BIOPOLITICAL
CONCEPTION &
STRATEGY OF
ONCOLOGY IN THE
ACTS OF LIFE AND
DEATH

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Abstract: The study, (whose original proposal is launched during our ongoing academic journey in the Doctoral Program in Bioethics of the Faculty of Medicine of the University of Porto/Portugal), presents some questions about the theme that involves biopolitics, highlighting the oncological universe in the current historical moment in order to rethink the references about professional practice in institutional practice. This is a brief reflection in which at least two sides of the same field of knowledge are present > oncology: the theoretical-practical conception of the decision-making process in daily professional practice, in which the determining action of life and death must be analyzed in its problematization; and, the strategic intervention understood as politics that involves the practices guided by ethics and values that promote Human Rights results in its interrelation with politics in order to express the contradictions of social reality.

Keywords: Biopolitics; decision-making process; Power relations; Strategy.

INITIAL CONSIDERATIONS

Scientific production in terms of Bioethics in Brazil is very fruitful in the academic field. However, the practices developed and articulated to the oncology daily life in the current historical moment evidence, even more, its concern in seeking possible ways to deal with the integrality of the subject, considering his human condition.

In this investigative path, we turned our attention to rethinking our references on the decision-making process, often present in professional practice with cancer patients. We realized the need to adopt strategies to face the problem of frailty caused by the impact of the cancer diagnosis, whether in the terminal phase or not. We need a response in which human-social empowerment becomes the objectification of action.

Thus, we began our reflection on the concept of strategy that we defend and, even, the path we traced to rethink certain unknowns that persist in life and death decisions, to subsequently seek theoretical support in Michel Foucault, from his analysis of power, explaining a position of questioning about the contradictions that permeate social relations in the capitalist world.

At the end of this discussion, we bring to the fore the understanding that norms establish a strong link between the individual and collective body as well as the influence of their interference in the public or private. And somehow we repeat 1 our concern with the pedagogical, political or ethical aspects contained in the norms that guide professional procedures aimed at the end of life in order to guarantee the quality of death (CHAVES et al, 2021, p. 519).2

THEORETICAL-METHODOLOGICAL PERSPECTIVE

We understand strategy as a political and dynamic instrument because it is used to modify/alter the action process according to the specific circumstance/situation. Conceived this way, it can define and redefine decisions and this way, streamline practices and leverage the new in the collective. In this line of reasoning, the dynamics in which the strategy of social relations is processed in the contradictory scope of capitalist society, drives the creation of a new rationality in work based on ethical, political and methodological dimensions.

1. This position is registered in our previous works delivered to this University because it marks the political stance towards the oncological reality from the perspective of biopolitics.
The reiterated and decontextualized use of concepts results in the benefit of a more routine than innovative practice. Being critical of action means building new designs that appreciate differences in the search for a link of convergence between conceptual discourses.

In this brief reflection, both the theoretical-practical conception of the decision-making process by the different subjects that make up this space of struggle for life and death with dignity, as well as the strategic intervention anchored in ethics and values implicit in power relations, must be considered. By examining the relationship between ethics and politics, Giuseppe Tosi (2002) seeks to justify and legitimize the existence of a public ethics that must be better analyzed. According to Luis Eduardo Soares (2002, p.14) “human rights have become a strategic reference”.

This analysis is based on a historical retrospective of at least six decades to change the old-fashioned view of values, changing the conception of superstructures to admit their structuring role. Values [more than masking reality or neutralizing contradictions] can express them, articulating a language that gives them aggregating potential (Ibid., p.10)

Some areas of knowledge dialogue on this topic with analyzes related to the theory of biopolitics. To address our questions about this particularity, we will make some notes on our reading and interpretation of Michel Foucault. Thinking about the policies that regulate institutional daily life, as a space for professional practice, means going beyond the walls of the academy and prioritizing the complex scenario in which the relationships between doctor/staff and patients/family members must consider new possibilities that meet, not only the right to decide their own condition of life and death, but also as a biopolitical concept in oncology.

Let us begin by sustaining that power constitutes the essential category inscribed in the political dimension, in order to subsequently adduce that strategy requires new forms of exercising power manifested (primarily) in the decision-making process. “Biopolitics debates the entry of bios into government techniques, that is, the return to the animality of policies that perceive the human being as bare life” (TREVISAN; ROSA, 2016, p.266).

In this perspective, we intend to reflect on biopolitics as a possibility to seek new horizons from Foucault, because, according to him, “for the first time in history, without a doubt, the biological is reflected in the political” (1999, p. 134). His understanding must be sought in the new mode of relationship between history and life/death. To this end, we make use of the words of Trevisan and Rosa (2016, p.266), whose investigation takes place within the educational context, which implies dealing with the professional training process open to new possibilities and here, in particular, related to biopolitics. Thus, Foucault (1999, p.134) cited by these scholars brings to the fore the relationship between history and life as a double position of life that is situated outside of history with

4. Here, our thinking is based on the last work delivered in which we reflect on palliative care in relation to the practice in the bioethical context that has been leveraged in the WHO proposal of a humanized treatment to improve the quality of life and death.
its biological surroundings and, at the same time, “within human historicity”, infiltrated by its techniques of knowledge and power” (Ibid., p.266).

We agree that an effort to understand Foucault means making a deconstruction in relation to “traditional legal-political theories that attribute the centrality of power to the State” (DANNER, 2010, p.143) and even in relation to this inversion of the analysis, evidence “the existence of a network of micropowers articulated to it (State) and that cross the entire social structure” (Ibid., p.144). Therefore, in this genealogy it is essential to develop an alternative conception of power, in its positive sense and ideological aspect that interacts in the collective, in a network formed by individualities. In these terms, in modern society, the contradictions arising from capitalism establish disciplinary (anatomo-politics) and normative (biopolitics) relationships. This is because Foucault considers that the development of the individual and of sociability occurs through basic conditioning.

This philosopher does not propose to create a theory of power, but rather an “analysis of power” because it argues that power is not a natural object, but a practice that is historically constituted (MACHADO apud DANNER, 2010, p.145). This way, one stops thinking about sovereign power (dominant and dominated) to think about practices or power relations and, therefore, something that is exercised, understood as a strategy. In other words, the power exercised as a strategy refers to techniques and actions, which is not a privilege acquired by the dominant, but the “effect of the set of its strategic positions”, manifested and renewed by the position of those who are dominated” (FOUCAULT, 1975, p.28). “Where there is power, there is always the possibility of resistance” (Ibid., p.29), a statement based on a broad discussion of processes and struggles that determine the possible fields of knowledge. These are approaches that support the study of disciplinary power (sense of technique or mechanism of power that allows control of the body’s operations and subjection of its forces; that is, it is a political anatomy and defines how to have power over the body of others) and the biopower analysis.

On this basis we can approach biopolitics and population normalization. For this philosopher, in the 18th century the West experienced major transformations in the mechanisms of power. It means to say that the sovereign power that dictates the right to cause death or to let live is replaced by a power to generate life. This period marks the process of entry of life into history, that is, “the entry of the phenomena proper to human life in the order of knowledge and power” (Ibid.). Little by little, man learns the conditions of his own existence, his human condition, the probability of life, individual and collective health – a moment in which the biological is reflected in the political.

Finally, we can associate these elements with the ethical values that guide professional responsibility and competence in the institutional space that moves the relationship between patients and oncology professionals becomes increasingly accessible to the fact of living since power can approach the biological processes to modify them more than the chance of death and its fatality.
**FINAL CONSIDERATIONS**

Biopolitics will deal with the biological processes related to man-species, establishing a regulation of this new multiple body whose understanding must consider combinations of life and death; morbidity and longevity; health and illness; possibilities and limits; humility and arrogance; knowledge and ignorance; in short, all expressions reflect the double face of the same coin present in institutional daily life from the production of multiple knowledge, such as sociology and medicine.

We considered the premise that there is a close relationship between them and an interface with the new forms of biopolitical control, from the axis of market economies, influenced by economic neoliberalism. This is based on the meaning of biopolitics in the new configurations of the market economy / new relations of capitalist production, anchored in the redirection of Foucault's research in the period between 1978 and 79 in which there is a kind of adjustment of individuals to the new relations of production of the capital.

Finally, to point out that it is about biopolitics when considering the power-knowledge as an agent of transformation of human life, because now what is on the agenda is the new concept of population that is built to establish a collective dimension in the field of knowledge. A normalizing society that involves the surface that goes from the organic to the biological, from the institutional procedures of political anatomy and biopolitics within the scope of action and still enhances the strategic intervention to the decision-making power through knowledge, or the connection of knowledge, in order to guarantee quality and dignity, not only in life itself, but even in the end of life.
REFERENCES


FOOTNOTES

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