

ORIGINAL ARTICLE

Governing with contagion: Pandemic politics, COVID-19, and undermining public health in Florida

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Abstract

The United States approached the COVID-19 pandemic with inconsistent responses that varied by state. In Florida, legislators passed laws contrary to mitigating the pandemic. These laws included banning county and municipal efforts to control the spread of COVID-19 through mask mandates, social distancing, and prohibiting vaccination mandates during infectious disease epidemics. Moreover, the Legislature simultaneously prioritized policies of social exclusion, passing bills that constrained the rights of transgender individuals, Black Lives Matter protestors, and educators. In this article, I use the perspectives of critical medical anthropology and “governing through contagion” to examine Florida’s COVID-19 response. I argue the COVID-19 pandemic provided an opportunity for legislators to obfuscate their political power and advance a politics of social division while simultaneously passing policies that undermined human health. I refer to this process as governing *with* contagion: Using a pandemic as a politically expedient backdrop to conceal power and simultaneously harm human health.

INTRODUCTION

In the spring of 2021, as the COVID-19 pandemic continued and before COVID-19 vaccines were widely distributed, I went for a hike at a large park outside of Orlando, Florida. There, I ran into a lobbyist, Raquel,¹ whom I met while doing politically engaged research in central Florida. Raquel and I stood outside the park and chatted about the current legislative session in Florida. We were both concerned about the state’s pandemic response and distressed about the legislation we saw being proposed in Tallahassee, Florida’s capital. Most policies focused on issues such as restricting the rights of transgender individuals and creating punitive measures for counties and municipalities that attempted to pass their

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own COVID-19 mitigation efforts, including the imposition of mask mandates in public spaces. We were also disturbed by how the policies were discussed or, perhaps more importantly, weren't. Typically, policy debates among legislators are open to the public and can be witnessed by news reporters, lobbyists, and anyone with a general interest in the topic. In the spring of 2021, however, the Florida Legislature prohibited members of the public from entering the statehouse or offering in-person testimony to lawmakers on bills being discussed. As Raquel explained, "It's so awful what's happening. They're doing all this in secrecy: They won't let news media in or anyone connected to the issues, so who knows what's really going on? They're passing all these laws in the dark and without any input from the public. It's really terrible."

The restrictions on public attendance in the Florida statehouse were ostensibly to mitigate potential COVID-19 spread, but as I argue in this article, this rationale is inconsistent with the Florida Legislature's policy priorities and overall pandemic response. Instead, I argue that the COVID-19 pandemic provided an opportunity to conceal state power through limiting public scrutiny of legislative authority. Against this backdrop, the Legislature advanced policies that (1) contradicted efforts to reduce the spread of COVID-19, and (2) perpetuated a politics of social division. Drawing from recent scholarship on governing through contagion (Chua & Lee, 2021), in this article, I argue that the Florida Legislature governed *with* contagion, using the pandemic as a cloak with which to shroud its own power and in doing so undermined efforts to protect human health, despite contrary narratives from political leaders.

MEDICAL ANTHROPOLOGY, POLITICS, AND PANDEMICS

Medical anthropologists have long been interested in politics, policy, and power, and how political forces are inextricably linked to human health. The perspective of critical medical anthropology, in particular, squarely focuses on power and political economic forces that shape health (Singer & Baer, 2018) and has been used to examine the health-related impacts of policy and policymaking (Castro & Singer, 2004). Medical anthropological attention to policymaking during pandemics—including the types of policies proposed in Florida in 2021 and their potential impacts—can reveal machinations of power operating in the context of health that perpetuate broader social inequities.

As anthropologists have shown, pandemics can reify social, political, and economic inequalities harmful to human health. Pandemics can heighten social stigmatization and scapegoating, as demonstrated by xenophobic and anti-immigrant sentiments connected to communicable diseases like Severe Acute Respiratory Syndrome (SARS) (Mason, 2012), H1N1 (swine flu) (McCauley et al., 2013), and SARS-CoV-2—the virus that causes COVID-19 (Reny & Barreto, 2022). Pandemics can also lead to persistent stigma, as exemplified by the case of HIV and ongoing otherizing of gay, lesbian, bisexual, and transgender individuals (Arrington-Sanders et al., 2020; Herek & Capitanio, 1999). Further, medical anthropological scholarship has shown the complicated political, social, and economic entanglements involved in examining disease outbreaks that can perpetuate individual suffering (Keck et al., 2019) and underscore the politics surrounding epidemics (Leach & Tadros, 2014).

Pandemics and epidemics also highlight moments of competing interests and can be opportunities for co-opting public health actions for other goals. For example, the United Nations Security Council's 2000 declaration of the HIV/AIDS epidemic as a threat to international security underscored the troubling militarization of public health, using public health efforts to advance securitization, and the growth of attention to biosecurity as another means for applying governmental power over life (Keck et al., 2019). These central themes—militarization and securitization—also informed responses to the Ebola crisis in West Africa (Benton, 2017).

This article contributes to the medical anthropology of epidemics and anthropological scholarship that encourages a critical examination of power relationships obfuscated by COVID-19 (Berlivet & Löwy, 2020; Caduff, 2020; Ecks, 2020) by examining political processes that occurred during the pre-

vaccine availability moment in the pandemic. In this article, I show how the COVID-19 pandemic presented an opportunity for the state to advance social division and do so in secret, all while simultaneously advancing pandemic policies that harmed human health. Specifically, politically conservative state leaders refused to limit public gatherings and, by extension, mitigate the spread of a respiratory infectious disease, except for public gatherings seeking to view the mechanics of the state itself.

In focusing on the simultaneous advancement of social division and policy that conflicts with protecting human health, I echo Arachu Castro and Merrill Singer's observation that "health policies are shaped by a number of factors, only one of which (and sometimes the least of which) is concern with public health" (Castro & Singer, 2004, xiii). Some health policies directly harm human health, and some policies are passed in secrecy under the pretense of protecting public health. Overall, I emphasize that the legislative efforts to (1) undermine principles of protecting human health, and (2) perpetuate social exclusion, showing how policymakers harmed residents and visitors of Florida, perhaps best demonstrated by COVID-19 death rates.

COVID-19 AND FLORIDA'S RESPONSES: ECONOMY OVER PREVENTION

In December 2019, the first case of SARS-CoV-2 was detected in Wuhan, China (Burke et al., 2020). By March 11, 2020, the World Health Organization declared the novel coronavirus a pandemic, prompting the United States to respond with numerous efforts intended to reduce transmission (World Health Organization, 2020). Rather than advancing a robust federal response, however, the United States' approach was instead a patchwork effort delegated to individual state governments. This meant geographic variation in measures to contain the virus's spread, largely differing by the governors' political ideologies in each state (Neelon et al., 2021). States led by Democratic governors were more likely to have mask mandates and stay-at-home orders and business closures for longer periods of time (if at all) than states with Republican governors (Adolph et al., 2021; Wissert, 2021). In Florida, Republican Governor Ron DeSantis resisted COVID-19 mitigation efforts and went as far as enacting executive orders banning local governments from passing their own COVID-19 protections. The state's mostly politically conservative Republican Legislature also passed several laws that directly inhibited efforts to reduce COVID-19 transmission.

Florida's response to COVID-19 was characterized by an initial effort to contain spread followed by swift rejection of any effort deemed unfriendly to businesses. The first cases of COVID-19 in Florida were officially detected in March 2020 (Mullery & Boschma, 2020), and state, county, and municipal governments responded by declaring a public health emergency. Throughout March, the governor issued bar and restaurant closures, ordered for restaurants to only serve food on a take-out rather than dine-in basis, and finally, on April 1, issued a statewide stay-at-home order with an exception for essential workers. By the end of April, DeSantis permitted public beaches to reopen, and the statewide stay-at-home order expired.

Once the state's stay-at-home order expired, DeSantis and his administration took a decidedly anti-prevention turn to resume all economic activity, a decision that undermined well-established public health objectives of limiting potential spread of an airborne communicable disease. By September 2020, DeSantis issued an order that overturned county and municipal measures to control COVID-19, preempting local governments' authority to attempt to protect the health and wellbeing of their residents. By November, DeSantis had gone so far as to champion and sign into law legislation that fined businesses for requiring vaccinations. Overall, the Florida response to COVID-19 was one that prioritized economic interests and did little to protect the health of the population.

In addition to prioritizing economic interests while failing to protect public health, Florida's COVID-19 response advanced a politics of exclusion instead of protecting human health. Rather than preventing the spread of COVID-19, the Legislature and DeSantis chose to advance legislation that doubled-down on social difference: In particular, the Legislature passed policies restricting transgender individuals' rights, expanded surveillance of purportedly politically liberal faculty at public universities and colleges, and attempted to curtail racial justice protests and restrict reproductive rights.

To advance its politics of exclusion, the Florida Legislature used the pandemic as a shroud to conceal its power, closing off public forums during legislative debates and purportedly limiting legislators' contact with the public due to the pandemic, even though the state's own legislation effectively pretended COVID-19 did not exist. Such efforts were elements of how Florida lawmakers used the COVID-19 pandemic to govern through secrecy and advance social marginalization.

GOVERNING WITH CONTAGION IN FLORIDA

Social scientists attentive to pandemics, state power, and health have considered how pandemics perpetuate and produce new forms of health-related governance and social division. For example, Lynette J. Chua and Jack Jin Gary Lee use the term "governing through contagion" to describe a form of power over life to ensure bodies are free from contagion that cannot spread person-to-person to optimize economic productivity through preventing disease (Chua & Lee, 2021). Specifically, governing through contagion features three interrelated elements: (1) using law and policy as a technique of control; (2) moralizing contagion-related technologies and items such as masks, medical equipment, sanitization products, and contact tracing (2021, 122)—all of which can fashion "good moral citizens" who engage in behaviors such as social distancing (2021, 126); and (3) doubling-down on fissures and reframing divisions of interconnectedness and disconnectedness.

Extending Foucauldian understandings of governmentality that focus on regulating the population and administering techniques of control (Lemke, 2001), Chua and Lee note that governing through contagion "is about the administration and politics of strategies of control to combat contagious disease" (2021, 116). Rather than combatting contagious disease, however, lawmakers in Florida advanced policies at odds with reducing the spread of COVID-19 all while advancing socially divisive policies. Accordingly, this article builds on the governing-through-contagion perspective to consider governing *with* contagion, or how pandemic-related politics can be used strategically for other governing objectives that perpetuate social and health-related harm. Overall, this perspective contributes to medical anthropological literature on COVID-19, power, and conservative US politics (Rouse, 2020) by emphasizing how political processes and policy during the COVID-19 pandemic reinforce existing social divisions and undermine basic public health goals.

UNEXPECTED FINDINGS IN AN ONGOING ETHNOGRAPHY

Ethnographic data and interviews that inform this article are part of ongoing fieldwork that began in 2016 following the Pulse nightclub shooting in Orlando, Florida. The shooting occurred on June 12, 2016, at a gay club on Latin night and gave rise to an intersectional social justice movement focused on advancing the rights of lesbian, gay, bisexual, transgender, or otherwise queer (LGBTQ+) people of color. The COVID-19 pandemic occurred as data collection focused on this social movement continued, and this resulted in altered forms of participant observation and interview methods. To date, I have completed 83 in-depth interviews with community organization leaders, lawmakers, lobbyists, and law enforcement officers. This article does not report the overall findings of the study; instead, it focuses on an unintended finding: How Florida lawmakers used the COVID-19 pandemic to constrain social justice and undermine efforts to protect the health and wellbeing of people in Florida by exacerbating the potential spread of COVID-19.

To advance this argument, I draw from interviews with elected officials ($n = 3$), statewide LGBTQ+ activist organization leaders ($n = 2$), local LGBTQ+ Latinx organization leaders ($n = 2$), and a state lobbyist ($n = 1$). I also draw from participant observation experiences with Equality Florida, the largest statewide LGBTQ+ activist organization, and the Contigo Fund, an organization focused on LGBTQ+ people of color that emerged after the Pulse shooting.

LEGISLATIVE SESSIONS TO ADVANCE HATE RATHER THAN PROTECT HEALTH

In the United States, each state's legislature meets regularly, the majority of which (46) meet once a year and four of which meet once every other year. The Florida Legislature meets annually for 60 consecutive days, and in some circumstances, the governor can call the Legislature back into session for special legislative sessions. Special sessions generally respond to pressing matters of great public importance, such as a public health emergency. In March 2021, the Florida Legislature's regular session was held, and Governor DeSantis called back the Legislature for a special session in October. When the regular session met, COVID-19 vaccines were not yet widely distributed, and the regular session had nothing to do with protecting human health but instead, focused on advancing a politics of division. In the October special session, which the governor called, the Legislature again failed to address the continuing COVID-19 crisis, instead focusing on countering federal efforts to impose vaccination mandates on the state (Sarkissian, 2021). The Legislature specifically reformed state law to penalize employers, counties, and municipalities if they enacted masking and vaccination requirements (Klas, 2021). Indeed, the entire special legislative session specifically focused on stripping away all public health power over pandemics, including passing legislation requiring employers to create additional vaccination opt-out options, hiding public records of employee complaints about vaccination exemptions, and removing the state health officer's ability to mandate individual vaccination in the event of a public health emergency (Bridges, 2021).

Given that the state Legislature made efforts to reduce public health protections during pandemics, including the one that persisted while they met, one might assume the Legislature would operate normally and meet as it typically did. Usually, when the Legislature meets, elected officials convene in person, and the statehouse is open to the public, allowing the public to provide commentary on the proposed legislation. Paradoxically, however, when the Legislature met for both sessions in 2021, the sessions were physically closed to the public. The articulated reason for this closure was to prevent the spread of COVID-19. However, when viewed together with the Legislature's priorities, the closure instead suggests that conservative Florida legislators and the governor had other motivations. I argue that these motivations included using COVID-19 as a reason to deny more robust public comment on legislation that advanced social division and harmed public health.

As reports from local newspapers highlighted, the closure of the statehouse caught the general public by surprise; indeed, residents who planned to meet with legislators observed that they were ironically shut out of the state's Capitol while spring breakers partied on beaches across the state, taking advantage of the state's "open for business" attitude (Call, 2021b). House Speaker Chris Sprowls justified the statehouse's closure by saying he "had a duty to minimize risk during the pandemic" (Call, 2021b), but then he voted in favor of a law that prohibits vaccination mandates during public health emergencies (HB 7B [2021]). As one member of the Florida public who attempted to enter a Florida Senate meeting explained of the Legislature's closed doors, "The question is (whether) they take the pandemic seriously outside of having public comment at their meetings, and the answer is no" (Call, 2021a).

Although members of the public were permitted to meet in separate rooms from the Legislature and could join video feeds to share input, the effect of the distance was a sense of removal from the policymaking process. This distance from powerful legislators was amplified by videoconferencing technologies that permitted members of the public to be muted at any point, effectively silencing speech (Call, 2021a). As one member of the public shared with a local reporter, in typical circumstances, and during in-person meetings, even if members of the public are silenced by having their mics turned off, they can "still yell loud enough for [legislators] to hear you and get the point across," (Call, 2021a). My own efforts to engage in participant observation at the Capitol had been thwarted, including having to shift what would have been in-person meetings with legislators to Zoom calls that some legislators chose not to attend.

Virtual participant observation in the Florida capitol

In March 2021, I was scheduled to join staff and volunteers from an LGBTQ+ social justice organization in the state's capital, Tallahassee, for a multi-day event in which individuals meet with legislators to lobby on particular pieces of legislation. The trip, however, was canceled because the Legislature closed itself to the public, and lobbying efforts had to be done virtually. As many other anthropologists did during the peak of the COVID-19 crisis, I shifted my participant observation from in-person to virtual (Johnson, 2022). On March 3, 2021, I had a Zoom call scheduled with legislators to ask them not to support a number of bills focused on restricting the rights of transgender individuals. These bills included HB 935, which criminalized trans-affirming healthcare and would result in medical providers who provided trans-affirming care being imprisoned, and two bans on transgender youth from participating in school sports (HB 1475 and SB 2012).

In addition to introducing the bills focused on transgender individuals, the Legislature also proposed and signed into law HB 1 and SB 484: anti-protest legislation designed in response to the 2020 racial justice protests after the murder of George Floyd and the ongoing problem of police violence against people of color. The legislation, signed by DeSantis, removes liability of police and counter-protestors if death or injury occur in protests and allows the public to challenge proposed reductions to police budgets. It also allows local governments to be sued if they do not stop a protest and creates a felony for riot participation for individuals engaging in protests more than 25 people (Sachs, 2021). These efforts were squarely designed to include harsher punishments for Black Lives Matter protestors (Burke et al., 2020; Kanu, 2021) and represent broader forms of anti-Blackness that have been perpetuated in the United States through several policy objectives (Bledsoe, 2020).

In addition to legislation perpetuating anti-Blackness, the 2021 legislative session also saw the proposed legislation restrict abortion access after 20 weeks of pregnancy (HB 351 and SB 744), and to restrict voting rights (SB 90). The abortion restrictions ultimately died in committee, but SB 90 passed. The law, which the Brennan Center for Justice referred to as a "sweeping voter suppression law," had no real reason for being proposed, restricted mail-in voting, limited access to ballot drop locations, made it more challenging to register to vote, and created new restrictions on those waiting to vote, such as limiting provision of snacks and water (Sweren-Becker, 2021). These, and other pieces of legislation, informed my talking points while I waited on a Zoom call to meet virtually with legislators.

As I waited with other Floridians for our meeting with one Republican legislator, we discussed our talking points. Eventually, we learned the legislator would not be meeting with us after all even though we had scheduled this time with him, and his office confirmed his attendance. "I don't know what happened," a staff member with the organization I accompanied said incredulously. "We had the time scheduled, and he didn't show up." Although this could have also happened in person, a missed in-person meeting could be countered by an informal encounter waiting in the legislator's office or running into them in the hallway. Such informal meetings were not possible in virtual spaces, however. The Republican lawmaker would not meet with us in person because of COVID-19 restrictions and failed to attend the Zoom meeting, and unlike in-person meetings, there would be no chance of another encounter. Like other members of the public, we were locked out of legislative decision-making and could not express our opinions to the legislator. Denying public access to open governmental processes is a key element of Florida's approach to governing with contagion. Such actions rendered the Legislature opaque and nonresponsive to the public, and they permitted the Legislature to advance a policy that perpetuated social division and was harmful to human health.

Timing of aggressive legislation

Why might Florida's legislators have been interested in passing divisive and harmful policies during a pandemic? As one Democratic state representative I interviewed, Elaine, explained, part of the response

was due to dislike for the communities the legislators were targeting, religious beliefs, political efforts to advance individual legislators, and a distraction from efforts to economically benefit corporations. As she explained, “I do think there are people that straight up . . . just like hate our community. Or they don’t think it’s real. I think there are people even in [the] Legislature today that like think that identifying as LGBTQ+ is a sin or that it’s not accurate and you need to just to just get the gay out of you.” More than that, though, Elaine noted that focusing on divisive policies could be politically expedient for individual legislators: “I do think that the majority of people just see it as a means to create tension and fuel the flames to benefit themselves, or [advance] themselves among the context of their colleagues. Like in the Florida House [of Representatives] it benefits you to be extreme. Like extreme ignorance in most cases gets you a leadership position.”

Timing of the bills, as Elaine explained, can also be understood as a distraction from large corporate tax breaks that undermine equity. “I think a lot of it is distraction. Like while my colleagues are filing these really hateful bills and . . . continuing to attack social issues, it does remind me that meanwhile corporations are continuing to exploit all of us.” She added that some of the largest corporate entities in Florida, such as rental car companies that fuel tourists’ appetite for driving from airports to the state’s amusement parks and beaches, received large tax breaks during the legislative session. “Corporations are pushing forward getting the tax breaks, and [those] policies are very damaging to any path of equity. And, like, those don’t get as much attention as these other bills because they’re harder to understand. So, I think that’s an element of it.”

The timing of the bills, and the simultaneous set of bills aimed to reduce local efforts to protect public health, are the most notable factors in how governing with contagion operated in Florida. The content of socially divisive bills was likely written by third-party organizations. As Cindy, an Equality Florida staff member, explained, “the [anti-]LGBTQ legislation is carefully orchestrated by organizations across the country. . . . They’re not unique. They are written and shared by hate groups, anti-LGBTQ organizations across the country. And we see these pop up. When we see one happen in Florida, we expect it to happen in Georgia and vice-versa.”

In the United States, it is not uncommon for organizations to draft bills and share them with legislatures across the country. Indeed, recent reports have highlighted the influence entities such as the American Legislative Exchange Council (ALEC), which hosts closed-door meetings and has written bills on topics such as immigration enforcement, guns, prisons, and schools and higher education policy (Jackman, 2013). It is publicly unknown which organization wrote the socially divisive bills, but their introduction during a public health crisis, coupled with statewide efforts to limit local action to curtail COVID-19 spread, underscores how the Legislature used COVID-19 to advance these policies while limiting public input. In other words, rather than focusing on protecting public health, the Legislature instead advanced policies that reinforce social difference. More than that, however, the Legislature also explicitly took efforts to harm public health during an infectious disease pandemic.

Aggregating power and refusing to protect public health

During critical phases of the COVID-19 pandemic and prior to widespread vaccine access, the Florida Legislature concentrated public health powers at the state level, restricting the ability of local municipalities and counties to limit the spread of COVID-19. As another Democratic state representative I interviewed, Mateo, explained, “in Florida . . . you have a state legislature that’s a Republican supermajority that continues to enact conservative policies. Then at the local level, you have mostly progressive city and county governments, where Democrats are mostly the mayors and the majorities.” This state and local power struggle informed the Legislature’s efforts to prevent cities and counties from enacting policies that would mitigate COVID-19 transmission. This type of state control was an intentional effort to curtail local measures aimed to protect human health, such as in Orange County, which is home to more than 1.4 million residents and whose international tourist destinations typically result in over 75 million annual visitors (Visit Orlando, [n.d.](#)).

On July 28, 2021, I interviewed Jerry Demings, mayor of Orange County, Florida, and former Orange County sheriff and Orlando’s chief of police. Our interview was moments before Demings was set

to announce a COVID-19 update, which he did publicly via television broadcast immediately after we concluded the interview. In our interview, I asked him to shed light on why Florida's Legislature aggressively combatted efforts to protect health and wellbeing as COVID-19 spread all while simultaneously passing divisive social legislation and making efforts to restrict local governments, including county governments, from passing COVID-19 protection policies. In his explanation, he summarized the Republican-controlled Legislature's attempt to maintain power, even if it meant doing the wrong thing regarding COVID-19.

Situating Florida in the broader US landscape, Demings noted, "what I see happening across the country, there is a movement by the conservatives to elect more conservatives, to create difficulty for those who are perceived to be liberal from getting into positions to have influence . . . one way to do that (since the majority of states today tend to be controlled by Republican governors and legislators) is to diminish the authority of the urban or metropolitan communities that tend to lean more Democratic." He specifically explained that the effort to control local populations from state capitals was part of this strategy:

What is happening is, if you're a member of the conservative groups [you think], "if we can't control them from the local governments, we're gonna control them from the state capital." And so that translates into a degradation of power and authority at the local level. And so, we saw this happen this last legislative session, where there were numerous laws that were passed to preempt local governments—again especially in the metropolitan and urban communities—from making decisions on behalf of its people, and controlling it, centralizing it in the state's capital.

For Demings, then, efforts to preempt local governments, including the one he administered, were elements of aggregating political power. Moments after our interview, when Demings made his public statement regarding COVID-19, he signed a local state of emergency, urging the public to get vaccinated and follow guidelines from the US Centers for Disease Control and Prevention (Demings, 2021). The order was a direct response to Governor DeSantis recommending the State of Florida "prepare to resume non-emergency operations due, in part, to a manageable trend in COVID-19 cases," but Demings noted that in Orange County, positivity rates had increased, and the more transmissible Delta variant had been detected. The state's efforts directly harmed the health and wellbeing of the overall public and local leaders were stripped of authority to mitigate the harms that could potentially occur in their local communities.

The Legislature's efforts to preempt local government have potentially long-term and insidious consequences. For example, Mateo noted that the Legislature had worked to pass laws that would undo local governments' protections for LGBTQ+ populations, generally referred to as human rights ordinances. These local laws typically include provisions to protect LGBTQ+ individuals from various forms of discrimination, such as in employment or housing. Mateo noted,

"Last year, we saw a number of bills that basically would have eliminated and wiped clean dozens and dozens of human rights ordinances around the State of Florida that protected LGBTQ people from discrimination, that prohibited things like harmful conversion therapy; we had some ordinances pass at the local level. Some of these pre-emption bills would have eliminated those. Canceled them."

Conversion therapy is a process that attempts to coerce LGBTQ+ individuals into changing their sexual orientation. The practice leads to numerous adverse health-related consequences, including substance abuse and potentially suicide (Forsythe et al., 2022). When Mateo pointed out that the policies would eliminate some local bans on conversion therapy, his colleagues in the statehouse seemed to pretend that such a consequence was unintended or to not care:

So, the response from Republicans when we correctly criticized them and called them out for pre-empting these good policies, they would say, “Oh! Oh! We didn’t mean to wipe out your human rights ordinance. The HRO is not our target. Our target is these other unrelated issues.” But the consequences were still clear: that many of our pro-LGBT policies at the local level would be eliminated by these pre-emption bills. And Republican leaders didn’t really seem to care.

Preempting local laws, as Mateo emphasized, was an essential component of a legislative strategy to perpetuate social division, and such a strategy can perpetuate harms against minoritized people, such as transgender youth. “You had overtly anti-LGBTQ legislation in addition to the preemption bills,” he explained. He then specifically referenced HB 935, which was introduced by Anthony Sabatini, a Republican lawmaker representing part of the Orlando metropolitan statistical area.

Like when . . . Sabatini famously filed legislation that made it a crime for a doctor or healthcare professional to provide life-saving care to transgender youth. Made it a crime. 15 years in prison if a doctor were to, for example, prescribe HRT, hormonal therapy, to a 17-year-old transgender teenager. These are streamlined practices that are approved and recommended by every major medical association and professional medical group in the country; to provide, for example, again, hormonal therapy. These are commonplace practices that are meant to improve the quality of life for transgender teens, and life-saving care.

The examples from Mateo and Mayor Demings emphasize the harms of the state attempting to aggregate power: local municipalities are unable to respond to communicable disease pandemics, and harms against people with minoritized identities, such as transgender individuals, are perpetuated.

The impact of governing with contagion and possible lasting consequences

The harms produced through the politically conservative Florida Legislature during the peak of the COVID-19 crisis manifest in numerous ways, including epidemiologically. Florida is the third most populous US state, following California and Texas. Florida’s COVID-19 related death rate, however, outpaced more populous states at a rate of 392 people per 100,000, versus 258 people for California, and 321 for Texas, for example (New York Times, 2023). However, these rates may not be accurate, since Florida’s state data scientist who had run the COVID-19 data dashboard was allegedly fired for refusing to manipulate data to support lifting COVID-19 restrictions² (Contorno & Wolfe, 2022). Further, as recent analyses have shown, Florida’s reopening policies and lax approach to limiting COVID-19 transmission, such as lack of mask mandates, are responsible for an excess of observable over projected deaths (Tam et al., 2022). Rather than protecting human health, the Florida Legislature instead perpetuated social and health-related harms.

As numerous community organizers and activists have explained of Florida lawmakers’ approaches to passing aggressive and divisive bills, “the cruelty [of such bills], is [precisely] the point” (Serwer, 2018).³ In the following legislative year (2022), which was unfolding at the time of this writing, the Capitol reopened to the public, and multiple anti-transgender and anti-LGBTQ+ laws were proposed, including one that prohibited discussion of LGBTQ+ people in public schools, dubbed the “don’t say gay” bill (Kline et al., 2022). Further, the Legislature proposed another abortion law, this time restricting abortions after 15 weeks. These and other divisive laws occurred precisely while the Omicron variant of COVID-19 surged, devastating Florida’s public health infrastructure and hospitals, so much so that, in some cities like Orlando, residents were asked to reduce water consumption so that the oxygen to treat the water could be diverted to hospitals that struggled to keep enough oxygen supplied to overcrowded

intensive care units filled with COVID patients on oxygen (Carbajal, 2021). In other words, just as in 2021, the 2022 legislative session saw a continuation of bills with the point of enacting cruelty.

In addition to advancing legislation intended to be cruel, the 2022 Florida Legislature passed the Stop Wrongs against Our Kids and Employees (WOKE) Act: A bill that banned critical race theory from being taught in Florida classrooms and businesses (Staff of Governor Ron DeSantis, 2021). Governor DeSantis proposed the bill and made national headlines for prioritizing its passage. The bill is one of many across the country attacking critical race theory (Schwartz, 2022), representing a broader retrenchment of white supremacy expressed through a political silencing of teaching topics related to race and racism. These and other bills proposed in 2022 demonstrate the progression of the consequences from governing with contagion: efforts to reinforce notions of social division during contagion may persist beyond the immediate urgency of responding to a pandemic. Further, these types of policies may take priority over policies to prevent an ongoing epidemic from worsening.

Mobilizing against hate

The Florida Legislature's efforts to perpetuate harm and failures to protect health and wellbeing were met with direct opposition. For example, in the beginning of the pandemic, Contigo Fund and QLatinx, grassroots social justice organizations that emerged after the Pulse shooting, immediately recognized the heightened risk of COVID-19 illness and death for LGBTQ+ people of color, particularly Latinx individuals in central Florida (Kline, 2020).

As described elsewhere (Kline and Quiroga 2021), Contigo Fund and QLatinx responded to LGBTQ+ Latinx individuals' heightened risk of COVID-19 severe illness and death, and the limited support for people with multiple forms of social precarity, by organizing a COVID-19 relief fund. Specifically, QLatinx conducted an assessment of 228 community members that revealed high rates of food insecurity and housing instability (Norman & Cuevas, 2020). Then, QLatinx and Contigo Fund raised USD 30,000 over 82 days to distribute to community members in need. To distribute funds, organization leaders developed a low-barrier application in English, Spanish, Haitian Creole, Portuguese, and Vietnamese, and they made all applicants eligible regardless of immigration status (Kline and Quiroga 2021). Including undocumented immigrants for eligibility was a particularly important goal of the application process: when the COVID-19 pandemic started, US citizens and documented immigrants were eligible for stimulus checks totaling USD 3200 per eligible adult (US Department of the Treasury, n.d.). Undocumented immigrants, however, were excluded from eligibility. As one QLatinx leader explained, "we wanted to make this application was low barrier and specifically reached the people who were intentionally left out of receiving the federal government's COVID-19 stimulus checks." The relief fund effort underscores how QLatinx and Contigo Fund not only responded to state failures to protect the health of the population during a pandemic but also emphasize efforts to resist how pandemics can reinforce social divisions and forms of exclusion, including efforts to exclude undocumented immigrants from pandemic-related economic stimulus initiatives.

Similarly, as the "don't say gay" bill progressed through the Legislature in March 2022, the Contigo Fund convened a meeting of its leaders. The meeting opened with members of the organization expressing their dismay over the legislation. As Sari, a Black transgender woman and Contigo member explained, "We keep moving forward and they keep finding ways to knock us down." Arturo, one of the leaders, explained that these kinds of pieces of legislation should be expected yearly now. "We know every year that there will be attacks on our people. We know every year that we have bills to fight. So, moving forward, we have to be more prepared for this."

Indeed, organizations prepared for resistance movements following the pandemic politics of 2021 and 2022. When the Florida Legislature began proposing and passing legislation reinforcing social difference in 2023, social justice organizations and students from Florida protested and marched outside the Florida statehouse. In 2023, in a post-vaccination COVID-19 landscape, the Legislature was unable

to hide from the public, shield itself, cut off microphones, or skip Zoom calls; it was unable to harness a public health emergency to conceal its own workings.

PANDEMIC POLITICS: DEATH, GOVERNING, AND RESISTING

Masking and social distancing are effective means for reducing COVID-19 transmission (Andrejko et al., 2022), and vaccination is an effective way to reduce severe illness and death (Stokel-Walker, 2022). Rather than promoting practices that could mitigate COVID-19, in Florida, the Legislature intentionally passed policies that undermined human health by prohibiting local governments from enacting mask mandates and social distancing, and stripping state officials from authority to enact vaccine mandates during epidemics. The consequence was one of death: Florida's death rate surpassed more populous states, and state officials' alleged firing of a data scientist for refusing to manipulate COVID-19 data highlights potential efforts to hide information from the public that could have informed individual understandings of the crisis. Further, Florida's revised public health policies related to vaccines, masking, and social distancing, underscore how some health policy can reproduce suffering and paradoxically directly human health (Castro & Singer, 2004, xiii).

Additionally, instead of focusing on addressing the COVID-19 crisis, the Legislature advanced policies of social division. As medical anthropologists have shown, pandemics can reinforce social difference. While the COVID-19 pandemic created new forms of governmentality that hinged on policy as a technique of behavioral control and moralization of pandemic-related public health behaviors (Chua & Lee, 2021), in Florida, the pandemic also prompted efforts to reinforce a politics of social difference. Legislation that squarely combatted racial justice efforts, reproductive rights, and sexual and gender minority rights advanced in the statehouse rather than efforts to improve the health and wellbeing of residents and visitors. Moreover, these policies passed while legislators evoked COVID-19 protections to limit public comment on the very policies they proposed.

Limiting public comment on proposed policies may have been for several reasons and elected officials in the United States have used various tactics to deny the general public access to political processes (Tienabeso et al., 2011). For example, legislators themselves may have feared contracting COVID-19 or believed that protecting economic activity was an important public health measure. These explanations provide some level of analysis for theorizing how and why pandemic policies unfolded in Florida. Notably, however, these explanations capture individual and behavioral motivations for these policies. Adding to this analysis, a critical medical anthropological perspective focused on power rather than individual behaviors, motivations, or personally held ideologies can provide additional understandings for how the Florida Legislature simultaneously advanced policy that harmed human health during a pandemic and perpetuated social division.

When viewed through a critical medical anthropological lens, the example from Florida highlights how the pandemic may have provided legislators a politically expedient excuse for limiting access to the statehouse and constraining public input on harmful policies. Florida was "open for business" at the direction of the governor but was not open to constituents. Legislators were therefore potentially able to shield their decision-making power—intentionally or unintentionally. As my encounter with lobbyist Raquel demonstrated, the Florida Legislature's advancement of political divisions during the COVID-19 pandemic may have been partly facilitated by using the pandemic to shroud the lawmaking process in secrecy.

Although the policies described here potentially could have been proposed and passed absent the COVID-19 pandemic, the timing of proposals along with the intentional secrecy behind the discussions of proposed legislation, underscore potential obfuscation of political power. This is especially the case given the hypocrisy in Speaker Sprowls claiming to close the statehouse to protect the public but then voting in favor of legislation that undermined public health interests. This type of obfuscation demonstrates how the state—and powerful agents of the state—makes efforts to shield its own power and

disguise its workings (Gusterson, 1997). The COVID-19 pandemic provided a cloak of secrecy though which to hide the machinations of state power. As medical anthropologists continue to work in settings where epidemics reveal social, political, and economic upheavals, there is a need to be particularly attentive to how epidemics provide a tool to shroud state power and deepen inequality.

Just as the state advanced a politics of exclusion at the expense of protecting human health, there have been meaningful resistance efforts. Newly forming coalitions to combat aggressively divisive policy agendas, and the intentional efforts to advance political power among those targeted by such legislation, underscore the relational process of power (Foucault, 2003) underpinning governmentality. Such processes suggest how pandemics and concomitant governing practices can create new political terrains on which efforts to assert rights are fought. The resistance efforts and responses led by Contigo Fund also highlight ongoing opportunities to ethnographically examine pandemic activism. Doing so provides potential opportunities for additional scholarship in medical anthropology that moves beyond “studying the suffering subject” (Robbins, 2013) and centers on health-related activism.

The potential of a pandemic to conceal the machinery of state power, the resulting politics of division, and corresponding mobilizations of resistance, require additional ethnographic research attention and novel methods. Anthropologists have explored policy as a tool of the state (Wedel et al., 2005), but the persistence of a novel contagious respiratory disease that can require social distancing may create new challenges for studying state power and implications for health. For example, mutations in COVID-19 resulting in more transmissible strains may again lead to restricted access to public facilities like statehouses. This may provide powerful leaders like legislators the ability to evade scrutiny from reporters and researchers for sustained periods of time. Legislators may leverage the legitimacy of biomedicine and public health as tools of power to continue to conceal their own operations. Just as the securitization of public health around Ebola in West Africa became a tool for enacting violence on some vulnerable populations (Benton, 2017), the guise of “protection” may be used for concealing power operations at varying moments in time as COVID-19 continues to be a global health concern.

CONCLUSION

As the COVID-19 pandemic persists, health and social scientists must continue to be attentive to how efforts to govern with contagion can reinforce socially constructed notions of difference. As the ethnographic fieldwork highlighted here shows, governing with contagion can undermine efforts to protect health and permit new ways of reinforcing notions of difference, all while doing so in secrecy. Such obfuscation of power requires additional anthropological attention to the pathways that governing with contagion can take. Further, anthropologists must continue to examine how health policy, including pandemic-related health policy, can be harmful and be passed by strategically exploiting public health practices such as social distancing.

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ENDNOTES

¹In this article, a combination of pseudonyms and real names are used for interviewees. Jerry Demings's real name is used since (1) he gave permission for it to be used in publications, and (2) the details he provided would make him identifiable regardless

of having a pseudonym. Pseudonyms are used for all others. When referencing public figures in interviews, such as Anthony Sabatini, real names are also used.

²There remains controversy over this issue as the state inspector general investigation has found this claim to be unsubstantiated.

³This phrase is a nod to journalist Adam Serwer's (2018) uses of the exact same phrase in identifying Donald Trump and his supporters' enjoyment in suffering of those they dislike.

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