Fall of 2022. From these interactions, four interrelated themes emerged, which inform the structure of this article: first, the role of immunitary practices and metaphors in political life; second, the relationship between medicalized responses to political phenomena and the increasing individualization and desocialization these bring forth; third, the problematic relationship between the protection of life and its often thanatopolitical consequences; and last, the exploration of some key avenues for future research on the relationship between medicalization and politics, as well as possibilities for resistance to the biopolitical model to envision an "affirmative biopolitics" in the service of political subjects. Before engaging with these interactions, however, we will first introduce the key tenets of Esposito's thought to provide the contextual frame for the following exchange. In the conclusion, we reflect on possible lines of intersection between IR and Esposito's work, specifically how it aligns and contributes to the relational turn (Kurki 2022) and how it supports work that rethinks the discipline's conceptual and epistemological architecture (Chipato and Chandler 2024; Fishel and Agius 2024).

Community, immunity, and biopolitics in the thought of Roberto Esposito

Capturing the thought of a thinker with the magnitude of Roberto Esposito is challenging, to say the least. Condensed, his work can be described as engaged in a renewal of the Foucauldian project of an ontology of the present, or "ontology of actuality" (Foucault 2000, 319). He works "within, through, and across" the tradition of modern Western political philosophy 'while simultaneously turning it inside out ... traversing this tradition.' (Bird 2016, 152). Though his intellectual thought spans now over nearly five decades, he is best known for his political, philosophical project on community that is spread out over three volumes *Communitas* (2009), *Immunitas* (2011), and *Bios* (2008), within which he attempts to gaze at an "originary and intense sense of *communitas*" that will make it 'possible to trace the initial features of a biopolitics that is finally affirmative. No longer over life but of life.' (Esposito 2008, 157). As it is impossible to provide an outline of Esposito's work that gives justice to his thoughts within a short article section, we concentrate on briefly outlining central themes that provide the context for the following exchange.

Communitas

To begin, Roberto Esposito's philosophy is deeply shaped by his concept of the "common", with *Communitas* (2009) standing as a cornerstone in his thought. This text is not only a synthesis of Esposito's earlier reflections but also the foundation for many of his subsequent ideas. Here, Esposito

challenges the prevailing paradigm of political philosophy that views community as a property shared by individuals (e.g., ethnicity, culture, language, territory), a framework that leads to "inclusion/exclusion dialectics" (Serafini 2017, 216) where belonging is based on owning common characteristics. Such an approach assumes that community is a property that connects individuals (in terms of a wider subjectivity) and treated as a property that a group can possess or lose. In his own words:

the way the concept-term [community] had been used in twentieth-century philosophy as a whole ... [is] as a substance that connected certain individuals to each other through the sharing of a common identity. Based on this understanding, community seemed to be conceptually linked to the figure of the "proper": whether it was a matter of appropriating what is in common or communicating what is proper, the community was still defined by a mutual belonging. What its members had in common was what was proper to them—that of being proprietors of their commonality. (Esposito 2013a, 83)

Esposito's work deconstructs this notion, specifically focusing on rethinking the common. In the words of Richter: 'The backbone of Esposito's philosophy is his deconstruction of community as an ontological essence which connects, unifies or delimits its members.' (Richter 2016). He conducts this deconstructive move by employing an etymological-philosophical account, through which he explores the origin of community via the Latin communitas. Communitas combines cum (with) and munus, a Roman term carrying a bivalent meaning denoting 'a "task" "duty", or "law" and "a gift" ... which is to be given rather than received' (Esposito 2013b, 15). These two dimensions converge in a common obligation to give. Here, drawing on the work of Marcel Mauss, Esposito distinguishes between munus and donum (the unconditional gift). Whereas *donum* is given without obligation, *munus* carries an inherent duty of reciprocity, creating a system of interdependence. The communal bond, for Esposito, is thus not based on mutual possession or shared characteristics, but on an ongoing obligation to give. This fundamental obligation to give—whether in the form of goods, services, or sacrifice—forms the ethical and social basis of community. Community is therefore structured by a "negative obligation", not by identity or possession, emphasizing instead a void that constitutes individuals in relation to others. As Esposito explains, 'to share the munus means to share a constitutive lack, to be always in debt to somebody else with whom we do not share any specific characteristic.' Thus, community is not a "fullness", or something "owned", but rather an "emptiness", something shaped by "constitutive impropriety" (Esposito 2009, 3). Community, according to Esposito, is thus not a collective body of individuals coming together in a contract; rather, the defining characteristic of community is a debt to the other. Esposito argues that this continual obligation to give represents an "original flaw" in community members' identities, binding them to each other and blurring the lines of individual identity. By accepting the munus, individuals are drawn into a communal exchange that dissolves separateness, merging individual identity with the fabric of communal responsibility.

Because 'communitas' is the totality of persons united not by a "property" but precisely by an obligation or a debt' (Esposito 2009, 6), it makes community inherently (im)possible. As the 'com-munus is a "debt that binds us"'

communitas 'is a community without borders, limits or definition.' (Lynch 2019, 365). It is an ontological "no-thing" (Esposito 2009, 136). From here it follows that community only exists as the practical social bonds which form and maintain communal life in the absence of an ontological ground (Richter 2016). Community is thus not a fixed being, artefact, or achievable end goal but needs to be understood as a process or praxis. As noted by Bird and Short 'For Esposito, [the common] is neither "la chose publique" the "common wealth" nor a "common good" because the common is not a property or a common good, because the common is nothing but exposure to common being.' (2013, 10) This shift in perspective moves community out of the realm of the proper and a focus on what community is, onto 'what community does, as a condition or praxis which shapes the way in which we interact with each other' (Gill-Pedro 2019, 176), while simultaneously moving us 'away from the unitary individual or collective subject toward contingent relations which are always in negotiation.' (Lynch 2019, 365). Community is therefore not a single, bounded body of subjects or wider subjectivity but rather a relational force that disrupts the individual identity of the modern autonomous subject.

Immunitas

Deconstructing community is deeply intertwined with Esposito's subsequent examination of immunity, which operates through a different aspect of the same munus that forms the basis of community. While community involves sharing munus, an opening of existence that 'breaks down the barriers of individual identity,' immunity constructs these barriers 'in defensive and offensive forms, against any external element that threatens it.' (Esposito 2013a, 83) An immunized entity, as such, refuses to partake in the shared debt of community, thereby severing the constitutive bond of gift exchange. Immunitas can thus be understood as the inverse/negative form of communitas, where both concepts function dialectically: communitas initially involves the sharing of the munus, while immunitas entails exemption from this obligation (Richter 2016). This dialectic reveals that immunity is inscribed within the very logic of community and vice versa. In other words, while community presupposes the possibility of immunity, immunity simultaneously represents the negation of community. As Esposito explains, "If communitas is that relation, which in binding its members to an obligation of reciprocal donation, jeopardizes individual identity, immunity is the condition of dispensation from such an obligation and therefore the defence against the expropriating features of communitas" (Esposito 2008, 50). Immunity, in this sense, acts as an "antisocial defence", isolating the individual and denying the mutual obligations that constitute community.

Immunitas, then, is the "removal and nullification of the munus" (Serafini 2017, 217), rendering the immunized individual sine muneribus—exempt from the obligations and symbolic reciprocity that underpin community. It represents a form of self-preservation that, while necessary for maintaining life, simultaneously undermines the openness and interdependence that define communal existence. As Vaughan-Williams notes, immunity arises as a response to the perceived threat that communal obligations pose to individual identity (2015). The particularity of immunitas, which privileges the individual

by exempting them from shared obligations, then reflects modernity's broader emphasis on self-defence and individualism, a shift that substitutes communal organization for defensive ways of being. As Esposito observes, immunity protects the self by restoring boundaries jeopardized by the communal, thus reaffirming separation over interdependence. As such, no community can exist entirely free of immunization tendencies because *immunitas* preserves life by maintaining boundaries. While it safeguards life, it also reveals that community's essence depends not on possession or rigid identity but on vulnerability and shared interdependence. Immunity, in negating the communal, paradoxically underscores the fragility and necessity of the bonds that hold communities together.

Yet, immunity can, when overextended, threaten the very unity it seeks to protect.

Although immunity is necessary to the preservation of our life, when driven beyond a certain threshold it forces life into a sort of cage where not only our freedom gets lost but also the very meaning of our existence—that opening of existence outside itself that takes the name of communitas. This is the contradiction that I have sought to bring to attention in my work: that which protects the body (the individual body, the social body, and the body politic) is at the same time that which impedes its development.

It is here where we find the link between *communitas, immunitas* and biopolitics in Esposito's work.

Biopolitics/than atopolitics

The inherent risk of immunity to overextend and turn deadly manifests in Esposito's analysis of the Nazi regime. Seeking to preserve and "purify" German life, the Nazis embraced a vision of immunity that prioritized biological preservation. By interpreting threats to German life in biological terms, the Nazis justified policies of exclusion, sterilization, and ultimately extermination, viewing the eradication of perceived external and internal threats as essential to the preservation of the "body politic". This immunitary drive culminated in the grotesque inversion of life-preserving logics: the belief that life could only be safeguarded through the systematic application of death (Esposito 2011).

Esposito highlights the duality at the heart of Nazi ideology, where the preservation of life intertwined with its negation. While pursuing genocidal policies, the regime simultaneously promoted initiatives with ostensibly *pro-life* objectives, such as anti-cancer campaigns, restrictions on harmful substances, the advancement of organic farming, and the encouragement of vegetarianism (Esposito 2011). Physicians, traditionally tasked with preserving life, became pivotal figures in the Nazi apparatus, overseeing both public health initiatives and the machinery of extermination. This chilling duality reflects how the immunitary logic of preservation became indistinguishable from the logic of annihilation.

By situating the Nazi regime within the framework of immunity, Esposito demonstrates the dangers of its unchecked expansion. The immunitary logic that underpins modernity—intended to protect life by

managing vulnerability—can, when overemphasized, mutate into a force that isolates, excludes, and ultimately destroys the very life it seeks to preserve. Without recognizing this dynamic, the trajectory of ideologies like Nazism becomes difficult to reconcile. Esposito's analysis reveals that the immunitary paradigm is not merely a feature of totalitarian systems but a latent potential within modern politics itself, demanding constant vigilance to maintain the balance between protection and openness (2011).

Towards an affirmative biopolitics

Building on the dialectic between *communitas* and *immunitas*, Esposito advances the concept of "affirmative biopolitics", through which he seeks to reimagine the relationship between life and politics. At the heart of affirmative biopolitics is a call to reconfigure the balance between the common and the immune. Rather than dismantling immunity entirely—a proposal Esposito views as untenable—he advocates for a reimagined immunitary function that moves away from exclusionary barriers and toward relational filters. This shift entails disabling the apparatuses of negative immunization while simultaneously creating spaces for the common, spaces where life can flourish in its interdependence and shared vulnerability (Esposito 2013a, 87–88).

Esposito's affirmative biopolitics aims to recapture a form of politics that enables a "life in common". This life is not based on shared possessions or identities but on what Serafini (2024, 241) describes as 'the sharing of a lack, an improper.' It is a communal existence rooted in the acknowledgment of mutual exposure and the incompleteness of individual subjectivity. This form of community resists the totalizing tendencies of both exclusionary immunization and the homogenizing impulses of modernity.

While modern biopower has often wielded immunity in ways that constrain or destroy, Esposito identifies areas within its structure that can be redirected toward affirmation. Echoing Foucault's analysis of biopolitics as the governance of life through power/knowledge (Foucault 2008), Esposito reinterprets immunity as a dynamic process that inherently involves openness to external threats. For immunity to function, the outside must penetrate the inside, establishing a relational interplay rather than a rigid separation.

This relationality offers the potential for transformation. Immunity, Esposito argues, is not a static defence but a filter that mediates between life's vulnerabilities and its protections. Politics, therefore, can neither entirely suppress life's creative potential nor reduce it to a purely protective mechanism. Even amid the destructive forces of immunitary logic, life persists, resisting and exceeding the boundaries imposed upon it (Esposito 2011, 165–177).

The task of an affirmative biopolitics is thus to reorient the immunitary paradigm from one of exclusion to one of relationality. Rather than acting as an exclusionary barrier that isolates the self from the other, immunity can function as a porous membrane that negotiates the relationship between inside and outside. By transforming immunity into a mechanism that fosters connection rather than division, affirmative biopolitics opens new spaces for the common. These spaces are not utopias free of conflict or vulnerability but dynamic arenas where life's interdependence and openness can be sustained.

The broad contours of Esposito's work outlined in this section also form the basis for the four following exchanges that took place in fall 2022, conducted as written interactions with the Italian philosopher around the following themes and questions:

- 1. The role of immunitary practices and metaphors in political life
- 2. The relationship between medicalized responses to political phenomena and the increasing individualization and desocialization these bring forth
- 3. Why is the protection of life often accompanied by thanatopolitical consequences?
- 4. What are key avenues for future research on the relationship between medicalization and politics? What possibilities for resistance to the biopolitical model can be envisioned and how can we work towards an "affirmative biopolitics" in the service of political subjects?

Interaction 1: The role of immunitary practices and metaphors in political life

Malte Riemann and Antonio Cerella: The rationale behind this Special Issue is to investigate the myriad ways in which medicalization is impacting international relations, both as a system of interaction between states and as a discipline, as well as to highlight specific practices through which medical governance is enacted in global politics. Over the last decade, IR as a discipline has become increasingly interested in the role that medical knowledge plays in diverse areas, such as security (Elbe 2010; Nunes 2013), governance (Davies and Harman 2024), war (Bell 2012a), conflict resolution (Riemann and Rossi 2020), terrorism (Howell 2007), migration (Vaughan-Williams 2015), and others (Ozguc and Rabbani 2025; Riemann 2023; Voelkner 2019), and interest in such investigations has soared after the Covid-19 pandemic. Your work has highlighted the importance of such investigations well before the outbreak of Covid-19. In your recent work Common Immunity (2022), you offer a rich genealogy of the complex relationship between politics and medicine. In your book, you argue that during modernity, there was a metaphorical incorporation of immunology through concepts borrowed from the political-legal sphere. In your view, what role do political and medical metaphors play in shaping social life?

Roberto Esposito: A reciprocal relationship between politics and medicine has always existed, both in terms of lexicon and metaphors and in terms of social practices. It suffices to mention the biological roots of fundamental political concepts, such as *nation*—which etymologically derives from the Latin word *nationem*, literally meaning "birth"—or the enduring metaphor of the "body politic". One can argue that the semantic transfer between medical language and political nomenclature has been continuous, with evident effects on both political and medical practices.

However, the politicization of medicine, in its most intense form, emerges with the modern age and, more specifically, at the end of the eighteenth century. Even under the old regime, societies faced increasingly aggressive epidemics and the challenge of protecting populations living in ever larger urban centres. It was during this period that the population ceased to be seen merely as a resource to be exploited by the sovereign and instead began to be regarded as the very source of his power—something that needed to be

Yet it was during the French Revolution that health, quantified in large numbers, was formally incorporated into the social domain and became subject to political intervention. Much like poverty, disease affecting a given population came to be viewed as a matter of national interest, thereby extending medical authority beyond the health sector into the broader political sphere.

The influence of medical and biological metaphors on politics and society has always been strong and far-reaching. By conceptualizing society as a large human body—for example, the famous frontispiece of Hobbes' *Leviathan*, which depicts a giant formed by the union of many small human bodies—Western political thought has taken social life as an object of protection and governance. Susan Sontag (1978), in her seminal book *Illness as Metaphor*, highlighted the risks inherent in the political use of medical concepts. However, the dangers of the medicalization of politics are no less serious, particularly because of the risk of translating social problems into the language of pathology. In such cases, the "cure" of society loses its metaphorical character and acquires an intensely medical and literal meaning.

MR and AC: The recent Covid-19 pandemic has brought public health debates to the forefront of global attention. Around the world, we have witnessed various immunitary strategies deployed by states—ranging from the pursuit of "herd immunity", as in the case of Sweden, to more restrictive and controlling measures, such as those adopted by Italy and China. What do these differing approaches reveal about the medicalization of global politics?

RE: To tackle the Covid-19 pandemic, countries around the world implemented a range of policy responses. The "herd immunity" model was not only adopted by Sweden, but also, at least initially, by other Scandinavian countries, the United Kingdom, and, outside Europe, the United States. Similarly, the "lockdown" or social distancing approach was not confined to China and Italy; it was eventually adopted by many countries, though with varying levels of intensity. However, it would be inaccurate to claim that China and Italy implemented social distancing in the same way. In China, the restrictions enforced by political authorities were considerably more stringent and violations of lockdown rules could result in arrest. This level of coercion was never reached in Italy. Nonetheless, social control in Italy was more pronounced than in countries, such as France, Germany, or Spain, partly because Italy was among the first European nations severely affected by Covid-19, particularly in the northern region of Lombardy, which experienced a high death toll.

These differences, however, do not obscure the fundamentally immunitary logic underlying all responses to the pandemic. Even the deployment of vaccines—which eventually supplanted herd immunity and isolation strategies—can be situated within the immunitary paradigm. Indeed, vaccination represents the archetype of immunization. Of course, these responses reflect different forms of immunization. The herd immunity strategy embodied a thanatopolitical form of immunization, insofar as the deaths of the most vulnerable were deemed an acceptable form of collateral damage. In contrast, enforced isolation constituted a form of negative biopolitics aimed at preventing contagion, but at the cost of widespread desocialization. The vaccination program, by

comparison, can be interpreted as a more sustainable form of immunization—one that is protective rather than destructive of the social body—though this interpretation is not universally accepted. Nonetheless, considering the millions of deaths worldwide, the distrust or outright demonization of vaccines appears difficult to justify.

MR and AC: One of the issues the pandemic has brought to the forefront is how the medicalization of policymaking—driven not only by governments but also by critics demanding more medically informed decisions—has contributed to obscuring the decision-making process behind a multilayered shield of technical expertise, potentially making it more difficult to identify and assign accountability (Degerman 2020). In your view, how is this technocratic turn affecting or transforming the way we understand and practice politics?

RE: In the event of a pandemic, it is inevitable that technical committees composed of epidemiologists and virologists are consulted—particularly when confronting an unknown and highly aggressive virus, as was the case with Covid-19. It is also understandable that, under such circumstances, the guidance of the World Health Organization (WHO) is considered. That the WHO has not always made the right decisions or has sometimes failed to act or communicate in a timely manner is another matter. However, if the question pertains to the broader relationship between politics and technology, then the issue becomes more complex. There is, in fact, a constitutive link between immunization and technicization. Technology is a dominant component of what might be called immunitary democracies, and it tends to neutralize political decision-making. In the face of a global threat to life, political deliberation gives way to what is framed as the objective interest of the population as a whole—on the assumption that this population is a homogeneous entity, rather than a composition of social segments with often conflicting interests. In this context, medical expertise appeared to substitute for political debate, with adverse consequences for both politics and medicine.

At this point, the dominant public figure has become that of the "expert", who appears to speak on behalf of society as a whole. This category extends beyond medical professionals to include various "knowledge holders" perceived as neutral and thus beneficial to the social body. In several countries, even the management of the economy—severely impacted by the pandemic—has been entrusted to "technicians" presented as politically impartial. In Italy, for instance, the political government was replaced by a so-called technical government, supported by nearly all political parties in the name of national interest. This development has marked a significant retreat from political engagement in favour of technoscience, a shift that, over time, risks undermining the foundations of democracy itself. Indeed, technical governments—typically led by committees of experts—are structurally limited in their capacity to make substantial political decisions and, as a result, tend to serve a fundamentally conservative function.

MR and AC: Let's bring this conversation to the international level. While the pandemic has, in many respects, contributed to the fracturing of a communitarian vision of international relations, policy makers still frequently invoke the notion of an "international community". From your perspective, can we meaningfully speak of a community of states? If so, what kind of immunitary logic might be at play in such a "community"?

In your book A Philosophy for Europe: From the Outside (Esposito 2018), you explore the possibility of constructing a European political space as a unitas multiplex—a unity grounded in diversity. Do you think this vision remains viable in our current "pandemic" times?

RE: In terms of international relations, the pandemic has had an ambivalent impact. Initially, it led to a deceleration of globalisation. One need only recall the cancellation of flights from China to numerous global destinations, followed by the reduction of transatlantic flights between Europe and the United States. Even within Europe, mobility was significantly disrupted—at least temporarily—by public health measures adopted independently by individual states, which were not always coordinated or aligned. Economic relations were similarly strained, not only due to the pandemic itself but also because of factors external to it, such as U.S. protectionist policies under the Trump administration and the effects of Brexit. The latter has notably isolated the United Kingdom and produced a range of negative consequences, which are only now, belatedly, becoming fully apparent. The pandemic exacerbated these challenges, ultimately contributing to a fragmentation of the idea of an "international community".

Subsequently, however, the situation began to shift. Firstly, efforts to keep the virus out of national borders proved futile—after all, viruses easily cross borders. Secondly, scientific research on vaccines necessitated and facilitated the sharing of scientific information. Today, purely national science is both meaningless and impracticable. Indeed, the rapid development of vaccines was only possible through collaboration among pharmaceutical industries across multiple countries. This further demonstrates that, despite its many limitations, globalization is an irreversible process from which there is no turning back. As I argue in my book, the strong global demand for immunization was another unifying factor among nations. Ultimately, relative safety against the virus can only be achieved if vaccination coverage extends worldwide. However, this process—the complex interplay between community and immunity—is inherently contradictory, as evidenced by the highly unequal distribution of vaccines. Wealthy countries have secured far more doses than low-income nations, which often lack the technology necessary for local production.

The tension between community and immunity can never be fully resolved, as it continuously generates new political struggles. This dynamic is evident within Europe as well. Today, amid the ongoing war in Ukraine and despite the pro-Ukrainian stance of almost all European governments, emerging challenges are making European integration increasingly difficult.

Interaction 2: The medicalization of political phenomena

MR and AC: Elsewhere you argued that "to belong entirely to the originary communitas means to give up one's most precious substance, namely, one's individual identity, in a process of gradual opening from self to the other" (Esposito 2013a, 84). And you expand, "by overlaying the legal and medical semantic fields, one may well conclude that if community breaks down the barriers of individual identity, immunity is the way to rebuild them, in defensive and offensive forms, against any external element that threatens it" (Esposito 2013a, 85). How do you think the Covid-19 crisis has affected the relationship between community and individual identity? Additionally, have these effects manifested differently at the local, state, and international levels?

RE: As I have already noted, the relationship between community and immunity is intrinsically antinomic. From a logical and etymological standpoint, these are two opposing terms derived from the Latin *munus*—which means law, service, but also gift. *Communitas* relates affirmatively to this notion, while *immunitas* denotes exemption from it. Those bound by the common law of mutual care are part of a *communitas* in its original sense, whereas those exempt from it are immune.

Although the two concepts are logically opposed, they are nonetheless historically intertwined. There has never existed, nor will there ever exist, a community without immunitary mechanisms—those intended to protect it from internal conflicts, the primary one being law, without which a community would disintegrate and implode. However, we must be cautious that these immunitary mechanisms do not become more burdensome than the risks they are meant to guard against, to avoid generating what might be called an immune disease. Indeed, if immunitary mechanisms exceed a certain threshold, they can produce greater harm than the evils they seek to prevent, ultimately leading to the dissolution of the community itself.

It can be argued that Covid-19 has made this antinomian dialectic even more evident. On the one hand, the interests of the global community, as well as those of individual states, necessitated the strengthening of immunization efforts against a deadly virus in all the forms we have previously examined. On the other hand, this in several cases pushed immunitary mechanisms beyond the community's threshold of tolerability. While this was especially pronounced in non-democratic states, such as China, the risks of social laceration—that is, the erosion of *communitas* in favour of *immunitas*—have also been experienced, albeit to varying degrees, within democratic societies. Although emergency measures were necessary, they have at times nearly transformed the state of emergency into a prolonged state of exception. Fortunately, at least in the West, this risk appears to be diminishing due to widespread vaccination programs and the weakening of the virus.

Interaction 3: Immunization and thanatopolitics

MR and AC: You once argued that "although immunity is necessary to the preservation of our life, when driven beyond a certain threshold it forces life into a sort of cage where not only our freedom gets lost but also the very meaning of our existence" (Esposito 2013a, 85). Have we seen this threshold being passed in the recent crisis, or have the meanings of freedom and existence merely been reworked?

Roberto Esposito: It is difficult to answer this question in general terms, as the choices made by governments and even by citizens have varied greatly. Regarding Italy, my impression is that, overall, democratic institutions have held up. Admittedly, especially during the first year, there were serious uncertainties, delays, and inadequacies in managing the virus, which caused significant social and medical damage. Additionally, governments sometimes exhibited a degree of intrusiveness into people's lives that was not always necessary. On a strictly institutional level, the delicate balance between the

executive and legislative branches—that is, between government and parliament—deteriorated in favour of the former, with an excessive use of emergency decree laws, which bypass parliamentary scrutiny. Even in the pandemic's second phase, errors and failures persisted, not to mention the extremely high number of victims in Italy.

That said, it must be recognized that without the intervention of governments and institutions, we would not have been able to withstand the attack of the virus. I am referring not only to central institutions but also to local ones and professional bodies-doctors, nurses, and voluntary associationsthat made a decisive contribution to mitigating the devastating effects of Covid-19. Of course, much more could have been done, but it must be remembered that the outbreak of the pandemic was sudden and terrifying.

MR and AC: In your recent work Common Immunity (Esposito 2022), you return to the problem of political immunization and its logic of exclusive inclusion. You write (2023, 53): '[...] immunity, to be perceived as such, must always presuppose a segment of the population that is excluded from it for social, economic, racial or gender reasons. However much the dividing line moves forward, inclusion can never become integral and indeed tends to contract in favour of exclusion. Every social function is crossed and divided into two opposing parts, one internal and the other external—just think of intercontinental journeys, vertically divided between the luxury cruises of the rich in frantic search for entertainment and the migrations of the poor in desperate search of asylum. It is as if modernity, instead of reunifying the divisions of caste or class that separated pre-modern societies, inscribed them once again within itself, separating not only different populations, but also different social strata within them. In this sense, neither the rights that are said to be "human" nor the juridical category of "person" have succeeded in blocking this process of division but have actually ended up strengthening it through new forms of exclusion.'

Given this modern paradigm of exclusionary capture, do global migratory flows have the potential to challenge the logic of immunity, or do they inevitably reinforce it? Moreover, why does the legalistic human rights regime fail to subvert the immunitary logic you describe?

RE: Human rights, as codified in legal norms, cannot fully overcome the mechanism of exclusionary inclusion because the law itself is structured by this dynamic. Many philosophers—such as Hannah Arendt, Simone Weil, Walter Benjamin, and René Girard—have highlighted that law does not equate to justice. While justice is inherently common and oriented toward the entire human community, the law is always immunitary, functioning to protect some at the expense of others. According to these thinkers, law can be understood as a secularization of ancient sacrificial logics rooted in revenge. Though legal systems are indispensable—no state can function without them—they invariably serve to safeguard specific groups rather than all inhabitants equally. If law were applied uniformly to every individual, it would cease to function as law and instead become a social fact, negating the need for juridical norms

This structural exclusion explains why human rights violations have been persistent throughout history. The concept of citizenship, for example, inherently excludes some, as illustrated by the gap between jus soli ("right of soil") and *jus sanguinis* ("right of blood"). For rights to be truly common rather than immunitary, all inhabitants of a territory—including recent migrants—would need equal rights, which is not the case. Therefore, citizenship necessarily draws boundaries and distinctions that exclude others. As a result, migration has never been addressed through a *just* framework but only a *legal* one.

Interaction 4: Medicalization and affirmative biopolitics

MR and AC: You once stated that 'the moment the immunitary dispositif becomes the syndrome of our time, one that is both defensive and offensive, community presents itself as the chosen locus—the real and symbolic form—of resistance to the excess of immunization that relentlessly entraps us' (Esposito 2013a, 85). In your view, is resistance to the medicalization of politics and the politicization of medicine still an open possibility? If so, what forms might such resistance take today?

RE: In some respects, the intertwined processes of the politicization of medicine and the medicalization of politics appear irreversible, given that biological life has become the focal point of contemporary socio-political practices. Yet, alongside the risks associated with this overlap, it is essential to recognize the potential opportunities arising from the public use of medical knowledge. The concept of social medicine was once a cornerstone of the welfare state—particularly in the post-war decades—but over the last forty years, neoliberal policies have largely dismantled these structures. For instance, in the United Kingdom, access to healthcare outside private means has become increasingly difficult, creating significant challenges, especially for European immigrants, many of whom are now returning to their countries of origin. Similarly, in the United States, health care reform efforts under the Obama administration—and the subsequent opposition under Trump—have become a central axis of political contention between Democrats and Republicans.

In short, the struggle against the biopoliticisation of health must recognize the complex realities at play. In many countries, privatization poses a significant threat to public healthcare systems. One critical form of resistance today is the political fight against Big Pharma's control over medical research through patents. The health of entire populations hinges on this battle. States occupy an ambivalent position in this dynamic—simultaneously supporting private healthcare interests while bearing responsibility for public health. The campaign against restrictive medical patents exemplifies an affirmative biopolitics, seeking to prioritize collective well-being over profit-driven exclusion.

MR and AC: Do you see any positive effects of medicalization, particularly in terms of opening up opportunities for political change? For instance, recent movements like Black Lives Matter and calls to defund the police have reframed issues through a public health lens. Alternatively, do such medicalized approaches ultimately serve to reinforce the status quo?

RE: I think I have already partially answered this question. Today, medicalization by public institutions—even if not directly led by states—would have an overall positive effect. What we need to be careful about is not confusing social deviance with medical pathology. For example, drug use is primarily a social problem, which only later may be treated as a medical condition. Under the influence of right-wing forces, there have even been attempts to classify

homosexuality as a pathology. We must respond to such reactionary outbursts with the utmost severity.

Regarding Black Lives Matter, I'm not familiar with the specific proposal you mention, but at first glance, it seems like a positive project. Disarming not entirely, of course—the police could help reduce the violence disproportionately exercised against Black communities. More broadly, it would be necessary to disarm as many individuals as possible, delivering a significant blow to the arms industry by blocking or more strictly regulating the sale of weapons to private citizens. If the resources saved were then redirected to public health, the outcome would be even better. I would argue that strengthening and rebuilding the public healthcare system—especially after decades of unfortunate neoliberal policies—would be a positive biopolitical approach capable of countering the thanatopolitical forms that persist today.

MR and AC: If resistance is unlikely to transform the current biopolitical regime, do you still see possibilities for an "affirmative biopolitics" as outlined in your work? What role do you envision for, as you put it, "a new alliance between national and international politics"? In other words, what political form do you have in mind when you speak of common immunity at the conclusion of your recent work?

RE: You touch upon a very important yet delicate point, especially today, as the strong winds of war are blowing. Nevertheless, the globalization of certain problems is a reality that cannot be ignored. This is true for environmental policies, where the efforts of individual nations are clearly insufficient. The same applies to health policies, which increasingly depend on scientific research that necessarily requires an international scope. Naturally, balancing the interests of different states—such as the United States, China, and Russia is not easy. Perhaps it is somewhat easier within Europe, where the major states—Germany, France, Italy, and Spain—can find more common ground. Yet, even within Europe, divergences persist, for example, between the centralnorthern and Mediterranean countries. In any case, collaboration at this level is imperative and, sooner or later, inevitable.

Towards openness or in lieu of a conclusion

This article began with a review of key aspects found within the thought of Roberto Esposito. This provided the opening for the ensuing dialogue structured around four interactions aimed at exploring the intersection of politics, medicalization, and community with the notion of an affirmative biopolitics emerging as a central idea and connecting thread throughout these exchanges. While the imperative to safeguard life frequently engender immunitary mechanisms that curtail individual freedoms, reinforce structural exclusions and lead to thanatopolitical consequences, Esposito identifies pathways for an affirmative biopolitics, particularly through the reinforcement of public healthcare, the contestation of privatization, and the regulation of corporate monopolies in medical research. The challenge, he asserts, lies in fostering a political framework that reconciles national sovereignty with global cooperation, particularly in addressing transnational crises, such as public health and environmental degradation. While biopolitical regimes often function through exclusionary mechanisms, he envisions the potential for a reconceptualization of immunity—one that shifts from a defensive paradigm of exclusion to a collective and inclusive form of political life.

But where does this leave us in relation to the wider discipline of IR, and possible areas of overlap with Esposito's work? This article has sought to show that Esposito's rethinking of biopolitics—particularly his critique of immunitary logics and his insistence on the political productivity of life itself—opens up novel analytical pathways for analysing how life is governed, regulated, and (de)politicized. Crucially, his notion of an affirmative biopolitics moves beyond a critique of sovereign power characteristic of much Foucauldian and Agambenian inspired scholarship in IR (Dillon and Lobo-Guerrero 2008). While important strands of biopolitical IR have traced the destructive implications of security-driven governance (Dillon and Reid 2001), Esposito challenges the discipline to think toward forms of political life not defined by closure, exclusion, or immunization. His reconfiguration of communitas as constitutively open and relational brings into sharper focus possibilities for theorizing post-sovereign/statist forms of belonging, which IR, as a discipline shaped by state-centrism and territorial imaginaries, has often struggled to conceptualize (Chen and Krickel-Choi 2024). By positioning communitas not as a homogenous unity but as a site of shared vulnerability and differential coexistence, Esposito's work aligns with attempts that challenge the dominant IR tendency to think political order in terms of bounded collectivities and exclusionary logics. Specifically, his insistence that community entails a mutual obligation to exposure rather than protection from the other invites a rethinking of global political life that resists both statist containment and cosmopolitan abstraction by rethinking community as a space of shared vulnerability where difference is not eliminated or assimilated but sustained and affirmed. This is particularly resonant considering recent efforts within IR to reimagine political subjectivity through relational ontologies (Bashovski and Rossi 2023; Kurki 2022), posthumanist frameworks (Burke et al. 2016), and Indigenous epistemologies (Tickner 2015), all of which foreground entanglement and interdependence as ontological and epistemological starting points.

Esposito's work can thus be read as an invitation to rethink IR from a relational perspective and to challenge its conceptual architecture, particularly its reliance on spatial binaries (inside/outside, domestic/international) and autonomous subjectivities ('sovereign man/state') that underpin conventional notions of political order (Ashley 1989; Riemann 2025; Walker 1992; Weber 2010). This architecture constrains how IR imagines both political agency and community, rendering the global as a site of exception or abstraction rather than one of relational embeddedness (Walker 2010). In this context, engaging with Esposito's biopolitical account offers a way to push these critiques further by foregrounding the embodied and affective dimensions of international politics (Wilcox 2015). In this, Esposito's work could find alignment with IR's increasing engagement with East Asian cosmologies (Bilgin 2024; Guzzini 2024), particularly those posing a challenge to the liberal ontology of autonomous, pre-social actors through a focus on dynamic interaction(s) (Qin 2016; Shih 2024). Esposito's immunitary paradigm aligns with these interventions by emphasizing that political life is sustained not through insulation from the

¹ We thank Reviewer 1 for pointing us in this direction.

other, but through constitutive openness and interdependence. His work introduces a biopolitical perspective that brings to the forefront the affective, embodied, and immunitary aspects of relationality. In contrast to East Asianinspired engagements, which place emphasis on dialogical or processual conceptions of relationality that emphasize the co-constitutive nature of actors and the embeddedness of identities within webs of social relations, Esposito draws attention to the ever-present risk of instability and excess that life introduces into any political configuration. Indeed, Esposito's reading of communitas shows that relations are not merely a product of mutual recognition or intersubjective ties but always marked by a constitutive impropriety: a shared lack or incompleteness that resists closure and stable identity (Esposito 2013a). This emphasis on the "improper" highlights how community is formed not through possession (of qualities, identities, relations), but through exposure to what exceeds and unsettles the self, thus revealing that the conditions of being-with are inherently unstable and entangled in shared vulnerability and openendedness. As such, Esposito's notion of affirmative biopolitics calls attention to how community is not only formed through relations of co-dependence but always already haunted by the impropriety of its constituent subjects.

Engaging with these theoretical interventions on community and the possibility of an affirmative biopolitics can add additional perspectives on contemporary global challenges. For example, Esposito's critique of exclusionary immunitary paradigms could provide a theoretical basis for rethinking how states manage borders and asylum. His call for a relational, open conception of community challenges the prevailing securitization of migration (Huysmans 2006), suggesting alternatives that prioritize shared vulnerability over exclusion. This approach aligns with emerging scholarship advocating for more inclusive and ethical approaches to global migration governance (Ní Mhurchú 2014; Squire 2020). Indeed, his work functions as an important reminder that the current discursive practices found within debates on migration are indicative of the intimate relationship between practices supposedly protecting the body politic and the life-negating consequences this might have. It might also find resonance beyond the corporeal by being expanded into the realms of digital sovereignty and cybersecurity. Here, Esposito's insights into immunity as a protective mechanism could be applied to examinations of how states regulate cyberspace and how these respond to digital "viruses". The metaphor of immunity, with its dual functions of protection and exclusion, could illuminate tensions in international cybersecurity policies, such as the balance between digital openness and restrictive data sovereignty measures (Zeng, Stevens, and Chen 2017) while also shedding light on the formation of "online communities" (Rothermel 2020) and their implications for global social and political cohesion.

The question of political cohesion opens up another intersection between Esposito's frameworks and IR via IR's increasing engagement with populism, particularly in relation to its biopolitical dimensions. Scholars have examined the populist exploitation of biopolitical fears, framing the nation as an immunized entity against external threats (Löfflmann 2022; Rossi 2025). Esposito's analysis of the immunitary paradigm could deepen our understanding of how populists mobilize exclusionary narratives and how such dynamics might be countered through more inclusive and relational political imaginaries. Related, a posthumanist IR framework inspired by Esposito could also transform discussions on ecological crises and international environmental law. By emphasizing interdependence and the dissolution of rigid boundaries between human and non-human actors (Chipato and Chandler 2024), Esposito's ideas might inform thoughts for transnational environmental governance and foster a politics that views ecological sustainability as a shared responsibility rather than a site of competitive sovereignty. Indeed, his work can provide fruitful avenues for responding to Fishel and Agius recent remark that '[t]he borders between the human and non-human world are sites of inquiry that require attention if we are to understand and rethink concepts of security and relationality in different terms.' (2024, 14).

These potential applications highlight the relevance of Esposito's thought for IR and how it can provide scholars with additional tools for rethinking foundational assumptions of sovereignty, community, and the international by opening up alternative pathways towards a more inclusive, relational, and lifeaffirming form of global community beyond the exclusionary logics of international relations. However, there are also areas where IR is distinctly equipped to engage with aspects that Esposito's framework only pays limited attention to, as it remains largely Eurocentric, insufficiently addressing coloniality, racism, and white supremacy as foundational elements of modernity (McMahon 2018). Indeed, while Esposito centres the Holocaust as paradigmatic of modern violence, his framework is largely silent with regards to colonial violence and systemic white supremacy. Here, especially those avenues opened up by postcolonial and critical IR, are well-positioned to expand Esposito's framework beyond a mainly Eurocentric perspective by emphasizing colonial and racialized forms of subjugation (see, e.g., Anievas, Manchanda, and Shilliam 2015; Henderson 2013; Howell and Richter-Montpetit 2019).

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