Biopolitics at the Crossroads of Sexuality and Disaster: The Case of Haiti

Rosalind Petchesky

Biopolitics at the Crossroads of Sexuality and Disaster: The Case of Haiti

Rosalind Petchesky

Sexuality Policy Watch (SPW)

Brazil secretariat
Brazilian Interdisciplinary AIDS Association (ABIA)
Av. Presidente Vargas, 446/ 13o andar
Rio de Janeiro/RJ – 20.071-907 – Brazil
Phone: +55 21 2223-1040 Fax: +55 21 2253-8495
E-mail: admin@sxpolitics.org Website: www.sxpolitics.org

US secretariat
Columbia University Mailman School of Public Health
Department of Sociomedical Sciences
Allan Rosenfield Building 722 West 168th Street, 5th floor
New York, New York 10032 USA
Phone: +1 212 305-3286 Fax: +1 212 342-0043

*******************************

Sexuality Policy Watch (SPW) is a global forum composed of researchers and activists from a wide range of countries and regions of the world. Inspired by local and international initiatives, the SPW’s mandate is twofold: to contribute to sexuality related global policy debates through strategic policy-oriented research and analysis projects, and to promote more effective linkages between local, regional and global initiatives.

The content of this publication may be reproduced by non-governmental organizations and individuals for non-commercial purposes (please send us copies).
SPW Working Paper N. 8 presents the remarkable analysis developed by Rosalind Petchesky, member of SPW Steering Committee, on the biopolitics of the militarized humanitarian responses to the Haiti 2010 earthquake, with a particular focus on global inequalities, racialization and sexuality.

We thank Rosalind for her generosity and wish you a good reading!

Sonia Corrêa and Richard Parker
SPW Co-Chairs
Biopolitics at the Crossroads of Sexuality and Disaster: 

The Case of Haiti


*Rosalind P. Petchesky*

**Framings: Intersectionality and Biopolitics**

This chapter is an argument for rethinking public health crises through a double lens, integrating the perspective of Foucauldian biopolitics with that of feminist intersectionality. These convergent perspectives direct us to see controversies over public health, particularly in a globalized world fraught with catastrophes, as inseparable from macroeconomic and militarized power relations, and such power relations in turn as laden always with contests over the meanings and lived realities of sexuality, race and gender. An intersectional approach invites us to conceptualize every domain or issue of political economy—markets, poverty, growth, militarization, climate change, as well as most problems in public health—as profoundly gendered and sexualized from the start. Conversely, every arena of sexual, gender and reproductive health politics has its deeply macroeconomic and development-related dimensions (see Corrêa, Petchesky and Parker 2008; Eisenstein 2004 and 2007; Harcourt 2009; Petchesky 2003). Influenced by moves in queer theory, intersectional analysis also calls into question a regressive gender binarism (the ubiquitous ‘women and men’), recognizing instead the multiple expressions of

1 This chapter originated in a talk given at DAWN (Development Alternatives with Women in a New Era) Development Dialogues, Mauritius, January 2010. Later versions of the paper were delivered at the Mailman School of Public Health, Columbia University; a conference on Urban Youth and the Determinants of Sexual Health at the University of Toronto, Canada; and a conference on Global Flows, Human Rights and Sexual and Reproductive Health at the University of Sussex in Britain. I am grateful to many participants in those events and to a number of readers for their thoughtful comments, especially to Gigi Francisco, Yao Graham, June Larkin, Zillah Eisenstein, Sonia Corrêa, Andrew Park, Maya Unnithan and my research assistant at Hunter College, Ying Huang.
masculinity, femininity and hybridity that travel across diverse bodies and intersect with race and ethnicity in historically and geographically specific ways (see Butler 2004; Currah, Juang and Minter 2006; Puar 2007). A language and politics that erase gender nonconforming people become particularly exclusionary in the midst of disasters, where privileged victim status is routinely conferred on legible ‘women and children’.²

I will explore these complex relationships through a close and contextualized reading of recent events in Haiti, particularly the aftermath of the 2010 earthquake and the still persistent cholera epidemic. Haiti as a site of colossal, overwhelming disaster raises troubling dilemmas for transnational public health advocates and humanitarian organizations. It demonstrates the difficulty, if not impossibility, of engaging in disaster assistance or defense of human rights in the pure or ‘neutral’ terms that public health practitioners and activists have long prized; the dangerously thin line between aid and protection on one side and corporate profiteering and militarization on the other. And it points to the centrality of sexualized, racialized—and sometimes dead—human bodies as both the objects and the subjects of transnational biopolitics waged in the name of health. All this suggests that we have to complicate even further the usual ways of thinking about current crises in public health by paying attention to the heavy layerings of temporality. For we find the present scenarios in such crises almost invariably haunted by the past—by vestiges of colonialism, slavery, sexual predation and old wars fought in new guises.

Before moving to the Haiti case, let me recollect some of the ideas of French philosopher Michel Foucault that seem directly pertinent to thinking about the transnational dimensions of disaster, sexuality and public health. In the 1970s Foucault introduced the concept of biopower or biopolitics into the lexicon of

---

² It seems important to clarify the particular way in which I am using the concept of intersectionality in this writing and building on its original meaning. Originally developed by Crenshaw (1991) and other women of color feminist theorists in the nineteen-eighties and nineties, the intent was to expand narrowly framed identity politics into a more comprehensive view of the multiplicity of identities and subjectivities, particularly for women of color. Here I am attempting to take intersectional perspectives to another scale by positioning subjectivities within the larger economic, social and political contexts that produce them. Those contexts in turn manifest their own intersecting folds and reverberations that relocate and further complicate subjectivities. (Thanks to Zillah Eisenstein for pushing me to expand upon this.)
theorizing about power and governance. He posited that somewhere around the late eighteenth and well into the nineteenth century in Europe (and in the colonial regimes Europe imposed on the third world) there was a shift in the techniques of power from the classical, juridically based modalities of sovereignty—which worked mainly through the ‘right of the sword’ and ‘power over death’—to forms of governance that took charge of ‘life itself’. (Foucault 1978; 1984, 63) The primary focus of what Foucault called ‘governmentality’ became not only enhancing life but also managing it, regulating it, calculating and quantifying it, normalizing it, and organizing it into a whole network of sciences and knowledge regimes claiming their own truth and wielding their own methods. Biopower took two forms as it developed in the nineteenth century: first disciplinary techniques that act directly on individual bodies, to render them docile or obedient or ‘normal’; and later regulatory processes directed at populations—their movements, size, hygiene, sanitation, housing, birth rates, longevity, disease and epidemics. This comprised the whole sphere of ‘apparatuses’, and the discourses and knowledge they produce, that became the domain of public health and order and rendered them distinctly modern (Foucault 1997/2003 and 1978).

Although Foucault notoriously ignored gender, biopolitics as a conceptual frame has obvious relevance to feminist thinking about the body, sexuality and health as a gendered experience and has influenced a wide range of feminist scholars (see Butler 2004; Cooper 2008; Corrêa, Petchesky and Parker 2008; Luibhéid 2002; Puar 2007; and Shalhoub-Kevorkian 2009). Thinking about biopolitics has clearly not been as vigorous among public health scholars, professionals and activists as it has, in the past two decades, in the fields of political theory, the social sciences and gender studies. Logically one would think it should, since what Foucault was talking about converges with the concerns of public health, though always through a critical lens intended to unmask the power relations behind the field. For Foucault the main idea is that these new apparatuses or ‘truth regimes’—some directly tied to the state and statist institutions and others (for example, the medical and psychiatric professions

---

3 At the beginning of his first Collège de France lecture in 1978, he defined ‘bio-power’ as ‘the set of mechanisms through which the basic biological features of the human species became the object of a political strategy, of a general strategy of power. . . .’ (2007).
or the pharmaceutical industry) operating around or outside it—are inseparable from power. There is nothing disengaged, neutral or ‘objective’ in the knowledge and techniques that biopolitics deploys. On the contrary, whether directed at individual bodies or at populations and ‘general biological processes’, they ‘[act] as factors of segregation and social hierarchization. . . guaranteeing relations of domination and effects of hegemony’ (Foucault 1978, 171).

By the second half of the nineteenth century and throughout the twentieth, when the politics of life (migration, settlement, fertility, marriage, contagious disease, and so on) became ingrained in state practices and nationalisms, these techniques became the vehicles for racism and genocide. While Foucault’s main focus in probing the racism inherent in biopolitics was the Nazis in Europe, he also called attention to colonialism as the laboratory where biopolitical techniques originated and to racial divisions and stereotyping, in both western and post-colonial contexts, as their continued effects. In his 1976-77 Collège de France lectures, he makes this brief observation: ‘Racism first develops with colonization, or in other words, with colonizing genocide. If you are functioning in the biopower mode, how can you justify the need to kill people, to kill populations, and to kill civilizations? By using the themes of evolutionism, by appealing to a racism.’ (Foucault 1997/2003, 257). Biopolitics and necropolitics are revealed as two sides of a coin. Killing, or letting die, certain groups, the ‘degenerates’, ‘will make life in general healthier and purer’ (Foucault 1997/2003, 255).

Critics have argued persuasively that Foucault’s thoughts about colonialism and racism are fleeting at best, and in any case he failed to apply them to the experience of the colonized or the legacies of ‘colonizing genocide’ in the post-colonial world, particularly sites of militarized occupation (see Stoler 2005 and Mbembe 2003). Achille Mbembe and Nadera Shalhoub-Kevorkian both argue that ‘late-modern colonial occupation’ in places such as East Jerusalem and Gaza combines ‘the disciplinary, the biopolitical, and the necropolitical’. They suggest that Foucault underestimated the extent to which technologies of war, terror and violence are central to ‘the management of multitudes’ in late modernity, whereby ‘brutal attempts to immobilize and spatially fix whole categories of people’ become
intertwined with attempts to secure the health of the occupiers (Mbembe 2003, 34, 12, 27). Shalhoub-Kevorkian describes how ‘the multilayered effect of the biopolitical deployment of bodies in a militarized space’ is also heavily gendered; women’s bodies become ‘weapons’ to deliver colonial assertions of power and ‘the incapacitation of Palestinian males’. Through the construction of ‘flying checkpoints’ that appear and disappear arbitrarily, Israeli soldiers may conduct strip-searches of Palestinian women at any time, thus marking Palestinian women’s bodies as occupied territory and eviscerating Palestinian men’s traditional roles as sexual protectors (2009, 118-121). In Haiti, we shall see the similar way in which foreign and United Nations peacekeeping forces wield sexual exploitation as a tool of military occupation, transmuting disaster into the everydayness of barely surviving bodies. Haiti and Palestine both demonstrate that the conversion of biopolitics into necropolitics and the militarization of rescue operations are endemic to situations where colonial occupation and war have become routinized ways of life.

Of course, Foucault—the preeminent theorist of sexuality as a historical discourse, an apparatus—perfectly well understood that sexuality lies at the very center of biopolitics—not simply as a dimension or sub-field but rather at its core. ‘Sexuality represents the precise point where the disciplinary and the regulatory, the body and the population meet’, Foucault writes (1997/2003, 251). Surely the politics of HIV and AIDS prevention, family planning, sex education and harm reduction in drug treatment programs make this intersection clear. Moreover, biopolitics also intersects with all the regulatory mechanisms beginning in the eighteenth century related to the flow of goods, capital and labor. That is, the politics of markets, trade, and the liberal (laissez-faire) and neoliberal doctrines they would engender are inseparable from those that regulate the flow of people, bodies, miasmas, sexual encounters and cultures of sexual expression. Not by accident did Foucault’s lectures of 1977-1978 focus on the relations between population, territory and security; and those of 1978-1979, titled The Birth of Biopolitics, concern the origins and diverse trajectories of neoliberalism (Foucault 2007 a and 2008). Securitization of bodies and borders, and the pathways, pathogens and substances that penetrate them, not only serves global capital but also develops its own logic in the division and hierarchical
ordering of human, and all, life. Nowhere do we see a more fertile laboratory for the engineering of these biomixtures than in Haiti.

The Haitian Earthquake and Cholera Epidemic: Disaster as Everyday Life

Haiti may be the epicenter of what the southern feminist organization DAWN has called the ‘fierce new world’, the most dismal and nightmarish portent of what will happen when imperial occupation, militarization, unbridled corporate exploitation, and climate change come together in a hideously perfect storm (Sen and Durano eds. forthcoming). But intersectional analysis as I am using it requires that we further queer the picture, find the sexual in the economic, the racialized body in the body politic. If we take a long historical view, we see that all the cruel assaults on Haiti and its people during the recent crisis are inseparable from the racialized, sexualized gendering of Haitian bodies and the Haitian body politic for well over two hundred years.

Starting in 1791 and culminating in 1804, with the unprecedented shock to white western sensibilities of African slaves revolting and establishing the first free African republic and the second independent nation in the Americas, Haiti was marked as perverse, a wanton black woman to be perpetually raped and tamed by the more “civilized” white fathers in the North. When Amy Wilentz, one of the most sympathetic and knowledgeable writers about Haiti, says that ‘Haiti has been a pariah nation throughout its history’, we can only understand the full meaning of this status through the codings of race, gender and sexuality (Wilentz 2010a). From colonial times to the present, Haiti’s relationship to the rest of the world, especially to its ruling powers, was defined through these codings. I am speaking both literally and metaphorically here, referring as much to the exploitation of black female slave bodies as to that of the Haitian body politic; as much to black Haitian women’s resilience and resistance as to the feminization and racialization of Haiti as an upstart nation. Journalist Mark Danner recalls that Saint-Domingue in the eighteenth century was ‘the richest colony on earth’, whose slave labor produced for its French masters massive amounts of sugar cane—the world’s most lucrative commodity at the time. He also writes: ‘Generation after generation, the second sons of the great
French families took ship for Saint-Domingue to preside over the sugar plantations, enjoy the favors of enslaved African women and make their fortunes.’ (Danner 2010). But the slaves who worked the sugar factories would revolt, and many of those slave workers were women—the same ones whose bodies French bourgeois sons craved. Indeed, Susan Buck-Morss, in her important book *Hegel, Haiti and Universal History*, tells us that a certain percentage of those African slave rebels in the 1790s were Muslims, and one of their leaders was a woman, a Vodou priestess named Fatima (Buck-Morss 2009, 141).

Bonaparte and Jefferson immediately sought to smash the newly independent black nation and to do so with unparalleled vengeance. The French demanded a huge ‘punitive reparations payment . . . in exchange for recognition and the ability to engage in unhampered international trade’ (Danner 2010). This was after French armies tried unsuccessfully to quash the revolution and Napoleon imprisoned its legendary leader, Toussaint L’Ouverture (Buck-Morss 2009; Davis 1975). The United States, fearing the example a free Haiti close to its borders posed for its own slaves, refused to recognize Haiti’s independence for nearly six decades, until President Abraham Lincoln finally did so in 1862. After that the United States joined France’s ‘suffocating trade embargo’ and demand for gigantic reparations (Danner 2010; Campbell 2011), followed by a stunning sequence of insults over the next century:

- The first United States military occupation of the island in 1915-1934, when soldiers seized and redistributed land to American corporations, forcing debt repayment and retaking all of Haiti as a virtual United States possession;
- The West’s (especially French and American) arming and supporting of the vicious Duvalier dictatorship in the mid-twentieth century;
- Corporate sweatshops, totally unregulated, that still sometimes pay their mainly female workers between thirty-eight and fifty cents an hour;
- The United States-backed overthrow and expulsion of democratically elected President Jean-Bertrand Aristide *twice*—once after his election in 1991 and again, following his return (aided by the Clinton administration) and re-election, in 2004;
• Haiti’s virtual recolonisation beginning in 2004, as it was brought under the ‘protective’ occupation of United Nations peacekeeping forces and the renewed imperial oversight of the United States until the present day (see among others Wilentz 1989/2010b; Robinson 2007; Girard 2010; and Campbell 2011 for this history).

And let us not forget that the democratic movement that formed Aristide’s popular base was made up mainly of the poor, many of them women, as well as youth groups, artists and journalists from the countryside, Cité du Soleil and the Bel Air district of Port-au-Prince. As a detailed study by Luc Smarth (1997) documents, popular organizations in Haiti had developed a strong, democratically run grassroots movement of alternative services and neighborhood and church groups seeking better education, water, sanitation, housing and cultural resources. These groups often aroused the ire of local elites and international forces and, despite playing a role in Aristide’s Fanmi Lavalas party, were sometimes even at odds with its leaders. Aristide had tried valiantly, though unsuccessfully, to end Haiti’s debt burden and to support the rural poor. In 2003, he tried to reclaim the money Haiti insisted France owed it from years of extortionary payments—in total, nearly 22 trillion US dollars—to no avail. In 2004, thanks to death squads and a coup orchestrated largely by the United States government, he was removed—not only from office but also from his country.

While the extent of United States imperial dominion over Haiti was well known to political observers for years, in 2011 the Haitian newspaper Haiti Liberté and the American weekly The Nation began publishing a series of articles based on a trove of nearly two thousand secret diplomatic cables obtained by WikiLeaks. These articles reveal that Washington’s ‘aggressive management’ of Haiti’s internal economy and politics, especially since 2004, was all-encompassing (Editorial, The Nation 2011). Among other things, the United States embassy, in collusion with giant oil companies, blocked an oil deal between Venezuela and Haiti (under former President Préval). That deal would have saved Haiti $100 million a year that might have been used for hurricane reconstruction, health care or clean water. Again at the prodding of US-based corporations and Haitian business elites, the United States opposed
raising the minimum wage in Haiti to five US dollars an hour and tightly supervised Haiti’s police and Brazilian-led United Nations peacekeeping forces (MINUSTAH, or the UN Stabilization Mission in Haiti) to assure the disciplining of rebellious neighborhoods such as Cité Soleil and Bel Air. These operations included sealing off areas where resistance to the 2004 coup and subsequent occupation was strong and killing, wounding and jailing hundreds of pro-Lavalas leaders and sympathizers; as well as support of elite business sectors that called the protesters ‘criminals’ and ‘bandits’ and sought to form their own private armies (Coughlin and Ives 2011a). Finally, the cables reveal the extent of United States interference in Haitian elections—not only its active efforts to keep Aristide from returning to Haiti but also its complicity in excluding Fanmi Lavalas from participating and its support of two Duvalierist candidates, one of whom—a politically inexperienced, anti-Aristide carnival singer, Michel Martelly—won, with a mere 23 per cent of Haiti’s registered voters participating (Coughlin and Ives 2011b). Concubines cannot be sovereign nations, and are severely punished when they rebel.

When Earthquake Tomás struck in January 2010 and demolished much of Port-au-Prince and its surrounding area, the first response on the part of the American government was to send 10,000 Marines to perform ‘rescue’ operations and 500 helicopters to do military flyovers for security purposes (Cooper and Robbins 2010). This is hardly surprising, given Haiti’s long history of United States dominance, but it also reflects the nature of so-called humanitarian relief in conditions of globalized militarism. Unquestionably we live in a world where all large-scale capabilities, and much of daily life, are effectively militarized. The military flyovers during Hurricane Katrina in the Gulf of Mexico in 2005 demonstrated that ‘disaster’ has immediate security implications; and the systems most poised and equipped to swing into action during crises—including systems for the delivery of health care and humanitarian assistance—are either based on military models or directly operated by military machines. War zones become laboratories for the militarization of humanitarian assistance, including health care, with disastrous effects (see Oxfam International 2010; Nordland 2010). Conversely, disaster zones become front lines for military action—so the US military’s Joint Task Force Haiti and Military Engineering Battalion were immediately dispatched to manage camps for displaced
persons and the relocation of thousands to less crowded areas outside Port-au-Prince (Webster2012).

While the situation in Afghanistan is beyond the scope of this chapter, the logic of United States and NATO military officials on duty there, who ‘say traditional aid groups have neither the capacity nor the willingness to bring large-scale aid programs to conflict areas’, is easily applied to situations of so-called natural disaster (Nordland 2010). Melinda Cooper provides evidence, from official documents published in the 1990s and early 2000s, that United States foreign policy now defines ‘a whole spectrum of potential homeland emergencies—from terrorist attacks to epidemics and freak weather events’—as potential security threats and thus subject to military intervention. After 11 September 2001, ‘the boundaries between the realms of war and civil life’ became even more blurred, as the United States security apparatus began to categorize public health emergencies, natural disasters and the like as “biological security” threats’ requiring ‘the same kind of full-spectrum military response as deliberate acts of terror’ (Cooper 2008). Brian Massumi likewise discusses the ‘generalized crisis environment’ that has reconfigured US foreign policy since 11 September 2001. Subsuming every kind of emergent threat—weather, biological, military—under a massive national security apparatus, a new ‘civilian-military continuum’ paradoxically unhinges normativity by rendering crisis, or a perpetual state of emergency, the new biopolitical normal. Crisis management is today’s biopolitics. (Massumi 2011)

The response to Hurricane Katrina foreshadowed that to the earthquake in Haiti (and subsequently to the tsunami in Japan), with not only military helicopter surveillance but also the awarding of major contracts for post-hurricane reconstruction to the same military contractors (for example, Halliburton) that have prospered in Iraq. An important paradox Cooper points out in all this is that, at the same time neoliberal economic doctrine had become fixated on ‘emergence’ and being prepared for the emergent event, cutbacks in public health and social service budgets and their replacement with military machinery for disaster relief were making such preparedness impossible (Cooper 2008). In fact, the politics of risk—whether in the undertaking of drone attacks or of building and siting nuclear power
plants—entail a remarkable underestimation of the probabilities of risk to human and biospheric life, or worse: arrogant judgments about which lives matter and which do not.

In economic terms as well, we see in the Haitian crisis the operation of contemporary global patterns, so that the rumblings of what Naomi Klein has called the neoliberal ‘shock doctrine’ and ‘disaster capitalism’ quickly followed the roar of the helicopters over Haiti. International politicians and development experts rushed in to proclaim the earthquake an ‘opportunity’ for economic investment, and proposals surfaced to rebuild Port-au-Prince from the ground up; to move its residents out into a whole network of new towns with new systems of privatized transport, housing, sanitation, schools, clinics and commercial outlets; and to decentralize the state (Klein 2007; Olopade 2010). Here too the shadow of Hurricane Katrina looms, as the story emerged that former President Bill Clinton’s foundation had awarded a million-dollar contract to a company called Clayton Homes to provide twenty trailers for use as classrooms for Haitian schoolchildren. This was the same company, owned by multi-billionaire Warren Buffett’s Berkshire Hathaway, that was being sued by the United States Federal Emergency Management Agency (FEMA) for the highly carcinogenic formaldehyde found in trailers it had built for homeless victims of Katrina. But tests have shown that the formaldehyde in the trailers sent to Haiti is ‘two and a half times the level at which . . . sensitive people, such as children, could face adverse health effects’; and the trailers are entirely lacking in sanitary facilities. (MacDonald and Doucet 2011) A similar story of lucrative forms of population management through humanitarian aid lies in the tons and tons of US-government-subsidized rice that have been donated to Haiti, effectively wiping out indigenous rice production (in earlier decades Haiti produced most of its own rice) and making Haiti ‘the fourth largest recipient of American rice exports in the world’. Here again President Clinton has been a key promoter of these subsidies, which ‘help his home state of Arkansas, the largest rice producing state in the US’, while also contributing to the destitution of local rice farmers. (Webster 2012) Such is “humanitarian relief” in the era of disaster capitalism.
Disaster may provide not merely an opportunity but also a primary terrain for aggressive neoliberal capital accumulation in the twenty-first century. Massumi remarks, ‘Neoliberalism, as a process, does not presume stability’. He reminds us that Foucault, in his *Birth of Biopolitics*, understood neoliberalism as operating in “an indefinite field of immanence” in which life falls under the “dependence” of a “series of accidents”:

The neoliberal economy is in a state of enterprise emergency by nature, at every complexly interconnected level, from the local through the national to the global. And it embraces that condition. Its mechanism is to ride waves of metastability through the turbulence of a permanently uncertain environment. . . . It does not try systematically to shelter itself from the storm. It spontaneously self-organizes following the turbulence of a far-from-equilibrium environment whose immanent agitation never ceases to haunt it with the specter of wave-convergent synergies suddenly forking into crisis. . . . It is emergent order on the edge, riding the wave crest of everywhere-apparent chaos. (Massumi 2011, 36-37)

The troubling, if by now all too familiar, scenarios of militarized crisis as investment opportunity have a very particular significance in the Haitian context. It is not a sign merely of incompetence or skewed priorities that the instant militarization, occupation and rush to find highways to economic boondoggle were accompanied by obscene neglect and failure to provide the most basic, critical medical and sanitary resources, again recalling Katrina. At a meeting sponsored by DAWN in Mauritius in January 2010, we heard reports from colleagues that the United States government, which had seized control over airports and seaports, was blocking access to CARICOM relief groups and Médecins sans Frontières (MSF), so experienced health responders could not reach Haiti. Confirming these anecdotes, the *International Herald Tribune* reported that eight of MSF’s planes carrying emergency medical equipment, as well as United Nations World Food Program planes, had been diverted from landing in Port-au-Prince by officials of the United States Air Force, now in command of the airport. Meanwhile, a private plane carrying
the governor of Pennsylvania, seeking to help transport Haitian orphans to the United States, was allowed to land (Carvajal 2010). The Clinton Foundation’s “gift” of leaky, formaldehyde-laden trailers with no toilets or running water is ‘a classic example of aid designed from a distance with no understanding of ground realities or needs’ (MacDonald and Isabeau 2011). Or perhaps the lack of understanding is willful, given Haiti’s enduring status as the hemisphere’s foremost state of exception.

We need to critique these skewed priorities on two scales: at the geopolitical level, the global trend since the mid-1990s, discussed above, toward the militarization and capitalization of humanitarian disaster relief; and at the local level, the particular meanings of this trend given the long history of Haiti’s neocolonial occupation by United States military forces and United Nations peacekeepers. At the level of the local and particular, we should notice how seamlessly Haiti—supposedly a sovereign state—becomes folded into United States policy for securing the ‘homeland’. Militarization and securitization of post-earthquake emergency relief maps onto Haiti’s historic status, in the eyes of the West, as its black female upstart and its forced concubine. That status invites a third response to Haiti’s crisis, in addition to militarization and economic exploitation: conservative moralizing. The nineteenth century colonial agenda of ‘civilizing the natives’, with its highly gendered and racialized dimensions, is alive and well here. When the disaster struck, United States evangelical preachers saw signs of God’s wrath, with the Reverend Pat Robertson informing us that Haiti had long ago made a ‘pact with the devil’. This was a clear allusion to the misunderstood practice of Vodou, or Voudou, which white westerners have always seen as not only ‘uncivilized’ and ‘unchristian’ but also sexually perverse. The implication of course is that Haiti’s plight is her own fault, attributed to her cultural backwardness and profligacy. More telling still are the words of conservative columnist David Brooks, hardly a member of the right-wing evangelical fringe, in a piece called ‘The Underlying Tragedy’ he wrote for the New

---

4 According to Amy Wilentz (2011), Aristide had a direct role in the establishment of United Nations peacekeepers in Haiti when he disbanded the national army after they worked to oust him. Mimicking previous administrations, President Obama tried to pressure the South African government not to allow Aristide’s return to Haiti before the presidential election runoff. But the South African government resisted, and Aristide, who is ineligible to run for another term in office, did return in March 2011—to the cheers of his millions of poor, female and young supporters and the anger of the wealthy elites who oppose him (Archibold 2011c).
York Times shortly after the earthquake. It is worth quoting from Brooks’ (2010) column at some length:

Haiti, like most of the world’s poorest nations, suffers from a complex web of progress-resistant cultural influences. There is the influence of the voodoo [sic] religion, which spreads the message that life is capricious and planning futile. There are high levels of social mistrust. Responsibility is often not internalized. Child-rearing practices often involve neglect in the early years and harsh retribution when kids hit 9 or 10. . . . Some cultures are more progress-resistant than others, and a horrible tragedy was just exacerbated by one of them.

In other words, Brooks appears actually to be blaming the Haitian ‘tragedy’ on bad mothers and exporting to Haiti a stereotype aimed at African American women for at least 150 years, through ‘Jezebel’ and ‘brood sow’ images and the ‘pathological family’ of the 1965 Moynihan Report. His “solution” is also painfully familiar: ‘. . . the programs that really work,’ he argues, ‘involve intrusive paternalism’—‘[replacing] parts of the local culture with a highly demanding, highly intensive culture of achievement—involving everything from new childrearing practices to stricter schools to better job performance’ (Brooks 2010).

Or, failing that, perhaps Brooks would recommend sending rescue missions to whisk Haiti’s children to be raised in the United States. Indeed, ‘intrusive paternalism’ took concrete form, as The New York Times reported ‘a baby lift unlike anything since the Vietnam War’, with some 1,150 Haitian children ‘swept up’ for adoption by American families. This operation was facilitated by the Obama administration’s waiver of visa requirements for the children and without the usual screening to make sure the children were actually orphans or in distress, had no relatives in Haiti willing to care for them, or were being placed in safe and adequate home environments in the United States (Thompson 2010)—in effect, a mass, officially sanctioned kidnapping. Here we have colonialism full-blown, along with classic blaming the victim and assurances that ‘cultures do change after major traumas’ (Brooks 2010). In this view, the earthquake presents not just ‘economic
opportunity’ but also an opportunity for Haiti’s cultural and moral redemption—to become more like us, or more like the white corporate heterosexual man.

Sadly, evangelical neocolonialism has not met with the kind of local resistance Haitians frequently mete out to foreign occupiers. Although, as a former French colony, Haiti has no laws criminalizing homosexuality, it has a local culture almost as susceptible to conservative moralizing and the homophobic propaganda of North American and home-grown evangelical preachers as are many parts of the United States. According to a qualitative study by the International Gay and Lesbian Human Rights Commission (IGLHRC) and SEROvie (2011), a Haitian organization providing HIV and other services to men who have sex with men and transgender women, immediately after the earthquake ‘local and foreign religious zealots [began] blaming both Haitian culture and its gay community for calling down the wrath of God’ and causing the disaster—a form of ‘accusatory theology’ that has surfaced in many disaster sites across the globe. When an AIDS service organization’s office was destroyed and several of its staff members killed, neighbors were heard cheering, ‘Thank you Jesus, the president of the pedophiles is dead’ and ‘Death to the Masisi [gays].’ Post-earthquake radio and church sermons not only blamed ‘sinners’ and sexual immorality for the catastrophe but also invoked the common belief associating Vodou practice with homosexuality and transgender expression (IGLHRC/SEROvie 2011, 7). As we shall see, these attitudes render sexual and gender nonconforming people triply vulnerable in conditions of disaster.

As six-month and one-year benchmarks passed after the earthquake struck Haiti, commentators were unanimous in condemning the slowness and paltriness of recovery efforts and the ‘absence of a coherent plan’ (Editorial, The Observer 2010). By ten months after the quake, only five per cent of the millions of cubic yards of rubble covering the affected areas had been cleared, and only a small fraction of the 1.5 million people who lost their homes had been moved to safer housing. Over a million (including 380,000 children) were still living in makeshift tent cities, in shanties in dangerous areas such as urban median strips, in the over 1000 camps for internally displaced persons, or in the seemingly endless piles of rubble. Landowners began forcibly evicting people living in squatter camps and tent cities,
now left with no place to go and no protection from the government (Center for Constitutional Rights 2011). Only around two per cent of the promised 125,000 better-standard housing units had been built, and only ten per cent of the USD 5.3 billion in aid pledged by foreign donors had actually reached the Haitian government. (Sontag 2010a; Delbert 2010; Editorial, *The New York Times*, 2010; Interlandi et al. 2010; Quigley and Shah 2011)

By the two-year benchmark, at the end of 2011, the numbers of displaced homeless people had been reduced by nearly half, thanks to the construction of modest but permanent shelters, leaving nearly 520,000 ‘people still living in tents and under tarpaulins without access to running water, a toilet or a doctor’. Moreover, according to an Oxfam Briefing Report, ‘half of the rubble remains uncleared; . . . few Haitians can access basic services; much [70 per cent] of the workforce is unemployed or underemployed; [and] 45 per cent of the population face food insecurity’. And of the many billions of USD pledged for reconstruction in 2010-11, only 43 percent had been disbursed by the end of 2011. (Oxfam 2012; Webster 2012) Even the relief funds that did materialize seemed to float in an institutional vacuum. According to a *Newsweek* research team writing in November 2010:

> Neither the Haitian government nor any of the countless NGOs that have descended on the country are capable of directing vast sums of money in the business of large-scale disaster recovery and reconstruction. In fact, disbursing the funds that have landed is proving so difficult that the Red Cross has stopped actively soliciting donations, and the World Bank . . . has deliberately slowed the flow of cash to Port-au-Prince.

The clear implication of this analysis is that only the private companies waiting in the wings to maximize their investments in the Haitian disaster have the capacities to clear and rebuild the country. (Interlandi et al. 2010)

On top of the hordes of NGOs, a post-earthquake United Nations entity was created, the Interim Haiti Recovery Commission (IHRC), headed by Haitian Prime Minister Jean-Max Bellerive and former United States President Bill Clinton. In a *New York Times* op-ed piece that perfectly illustrates the neoliberal model of catastrophe,
Bellerive and Clinton called upon ‘the partnership and cooperation of the World Bank’ to facilitate the release of Haitian reconstruction funds promised by governments. They also hailed the ‘ample opportunities for investments with longer-term dividends—in agriculture, construction, tourism, manufacturing, service industries and clean energy, especially solar’—that beckon disaster capitalists to Haiti (Bellerive and Clinton 2010). To guarantee the security of these investments, some 12,000 peacekeeping troops (MINUSTAH), installed in 2004, have been ‘an international occupation force . . . which controls the forces of order in Haiti to this day’ (Wilentz 2011; Liana and Doucet 2010). Haiti, in other words, is a society run by the global, militarized system of humanitarian relief. As one commentator puts it bluntly, ‘Haitians do not rule Haiti, and have not since 2004’ (Podur 2011).

Thus, at the heart of the post-earthquake failures lies the phantom nature of the Haitian state. In addition to bureaucratic snarls and the diplomatic intricacies of figuring out how to divide responsibility between local and international authorities, the already weak Préval government was decimated in the disaster, most of its buildings and almost twenty per cent of its work force destroyed. But this political weakness can only be understood in the context of the two hundred years of foreign dependency and occupation discussed earlier. As the Newsweek article puts it, ‘Haiti’s public sector crumbled long before its presidential palace’. In the early 2000s, the Bush Administration’s ‘sustained campaign to block aid from reaching the Haitian government’ of President Aristide meant diverting any assistance away from the government to NGOs, a pattern followed by most international donors in Haiti. As a result, according to Dr. Paul Farmer—currently United Nations Deputy Special Envoy for Haiti, founder of Partners in Health, and longtime provider of HIV/AIDS treatment and prevention and other health care in rural Haiti—Haiti in the past decade underwent a kind of reoccupation, this time by armies of non-governmental and intergovernmental agencies funded by billions of dollars in humanitarian assistance monies—creating what some have called ‘a republic of NGOs’. According to Farmer, ‘[e]ven before the quake, there were more NGOs per capita in Haiti than in any other country around the world, save India’. International NGOs and

---

5 The IHRC’s mandate expired in October 2011, with most of its approved projects left unfinished. At this writing, the mandate had not been renewed.
contractors not only absorb enormous amounts of foreign assistance monies without any accountability but also take over the job of Haiti’s public sector, which United States law prohibits from receiving foreign direct investment in any case. So Haiti, weakened by the earthquake, ‘needed many of the foreign contractors and NGOs’, but their presence further weakens the country’s governance and job-creating capacity—a ‘vicious circle of dependence’. (Farmer 2011, 99; Carroll 2010)

Nowhere have the distortions of militarized humanitarianism and its direct conflict with the human rights of health become more evident than in the cholera epidemic that broke out in the aftermath of Haiti’s earthquake. As early as July 2010, at least one commentator was warning that the severe level of displacement and homelessness had ‘dramatically increased the risk of communicable disease transmission’ as well as respiratory illness, mental health problems, sexual and gender-based violence, and HIV/AIDS. People living with AIDS in Haiti numbered 120,000 before the earthquake; their vulnerability to opportunistic infections and tuberculosis has undoubtedly risen in the post-earthquake chaos (Williams 2010). No one, including public health experts, anticipated that cholera—a disease not seen in Haiti in fifty years—would suddenly appear in the region of Artibonite and then spread rapidly to other parts of Haiti so that by May 2011, over 4,500 people had died and 300,000 cases been documented (United Nations Final Report 2011; McNeil 2010; Archibold 2010a). At this writing, the epidemic, far from being under control, seemed to be growing still.6

What triggered the epidemic, and why has a disease that in most parts of the world is fairly easily contained and cured become so lethal and out of control in Haiti? The answers are political as much as epidemiological and reflect the deadly mix of poverty, disaster, neoliberal economic and political regulation, and military occupation that define Haiti’s status as the feminized, racialized pariah of the hemisphere. The reporter who broke the story of the cholera outbreak in October 2010 traced it to an overflowing septic tank behind the United Nations base housing

---

6 A study published in The Lancet predicted that, without a full offensive involving reduced consumption of contaminated water, vaccinations and use of antibiotics, 779,000 more cases and around 11,100 cholera deaths would occur by end of November 2011 (Andrews and Basu 2011).
peacekeepers from Nepal; the United States Centers for Disease Control and Prevention confirmed that the cholera strain was similar to one from South Asia; and Harvard University’s chair of microbiology concluded that it ‘very much likely did come either with peacekeepers or other relief personnel’ (MacDonald 2010; Katz 2010a; Delva 2010). An independent panel of experts set up by the United Nations to review all the existing studies and medical records also confirmed that the strain of the bacterium causing the cholera outbreak came from fecal matter dumped into the septic tank and the river system behind the MINUSTAH camp housing the South Asian peacekeepers. But the panel also emphasized that the further spread of the disease was due to a whole ‘confluence of circumstances’, primarily Haitian people’s lack of access to safe water, sanitation and adequate medical care (United Nations 2011).

All commentators have observed how the conditions of earthquake devastation and pre-existing poverty have contributed to this calamity. Since cholera spreads through fecally contaminated water, the lack of decent sanitation facilities and potable water sources and inability to afford bottled water that millions of poor and displaced Haitians have to cope with, along with crowded camps, create the perfect medium to grow an epidemic (Archibold 2010b; PAHO 2010). Being forced to drink from contaminated river water, to defecate in jars or plastic bags or the open ground, or to wash babies’ diapers in the river from which you drink, represents gross violations of the internationally recognized ‘right to the highest attainable standard of health’ contained in many human rights documents (Petchesky 2003; Quigley and Shah 2011; Gerntholtz and Rhoad 2010). These bleak conditions also constitute violations of women’s reproductive health rights. According to the feminist solidarity organization MADRE, ‘When the earthquake struck, there were an estimated 63,000 pregnant women in Haiti. With extremely limited access to emergency obstetric care, including a severe shortage of skilled midwives and maternity clinics, many pregnant women were forced to deliver their babies in the street.’ (MADRE 2010a). The cholera epidemic simply compounds the drastically high maternal and infant mortality in Haiti, adding infectious disease to homelessness, lack of prenatal and obstetric care, and the rapes that sometimes cause unwanted pregnancy.
To argue that human rights are at issue here (on the more general question of human rights and health in a globalized world see Chapman, this volume) is to return to the materiality of power: denial to Haitians of the most basic infrastructural conditions for realizing the human right to health is a matter, not of unforeseeable natural disaster, but of biopolitics and deliberate global policy. In 2000, as part of its campaign against then President Aristide, the United States government blocked an Inter-American Development Bank loan of USD 54 million meant to improve Haiti’s public water system. According to one report, ‘the United States actively impeded the Haitian government’s capacity to fulfill Haitians’ human right to water through its actions, thus breaching its duty to respect human rights’ (Farmer 2011; MacDonald 2010). Beyond the human rights violations, such actions epitomize the ‘letting die’ of necropolitics, and the infected dead bodies that relatives are too fearful to claim become the most abject symbol of Haiti’s pariah status (Archibold 2010b). A World Health Organization spokesman, commenting on Haiti’s latest crisis, says: ‘We really need to reconstruct water and sanitation systems for the cholera epidemic to go away completely’ (Roberts/BBC 2011). Are humanitarian efforts and foreign investments through such neoliberal entities as the Interim Haiti Recovery Commission likely to make this happen, much less to restore Haiti’s nationhood? As Aristide wrote prior to returning to his country, ‘What we have learned in one long year of mourning after Haiti’s earthquake is that an exogenous plan of reconstruction—one that is profit-driven, exclusionary, conceived of and implemented by non-Haitians—cannot construct Haiti’ (Aristide 2011).

But the Haitian pariah continues to rise up and rebel, never content with passive victimhood. The reports linking the cholera epidemic to United Nations peacekeepers provoked angry, sometimes violent or armed protests against the base and the peacekeepers, with shouts of ‘MINUSTAH go home’, followed by the deployment of anti-riot police to quell the protestors (UPI 2010). Those riots themselves echo many others in previous years, reflecting a deeper and more longstanding popular resentment against the United Nations occupation troops for draining scarce resources, including health care and aid funds; for policing and abusing Haitian residents; and for being an occupying force, entirely unaccountable to the Haitian people, that both signifies and carries out Haiti’s subjection since the
overthrow of Aristide (Naiman 2010; Katz 2010a). Of especially bitter memory are the cruel suppression of the resistance to the 2004 coup that ousted President Aristide and the killing of so many pro-Lavalas supporters. According to the WikiLeaks reports discussed earlier, MINUSTAH troops had carried out this suppression, shooting people in the streets and markets and assassinating a revered pro-Lavalas leader in 2005 (Coughlin and Ives 2011a). But perhaps the most egregious human rights violation by occupying troops is that of persistent sexual abuse.

Another epidemic came to light in the aftermath of Earthquake Tomás in Haiti: the epidemic of sexual and gender-based violence against women, children and transgender people—violence that is frequently perpetrated by United Nations peacekeepers and international aid workers. Field reports by Human Rights Watch, journalists and local women’s NGOs attest to a sharp increase in rapes, beatings and threats against women and girls, especially among those sleeping in the camps or the streets. As in thousands of camps across the globe, conditions such as ‘poor or nonexistent lighting, unlockable latrines, adjacent men’s and women’s showers and inadequate police protection’ contribute to this escalated risk (Rhoad 2010; Sontag 2010b; Giles and Hyndman 2004). Thus a petition filed in January 2011 before the Inter-American Commission on Human Rights by a group of advocates and attorneys for displaced women in Haiti argued that the insecure conditions of the camps and the massive homelessness brought by the earthquake underlie this ‘epidemic of sexual violence’, making ‘permanent, safe housing for Haitians’ a matter of utmost urgency. The Commission responded by recommending improved security patrols and better lighting in the camps; ‘access to medical care (including emergency contraception for survivors of rape and sexual assault. . .)’; legal accountability; and ‘full participation and leadership of grassroots women’s groups in anti-violence policies and practices in the camps’ (Center for Constitutional Rights 2011). Prompted by an anti-rape forum held in Port-au-Prince in May 2011, the newly elected Haitian government promised new legislative measures and better police training, as well as improved housing conditions, to meet the security needs of internally displaced persons (Anzia 2011).
It is certainly true that the conditions of ‘bare life’ and deprivation in the camps, where millions displaced by armed conflict and disaster reside, escalate the risk of sexual violence (Petchesky and Laurie 2010; Laurie and Petchesky 2008; Agamben 1998). Yet sexual violence by peacekeepers and aid workers in Haiti predates the hurricane and speaks to Haiti’s chronic subordination as a ‘kept’ society, under continual international military occupation. In March of 2005 a flurry of reports by United Nations officials and internal documents, international human rights organizations, journalists, and local observers alleged that United Nations peacekeepers in many countries ridden with poverty and conflict—Haiti heading up the list—engaged regularly in acts of rape, prostitution, sex trafficking and paedophilia with women and girls (sometimes as young as twelve) among the populations they were assigned to protect (Bowcott 2005; Lynch 2005). In May 2008, Save the Children Fund issued a report documenting ‘the underreporting of child sexual exploitation and abuse by aid workers and peacekeepers’ in Southern Sudan, Côte d’Ivoire and Haiti. Based on field visits, focus group discussions and in-depth interviews in towns, villages and rural areas, the report identified many forms of sexual exploitation—sexual favors in exchange for food, soap or mobile phones; forced sex; verbal sexual abuse; child prostitution or trafficking—inflicted on children as young as six, mostly girls but boys as well.\(^7\) While workers with many humanitarian organizations were implicated in such abuse, by far the largest volume of complaints was registered against agents of the United Nations Department of Peacekeeping Operations, that is, predominantly male peacekeepers in the blue helmets (Csáky 2008, 8-9). One young Haitian boy, when asked why kids seemed reluctant to report such incidents, replied: ‘Who would we tell? We wouldn’t tell the police because they are afraid of the peacekeepers and they can’t do anything. Anyway, I’ve heard that the police do this kind of abuse too’ (Csáky 2008, 14).

If the earthquake’s devastation and displacement exacerbated the risks of violence against heterosexual women and children, the insecurities faced by lesbians, gay men and transgender people in post-earthquake Haiti have multiplied

---

7 ‘My friends and I were walking by the National Palace one evening when we encountered a couple of humanitarian men. The men called us over and showed us their penises. They offered us 100 Haitian gourdes (USD 2.80) and some chocolate if we would suck them. I said no, but some of the girls did it and got the money’ (15-year-old Haitian girl) (Csáky 2008, 5).
ten-fold. According to the IGLHRC and SEROvie field study cited earlier, which interviewed around 75 LGBT people in Haiti in 2010, discrimination, violence and stigma based on sexual orientation and gender expression were widespread in Haitian society prior to the earthquake. However, the disaster left sexual and gender minorities far more vulnerable insofar as ‘it decimated the already limited physical spaces, social networks and support services available to them’ (IGLHRC/SEROvie 2011, 3). And, like the dead cholera victims, the bodies of transgender and gay activists killed in the earthquake, the most abject of the abject in a pariah society, could not be claimed (7). Those who survived have found themselves not only shunted into camps and exposed to sexual violence and harassment like cis-women and girls but also victimized by exclusion from (or increased exposure in) sex-segregated bathrooms, health services and emergency food distribution. Since priority in food rations is often given to female household heads, gay and transgender men, whose families have frequently rejected them, have tried to disguise themselves as women in order not to go hungry. Lesbians, bisexual and transgender women, on the other hand, reported feeling ‘unsafe in crowded, volatile environments’ and being stigmatized as prostitutes. Even more than heterosexual women and girls, LGBT people view the police and peacekeepers as likely attackers rather than potential protectors (IGLHRC/SEROvie 2011, 4-6). Unfortunately, the most visible organizing against sexual and gender-based violence in post-earthquake Haiti seems to ignore these realities.

So we return to sexuality as the lynchpin of biopolitics and have to wonder, when we talk about the militarization of humanitarian interventions are we inevitably talking about their sexualization as well? Is sexual abuse endemic to military occupation, and does it work in some ways to aggravate homophobic and transphobic violence and discrimination already embedded in the society (Corrêa, Petchesky and Parker 2008; Giles and Hyndman 2004; Shalhoub-Kevorkian 2009; Zarkov 2007)? Should we have been surprised when people in Cap Haitien violently attacked United Nations troops, whom they perceived to be the source not only of disease and death from cholera but also of years of harassment, surveillance, impunity and rampant sexual abuse of themselves and their children? On the other hand, should we be surprised that some of the earthquake’s victims turn on their
sexual and gender nonconforming neighbors as scapegoats to blame for a calamity that seems too cruel to blame on God? The politics of sexuality and gender undermine unity against economic injustice and militarism because they have affective power. They arouse passions about individual bodies and identities through norms of true “manhood” and “womanhood” and moral virtue, as well as passions about collective bodies and identities through post-colonial rejection of all that is associated with foreign (US) domination. Human rights strategies such as petitioning the Inter-American Commission may be useful, but we also need to note the distinctly heteronormative terms of the Commission’s recommendations (see above), the exclusions performed there. We have to reflect soberly on the limits of legal pronouncements, not only to achieve enforcement in their own terms, but also to address a virulent culture of homophobia and transphobia and to transform the underlying structures of power that help to sustain it.

Regarding Haiti’s governmentality crisis, The Observer urges ‘the international community’ to step in but ‘without special interest, without hidden military agendas and without economic preconditions’. But which imagined ‘international community’ is this? The one United States presidents have invoked through Security Council resolutions that endorse the bombings of Iraq and Libya? The one that rouses global financiers and private contractors to find lucrative opportunity in disaster? Or the one that garrisons sexually abusive peacekeepers? In the case of Haiti, international ‘aid’ free of such economic, military and sexual price-tags seems, in the current state of things, unimaginable. Some human rights advocates and journalists, on the other hand, would counter neoliberal disaster capitalism and neoconservative ‘intrusive paternalism’ with a more democratic model. They urge involving the Haitian people and local civil society groups in decisions about reconstruction and developing ‘multisectoral approaches’ that prioritize ‘community home-based care systems’ and community-based decision-making methods for health care and urban and rural planning (Rhoad 2010; Williams 2010; Editorial, The Observer 2010). But, as we have seen so tragically in Iraq and Afghanistan, this sort of grassroots people’s reconstruction is precisely what militarized bio-security systems are intrinsically ill-equipped, and unmotivated, to do. The militarization of humanitarian relief has exacerbated its tendency to get stuck in the ‘emergency’ phase of a disaster, leaving
the victims to languish indefinitely in camps; or, alternatively, to facilitate the ‘clearance’ of poor areas and impoverished people to make way for high-powered investors and their development projects.

Andrew Park suggests that ‘humanitarian groups’ are able to carry out the long-run objectives of ‘state regulation and discipline’ precisely because ‘they deal with health, rewards, livelihood and income generation, and security’ and thus come even closer than traditional military methods to biopower as Foucault envisioned it. The prototypical biopolitical form, as Agamben (2005) argued, is the refugee or internally displaced person camp, whose ‘essential nature . . . is security’ and supervision over every aspect of daily life (Park, personal communication). But militarization also exists here in the form of doling out rations, subcontracting operations and policing bodies. Indeed, the militarization of disaster capitalism and the privatization of military pursuits have become so entangled with humanitarian actions that they now comprise a single, complex system of governmentality to regulate bodies and populations caught up in crises.

**Conclusion – Resisting or Reinventing Biopolitics?**

How might we imagine democratic, social justice based approaches to sites where sexual hysteria and climate or other disasters converge? How can we counter the prevalence of militarized neoliberal biopolitics in such crises? This analysis has identified four existing forms of biopolitical governmentality at the global level in sites of disaster: (1) militarized humanitarian intervention, (2) neoliberal disaster capitalism (often partnered with (1)), (3) neoconservative ‘intrusive paternalism’ (including evangelical neocolonialism), and (4) transnational human rights activism. I have critiqued the first three as hopelessly tainted by self-interest, imperialist motives, stigmatization, sexual exploitation, disempowerment of local populations and other problematic tendencies. Implicit in that critique is also the question of, not when or how should ‘the international community’ step in to alleviate local crises, but rather who or what is ‘the international community’? While a full exploration of that question far exceeds the scope of this chapter, in conclusion I want to address the role of transnational human rights and social justice activists in responding to
the biopolitics of sexuality and disaster. Are transnational activist campaigns, however well intentioned, integrally bound up in global biopolitical governmentality? Do they sometimes produce their own forms of ‘intrusive paternalism’, anti-colonial backlash, local disempowerment, and racist stereotypes? And what strategies might help to avoid these minefields?

Thinking strategically requires that we first reconsider, with full honesty, what biopolitics is and the ways in which activists are necessarily or unnecessarily caught up in it. We have seen that militarization, racialization, and sexual and gender economies weave tightly together in the production of biopolitics as a ‘general strategy of power’. But the disciplinary and regulatory effects of biopolitics exert power because they work through affect, simultaneously imbuing fear and hatred into individual bodies/psyches, constructing homophobic societies, and producing resistant or oppositional sexual and gender identities. We cannot ‘escape’ biopolitics any more than we can escape macroeconomics or the reality that security is a basic human need as much as it is a tool of political domination and imperialism. The challenge here is to recognize that when we advocate for quality public housing, reproductive health care, and sanitation for the displaced; or for protection of women, children and gender-nonconforming people from sexual abuse, we are engaging in oppositional biopolitics. How do we do so in a way that is not steeped in paternalistic neocolonialism, disabling legalism and racism?\(^8\)

Post-structuralist and post-colonial writers have presented a challenging critique of human rights and humanitarian discourses deployed by transnational advocates as reducing Africans and peoples of African descent, including Haitians, to the status of helpless victims. Such discourses, they argue, reinforce racist tropes of Haiti and Africa as the site of darkness, violence, and barbarism while perpetuating the arrogant assumption of Northern based NGOs that they are ‘rescuing Africans from their death driven impulses’. Tavia Nyong’o (2011), for example, states:

If Africans [or Haitians] are the permanent targets of humanitarian intervention, who repeatedly have to be rescued from the worst they are

---

8 Once again I am indebted to Andrew Park for reminding me of how Foucault’s understanding of the ‘productive’ nature of biopolitics and discourse means we always are inside, not ever standing on some privileged outside (personal communication).
about to visit upon themselves, then they cannot become visible as agents of a transformational critique of globalization, or of the impoverished, exploited position they have been assigned within it.\(^9\)

To avoid the pitfalls Nyong'o warns against, it seems to me transnational sexual and health rights activists, especially those based in the global north but also the south-based queer and feminist subjects who often get pulled into legalistic and neoliberal frames, need to embrace two critical strategic positions. First, transnational campaigns seem most effective when undertaken in solidarity with, indeed under the leadership of, local groups working on the ground whose knowledge, courage and expertise are often formidable even if their resources are small. In Haiti, many examples exist in spite of horrific conditions. In contrast to the racialized, sexualized stereotypes of helplessness and hopelessness, consider the actual work and recovery efforts on the ground of local women's groups in Haiti's disaster areas. For example, the Zanmi Lasante Clinic in Haiti, MADRE's partner organization, is a community-based clinic that delivers comprehensive primary care regardless of people's ability to pay. Its doctors, nurses and community organizers address social and economic rights issues, such as dozens of water projects in rural villages, as well as reproductive, sexual and primary health care needs. During and following the earthquake, the Zanmi Lasante staff worked tirelessly to identify the most urgent needs of devastated women and families and to mobilize delivery of direct medical aid and supplies (MADRE 2010). This reminds me of the extraordinary heroism of black women's groups during and after the Katrina hurricane in the United States Gulf and the larger truth that, whether as nurses, clinicians, neighbors, mothers and grandmothers, or self-organized community groups, African-descended women actively respond to disasters, defying race and gender stereotypes all the time.\(^10\) Such community-based, grassroots initiatives offer a heartening counterpoint

---

\(^9\) Nyong'o's analysis is problematic in that he conflates all human rights advocacy into a single, stereotyped mold, ignoring that human rights is a distinct regime from humanitarianism and the multiple ways in which it has become a dynamic discursive field for a wide variety of social movements—transgender people, Dalits, sex workers, indigenous peoples—claiming their agency, not their victimhood (see Corrêa, Petchesky and Parker 2008, chapter 7).

\(^10\) Following Katrina, the organization INCITE! Women of Color Against Violence opened a women's health clinic to serve low-income and uninsured women of color in New Orleans. In an article about their project, INCITE!'s leaders stress the need to 're-center women of color in the work of organizing in the context of' disasters. They urge the women most direly affected 'to develop our own
to the macroeconomic and militarized techniques of globally deployed biopolitics; yet they too participate in global connectivity, utilizing the Internet effectively to mobilize international support and raise funds.

A second strategic position that transnational sexual/health rights activists need to adopt to counter prevailing forms of biopolitics is that of broad-based, multi-issue alliances. At the forefront of such strategies should be building strong coalitions between sexual rights and public health advocates and economic and social justice groups that oppose distorted neoliberal development policies and militarized forms of humanitarian intervention as well as corporate opportunism in disasters. When a feminist reproductive health clinic in Haiti embraces safe water projects as essential to its mandate, it conveys an analysis of reproductive and sexual health care, primary health care, and revitalized public infrastructure as all of a piece. When IGLHRC and SEROvie, in an admirable model of global-local collaboration, and Save the Children Fund, reveal the endemic ties between patterns of gender-based, homophobic, transphobic and pedophilic violence and military occupation, they show that militarism and sexuality are perversely and systematically connected. To become reality, these multiple, or ‘polyversal’ (Eisenstein 2004), visions cry out for similarly polyversal coalitions, joining global, regional and local organizations across many fields of activism.

Ultimately, single-issue politics have deadly consequences. Homophobia and transphobia become available as decoys to deflect from systemic as well as environmental crises precisely because they are seen, by advocates as well as opponents, as isolated and disconnected from the conditions of economic distress, militarism, occupation, and structural violence. Conversely, the militarization of humanitarian relief efforts and the conversion of disaster zones into capitalist investment opportunities can become an ‘economic and political order that presents itself as the only alternative’ (Nyong’o 2011, 21) only when their catastrophic effects

community-based resources and responses to violence within our communities, as well as to violence targeting our communities, such as police violence and environmental racism. Centering the lives of women of color—because they are often the primary caregivers for both children and elders—might have helped us anticipate the way that children would be targeted in chaos and the way in which people with disabilities and elders might be trapped in nursing homes and hospitals’ (Bierria and Liebenthal/INCITE! 2007).
on gendered and sexual bodies disappear from view. Human rights campaigns and petitions to international human rights bodies might result in affirmative pronouncements (like that of the Inter-American Commission on Human Rights), but their actual translation into effective policies and practices will rely on mobilized opposition groups ever vigilant against the obstructions of international and national power centers and ready, if necessary, to go to the streets. Opening up the panorama of these complex intersections is dangerous and, at the same time, the only way forward to a politics that moves beyond rhetoric and legalism toward social transformation.

For citation references, please contact the author: rpatches@igc.org.