Bioethics in the Times of Contagious Populism

As I write this short piece, several social protests are happening in Costa Rica, where I live. The messages that protestors are sending out are very confusing, even contradictory. However, in the midst of this chaos, it’s still possible to identify certain emotions and narratives. There is plenty of frustration, fear, anger. The economic crisis exacerbated by COVID-19 has caused an increase in unemployment, which had already been growing rapidly during the last few years. Using conspiracy theories and false information about the SARS-CoV-2 virus, anti-democratic groups are taking advantage of the situation in an effort to destabilize the political and constitutional order.

Much of this looks like a generic description that could easily be valid for a large number of countries in many regions of the world. This is not a coincidence. Humanity is going through a variety of simultaneous crises that can be defined as a systemic crisis. Climate change has been worsening year after year, while the community of nations still can’t gather the necessary political will to do what needs to be done to tackle this emergency. On the other hand, many political crises have erupted around the world, fueled by years of growing inequality and continuing injustice. And, during the last decade, we have been dealing with a concatenation of economic crises that many experts interpret as an unequivocal sign of the collapse of the global economic system.

It is precisely these entwined crises that enabled the SARS-CoV-2 pandemic: intense globalization, accelerated during the last 3 decades; extreme environmental degradation; and a crisis of legitimacy of intergovernmental institutions. These factors have determined the course of this pandemic that we are currently living through.2

The structural and long-standing causes of this systemic crisis are constitutive parts of the economic and political systems that reproduce the oppression, exploitation, and exclusion of entire populations. Although in the course of history there have been significant transformations to correct some of these injustices, certain social sectors continue to oppose these changes and advocate maintaining certain privileges.

One of the most contributing factors that has led us to the situation we are experiencing today is growing inequality. Inequality has gradually tightened the threads of the social fabric, and is causing them to break. The consequences are dire. The turn toward authoritarian populism is one of those consequences. We have seen it in the USA, in Brazil, in El Salvador. In Costa Rica we came very close to that outcome two years ago during the 2018 Presidential election. However, even though the populist alternatives did not win the popular vote, they have been causing political instability, and an authoritarian populist candidate is very likely to win the next election.

When the social contract seems to work fine just for a few people and not for all, the very notion of politics as the means through which a society creates the common good disappears. And that is what is happening in many countries. Millions of people in the world live in conditions that clearly demonstrate the social contract does not exist for them. Yes, they have duties, but they have no rights. On the other hand, “total billionaire wealth reached USD 10.2 trillion at the end of July 2020, touching a new high after the year’s V-shaped rebound in asset prices. This level surpasses the previous peak of USD 8.9 trillion, reached at the end of 2017”3 while an equivalent of 305 million full-time jobs have been lost in these months.4 This is what inequality looks like.

The social conditions that cause the most marginalized and excluded to develop non-communicable diseases such as diabetes, hypertension, and obesity (which also expose them to a greater risk of becoming seriously ill of COVID-19) are deeply connected to the social and cultural factors that push many people toward supporting authoritarian populist politicians. Paradoxically, the growing distrust in democracy and intergovernmental institutions, such as the WHO, seems to end up working against the interests of the most vulnerable and dispossessed.

In such a context, the field of bioethics faces several very complex and urgent challenges. The production and distribution of health and disease cannot be separated from those socio-economic and political conditions that constitute the breeding ground for a populist
During this global crisis, because populist leaders promote xenophobic ideas in society, identifying categories of the deserving and undeserving ill. The way in which several governments have responded to the COVID-19 pandemic provides many examples of what Speed and Mannion explain. How many are experiencing additional burdens, during this global crisis, because populist leaders promote xenophobic, homophobic, ableist or ageist narratives, that secure them the favor of “the people” who elected them? Furthermore, I consider that this current crisis is serving as a perfect storm for populist regimes to advance necropolitics strategies, in a way that would have been almost impossible under the previous circumstances.

Recently, Speed and Mannion published another paper about populism and health policy (2020) in which they continue to explore how the recent upsurge in rightwing populism creates a specific set of barriers and challenges for access to healthcare and the health of populations, based on the analysis of three case studies: UK, USA and Italy. In these three cases the authors found appeals to ‘the people’ emphasizing threats, imposed by certain social groups (migrants, for instance), to public’s health and safety. Implicit in all three cases, they argue, is a distrust of evidence-based policy interventions and the vilification of professional expertise. This issue, clearly, should receive more attention from bioethicists. Besides that, populist leaders’ benefit from inflamed public outrage and moral panics because in that way they can easily sidestep political negotiations, which are viewed by their popular base as unnecessary and weak. Speed and Mannion (2020) explain the populist rhetoric in this way: “…through notions of regret, nostalgia and the loss of past cultural identities with the aim of attenuating the potential for expressions of ‘mutuality and solidarity’. In all of these definitions there is an emphasis on the need to distinguish between the people and the elite, and furthermore to demarcate precisely which social groups comprise the people and which social groups are viewed as outsiders or the ‘other’.”

In several countries ruled by authoritarian populists, alliances between political leaders and extremely conservative religious authorities have taken place. In a political move that plainly denies the separation between the State and religious beliefs, both the political leader and the religious leader seek a mutual gain to concentrate power. We have seen this happen recently in Hungary, Poland, Turkey, Brazil, Nicaragua, and the USA. As a consequence, the attacks on freedom of thought and expression start to undermine science and public health institutions. In some countries, even academia has been under persecution. In Hungary, for example, the Gender Studies program of the Central European University was expelled from the country. Similar situations have also occurred in Brazil. Furthermore, recent research shows that the social phenomenon known as Christian Nationalism is an integral part of the populist turn in the USA and in many other countries.

This alliance between populist leaders and religious authorities frequently operates through the weaponizing of morally sensitive issues linked to sexual and reproductive human rights such as abortion, emergency contraception and sexual diversity. In Nicaragua and El Salvador, for example, the complete criminalization of abortion was the result of negotiations between populist leaders and religious authorities. And now, this strategy is being used by the populist leaders of Brazil and the USA at a regional and international level at the Organisation of American States (OAS).

Based on this state of affairs I consider that we, bioethicists around the world, should ask ourselves some difficult and urgent questions regarding the very conditions of possibility for our field to keep existing as we know it. For instance, we need to consider whether or not global bioethics can fulfill its fundamental objectives if the populist shift turns into a tide? Furthermore, how can bioethics be relevant in public policy, healthcare settings and research in countries where populism is getting stronger?

Finally, and more importantly, if authoritarian populism continues its contagious growth, how can bioethics honor the historical legacy that constitutes the very foundations of this field?

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