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"The Child in the Basement: States of Killing and Letting Die"

The Child in the Basement

Ursula Le Guin's "The Ones Who Walk Away from Omelas" tells the tale of a city, Omelas, where the happiness and wellbeing of its inhabitants depend on a small child being constrained to and humiliated in a small putrid broom closet. It is critical to Le Guin's fiction-based ethical wager that Omelas' happiness is not ideological in Althusser's sense; nor is it naïve. It is experientially unmediated, materially substantive, and morally desirable. This happiness is what every average Joe and moral philosopher would wish for. But it is, nevertheless, dependent on a child being constrained and humiliated in a cramped space and on this being known by all who inhabit Omelas. Some actually visit the child's fetid chamber. Some have merely heard of it since they were children themselves. But every member of Omelas must assume some relationship among her present personal happiness, the present happiness of the millions inhabiting Omelas, and the present suffering of one small human being. Some offer facile excuses for preferring their happiness to the child's. At this point, they reason, the child is "too

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degraded and imbecile to know any real joy," so destroyed and so used to her destitution that liberating her would do more harm than good. Others face the true paradox. For them "their tears at the bitter injustice dry when they begin to perceive the terrible justice of reality, and to accept it." Others leave Omelas. Not en masse. They leave one by one. "The place they go is a place even less imaginable to most us than the city of happiness. I cannot describe it at all. It is possible that it does not exist. But they seem to know where they are going, the ones who walk away from Omelas."

"The Ones Who Walk Away from Omelas" was conceived as a fictional counterpoint to William James's "The Moral Philosopher and the Moral Life" and more broadly to the moral philosophy of American pragmatism of which James was a leading voice. James begins his essay with the position that "there can be no final truth in ethics any more than in physics, until the last man has had his experience and said his say." This ethical position was deeply influenced by the semiotic musings of his colleague, Charles Sanders Peirce. More specifically James borrows Peirce's understanding of the temporal and modal structure of the "final interpretant" and applies it to the question of ethical truth. For Peirce the interpretant is a sign that establishes a relationship between two other signs—what Paul De Man understood to be the act of critical reading. Ethical readings of the kind that interested James have a specific temporal and modal structure: the future anterior. They are the "toward which the actual," as the sum total of all interpretants, "tends." It is what will have been the ultimate truth, good, and justice, after every last man has had his experience and his say.

Le Guin disagrees with this account of time, possible worlds, and ethics. Why she disagrees opens a productive avenue for critically engaging the imaginary and practical

relationship of late liberal subjects and institutions to the unequal distribution of life and death in democratic orders. Le Guin's alternative ethics depends on altering three ways in which liberal subjects normally encounter the social time, meaning, and scale of suffering and lethality. First, as opposed to those who would read ethics from the perspective of ends, Le Guin insists that, because there is no horizon in which this child could be incorporated into the material and emotional good of the city without that good being compromised, the ethical nature of the relationship between the residents of Omelas and the child in the basement cannot be deferred to some future anterior perspective—what will have been the meaning of this suffering from the perspective of a future interpreter we cannot as of yet know. As a result, the ethical relationship that links the citizens of Omelas to the child in the basement must be radically present tense. Second, any goods generated from the kind of misery found there must be seen as socially co-substantial as well as temporally nontransferable. My happiness is substantially within her unhappiness; my corporeal wellbeing is part of a larger mode of embodiment in which her corporeal misery is a vital organ. As a result, the ethical imperative is not to put oneself in her place, nor is it to experience the anxiety of potentially being put in her place. Le Guin rejects such ethics of empathy. Instead, the ethical imperative is to know that your own good life is already in her broom closet and, as a result, either you must compromise on the goods to which you have grown accustomed (and grown accustomed as thinking of as "yours") or admit that these goods are more important to you than her suffering. To be sure, Le Guin seems to provide readers an exit from this grim worldview. Some residents, though only one by one, walk away from Omelas. Why does she allow them to do so? Perhaps Le Guin could not bear the claustrophobic character of her ethical statement. But

perhaps the world they walk into compromises the good—and the goods—in order to liberate the child. Finally, the nature of the suffering that interests Le Guin is ordinary, chronic, acute, and cruddy rather than catastrophic, eventful, and sublime. Every so often the child in the basement is given a kick. But for the most part her misery is a quieter form of abjection, despair, and impoverishment. There is nothing spectacular to report. Nothing happens that rises to the level of an event. Life drifts into a form of death that can be certified as due to "natural causes." As a result any ethical impulse dependent on a certain kind of event and eventfulness flounders in these closets.

This essay is not a critical reading of Le Guin's story. Even less is it an extended reflection on American pragmatics. Instead I want to use these as a point of departure for engaging this special issue of the *South Atlantic Quarterly* on "Killing States: Lethal Decisions/Final Judgments." In this essay I examine the forms, modes, and discourses of lethality in contemporary Australia, focusing first on the contemporary carnal conditions of indigenous life and second on recent state security measures said to be a reaction to the post 9/11 world. I do so in order to understand the dynamic conditions that qualify one kind of lethality as "state killing" and another as a more amorphous state of "letting die" And I do so in order to understand why present tense modes of live and dying are transformed into future anterior modes of the proper life. My argument is that a specific catachresis between the security state and neoliberal market—between the sovereign state and biopolitical state—animates contemporary late liberal attitudes towards various forms of living and dying that so interested Le Guin. What makes this catachresis interesting theoretically, as well as socially, is that it is comprised of qualities of state practice at once and the same time apprehensible by a Schmittian model of the sovereign

state and by a Foucauldian model of the biopolitical state. Australia is a good example of how this catachresis is unfolding in late liberal societies. As will become clear, Australian forms of governmentality have strong institutional and discursive ties to the US neoconservative movement. Prime Minister John Howard advocates state powers that would enhance the government's ability to designate friends and enemies and to declare special legal statuses for enemies that would cast them outside normal democratic principles and procedures. At the same time, Howard's government has advanced the biopolitical regime of the neoliberal global market ever more deeply into the recesses of the social order, producing and distributing divisible forms of life, qualities, vitalities, and borders as well as their agencies and powers. The market does this not through the kinds of spectacular events that the sovereign state causes, references, and defends against, but though the kinds of events whose visibilities are so dispersed into the background conditions of ordinary life that to refer to them as events seems strange and awkward. It is the contention of this essay that if we want to understand state killing in contemporary late liberal societies then we need to look at how this dynamic intersection of the security state and neoliberal market—the sovereign state and biopolitical state—helps secure a specific "imaginary" about the agencies of life and death, making the content of different kinds of ethical statements and practices practical or impractical, self-evidently true or absurd, coherent or incoherent, sane or mad.

In the Basement

Late liberal societies hardly lack the kinds of broom closets that so interested Le Guin. And, no less than the citizens of Omelas, members of these societies are fully aware of the existence of these broom closets in their polis and make decisions about the relation between them and their own wellbeing. These fetid spaces are often the occasion for public hand wringing, outrage, and scandal. In Australia, for instance, indigenous rural and urban communities are open closets of poverty, disease, and despair. Since 1969, one year after the federal government was given the power to legislate on behalf of indigenous Australians, the Commonwealth government listed health as one of four domains for indigenous development. In 1976 the Commonwealth government commissioned the House of Representatives Standing Committee on Aboriginal Affairs (HRSCAA) to conduct a review of Aboriginal health. It released its report in 1979, the contents of which were so scandalous that the Commonwealth Government initiated a \$50 million five-year Aboriginal Public Health Improvement Program in response. The program, administered by the Department of Aboriginal Affairs, focused in particular on inadequate water, sewerage and power systems in rural Aboriginal communities. viii Unfortunately, the crisis in indigenous health has continued to make front-page headlines, periodically prompting the organization of special inquests and parliamentary committees at the federal and state level and the reorganization of government agencies responsible for indigenous health, education, and welfare. This longstanding and appalling state of indigenous health periodically prompts the question of what, or who, is to blame, and, consequentially, what is to be done.

It is a somewhat arbitrary decision to begin the history of the lethal conditions of indigenous worlds in 1969. Since colonization, British administrators, the Australian

state, and a variety of domestic and international publics have asked and answered the question of what and who is to blame for the fetid state of indigenous life. Prior to the federal government listing health as one of four critical domains in indigenous affairs, not merely indigenous health but the rapid loss of indigenous life was discussed, explained, and managed in terms of a series of historically fluctuating accounts of the causes and cures of social pathology. In the early years of Australian Federation the lethal conditions of indigenous life were justified in Social Darwinian terms. "Full-blooded" indigenous subjects would be allowed to live a somewhat traditional life as they faded into human evolutionary history, while "mixed bloods" would be slowly interbred with the white population until all traces of cultural and genetic difference disappeared. From the perspective of a future world where indigenous people would be museum pieces, the immediate suffering of living people will have made ethical sense. But is this temporal location of the ethical end of indigenous suffering and death unique to Social Darwinism? Or is the ethical truth of the fetid conditions of indigenous life still apprehended through the future anterior—a form of future in which this misery would have been redeemed?

Contemporary answers to the question of who or what is to blame for the appalling conditions of Aboriginal health pivot between discourses and imaginaries of the social and individual causes of poverty. The Australian Institute of Health and Welfare, a bureaucratic arm of the federal government, reports a "relationship" between "socioeconomic status and health...with people at the lowest socio-economic levels experienced the highest rates of illness and death." In Australia, indigenous people are the poorest of the poor. And so, not surprisingly, in the period 1996-2001, the life expectancy at birth was estimated at 59 years for indigenous men and 65 years for

Australian females in 1998-2000.^x And although Australian Bureau of Statistics reports that "after adjusting for age differences between the populations, Indigenous Australians were twice as likely to report their health as fair or poor as non-Indigenous Australians," they also note that the statistics that they compiled are "likely to be underestimates of the true rates of illness in the Indigenous population because of the under-identification of Aboriginal and Torres Strait Islander people in these data collections."

The statistics are dramatic, but the diseases are not. The typical illnesses that inflict indigenous people are chronic and endemic, infectious and cumulative, rather than spectacular and catastrophic. They are the illnesses of the poor, typically staphylococcal and streptococcal infections, parasites such as scabies and giardia circulatory diseases, diabetes, respiratory diseases, musculoskeletal conditions, kidney disease, eye and ear problems and mental and behavioral disorders. It can be hard to see these illnesses in their normal physical state. Their effects on mortality are usually slow and corrosive. One thing leads to another. For instance, the chronic nature of Streptococcal A infections helps contribute to diseases of the circulatory system for indigenous men and women that lead to hospitalization rates two to three times the rates for non-indigenous men and women. The risk of septicemia from chronic staphylococcal infections—which are common and for the most part untreated—on rural communities is constant. And even in indigenous communities with functional health clinics the treatment of cruddy health moves through the international divisions of race. For instance, in the indigenous communities where I live and work, health care policies stipulate that "sores"—that might be streptococcal or staphylococcal infections but in any case are never culturedare only treated if a person has more than six on her body at any one time even though in many cases the sores are necrotic and cellulitic.

In other words, the agent of infection may be pathogenic but the vector of infection is related to socioeconomic factors—to who you are, and to where, how, and with whom you live. Xii As a result, the answer to the question of what, or who, is to blame for the stubborn persistence of indigenous ill health can be quickly attached to contemporary accounts of the causes and cures of poverty, and especially to what is considered a social as opposed to an individual vector. In Australia, after more than a decade of conservative leadership under Prime Minister John Howard, Australia has witnessed a distinct shift from a strong social welfare state to a form of neoliberalism and its concomitant economic and a dominant discourses of privatization and the individualization of wealth, value, and destiny. During his government, Howard has pushed through the privatization of state holdings including the airlines, telecommunication, and health care; has roll backed social welfare; has assaulted the trade union movement; and has shifted the source of public care from the state to the private individual and family. Xiii

Given that discourses of poverty, ill health, and social pathology are increasingly saturated, especially at the state and business level, by the logic of the neoliberal market, it should come as no surprise that the Australian Institute for Health and Welfare tempers any argument that poverty causes ill health with a bureaucratic proviso that "socioeconomic status does not alone explain the variations in health status that exist between groups in society." According to this argument, to understand health status one must look beyond socio-economic status to individual risk and "behavioral" practices.

Socioeconomic status is not a risk factor for ill health according to the AIHW. The sentence "poverty is a risk to your health" is not sensible within its language-game. Behaviors that put one at risk are associated with individual choice: immunization, smoking, diet and exercise, and high blood pressure. However we critically read this discursive separation of the social nature of poverty and the individual nature of behavior—and we should, I think, read this separation critically—it would still seem to create and conserve an explanatory space that links poverty to some supraindividual cause, a phenomena not reducible to the aggregate of individual choice. And yet, it does not—or not necessarily. For some reason, this separation transforms the social causes and social distributions of lethality into the responsibility of the individual, or her culture. State killing and its public sanction are transfigured into a more amorphous agreement that people are killing themselves. Indeed, separating the socieconomics of poverty and the behavioral choices of individuals seems to make it much more difficult to understand the state's withdrawal as a form of state killing.

Sweeping out the broom closet

To understand how this separation sinks into various social worlds in such a way that that those who suffer most from the socioeconomics of poverty take most responsibility for this suffering, we need to move more closely into the nitty-gritty of everyday social life within the broom closets of late liberal states. Take for instance an interaction between a young indigenous man in his late thirties and his family. The young indigenous man's social profile is typical of most people his age living in the community.

No matter the horrific nature of the following account if you met him, you would often see him in good spirits. This young man characterizes himself as an alcoholic. Like everyone in his family, he has had "sores" (staphylococcal and streptococcal infections) on and off since he was a child, bearing the scars on his body. He has high blood pressure but does not take his medication regularly. He was hospitalized for congestive heart failure, as his mother was in her last stages of oral cancer. His father died of a stroke when he was in his teens. His mother's youngest brother died years before of kidney failure associated with septicemia. His younger brother has a congenital heart condition. Three weeks after he was released from the hospital, his eldest sister was taken to the hospital with septicemia. The treatment resulted in massive congestive heart failure. Although told by doctors and family to stop drinking, this young man started drinking within a week of his release from the hospital. And, what would perhaps be more surprising to the sensibilities of many Australians, he demanded that his family members drive him to a local shop to buy alcohol with the money he had saved during his hospitalization. When family members refused, he angrily told them he could do what he wanted with his body. He knew the risks. They were his to take. How he gambled with his life his business. These were his words, "risk," "gamble," "my body." Only the future could say whether he won or lost his gamble, was right or wrong in his approach to this world of misery.

Forty years his senior, his aunt vehemently disagreed not only with his account of the location of his risk, but also with the underlying logic of his social imaginary. To his statement that his body was his alone, she replied, "No, that is not your body that is my body. When you die my body will suffer and die." When she referred to her physical risk,

this woman was not simply referring to a generalizable empathic form of grief. She was not saying, "I will mourn you as an individual." Her brother was this young man's father. Thus she and he share "one body": They are both *murrumurru* (long yam), an ancestral being from which they both substantively descend as surely as an average non-indigenous Australian believes that she shares the genetic substance of her mother and father. In other words, the woman was attempting to mobilize a discourse of socially cosubstantial corporeality being against her nephew's social imaginary of individuated bodies engaged in private wagers. His language of privatized loss, and its incumbent discourse of individual risk, was not met by the risk of another private loss, but by an appeal to a cosubstantial distribution of life, health, and social being—a position much closer to Le Guin than her nephew.

The state and businesses do not greet these social imaginaries of lethality, individuality, and responsibility in the same way. They amplify and channel the nephew's rather than the aunt's social imaginary into agencies of social life in such a way that the one is sensible, practical and productive while the other is insensible, impractical, and sterile. By the time the aunt makes her argument, the language game of individual risk has already organized social, economic, and political life increasingly organized around the neoliberal view of her nephew—that bodies and values are poker chips in individual games of chance and that the social is an impediment to the production of value. This view ramifies socially; and ramifies especially hard on the poor. As Craig Calhoun concisely put it, privatizing risk makes "individuals bear the brunt of hardships that are predictable in the statistical aggregate without effective mechanisms to share the burden, let alone reduce the risk." Privatizing risk creates and fosters a language game in which

the social is practiced as nothing more than an aggregate of individuated risk calculators working according to mathematically predictable econometric models. I am not in you. You are not in me. We are merely playing the same game of chance whose truth lies not here and now between us but there and then in who wins and who loses. No one is killing me. I am killing myself. Maybe...we'll see...the future will tell.

"Are you killing yourself, yes, you are. And we will no longer help you do so."

This is the answer that the current federal government gives in response to the question of what, or who, is to be held accountable for the lethal conditions on indigenous communities. Cultural and social logics of exactly the sort articulated by the aunt are, according to Prime Minister John Howard, an impediment to the maintenance of a unified social fabric and to the fostering of an entrepreneurial spirit among indigenous people.

Indeed, they are said to be the cause of poverty along with longstanding federal and state commitments to indigenous social welfare. When indigenous people stop seeing their social worlds from the perspective of local cultural sense or from state-backed social welfare then they will emerge from poverty and with this emergence gain the health that all other Australians have.

Then, then, then...local men and women are quite familiar with the temporal ethics of this future anterior. Needless to say, it is the aunt who is sober, the nephew who is not; the aunt who is outside the logic of life as a set of privatized risks, the nephew who is not. Nevertheless, as an "incentive" to more indigenous people to take up the nephew's position, Howard has committed his government to withdrawing federal economic support from rural indigenous communities as part of the "mainstreaming" of indigenous people and policy. Is this withdrawal, seen throughout late liberal worlds, a form of state

killing? Howard would say, clearly not. And beside him would sit many indigenous men and women. Noel Pearson, an Aboriginal activist, has famously and forcefully argued that state welfare, when applied to indigenous peoples, is a technique of numbing indigenous and non-indigenous people to the radical state of dysfunction in Aboriginal communities. For Pearson, the indigenous subject is so destroyed and so used to her destitution that only liberating her from a failed social welfare net and local social imaginaries will save her. In the future, according to Howard, Pearson, and others, the young man's stultifying life will be shown to have been the vigorous beginning of a new day for indigenous welfare. The evidence won't be in for quite some time, of course.

But what if we do not accept that the social welfare net and local social imaginaries are not working in some general way but only in a specific way? Why aren't they seen to be working? What isn't working? Take, for example, local policies in many indigenous communities of not treating staphylococcal and streptococcal infections until a person has at least six active infections on their body. There have been several reasons given to me why this policy is in place in poor indigenous communities. One reason given is that health officials have to assess the risk of creating a drug resistant form of staphylococci or streptococci as opposed to the value of clearing a person of infection.

So, this reasoning goes, since indigenous persons living on indigenous communities will be constantly re-exposed to staphylococci and streptococci, their bodies should be allowed to fight off the infection until antibiotics are absolutely necessary. This risk analysis might make sense if it were not for the fact that these infections are rarely if ever cultured and that their treatment has not changed over the course of the last twenty plus years. When I first began living in indigenous communities in north Australia twenty-two

years ago, amoxicillin or penicillin would quickly cure the infections I had. Presently, doctors on indigenous communities say that they continue to do so. Doctors in the US say they don't and prescribe amoxicillin-clav (Augmentin). On amoxicillin-clav my infections recede within a week. On amoxicillin or penicillin they can persist for months and then re-emerge—the same is the case for my indigenous friends in Australia. How much would it cost to culture the various sores infesting indigenous Australians? How much to treat them with the proper antibiotics?

These questions need not be asked or answered when we are dreaming of future worlds in which no one has these sores or these life expectancies even as others are never impeded in their quest to accumulate as much wealth as possible. But the actual costbenefit analysis occurring is not the balance between the risk of untreated staphylococci or streptococci verses the risk of developing a drug resistant form, but the risk of untreated staphylococci or streptococci within certain populations and the cost of investing in poverty stricken communities for the short or long term. The presupposition underlying the treatment of infections in indigenous communities is that the communities themselves will remain fetid. And, within a neoliberal state, any social investment that does not have a clear end—a projectable moment when input values (money, services, care) can be replaced by output value—is not merely economically suspect but morally suspect no matter the life-enhancing nature of the investment. Take, for instance, a quite effective program on rural indigenous communities, The Community Development Employment Project (CDEP).

The CDEP is an indigenous-specific work plan that was established in 1977 and run by the Aboriginal and Torres Strait Islander Commission (ATSIC) until the Howard

government dissolved the ATSIC. As Jon Altman and M.C. Gray note, CDEP has been described as "a labor market program, an alternative income support scheme and a community development scheme," but whatever it is CDEP has raised the personal income of rural indigenous men and women. xvii This basic fact, that a state run social program increased the quality of life for the most disadvantaged, was judged a failure, however, because it did not project its own end—the movement of indigenous workers out of the program and into the market. As a result, the Howard government has radically cut back positions available in the program and increased the reporting requirements for receiving social welfare. The young indigenous man I mentioned above was denied a position on CDEP because of cutbacks to the program. To be sure, when CDEP was a more robust alternative, he moved in and out of it. But even this use of the program increased the gross numbers of days he didn't drink. Why isn't the cancellation of this support of life seen as a form of state killing—a form of the death sentence? On the contrary, withdrawing this life support is considered a moral good. Somehow the refusal of this form of life contributes to the happiness of a majority of citizens, even though their own mortality and economic wellbeing has continued to increase irrespective of the presence or absence of the CDEP.

We should not be surprised by this way of assessing failed forms of state welfare. After all, the neoliberal weak state and strong market does not produce and distribute life, its qualities, vitalities, and borders, evenly or equitably. Nor do all forms of lethality produce the same qualities, visibilities, and intensities as others. Lethality is apprehended and perceived, is discussed, explained, and managed, in terms of historically fluctuating accounts agency, eventfulness, sociality, and normality. Even tsunamis, earthquakes, and

hurricanes that generate terrific waves of empathy and generate moral capital for those who demonstrate outrage leave in their wake a nonplussed public. When the waters recede and the ground stops shaking empathy also evaporates as ethical sense settles back into doxic accounts of poverty, its causes and consequences. Cost re-emerges as a central issue for how to calculate who can or should be protected, relocated, cared for. Here we see how prescient Le Guin's suspicion of the ethics of empathy is. Empathy asks us to put ourselves in someone else's shoes. What would it be like to be them? To be in this tidal wave, that fetid broom closet, that cultural condition? And yet, this very act—this ethical gesture—initiates a separation between you and me. I am not substantially the result of your tsunami or your staphylococci. As a result to give to you can end up seeming like a taking away from me because mine seems to be mine. Never has Le Guin's basic point that all goods are generated in a system of distributed misery seemed so hard to fathom, so impractical, and yet so close to liberal homes.

Captive Audiences

I would be surprised if most Australian citizens would confuse their mode of happiness with the mode of happiness of the fictional citizens of Omelas. Although they share some of the same characteristics, the broom closets perforating Australia do not work the same magic on Australians as they do on the citizens of Omelas. Things are not that good. The middle class is being squeezed as a new gap emerges between rich and poor. There are mortgages to worry about. There are new individual labor contracts to negotiate. In Le Guin's imaginary society nothing but a robust happiness acts as a

comparative backdrop to the everyday abuse of the small child. Not so in Oz. True, like the fetid space in Omelas, indigenous communities are often cruddy, corrosive, uneventful spaces. An agentless, slow death characterizes their mode of lethality. Quiet deaths. Slow death. Rotting Worlds. The everyday drifts towards death: One more drink, one more sore; a bad cold, bad food; a small pain in the chest. But unlike Omelas, these kinds of deaths only periodically fix the gaze of national and international publics. And when they do they don't do so in way that unambiguously concretizes their ultimate, or immediate, cause, agent, and effect. Who is killing these people? What is killing them? Answers must yield to the complexity of an entire system; a set of substantial transfers, some lighter than a feather duster. How a subject within late liberal societies might dream of something decisive, clear, sublime?

Late liberal subjects do not have to be lulled to sleep to see deathscapes with much clearer borders, agencies, and intensities. In contrast to cruddy, cumulative, and chronic lethality are special forms of enemies and spectacular forms of death that capture and rivet the imagination of late liberal societies and act as an alibi for the concentration and consolidation of state executive power. Certain kinds of enemies, events, and history are seen as having a spectacular, even sublime, quality: they cut time into two, present decisive ideological struggles, and demand exceptional measures be taken. Those within late liberal societies seeking to increase state surveillance powers cite these decisive kinds of enemies and devastating images of airplanes, nightclubs, and towers exploding and vomit forth singed and dismembered bodies. The lethal state of indigenous life hardly competes with the society of the terrorist spectacle: bodies in hoods, in naked piles, attached to real or fake electrodes. Bodies disappear only to reappear with drill marks.

These forms of violence seem to oppose and stand outside of the everyday uneventful forms of misery and dying that characterize indigenous life. These new terrorist forms of death are spectacular, even sublime, in outward form. And in appearing to be spectacular, they seem to create the ontological necessity to respond ethically—a demand that we take sides. And citizens and their governments do.

The Howard government cited both the bombing of Bali nightclubs and an omnipresent invisible domestic and international terrorist threat when it sought to modify the Crimes Act 1914. Passed in 2005, amendments to the Crimes Act provided the Australian Security Intelligence Organization (ASIO) the power to detain any person for up to seven days without charge if he is suspected on "reasonable grounds" of being involved in any terrorist activity. During this time, detainees are prohibited from exercising their right to have a lawyer present; to silence; and to protect themselves against self-incrimination. While Australia does not have a declaration of rights that enshrines freedom of speech in general, the High Court of Australia found a specific implied right of freedom of political speech in the 1992 Australian Capital Television v Commonwealth. It is exactly this more circumscribed right that the amendments to the Crimes Act assaulted. What has especially worried free speech advocates is the definition of a terrorist activity under the "advocacy" clause. There a terrorist is defined as anyone who advocates the doing of a terrorist act including "praising the doing of a terrorist act in circumstances where there is a risk that such praise might have the effect of leading a person" to commit "a terrorist act" or "advocates the doing of a terrorist act (whether or not a terrorist act has occurred or will occur)."

These carceral forms of state power, premised on actual and potential spectacularly catastrophic mass deaths, incited mass protests and engaged public and private consciences. In November 2005, in the major cities throughout Australia, thousands of people marched against the new crime amendments. The news media highlighted, and in some instances violated, the far-reaching scope of the new terrorist laws. Beyond the specific crime amendments, these protests were aimed at what many left-progressives saw the Howard government forging an uncritical alliance with the Bush Administration that was compromising fundamental Australian principles of social and personal justice. For example, while Australia has a long history of strongly opposing the death penalty domestically and internationally, since the Bali bombings of October 2002 there has been a significant silence about the death penalty for "terrorists." And while no troops are stationed in indigenous communities shooting at armed and unarmed resistance to the lethal state of indigenous life, police have faced a number of indigenous riots in Red Hook, Palm Island and, most recently, Aurukun after alleged police abuse and murder. The Howard government has stationed Australian troops in foreign nationstates as part of a humanitarian effect. For instance, troops entered East Timor putatively to stop the carnage that erupted as Indonesia withdrew. However, after decades of refusing to intervene against Indonesian atrocities in the region, critics argued that the government was merely attempting to gain strategic control over the Sunshine Oil fields. Likewise, critics saw the Australian intervention in the Solomon Islands as compromised by its refusal to publicly renounce a first strike policy in the Asia-Pacific and continual references to Islamic fundamentalist infiltration of the Pacific via Southeast Asia.

There is serious debate about why John Howard, whose government predated by four years the US Supreme Court appointment of George W. Bush in 2000, has made such a firm commitment to the international unilateralism of the US neoconservative movement. Some have argued that Howard is a "true believer," whose political thinking ultimately derives from Milton Friedman's school of laissez-faire capitalism developed at the University of Chicago during the same time that Strauss taught there. xviii As a result. so this story goes, Howard's foreign policy could be easily adapted to the Straussian neoconservativism of the current Bush administration with its deep resonant ties to Schmitt's theories of political theology. (Here it would be critical to examine the influence on John Howard of neoconservatives within the first Bush administration prior to Howard's election in 1996.) Others have insisted that Howard is an extraordinarily skilled modern prince, astutely morphing his Party's message to fit shifting public anxieties about the location of economic, social, and political threats, and never letting belief get too much in the way of securing and holding power. Whether believing or not, Howard's allegiance to the liberal democratic parliamentary system seems shaky, if not outright hostile, to some of his critics. For instance, Ian Duncanson has argued that the Howard government reflects a "kind of Peronism" in which the separation of powers, foundational to liberal democracies, has been replaced by elections in which "victories become empty mandates to pursue previously undisclosed or hitherto non-existent policies" and by "opportunistic opinion polls" in which "majority opinions act as plebiscites on single issues." Indeed, Howard's refusal in the mid to late 1990s to countenance even a hint of contemporary national responsibility for past historical wrongs carried out against the indigenous

population foreshadowed rather than reflected the US neoconservative disdain for guilt saturated liberalism.

But for whatever reason, this strong state rhetoric continually foregrounds and creates spectacular scenes of killing. Two examples suffice. The one occurred in late August as UN World Conference Against Racism in Durban, South Africa, was underway. The Norwegian Tampa picked up some 433 asylum-seekers, who found themselves trapped on a sinking ship as they traveled from Indonesia to Australia. The asylum seekers were mainly Afghani people fleeing the Taliban. The Tampa sought to drop off its unintended passengers on Christmas Island. On 27 August Howard declared that the asylum seekers would not be allowed into Australia or Australian Territory, including Christmas Island. Instead, Howard pushed ahead with the so-called Pacific Solution—the use of economic incentives to entice the near bankrupt state of Nauru to establish a detention center for asylum seekers attempting to enter Australia. As many have noted, Nauru agreed to set up these detention camps in exchange for Australian foreign aid after its material resources had been exhausted by a history of British and Australian extractive capital. Still more shocking was Howard's stance on the "children over-board" controversy. It was alleged that some families through their children overboard in order to force the Howard government's hand. Howard figured this decision as a sign of the barbarous cunning of these asylum seekers. xx Prior to the establishment of the security state in Guantanamo Bay, (which, as we know, swept up the Australian David Hicks) Howard was testing how far the international community was willing to go to stop what he and his government readily admitted were potentially permanent detention camps. These camps were just, argued Howard, because they were good for

Australian nationalism. Very quickly international human rights groups at the Durban conference, as well as members of the UN, denounced the Pacific Solution as a violation of the UN Refugee convention. And how could they not, if for no other reason than, like the post September 11th US mantra that the government must protect "The Homeland," Howard's "Pacific Solution" had shocking resonances with fascist rhetorics of the last World War.

It is important to note that mandatory detention has been part of the migration policy of Australia since 1992 and that it was a Labor Government which removed the 273 day limit on mandatory detention. In other words, it is not simply the neoconservative movement that is responsible for the fetid conditions in detention camps on Nauru and Manus Island and on Australian soil such as at the Woomera Detention Centre. As early as 1998 Amnesty International cited the mandatory detention of adults and children as a violation of human rights, noting the UN Human Rights Committee had found Australia in violation of the Covenant on Civil and Political Rights. In the eight years that followed, various United Nations committees and commissions have investigated the conditions of detention camps in Australia. In July 2002, a delegation from the office of the UN High Commissioner for Human Rights OHCHR stated that the camps were an "offensive to human dignity." Later that same year the UN Working Group on Arbitrary Detention suggested the extrajudicial nature of the detention regime given its "automatic and indiscriminate character, its potentially indefinite duration and the absence of juridical control of the legality of detention."

The Howard government had steadfastly refused the recommendations of Amnesty International, the UN HRC, the UN WGAD, and other human rights advocates,

arguing that the detention policies were lawful because they had been written into law under the Migration Act since 1992. There is no state of humanitarian exemption if the state lawfully states the exemption of certain humans from humanitarian conditions. The Australian High Court has agreed finding in favor of the government in two cases decided in 2004. In *Behrooz v Secretary of the Department of Immigration and Multicultural and Indigenous Affairs*, the High Court found that the inhumane conditions of the detention camps did not annul their legality. **saiii* In *Al-Kateb v Godwin* the High Court found that unsuccessful asylum seekers could be held indefinitely in these same fetid camps if they could not be returned to another country. **saiv* Hunger strikes, mouths sewn shut, the absence of physical and mental health facilities: The law easily survives the inhuman conditions it creates, fosters, and inhabits. It was only after the 2006 discovery of two seriously mentally ill Australian citizens mistakenly confined in these camps—one of whom claimed, as part of a psychotic delusion, that she was German—that the Howard government reversed state policy. Mandatory detention was abolished. And asylum seekers can now challenge their confinement.

A second example of the kinds and modes of eventfulness characterizing the strong state and riveting public response occurred in July of 2006 as Israel began a sustained attack on Lebanon. Devastation to southern Lebanon and Beirut was massive as was the humanitarian crisis. The news media showed extensive footage of refugees streaming down roads as Israeli jets bombed nearby, refusing to guarantee civilians safe passage. Various states organized the evacuation of their national citizens from Lebanon, hiring cruise liners and freighters, and making room on military vessels. But the Australian government's effort to hire a vessel to evacuate its citizens was continually

stymied. Members of the large Lebanese community in Australia accused the government of abandoning its citizens and, according to some, doing so because of its support of the Israeli offensive. Strongly protesting any suggestion that the government was in any way slow in its response to the crisis, the federal government insisted that the real cause of the crisis was the weak Lebanese state. As the crisis dragged on amidst images of bodily and material carnage, members of the conservative public added another culprit to the weak Lebanese state; they openly questioned how much public finance should be spent on evacuating people who were dual citizens and spent most of their time in Lebanon. Were these "real" Australians? Didn't they choose to put themselves in harms way? The federal government vigorously denied that these kinds of questions effected their actions. The problem was purely logistical. But other state and public events leading up to the war provided a fertile discursive ground for suspicions of a new virile form of racial discrimination in Australia: The public race riots in Cronulla in 2005; the government passage of new security laws in 2005 said to address domestic and international Islamic terrorism; and the ongoing public debate about the loyalty of Muslim clerics and immigrants, especially, Sheik Feiz Mohamed, who now resides in his ancestral village in north Lebanon. On 22 July 2006 twenty thousand people marched in Sydney against the Israeli attack of Lebanon and the governments attack on Muslim civil rights.

No Exit

As these preliminary discussions suggest, any attempt to understand the social imaginaries characterizing lethal conditions within late liberal societies must take into

account the two very different forms, modes, and qualities of killing found there: strong and weak state killing and the modes and forms of agency, causality, and eventfulness they rely on. I began this essay by noting that from the perspective of state security, we are witnessing the emergence of mode of governmentality with closer ties to Schmittian sovereignty than Foucauldian biopolitics. Thus the Australian government could blame the weak condition of the Lebanese state—its inability to disarm Hezbollah—for the war itself and for the humanitarian crisis it triggered. And yet, from another angle, the biopolitical regime of an increasingly weak post-Fordist state continues to spread its practical ideology of agency and value deeper into the tissues of everyday life. New organizations of production, circulation, and consumption produced in the wake of the Keynesian state continue to dismantle any "collective structures which may impede the pure market logic." Even Australia, with its strong history of social equity (as opposed to the more vapid value of social equality), is slowly installing neoliberal markets and cultivating the neoliberal subjects who will occupy them.

It is at the intersection of these state and market forms and forces that the lethal condition of late liberal societies must be understood. And they need to be understood not merely in terms of the facts on the ground, but also in terms of our scholarly attachments to certain modes of time, eventfulness, and ethics. The security state's ability to capture countervailing energies and imaginaries is not restricted to those who march, protest, and organize against the security state, but also to those who think critically inside and outside the universities. The outpouring of critical thought on 9/11 and the wars in Afghanistan and Iraq is staggering. Special journal volumes and citational moorings (like this essay, here and now) often match the rhetoric of George W. Bush and John

Howard—that September 11th 2001 marked the interval between a new and old form of nationalism and a new and old form of state power. Bush, Howard, a vast group of scholars supporting their position as well as the numerous political leaders and scholars opposing their policies continually enclose lethal landscapes around a singular kind and form of death.

But how do we critically reflect on the conditions of lethality in late liberal societies when life and its imaginaries are located at the catachresis of these strong and weak states? It seems to me that two avenues need to be pursued. Along the first, we would examine violence and lethality from a perspective that does not assume the qualities, vitalities, and borders on which neoliberalism defines life itself. Several scholars have been pursuing this project. In her recent book, *Life and Words*, Veena Das notes the anthropological attachment to the kind of violence that characterizes the catastrophe. Concentrating on social being in the wake of two catastrophic events—the gendered violence during the partition of India and Pakistan and the massacre of Sikhs in the wake of the assassination of Indira Gandhi—Das argues that it is not only the events themselves that are "world-annihilating" but other modes and "slow rhythms" of death in their wake. How do scholars find the right "distance or right scale" from which the sketch the slow rhythms of this lethal violence? This is indeed the question: How do we focus attention on the broom closets of late liberalism in the context of the spectacular machine of the killing state. Likewise, in a recent essay, Lauren Berlant juxtaposes forms of biopower within the current regime of capitalism to the forms of sovereign power accumulated by the terror state. xxvi Her case study is obesity. Her aim is to make visible endemic forms of death that are experienced as the attenuated background conditions of

ordinary life and are resistant to typical accounts of causality, subjectivity, and lifemaking.

One tactic all of us use to make visible and compelling the nature of dying in these zone of slow death is statistics. By design, statistics transfigure one kind and mode of eventfulness into another. They transform borders, qualities, scale, and agency of one kind of eventfulness—if we can even use the term event in the domain of the chronic slow but as of yet unrealized form of lethality found in indigenous worlds—into another. And yet, as I am sure Das and Berlant are well aware, the deployment of a statistical imaginary to awaken a slumbering critical public and reason faces a central paradox. By transforming the invisible, dispersed, and uneventful into the visible, compact, and eventful statistics obliterate the very nature of this kind of death. Rather than understand this kind of lethality within its own terms (its dailyness, ordinariness, livedness), we demand that it conform to the spectacular event and the ethical dictates of empathic identification. As a result nothing new happens. No alternative ethical formations are initiated. It is not even very clear how these statistics puncture the inured nature of suffering in local communities. Many friends of mine in indigenous Australia do not see their deaths as a form of state killing unless an agent of the state—a police constable literally kills them. The cruddy, cumulative, and corrosive aspects of life have spread so deep into the everyday that, as Wittgenstein says, nothing more I can say other than that is what is.

This takes me to the second avenue that we might pursue. On this avenue life is defined not by some redemptive future but what the understanding that *this is what is.* No future will have made it anything else. No present can be divided in such a way that what

I have—my body and its health, my things, my affects—is not co-substantial with what you have and do not have. We hardly have to have the same things, the same desires, tastes, languages or aspirations. But the tighter the neoliberal market ties us all to one scale of value, the looser the post-Fordist state's grip on any ethical obligation to the health and welfare of its citizens, and the more wakeful late liberal subjects are to what time it is, the more gripping Le Guin's simple ethical paradox becomes. Everyone must decide if their happiness is worth the suffering of those within the fetid broom closet. And in this world where we live there is no exit. We can only change the distribution of life and death so that some have more and some to have less.

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ⁱ For the Jamesian influence see Linda Simon, "William James's Lost Souls in Ursula Le Gin's Utopia," *Philosophy and Literature* 28.1 (April 2004): 89-102.

ii Ursula Le Guin, "The Ones Who Walk Away from Omelas," in *The Norton Anthology of Fiction* (New York: Norton, 2006), 862-66, 866.

iii Ibid, 866

iv Ibid, 866.

^v See Louis Menard, *The Metaphysical Club: A Story of Ideas in America* (New York: Farrar, Straus and Giroux, 2002).

vi Paul De Man, *Allegories of Reading: Figural Language in Rousseau, Nietzsche Rilke, and Proust* (New Haven: Yale University Press, 1982).

vii Charles Sanders Peirce, "Letter to Lady Welby," in *Semiotic and Significs: The Correspondence Between Charles S. Peirce and Victoria Lady Welby*, ed. Charles S. Hardwick & J. Cook (Bloomington: Indiana University Press, 1977), 110-1.

viii Summarized from

http://www.healthinfonet.ecu.edu.au/html/html_programs/programs_policy/programs_policies_timelines.ht m. See also Ian Anderson, "The National Aboriginal Health Strategy," in *Health policy in Australia*, ed. H. Gardner (Melbourne: Oxford University Press 1997), 119-135.

ix (http://www.aihw.gov.au/indigenous/health/index.cfm). See also Yin Paradies, "A systematic review of empirical research on self-reported racism and health," *International Journal of Epidemiology* http://ije.oxfordjournals.org/cgi/content/abstract/dyl056v1.

^x *The Health and Welfare of Australia's Aboriginal and Torres Strait Islander Peoples* (Canberra: Government Printer, 2005).

xi http://www.aihw.gov.au/indigenous/health/index.cfm

xii See J. Altman and B. Hunter, "Indigenous poverty," in *Australian Poverty—Now and Then*, eds. R. Fincher and J. Nieuwenhuysen (Melbourne: Melbourne University Press, 1998), 238-257

xiii For instance, having finally gained control of both houses of parliament in 2004, Howard radically transformed labor relations by introducing Australian Workplace Agreements (AWAs), individual agreements made between an employer and their employee that replaced the "awards" system, a system in which pay packages were negotiated between the federal government, industry and the trade union movement.

xiv http://www.aihw.gov.au/indigenous/health/index.cfm

xv Craig Calhoun, "The Privatization of Risk," *Public Culture* 18.2(2006): 257-263. See also Tom Baker and Jonathan Simon, eds., *Embracing Risk: The Changing Culture of Insurance and Responsibility* (Chicago: University of Chicago Press, 2002).

xvi For a different approach to indigenous poverty, see Peggy Brock, *Outback Ghettos* (New York: Cambridge University Press, 1993).

xvii See the 2002 analysis of Jon Altman and Matthew Cameron Gray, "The effects of the CDEP scheme on the economic status of Indigenous Australians: some analyses using the 1996 Census." http://129.3.20.41/eps/lab/papers/0408/0408003.pdf

xviii Robert Garran, *True Believer*, *John Howard, George Bush and the American Alliance* (Sydney: Allen & Unwin, 2004).

xix Ian Duncanson, "The Peronist and the Ghost in the State of Australia," Law/Text/Culture 8 (2004): 107, 111.

xx John Warhurst, "The Australian Federal Election of 10 November 2001," *Australian Journal of Political Science* 37(2002): 153.

xxi See, for instance, Amnesty International, "MV Tampa and the Pacific Solution Fact Sheet 07." http://www.amnesty.com.au/refugees/ref-fact07.html

xxii See Amnesty International, "Mandatory Detention Fact Sheet 2002."

http://www.amnesty.org.au/resources/fact_sheets/refugees/mandatory_detention_of_asylum_seekers_fact_sheet

xxiii Behrooz & Ors v Secretary of the Department of Immigration & Multicultural & Indigenous Affairs, HCA 36 (2004): 125-132.

xxiv Al-Kateb v Godwin, HCA 37 (2004): 241.

xxv Pierre Bourdieu, "The Essence of Neoliberalism," trans. Jeremy J. Shapiro, *Le Monde Diplomatique* December 1998 http://www.homme-moderne.org

Lauren Berlant, "Slow Death (Sovereignty, Obesity, Lateral Agency)," Critical Inquiry, Upcoming.