

Introduction

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As we all know, Illich was a prophet. Not a man with a crystal ball, but someone who knew how to read the present and discover deep trends. And so he could anticipate what was going to happen.

In the time of the Cuernavaca pamphlets he could not have anticipated the end of the era of tools, but in the 1980s he knew already that people had been transmogrified into subsystems of systems, that we had entered the era of systems. And he thus anticipated, horrified, the time of Covid-19, the current time. He anticipated the unprecedented situation in which the majority of the people on Earth will passively submit to instructions reducing them to statistical bodies, for which they should care and protect.

In calling for papers for this issue we were fully aware of the highly controversial nature of the theme. First of all, there are many “deniers”, people who pretend that the threat of Covid-19 does not exist or is irrelevant, and also those who resist the policies of the health authorities in the name of individual rights. On the other extreme, many of those confined voluntarily or forced to obey curfew rules and other instructions are really afraid of the danger of the new virus, a danger announced in the name of medical science. In the current social contexts, created by the government, the media and by the medical establishment, any critique of public policies is thus perceived as a kind of irresponsible behavior, which may affect the health of many people; often such critique is assimilated into the opposition of the deniers.

The current polarization of positions and the subsequent inability to forge a third way was one of the many motives to organize this issue. Illich fully anticipated such polarization, forging his own position between the “left-right” poles. Too, he was fully aware of the frequent misinterpretation of his ideas. What was previously rejected or misunderstood in Illich’s thought can now be acknowledged and incorporated into general awareness. As Giorgio Agamben has written, the time of the legibility of Illich’s writings has arrived.

In different moments, particularly in the last ten years of his productive life, Illich looked for ascetic practices “to keep alive our senses, in the lands devastated by the ‘show’, among overwhelming information, advice in perpetuity, intensive diagnostics, therapeutic management, the invasion of counselors, terminal care, breathtaking speed...” These phrases come from the preface to a collection of essays Illich published in French with the title *La perte des sense* (“The loss of sense”, Paris: Fayard, 2004). Several essays of that book are especially pertinent for the current discussion.

In 1994, for example, he pronounced in a lecture¹ a devastating critique of the very idea of a “self-immune system”. He explains that *Medical Nemesis* was written to justify the art of living, enjoying and suffering and dying even in the modern culture, shaped by the ideas of progress and comfort, and explains why, in the era of systems, he can no longer use the expression “autonomous coping”. Four years later he spoke during a conference in Bologna: “Lead us not into diagnosis, but deliver us from the evils of health”, as he explains how the pursuit of health dissolves our flesh and our self. In 1999, in his last conversations with David

¹ The XII Conference of the Qualitative Health Research Association, at Penn State University Hershey Medical School, that is now the introduction for *Medical Nemesis* for the new edition of his collected works in French, German and Spanish. Additionally, see Illich’s lecture, “Against Coping” at the Second International Interdisciplinary Conference, Hershey, PA, June 1994. Accessed 7 December, 2020 at https://chamberscreek.net/library/illich/against_coping.html

Cayley, he explained how “risk awareness”—which is today the very core of the policies and attitudes about Covid-19—generates the loss of the sense of our bodies and is “the most important religiously celebrated ideology today.” As we currently observe every day, risk is a mathematical concept, which cannot be applied to any person in particular. It is applied to populations and what can happen to them is expressed in terms of probability. The now common idea of “flattening the curve” is but one instance of risk management applied to populations. To identify oneself with this statistical figment (as millions are doing every day) is to engage, Illich said, in “intensive self-algorithmization,” the effect of which disconnects us from our own bodies, while reducing each to a collection of statistical elements.

In the last twenty years of his life, Illich expressed repeatedly his increasing concern with the condition imposed on the people, who can no longer die their own death, those denied a dignified death. In place of the art of dying, which in every culture always expressed a fundamental element of the art of living, an abstract medical intervention reigned. Only a month ago, a medical doctor, a sensitive woman who works in a Covid unit of a Mexican social security hospital, shared with me her anxiety, her suffering, when she was unable to respect the will of a 98 year-old guy who pleaded, from his bed in the hospital: “Please allow me to go to my home, to be with my daughter and my grandson. I don’t want to live any longer. But I want to die in my bed, with my loved ones. I want to die in dignity.” But he was not allowed to go. And the family was not allowed to accompany him in his burial. Against all cultural traditions, funerals were not allowed...to “protect” the people, the body of the beloved family member was deemed a threat.

In early April, David Cayley, the Canadian thinker and journalist, published the essay “Questions About the Current Pandemic From the Point of View of Ivan Illich”². He recalls that

² Accessed at <https://www.quodlibet.it/david-cayley-questions-about-the-current-pandemic-from-the-point>.

Illich's seminal book *Medical Nemesis* (1974) is a book about professional power. Cayley describes how the everyday power of contemporary medicine "can be further expanded by what Illich calls 'the ritualization of crisis.'"

This confers on medicine 'a license that usually only the military can claim. Under the stress of crisis, the professional who is believed to be in command can easily presume immunity from the ordinary rules of justice and decency. He who is assigned control over death ceases to be an ordinary human... Because they form a charmed borderland not quite of this world, the time-span and the community space claimed by the medical enterprise are as sacred as their religious and military counterparts.

Cayley continues within a footnote to this passage and referencing Illich, "... he who successfully claims power in an emergency suspends and can destroy rational evaluation. The insistence of the physician on his exclusive capacity to evaluate and solve individual crises moves him symbolically into the neighborhood of the White House."

In his article, Cayley also describes how, ten years after *Medical Nemesis* was published, Illich revisited and revised his argument, explaining how he had been "blind to a much more profound symbolic iatrogenic effect: the iatrogenesis of the body itself." He had "overlooked the degree to which, at mid-century, the experience of 'our bodies and our selves' had become the result of medical concepts and care". Cayley writes,

Medical Nemesis had addressed a citizenry that was imagined as capable of acting to limit the scope of medical intervention. Now (Illich) spoke of people whose very self-image was being generated by bio-medicine. *Medical Nemesis* had claimed, in its opening sentence, that 'the medical establishment has become a major threat to health.' Now he judged that the major threat to health was the pursuit of health itself.

Cayley further explains in his article that Illich's change of mind emerged from the conviction that the world had undergone an epochal change.

'I believe,' he told me in 1988, 'that...there [has been] a change in the mental space in which many people live. Some kind of a catastrophic breakdown of one way of seeing things has led to the emergence of a different way of seeing things. The subject of my writing has been the perception of sense in the way we live; and, in this respect, we are,

in my opinion, at this moment, passing over a watershed. I had not expected in my lifetime to observe this passage.’ Illich characterized ‘the new way of seeing things’ as the advent of what he called ‘the age of systems’ or ‘an ontology of systems...’ A system, conceived cybernetically, is all encompassing – it has no outside. The user of a tool takes up the tool to accomplish some end. Users of systems are inside the system, constantly adjusting their state to the system, as the system adjusts its state to them. A bounded individual pursuing personal well-being gives way to an immune system which constantly recalibrates its porous boundary with the surrounding system. Within this new ‘system analytic discourse,’ as Illich named it, the characteristic state of people is disembodiment. This is a paradox, obviously, since what Illich called ‘the pathogenic pursuit of health’ may involve an intense, unremitting and virtually narcissistic preoccupation with one’s bodily state. Why Illich conceived it as disembodiment can best be understood by the example of ‘risk awareness’ which he called ‘the most important religiously celebrated ideology today.’ Risk was disembodiment, he said, because ‘it is a strictly mathematical concept.’ It does not pertain to persons but to populations – no one knows what will happen to this or that person, but what will happen to the aggregate of such persons can be expressed as a probability. To identify oneself with this statistical figment is to engage, Illich said, in ‘intensive self-algorithmization.’... His horror was at seeing people reconceive themselves in the image of a statistical construct. For him, this was an eclipse of persons by populations; an effort to prevent the future from disclosing anything unforeseen; and a substitution of scientific models for sensed experience.... Increasingly people were acting prospectively, probabilistically, according to their risk... Individual cases were increasingly managed as general cases, as instances of a category or class, rather than as unique predicaments, and doctors were increasingly the servo-mechanisms of this cloud of probabilities rather than intimate advisors alert to specific differences and personal meanings. This was what Illich meant by ‘self-algorithmization’ or disembodiment.

Six months after that article, Cayley wrote an essay (re-published with permission in this issue), in which he elaborates on all those elements—a pertinent frame for the reflection we attempt here in the special issue of the *IJIS*. Illich’s eyes throw a lucid light to understand what is happening.

In spite of the claims that most public decisions about the pandemic are based in “science”, there is no scientific study supporting the idea that confinement and distancing of healthy people are the best or even the proper way to deal with Covid-19. Opinion, masquerading as science, now governs—the prejudices of some professionals who’ve abandoned any sense of justice and decency before the emergency.

Everywhere, adopted policies are destroying the livelihoods of millions of people, perhaps the majority of the population. Even as the number of deaths attributed to the virus is contested, increasingly, evidence is emerging that the number of deaths caused by the situation created by those policies is higher than those attributed to the virus. Death by policy rather than virus is the secret in plain view.

A new cult emerges—the general devotion to prescriptions given in the name of medical science—despite the ability of the medical system to deliver what it promises. A recent study of Oxford University found that only 1 in 10 drugs and treatments prescribed by doctors will work. Another study revealed that 70% of all medical research is fraudulent³. For Rob Verkerk, executive and scientific director of the Alliance for Natural Health International, “the official Covid ‘cure’ is turning out to be worse than the disease.”⁴

Our main concern: the obedience of a third of the people on Earth, and in particular their conviction that they are doing the right thing before the so-called pandemic. It is indeed difficult, at this point, not to see the real nature of the current threat. What we now have is not only an immoral and irresponsible economic and political elite, ready to continue the destruction of the environment and the social fabric. We also have an enormous number of people already formatted as “cybernetic beings”, too easily transmogrified into statistical pigments – the intensive self-algorithmization about which Illich warned us. We are just beginning to see the predictable and perhaps intentional consequences of all of this.

The consequences: the immense destruction of livelihoods, in many cases constructed through the patient and courageous effort of generations; the destruction of the social fabric that

³ “Doctor 10%: just one in 10 treatment Works”, *What Doctors Don't Tell You*, November/December 2020, pp. 18-20.

⁴ Rob Verkerk, “Adapt, Don't Fight”, *What Doctors Don't Tell You*, November/December 2020, p. 23.

is the basic condition for a peaceful social coexistence; the systematic destruction of all the beliefs and institutions constructed in the last 200 years; the continuation and even the intensification of the accelerated destruction of all the gifts of nature; the increasing, obscene concentration of wealth in always fewer hands, thus deepening inequalities; the massive increase in the biased use of violence, making evident its racist and sexist character—all this and many other evils are now extended in the name of “saving lives.” Even worse, the widespread and largely passive acceptance by a great number of people of the pandemic policies as the right thing to do by, demonstrate both the loss of their reasoning abilities—informing both their behaviors and their moral judgments—while revealing acquiescence to the rules of this new “cult”, the biomedical catechism.

These elements are addressed in different ways in many of the articles included in this issue. Many of the articles offer a reflection about how to react in the face of current challenges, with clear emphasis on Illich’s insights. To understand Illich’s insights requires going beyond the right-left poles of the political spectrum in which contemporary issues are framed. To be among the Left is to be pro-science, to be all-embracing of quarantine policies, to advance liberal/neo-liberal and democratic interventions. To be among the Right is to be anti-science, to reject infringement of an unfettered individual “freedom,” to exalt the Market and to impugn the State. Classifying Illich’s insights—utilizing these two dominant polarities—obliterates possibilities inherent in them, while blinding us to the countless alternatives now manifesting around the world; the diversity celebrated in all his writing.

A glaring omission within this special issue is a collection of stories about how people around the world, particularly among indigenous communities, are demonstrating amazing resilience, responding to the ‘new normal’ with ingenuity, courage and lucidity. They are using

their traditions, their moral judgment, their rational evaluation and a fascinating juxtaposition of knowledge from different sources. Having discovered the very patriarchal nature of the Covid ‘cure’ they have instead opted for resisting it. These stories are indeed so abundant and impressive that we are now organizing a special issue to present them, separately. We are convinced that these initiatives clearly resonate with Illich’s notion of conviviality and in a very real sense represent an institutional inversion as suggested by Illich in *Tools for Conviviality*.

We hope that the reader will find within this collection of essays alternative ways of thinking, of being in relationship to the “novel Covid-19” virus, of “conviviality for the day ‘after normal.’”

San Pablo Etna, December 2020