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Arguing with Justice: Brexit and Biomedicine

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By Rosalind Williams and Amy Hinterberger

The aftermath of the UK's recent referendum on European Union (EU) membership, which culminated in a decision for Britain to leave the EU, reminds us of Britain's bleak history of racism, and should prompt us to reflect upon the political visions of justice that underlie current constitutions of biomedicine.

For many, the outcome of the 'Brexit' referendum was justice turned on its head. After the Leave vote won with a 52% majority, social commentators argued that Brexit is an injustice to Britain's youth—those who will live the longest with the outcome of the referendum wanted to remain in the EU, which bears out in the [early retrospective analysis](#) of voter demographics. But the Leave campaign also appealed to justice by arguing that the EU had morphed into a force for “[social injustice](#)” as Brussels turned its back on “[economic common sense](#)”. The most toxic claims came from those who appealed to a kind of natural right, couched in [English nationalism](#), about who belonged in the UK.

In the wake of these claims on justice, it is, we suggest, time that scholars working at the intersection of science and medicine argue *with* justice. Similar to other [recent arguments about science and justice](#), we choose these words deliberately. Arguments are often made by using justice (for example, by mobilising the language of “social injustice” to argue against the EU). But scholarship doesn't as freely spend time arguing *with* justice—interrogating this unwieldy but [thoroughly seductive motif](#).

At this intersection between Brexit, science and health, it comes clearly into relief that biomedicine is about much more than patients and clinicians, or research participants and investigators. It is about the legal and institutional frameworks that shape our daily lives and our access to healthcare and medicines. Such issues of inclusion, health and wellbeing are matters of justice. With fundamental societal changes looming ahead, Brexit means we must argue with justice.

Such reckoning with justice is critical because what we have seen with Brexit is a *heredity redux*—an explicit revival of imperial attention to biological and genealogical propriety, marked by the dilation of hierarchy

as ordering mechanism. An overt return to much older and never fully forgotten nationalist, biological and xenophobic sentiments about who belongs and is entitled to receive provisions of justice, like health care and access to medicines.

During the June 2016 lead-up to the EU referendum vote, the Official Leave campaign made the funding of Britain's National Health Service (NHS) a central component of its [movement](#). Notoriously, campaign buses touring the country were emblazoned with: 'Let's give our NHS the £350 million the EU takes every week'. One of the most powerful pieces of propaganda released by the Leave campaign (which was also [immediately rescinded](#) by [Leave campaign politicians](#) on their victory), this statement tapped into long-standing frustrations. The NHS, ushered in with sweeping post-war welfare reforms, is in the midst of apparent [debt crisis](#), a veritable [black hole](#) sucking in precious funds to meet the health demands of a growing (and aging) population. All this against the backdrop of funding cuts imposed by EU '[enforced austerity](#)', by shrinking State [economic support](#) and the slow creep of privatisation through which the famous NHS logo is itself now being used by [private companies](#).

In the media, blaming the non-national—asylum seekers, refugees and migrants—has been explicit. In the most amusing analysis, migrants into Britain are simultaneously lazy social welfare/healthcare users *and* job-stealing (summed up perfectly by the [Schrödinger's immigrant](#) meme). In more nefarious moments, asylum seekers are set to [overwhelm](#) the country's beleaguered health service.

Where does the EU sit in all of this? As a key [EU report](#), entitled 'Evaluating Care Across Borders', pointed out, discussions of the then European Economic Community in the 1970s concluded that "the principle of free movement of people was meaningless if it applied only to those in full health". Accordingly, we see the legislative enshrinement of what the EU calls [cross-border care](#). in the European context, far right political energy has reached a peak and this comes starkly into relief in the context of Brexit. Preoccupation with indigeneity to the United Kingdom manifested in the week after Brexit with a [fivefold increase of race hate incidents](#) nationally. The day after the result, English National Front protesters [were out in Newcastle](#), carrying a poster demanding "STOP IMMIGRATION. START REPARTRATION".

Such vitriol highlights the more pernicious articulation of the increasingly complex relationship between race, geography and national identity in which claiming citizenship through *jus soli* has undergone systematic erosion in various nation-state contexts, not least via the British Nationality Act 1981 [in which statelessness is the default](#) for British-born children of non-British parents. But the vitriol doesn't answer the question it begs of

us—what makes one British? This question carries such weight because of the benefits of Britishness—of existing in a country built on colonial exploitation, of existing in a country where feelings of deservedness, of a right to access health and wealth are deeply embedded. But such a question (really, a basic question of justice) of who belongs in a polity is one not easily answered.

Health provision, biomedical research and technology are deeply impacted through these changing post-colonial iterations of what being British means, along with who has the right to belong and benefit from state institutions, such as the NHS. In addition, biomedical technologies are increasingly playing a public role in answering questions of who is part of a polity. The proliferation of genetic ancestry testing and national biobanking are testaments to the multiple and contradictory ways genetic and biological evidence of belonging becomes enmeshed in national debates. This is not just evident in the UK as Senator Elizabeth Warren's [debunked claim](#) to Native American heritage highlights. As we have seen with Brexit, being able to say that one person is more British than another is a dangerous ability.

The political shifts signalled by the Brexit vote present a profound departure from the idealistic sentiment of universalism we usually imagine when we think about justice. Porous borders, and the postcolonial push and pull of bodies through them, tested 'justice' and the capacity of communitarian caring. Now we are compelled to think about the grammar of justice.

Rosalind Williams is a Research Associate in Sociology at the University of Sheffield. She is currently working on a Leverhulme funded project, 'Tracking Ourselves?', focusing on everyday practices of self-monitoring. She's written for Life Sciences, Society and Policy and New Genetics and Society.

Amy Hinterberger is an Assistant Professor of Sociology at the University of Warwick. Her work has been published in Public Culture, Theory, Culture and Society and Science as Culture. She is currently working on a Wellcome Trust funded project entitled 'Blood and tissue as human research subjects' which investigates transformations in definitions and practices of what constitutes a human research subject in the context of data-intensive biology.

This piece was inspired by discussions had at ['Arguing with Justice'](#), an Early Career Researcher workshop held June 2016 at the University of Warwick's Sociology department and attended by keynote Jenny

Reardon from UC Santa Cruz and discussant Maria Puig de le Bellacasa from University of Leicester.

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