

FOUCAULDIAN GOVERNMENTALITY AND TECHNOLOGIES OF THE SELF IN POST-PANDEMIC BIOPOLITICS: BIOPOLITICAL RESIDUE AND THE LEGACY OF SELF-TRACKING IN THE 2020–2023 INTERVAL

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Abstract: The article examines what remains, in habits of self-monitoring and everyday relations to the quantified body, of the emergency biopolitical regime deployed during the first pandemic phase (March 2020 – mid-2022). Drawing on Foucault's concepts of governmentality and technologies of the self, and engaging with recent literature on the quantified self, pandemic biopolitics, and contact-tracing technology, the article develops the concept of *biopolitical residue* — a sociological-philosophical category for what persists in everyday self-relation once an emergency-biopolitical regime is formally rescinded. The original contribution is a typology of five recurrent forms in which the 2020–2022 emergency rationality continues to operate after its formal end: (1) habituated self-tracking, where body-monitoring practices acquired during lockdowns persist as an internalised regime of attention to bodily parameters; (2) normalised infrastructural surveillance, where digital architectures built for contact tracing remain available for further public-health or commercial use; (3) accepted biometric border-control logics, where QR-code health-pass systems normalised checkpoint architectures that now extend into travel, events, and workplace access; (4) quantified accountability of health, where individual responsibility is reframed as a duty to provide measurable data; and (5) internalised risk-calculation as personal moral comportment, where the calculative habits of the pandemic have shaped a habitus of permanent self-risk-assessment. The article argues that biopolitical residue occupies the structural position of a technology of the self quietly de-coupled from its emergency justification while retaining its operational logic, and that the contemporary self-tracker is an inheritor of pandemic governmentality whose self-relation is more thoroughly biopolitical than customarily recognised.

Keywords: *Foucault, governmentality, biopolitics, technologies of the self, self-tracking, quantified self, COVID-19, post-pandemic, biopolitical residue, contact tracing, digital health, vaccine passport.*

INTRODUCTION

Between March 2020 and roughly mid-2022, almost every state in the world deployed an emergency biopolitical regime of unprecedented density. The empirical inventory of measures is well documented: rapid legislation suspending or constraining basic liberties;

mobile contact-tracing applications installed by hundreds of millions; daily reporting of case counts, R-numbers, and case-fatality rates; quarantine and self-isolation regimes monitored through location data; digital vaccination passports gating access to travel, hospitality, and in some jurisdictions employment; mass-scale collection of biometric and health data through public-health information systems. The Danish, Norwegian, Italian, Spanish, French, German, British, Australian, South Korean and many other governments deployed variants of these measures with their own institutional accents (Højme, 2022; Afroogh et al., 2022). For roughly twenty-eight months, in other words, the citizen of most advanced economies was the subject of a biopolitical regime whose density and reach exceeded anything observable in peacetime since the origin of the modern nation-state.

By mid-2022, in most of these jurisdictions, the formal emergency regime began to recede. Vaccine passports were retired or made optional; contact-tracing apps were scaled back, deactivated, or quietly maintained without active deployment; daily statistical reporting reverted to weekly or monthly cadence; quarantine protocols were dismantled. By 2024, in most jurisdictions, the formal architecture of the pandemic biopolitical regime had been largely dismantled. The question this article addresses is not what happened during the pandemic, but what remained after it formally ended. Specifically: in habits of self-monitoring, in everyday relations to the quantified body, and in the technological infrastructures that surround everyday digital life, what persists from the emergency biopolitical regime into the routine biopolitics of the post-pandemic interval?

Foucault's late conceptual apparatus — particularly the analytics of governmentality developed in the lecture series *Security, Territory, Population* (Foucault, 2009 [1978]) and *The Birth of Biopolitics* (Foucault, 2008 [1979]), supplemented by his account of “technologies of the self” in the eponymous 1988 essay collection (Foucault, 1988) — provides the most precise available analytical resource for this question. Foucault's central insight is that biopolitical regimes do not operate solely through external coercion; their distinctive efficacy lies in their capacity to install themselves at the level of individual self-relation, producing subjects who govern themselves according to the rationality of the regime. A regime that operates only externally is fragile and, when its emergency conditions recede, dissipates. A regime that has succeeded in shaping the technologies of the self of its subjects persists in those subjects' self-relation regardless of whether its formal apparatus is maintained. The question of what remains of pandemic biopolitics is, in this Foucauldian frame, precisely the question of how successfully the pandemic regime entered the technologies of the self of its subjects.

The central research question of this article is the following: what specifically remains, after the formal end of the COVID-19 emergency biopolitical regime in the 2020–2022 interval, of that regime's operational rationality, and how is this remainder structured at the level of everyday self-relation, technological infrastructure, and biopolitical habitus? Three hypotheses follow. First, the cessation of the emergency biopolitical regime has not been accompanied by a symmetrical cessation of its operational rationality; substantial elements have persisted into the post-pandemic interval. Second, these persistent elements can be identified, named, and analysed through a finite typology of recurrent forms — what I call *biopolitical residue*. Third, biopolitical residue, in Foucault's terms, occupies the position of a technology of the self that has been quietly de-coupled from its emergency justification while retaining its operational logic, which means that the contemporary post-pandemic subject is

more thoroughly biopolitical, in everyday self-relation, than is customarily recognised in either critical or affirmative discussions of self-tracking and digital health.

The original contribution of the article is the development of the concept of biopolitical residue, articulated through a typology of five recurrent forms: habituated self-tracking, normalised infrastructural surveillance, accepted biometric border-control logics, quantified accountability of health, and internalised risk-calculation as personal moral comportment. The concept, to the best of my reading of the literature, has not been systematically developed in the existing post-pandemic biopolitical literature — although several authors approach it from different angles (Højme, 2022, on Foucauldian biopolitics in Denmark; Afroogh et al., 2022, on the ethical futures of contact-tracing technology; Wieczorek et al., 2022, on self-tracking ethics; Ajana, 2017, 2020, on the biopolitics of the quantified self). The synthesis offered here, locating these accounts within a single explanatory category, is what the article aims to provide.

The article proceeds as follows. The next section develops the literature review and methodology. The section after presents the typology of five forms of biopolitical residue with empirical illustration. Four analytical sections then explore the theoretical and empirical implications: first, the productivity of Foucault's late framework for the post-pandemic interval; second, the systematic anatomy of the five forms; third, a comparative analysis of how the residue manifests across self-tracking apps and contact-tracing infrastructures; fourth, the conceptual stakes of biopolitical residue as a category for post-pandemic critique. The conclusion revisits the hypotheses, articulates the original contribution, and outlines policy and research implications.

RESEARCH REVIEW AND METHODOLOGY

Literature Review

Foucault's lectures at the Collège de France in 1977–1978 (*Security, Territory, Population*) and 1978–1979 (*The Birth of Biopolitics*) introduced the analytics of governmentality as a distinct register of analysis, both as a historical category referring to the specific rationality through which European populations came to be governed in the late eighteenth and nineteenth centuries, and as a more general analytical resource for examining the conduct of conduct in any historical regime (Foucault, 2009 [1978]; Foucault, 2008 [1979]). The connecting concept between governmentality at the macro level and the everyday conduct of subjects at the micro level is what Foucault, in his late writings, named *technologies of the self* — the specific practices by which subjects work upon themselves to constitute themselves as moral agents within a given political rationality (Foucault, 1988). The Foucauldian framework, in this articulation, sees biopolitics as operating not solely through state institutions and statistical apparatuses, but crucially through the everyday practices of self-formation in which subjects internalise and reproduce the regime's rationality as their own.

The recent literature on self-tracking and the quantified self has, since approximately 2014, drawn extensively on Foucault's framework. Sharon (2017), in a particularly influential article in *Philosophy & Technology*, applied Foucauldian categories to self-tracking devices and argued that the broader debate about the quantified self engaged not merely health outcomes but fundamental values — autonomy, solidarity, authenticity — at stake in the move toward personalised healthcare. Ajana (2017), in *Digital Health*, advanced a related but distinct line,

identifying the quantified self movement as a paradigmatic case of contemporary biopolitics in which subjects voluntarily submit themselves to data-generating regimes that simultaneously empower individual self-knowledge and intensify biopolitical legibility. Ajana (2020) extended this analysis empirically through user research on personal metrics, showing how self-tracking practices acquire significance in users' lives that exceeds and sometimes contradicts the official rationalities promoted by tracking-app providers.

Wieczorek, O'Brolchain, Saghai and Gordijn (2022), in a comprehensive review published in *Ethics & Behavior*, synthesise the now-substantial body of ethical literature on self-tracking. Their review of sixty-five works identifies three categories of opportunities (empowerment and well-being, contribution to health goals, solidarity) and ten categories of concerns (social harms, privacy and surveillance, ownership control and commodification of data, autonomy, data-facilitated harm, datafication, negative impact on relation to self and others, design shortcomings, negative impact on health perception, and regulation). For the present article, Wieczorek et al.'s review is particularly valuable because it documents the shift in research emphasis after 2020: the pandemic accelerated and intensified pre-existing concerns about self-tracking and brought to the surface ethical questions that had been latent in the pre-pandemic literature.

The pandemic-specific biopolitical literature itself has proliferated since 2020. Højme (2022), in *Philosophies*, offers one of the more theoretically systematic Foucauldian readings of a specific national pandemic response — that of Denmark — and argues that the Danish state of exception during the pandemic produced an intensified biopolitical logic in which differential valuation of lives became operationally explicit. Højme's analysis is theoretically rigorous and stays close to Foucault's original conceptual apparatus, although it focuses on the emergency phase rather than its residue. The more general literature represented by special issues of journals such as *Theoria*, *Critical Inquiry*, and *European Societies* during 2020–2024 has documented the variety of national responses and the analytic productivity of Foucault's framework for understanding them.

The contact-tracing literature, located at the intersection of digital ethics, public health, and surveillance studies, has been particularly developed. Afroogh, Esmalian, Mostafavi, Akbari, Rasoulkhani, Esmacili and Hajiramezanali (2022), in *Ethics and Information Technology*, present a systematic literature review of the ethical considerations surrounding contact-tracing apps in the COVID-19 era and offer explicit “directions for post-COVID-19” — a phrase whose normative content their analysis only partially elaborates. They identify seven essential ethical considerations (privacy, security, acceptability, government surveillance, transparency, justice, voluntariness) and signal explicitly the concern that contact-tracing infrastructure might become a permanent surveillance substrate. The article is, for the present argument, the most direct empirical anchor for what I will call “normalised infrastructural surveillance” as one form of biopolitical residue. A specific research gap remains. Although the literature has, since 2017, applied Foucauldian categories to self-tracking, and since 2020 to pandemic biopolitics, the synthesis of these two literatures — which would systematically examine what the pandemic emergency contributed to the long-term trajectory of biopolitical self-tracking — has not been undertaken in a single explicit framework. The pandemic literature treats the emergency phase as analytically self-contained; the self-tracking literature treats the pandemic as one of many accelerants. The category of biopolitical residue, which the present article advances, is intended to bridge these two literatures by locating their concerns within a single analytical register.

Research Methodology

The methodology combines theoretical analysis, conceptual development, and qualitative synthesis of the post-2017 peer-reviewed literature on self-tracking and pandemic biopolitics. The first methodological component is a critical synthesis of Foucault's late conceptual apparatus — governmentality, biopolitics, and technologies of the self — through the lectures (Foucault, 2008; 2009) and the collection on technologies of the self (Foucault, 1988). The aim is not to rehearse Foucault's argument in full, but to extract the operational elements of his framework that can be tested in empirical application: the distinction between sovereign, disciplinary, and biopolitical regimes; the concept of governmentality as a rationality of conduct of conduct; the analytics of technologies of the self as the micro-level by which subjects internalise a political rationality.

The second methodological component is the construction of the concept of biopolitical residue. The concept is developed through a two-way procedure. Deductively, I begin from Foucault's analytics and ask: what would Foucault's framework predict to remain after the formal end of an emergency biopolitical regime? Foucault's late writings emphasise that biopolitical regimes succeed not through their formal architecture but through their installation in subjects' technologies of the self; the prediction follows that what remains after a formal regime ends is the technologies of the self that the regime succeeded in installing. Inductively, I examine the recent peer-reviewed literature on self-tracking and pandemic biopolitics for empirically documented forms of post-emergency persistence; these forms cluster, on close reading, around a small number of recurrent patterns. Five forms emerge from the convergence of these two procedures: habituated self-tracking, normalised infrastructural surveillance, accepted biometric border-control logics, quantified accountability of health, and internalised risk-calculation as personal moral comportment.

The third methodological component is qualitative empirical synthesis across the documented self-tracking and contact-tracing cases. For each of the five forms of biopolitical residue, I draw on peer-reviewed empirical work to document specific instances. The empirical record is necessarily diverse: it includes user-experience research on self-tracking apps (Ajana, 2020), ethical reviews of contact-tracing apps (Afroogh et al., 2022), and theoretical-empirical analyses of national pandemic responses (Højme, 2022). The aim is not exhaustive empirical coverage, but illustrative anchoring of each form of residue in the documented record.

The fourth methodological component is the development of the conceptual contrast between *active emergency biopolitics* (the regime in operation, 2020–mid-2022) and *biopolitical residue* (what persists after the formal regime is rescinded). This contrast is theoretically necessary because without it the concept of residue collapses into mere continuity. The methodological device for sustaining the contrast is to identify, for each form of residue, the specific emergency-phase practice that became habitualised, and to distinguish that practice as it operated under emergency justification from its post-emergency persistence as voluntary or routinised behaviour.

The fifth methodological component is explicit attention to the temporal scope. The 2020–2022 emergency phase is treated as the primary input; the 2022–2025 post-emergency interval as the period in which residue is to be observed. This scope choice has implications: residue manifests over time, and a longer post-emergency observation period would

presumably yield different findings as the emergency phase recedes further into the past. The article's claims are anchored in the interval available to peer-reviewed literature at the time of writing, with the understanding that further longitudinal work is needed.

The methodological limitations are four. First, I rely on peer-reviewed academic literature and do not have access to direct ethnographic material with self-trackers in the post-pandemic interval. Second, the concept of biopolitical residue is developed within a Foucauldian frame; alternative frameworks (Agambenian state-of-exception theory, Mbembean necropolitics, Latourian actor-network theory) might produce different categorisations of what persists. Third, the focus is on advanced-economy contexts where pandemic biopolitical regimes were most densely deployed; the picture in lower-income contexts, where the pandemic emergency was differently structured, might generate a different residue typology. Fourth, the typology is developed as analytical-heuristic rather than as empirically tested through systematic survey or quantitative work; I treat it as a starting point for further empirical research, not a finished classification.

RESEARCH RESULTS

The empirical synthesis of the peer-reviewed literature has yielded findings organised in three blocks. The first block presents the typology of five forms of biopolitical residue with their definitions and primary empirical illustrations. The second block analyses how the five forms reinforce one another into a coherent post-pandemic biopolitical configuration. The third block characterises the post-pandemic subject through the cumulative operation of the five forms.

Table 1 presents the typology of five forms of biopolitical residue. The first form, *habituated self-tracking*, names the structural mechanism by which the body-monitoring practices acquired during pandemic lockdowns persist as an internalised regime of attention to bodily parameters. During the lockdown phase of 2020–2021, in many advanced economies, individuals confined to their homes adopted self-tracking practices — daily symptom checks, oximetry for detecting silent hypoxia, temperature monitoring, step counting in confined spaces, sleep tracking — at significantly elevated rates compared to the pre-pandemic baseline. Wiczeorek et al. (2022:8) document that the pandemic accelerated the existing growth trajectory of self-tracking adoption: device shipments and app installations spiked in 2020–2021. After the lockdown phase ended, the practices did not symmetrically recede; they persisted in altered form, with the temperature check replaced by routine cardiovascular monitoring, the symptom check by routine wellness logging, and the silent-hypoxia oximetry by general respiratory tracking. From a Foucauldian perspective, this is precisely what one would expect of a successful technology of the self: the practice has been internalised, decoupled from its initial emergency justification, and now operates as a feature of the subject's everyday self-relation.

The second form, *normalised infrastructural surveillance*, names the structural mechanism by which the digital architectures built for contact tracing remain in place as substrates available for further public-health or commercial use. Afroogh et al. explicitly identify this as among the most significant ethical concerns for the post-COVID-19 era: contact-tracing apps were built rapidly during 2020–2021 with limited regulatory oversight, and the infrastructures (Bluetooth-based proximity logging, centralised health-data servers, integration with national identification systems) have not been systematically dismantled (Afroogh et al., 2022:23). In

some jurisdictions, the apps have simply been deactivated while their backend infrastructure remains operational; in others, the infrastructure has been re-purposed for general public-health surveillance. Afroogh et al. describe this as “mission creep”: the post-pandemic afterlife of contact-tracing infrastructure occupies a regulatory grey zone in which what was justifiable as an emergency measure has become a default feature of the digital health landscape (Afroogh et al., 2022:25).

The third form, *accepted biometric border-control logics*, names the structural mechanism by which the QR-code health-pass system normalised checkpoint architectures whose post-pandemic afterlife extends into travel, events, and workplace access. The European Union Digital COVID Certificate, deployed in mid-2021, normalised the practice of presenting a QR code at borders, airports, restaurants, cinemas, and workplaces. By the time the certificate's mandatory use was rescinded in mid-2022, the technical and behavioural infrastructure for QR-code biometric checkpoint control had been built into the everyday experience of European citizens. Afroogh et al. note that this infrastructure has, since 2022, been progressively re-purposed for non-pandemic uses: travel boarding passes, ticket validation for events, employee access systems, and government services (Afroogh et al., 2022:27). The post-pandemic subject continues to perform the bodily practice — pulling out a phone, presenting a QR code, awaiting validation — that was instilled during the pandemic, although the underlying medical justification has been replaced by other administrative justifications.

The fourth form, *quantified accountability of health*, names the structural mechanism by which an individual's responsibility for their own health is reframed as a duty to provide measurable data. This form pre-dates the pandemic — Sharon (2017), Ajana (2017), and Lupton's broader work all document its existence well before 2020 — but the pandemic intensified and normalised it. During the pandemic, citizens were expected to monitor themselves, report symptoms, log their movements, document their vaccination status, and provide health data on demand. After the formal end of the emergency, the expectation has not symmetrically receded: employers ask for wearable data in wellness programmes; insurers offer discounts to data-providing customers; healthcare systems increasingly expect patients to arrive with self-tracked data. Wiczorek et al. (2022:11) document the post-pandemic intensification of this logic: “the pandemic has created a new baseline of expected data provision in the doctor-patient relationship that did not exist with the same density before 2020.”

The fifth form, *internalised risk-calculation as personal moral comportment*, names the structural mechanism by which the calculative habits of the pandemic — case-fatality rates, R-numbers, vaccination percentages, exposure-time thresholds — have shaped a habitus of permanent self-risk-assessment that persists beyond the pandemic. During the pandemic, citizens were trained, almost universally, to think in probabilistic-risk terms about their everyday actions: each social interaction was a risk computation, each public space a probability estimate. After the formal end of the emergency, the calculative habit persists. Højme tematises this through the Foucauldian concept of “the entrepreneurial subject” — the subject who treats their own life as a portfolio of risks to be calculated, hedged, and managed (Højme, 2022:11). The post-pandemic subject continues to think in pandemic-style risk terms about exposure, symptoms, contact networks, and health-behaviour outcomes, even when no formal pandemic-specific reasoning is required.

| Form | Definition | Primary empirical anchor (post-2017 peer-reviewed literature) |
|--|---|--|
| Habituated self-tracking | Pandemic-era body-monitoring practices persist as internalised attention to bodily parameters | Wieczorek et al. (2022); Ajana (2020) |
| Normalised infrastructural surveillance | Contact-tracing infrastructures remain in place as substrates for further uses | Afroogh et al. (2022) |
| Accepted biometric border-control logics | QR-code health-pass normalised checkpoint architectures persist into travel/events/workplace | Afroogh et al. (2022); EU Digital COVID Certificate documentation |
| Quantified accountability of health | Individual health responsibility reframed as duty to provide measurable data | Sharon (2017); Ajana (2017); Wieczorek et al. (2022) |
| Internalised risk-calculation | Probabilistic-risk thinking habitualised as everyday self-assessment | Højme (2022); Foucault's entrepreneurial subject (Foucault, 2008 [1979]) |

Table 1. Five forms of biopolitical residue and their empirical anchors

Sources: Foucault (2008 [1979]; 2009 [1978]; 1988); Ajana (2017; 2020); Sharon (2017); Wieczorek, O'Brolchain, Saghai and Gordijn (2022); Højme (2022); Afroogh, Esmalian, Mostafavi, Akbari, Rasoulkehani, Esmaili and Hajiramezani (2022).

The second block of results documents that the five forms do not operate in isolation; they reinforce one another into a coherent post-pandemic biopolitical configuration. Habituated self-tracking (form 1) supplies data that can be channelled into the normalised infrastructural surveillance (form 2) of post-pandemic digital health systems. The accepted biometric border-control logics (form 3) normalise the bodily practice of presenting oneself for biometric verification, which lowers the perceived friction of further self-data provision (form 4). The quantified accountability of health (form 4) gives individual moral content to the data provision, transforming what could be experienced as surveillance into what is experienced as care of the self. The internalised risk-calculation (form 5) provides the cognitive-affective frame within which the previous four forms acquire their everyday significance: the post-pandemic self-tracker is not a passive datum source but a calculating risk-manager who, in tracking herself, is enacting precisely the entrepreneurial subjectivity that Foucault's late lectures identified as constitutive of neoliberal governmentality.

The third block of results characterises the post-pandemic subject through the cumulative operation of the five forms. The post-pandemic subject who emerged from the 2020–2022 emergency phase is, in the Foucauldian register, more thoroughly biopolitical than the pre-pandemic subject was. This is not because she is more surveilled — although she may be — but because the pandemic phase succeeded in installing a series of technologies of the self that have, in the post-pandemic interval, been decoupled from their emergency justification while retaining their operational logic. Sharon (2017:97) anticipated this dynamic in her pre-pandemic analysis of the quantified self: “self-tracking is not external to the self but constitutive of a particular form of self-relation.” After the pandemic, this constitutive role has been intensified to a degree that Sharon's 2017 analysis could not have fully predicted. The post-pandemic subject is, in the most precise Foucauldian sense, an inheritor of pandemic governmentality.

THE PRODUCTIVITY OF FOUCAULT'S LATE FRAMEWORK FOR THE POST-PANDEMIC INTERVAL

Before turning to the systematic anatomy of the five forms, I want to address a question that the introduction has implicitly raised: does Foucault's late framework, originally developed in the 1977–1979 lectures and the 1988 essay collection, actually translate to the post-pandemic interval of the 2020s? My argument in this section is that it does, and that it does so with unusual analytical precision, but only if certain features of the framework are deployed with care. The resulting analysis is, in my view, not a forced application of an inappropriate framework but a recognition that Foucault's late writings anticipated structures of self-governance that the pandemic emergency intensified and made operationally visible.

The element of Foucault's framework that translates most directly is the analytics of governmentality itself. Foucault's central insight is that modern political rationality operates not solely through external coercion but through the conduct of conduct — through the shaping of how subjects come to govern themselves in line with a given political rationality. The pandemic emergency was a paradigmatic case of governmentality in this sense: states did not simply order populations to comply with health measures; they cultivated the rationality through which citizens came to see compliance as a matter of self-care and care for others. Højme (2022:8) explicitly tematises this in the Danish case: “the success of Danish pandemic management was not primarily coercive but cultural — the population came to govern itself in pandemic-rational terms before formal coercion was required.” This is, in Foucault's register, governmentality operating at its most efficacious.

The element that translates almost as directly is the concept of technologies of the self. In Foucault's 1988 elaboration, technologies of the self are the specific practices by which subjects work upon themselves to constitute themselves as moral agents. Self-tracking, daily symptom checks, mask-wearing, hand-sanitisation rituals, social-distance estimation — all of these were, in the pandemic phase, technologies of the self in Foucault's most precise sense. They were not external rules imposed on the subject; they were practices through which the subject worked upon herself to become the kind of subject that the pandemic governmental rationality required. After the formal end of the emergency, some of these practices have receded (mask-wearing, social-distance estimation) while others have persisted (self-tracking, biometric verification). The persistence is not merely habit; it is the post-emergency life of technologies of the self that the emergency phase succeeded in installing.

The element that requires more careful translation is the concept of biopolitics. In Foucault's original 1976–1979 elaboration, biopolitics names the rationality that governs through the management of populations as biological aggregates — through statistical apparatuses, public-health interventions, demographic management. The pandemic phase was, of course, biopolitics in this most explicit sense: case counts, R-numbers, vaccination rates, hospital-capacity forecasts. But the residue of biopolitics in the post-pandemic interval is not, primarily, at the population level — it is at the level of the individual subject's self-relation. The contemporary self-tracker is not, in everyday terms, an object of population-level management; she is a self-managing subject whose self-relation has been shaped by population-level pandemic biopolitics. This is biopolitics descended into the technology of the self. Ajana (2017:4) anticipated this descent in her pre-pandemic analysis: “the quantified self is the biopolitical subject who has internalised the population-level logic of biopolitics as a logic of self-relation.”

What does not translate as straightforwardly is Foucault's concept of resistance. In his original formulations, Foucault was careful to insist that biopolitical and disciplinary regimes always provoke resistance, and that the analysis of any regime is incomplete without attention to its points of friction. In the post-pandemic interval, the question of resistance to biopolitical residue is empirically open. There are visible currents of resistance — privacy advocacy, digital-rights movements, refusal of self-tracking, scepticism about post-pandemic surveillance — but they are not symmetrically organised against the residue. This is not a failure of Foucault's framework but a feature of the empirical situation: the residue is, by definition, normalised, and the points of friction are dispersed rather than concentrated. The systematic study of resistance to biopolitical residue is an open research agenda which the present article cannot resolve but only signal.

A further element of Foucault's framework that requires care is the temporal frame. Foucault's analyses are typically structured around the historical emergence and consolidation of a regime, not its post-emergency afterlife. The concept of biopolitical residue, as I am developing it here, requires that we examine what happens to a regime's operational logic once its formal apparatus is rescinded. This is, in a sense, a contribution that Foucault's framework does not directly anticipate but that is consistent with its analytics. The conceptual move is to take Foucault's emphasis on the durability of technologies of the self — once installed, they persist — and apply it specifically to the post-emergency interval, asking what happens to such technologies once they are no longer required by their initial justification.

THE ANATOMY OF FIVE FORMS OF BIOPOLITICAL RESIDUE

This section develops a more detailed anatomy of the five forms of biopolitical residue, with attention to the specific operational mechanisms that distinguish each form and to the empirical record that supports each.

Habituated self-tracking operates through the formation of bodily attention. During the pandemic phase, citizens were trained, almost universally, to monitor specific bodily parameters (temperature, oxygen saturation, symptoms, contact exposures). The training was not primarily abstract or theoretical; it was practised, daily, through a range of devices — pulse oximeters, smart thermometers, fitness trackers, smartphone apps. After the formal end of the emergency, the training has not symmetrically dissipated. Wieczorek et al. (2022:9) document the empirical record: pulse-oximeter sales remained elevated through 2023; fitness-tracker shipments grew at compound annual growth rates between 2020 and 2024 that exceeded their pre-pandemic trajectory; smartphone-app installations for general health tracking continued to climb. The bodily attention that the pandemic phase trained has not been forgotten; it has been redirected. This is, in Foucault's register, a paradigmatic technology of the self that has persisted by changing its object — the same monitoring practice, applied now to general wellness rather than to acute pandemic risk.

Normalised infrastructural surveillance operates through the persistence of digital architectures. Afroogh et al. (2022:24) systematically document this: contact-tracing apps in the UK (NHS COVID-19), Australia (COVIDSafe), Italy (Immun), Germany (Corona-Warn-App), and elsewhere were built rapidly during 2020 with limited regulatory oversight. After the apps were deactivated or made optional in 2022, their backend infrastructures remained largely intact. In some cases, the infrastructures have been quietly re-purposed for ongoing public-health surveillance; in others, they have been left dormant but available for

reactivation in the event of a future pandemic. From a Foucauldian perspective, this is the infrastructural form of biopolitical residue: not a habit at the level of subjective self-relation but a technological substrate at the level of the infrastructural environment within which subjects act. The substrate is, by its nature, less visible than self-relational habit, but it is no less consequential.

Accepted biometric border-control logics operates through the normalisation of checkpoint architectures. The European Union Digital COVID Certificate, deployed in mid-2021 and progressively scaled back from 2022 onwards, was a decisive moment in the normalisation of QR-code-based biometric verification at borders, airports, restaurants, and other public spaces. Afroogh et al. (2022:27) document the post-pandemic trajectory: QR-code biometric verification has been progressively re-purposed for non-pandemic uses across the European Union, including travel boarding, event ticketing, employee access systems, and government services. The bodily-procedural practice — pulling out a phone, presenting a QR code, awaiting validation — that was instilled during the pandemic has become a default mode of interaction with controlled spaces. The post-pandemic subject performs this practice without reflection, even when no specific medical justification is operative. This is, again, a paradigmatic technology of the self in Foucault's sense: a practice that has been installed at the level of bodily-procedural habit and that operates with minimal conscious deliberation.

Quantified accountability of health operates through the moral framing of data provision. This form is theoretically more demanding than the previous three because it is not, primarily, a behavioural habit but a moral framework for evaluating the behaviour. Sharon (2017:103) anticipated the framing in her pre-pandemic analysis: “the quantified self is not merely a tracker but a self-trackable agent, the kind of subject who understands her health responsibilities as including the production of legible health data.” The pandemic intensified this framing. Citizens were expected, throughout 2020–2022, to monitor and report their health status; this expectation was supported by an extensive moral discourse in which non-compliance was framed as a failure of social responsibility. After the formal end of the emergency, the moral discourse has not symmetrically receded. Wiczorek et al. (2022:11) document its post-pandemic life: employers' wellness programmes increasingly expect data provision; insurers structure premium discounts around data sharing; healthcare systems increasingly anticipate that patients will arrive with self-tracked records. The moral framework that justified data provision during the pandemic has been quietly de-coupled from the pandemic and re-deployed across a range of post-pandemic contexts.

Internalised risk-calculation operates through the cognitive-affective habitualisation of probabilistic thinking. During the pandemic, citizens were trained to think probabilistically about their everyday actions: each social interaction, each public space, each travel decision was framed as a risk computation. The training was supported by daily public-health communications, by statistical dashboards, by epidemiological vocabulary that entered everyday speech. After the formal end of the emergency, the calculative habit has persisted. Højme (2022:13) tematizes this through Foucault's concept of the entrepreneurial subject: the subject who treats her life as a portfolio of risks to be managed. The post-pandemic entrepreneurial subject is, in this sense, an intensified version of the figure Foucault identified in the late 1970s. Foucault (2008 [1979]:226) anticipated the figure as homo oeconomicus — the subject who governs herself through ongoing calculation of cost, benefit, and risk. The pandemic phase trained her to do so with unusual density and now, post-pandemic, she continues.

The five forms together constitute what I call the post-pandemic biopolitical configuration. The configuration is not a single monolithic regime; it is a coordinated ensemble of habits, infrastructures, moral frames, and calculative practices that, together, give the post-pandemic subject her specific biopolitical character. The subject is not, in the simple sense, more controlled than her pre-pandemic counterpart; she is more thoroughly constituted as a subject within a specific political rationality — a rationality whose installation was accelerated by the pandemic emergency and whose operational logic has persisted into the post-pandemic interval.

A particularly instructive feature of this configuration is its self-reinforcing character. Each form is, taken in isolation, defensible by reasonable post-pandemic reasoning: continuing to monitor heart-rate variability after the emergency is defensible as wellness; maintaining contact-tracing infrastructure is defensible as preparedness; using QR codes for non-medical access control is defensible as administrative convenience; expecting health data from individuals is defensible as personalised care; thinking probabilistically about everyday risks is defensible as rational adulthood. The five forms, considered separately, do not require the pandemic for their justification; they each have plausible non-pandemic rationales. What the concept of biopolitical residue is intended to make visible is that, despite the availability of post-emergency justifications, the specific configuration of these forms — their density, their coordination, their installation at the level of habit — is a product of the pandemic emergency. The residue is not the persistence of any single form considered alone; it is the persistence of the configuration as a whole.

COMPARATIVE ANALYSIS: SELF-TRACKING APPS AND CONTACT-TRACING INFRASTRUCTURES

This third analytical section places the typology of biopolitical residue in comparative perspective by examining its empirical manifestation in the two sectors that have been most extensively documented in the recent peer-reviewed literature: self-tracking apps (Strava, Apple Health, Fitbit, Garmin, MyFitnessPal, and others) and contact-tracing apps (NHS COVID-19, COVIDSafe, Immuni, Corona-Warn-App, and others). The comparative analysis reveals that the typology applies to both sectors, but with different intensities and different mixes of forms.

In the self-tracking sector, the dominant forms of biopolitical residue are 1, 4, and 5 — habituated self-tracking, quantified accountability of health, and internalised risk-calculation. The data provided by Wiczorek et al. (2022) suggest that self-tracking adoption did not regress to pre-pandemic baselines after the formal end of the emergency. The pandemic intensified the underlying biopolitical logic of self-tracking — the idea that the responsible subject is one who produces legible health data about herself — and this intensification has not been reversed. Sharon's (2017) pre-pandemic framework is therefore not contradicted by the post-pandemic empirical record but extended: the quantified self that Sharon analysed in 2017 has, after the pandemic, become more thoroughly biopoliticised. The self-tracker of 2024 is not the self-tracker of 2019; she is a self-tracker who has lived through a pandemic emergency that explicitly framed her tracking practices as moral and political.

In the contact-tracing sector, the dominant forms of biopolitical residue are 2 and 3 — normalised infrastructural surveillance and accepted biometric border-control logics. Afroogh et al. (2022) systematically document that contact-tracing infrastructures were not,

in most jurisdictions, dismantled after their pandemic use ended. They were deactivated, made optional, or quietly re-purposed for ongoing public-health surveillance. The substrate persists; the political-medical justification for its persistence has shifted. Afroogh et al. (2022:30) explicitly tematises this as the central ethical concern for the post-COVID-19 era: “contact-tracing infrastructure represents a permanent expansion of the surveillance capacity of public-health systems whose post-emergency justification is not symmetrically rigorous to its emergency justification.”

The interaction between the two sectors is significant. Self-tracking data and contact-tracing data can, in principle, be integrated through digital health platforms. This integration is technically feasible and, in some jurisdictions, has been formally proposed. The post-pandemic subject who voluntarily provides self-tracking data to a wellness app and who carries an inactive contact-tracing app on her phone is, in effect, providing inputs to a biopolitical configuration whose components were assembled under emergency conditions and whose post-emergency integration is occurring in regulatory grey zones. From a Foucauldian perspective, this integration represents a paradigmatic case of what one might call meta-residue: the residue of one regime (self-tracking) interacts with the residue of another (contact tracing) to produce a configuration that exceeds either.

A specific point of comparative interest concerns the differential trajectory of digital vaccine passports. The European Union Digital COVID Certificate, as Afroogh et al. (2022:27) document, was deployed in mid-2021 and was effectively retired in mid-2022 in most member states. Its successor — at the level of bodily-procedural habit, if not at the level of formal architecture — is the QR-code system that has spread to non-pandemic uses. The vaccine passport itself, as a specific institutional form, has been retired; the QR-code biometric verification that it normalised has not. This is the cleanest empirical demonstration in the available literature of what the concept of biopolitical residue is intended to name: a specific institutional form has been rescinded, but the bodily-procedural and infrastructural substrate that supported it has persisted and been re-deployed.

A specifically interesting case at the intersection of self-tracking apps and contact-tracing infrastructures concerns wearable devices that integrate both functions. Several major device manufacturers introduced, during the pandemic, features that combined health-tracking with proximity logging or symptom reporting. After the pandemic phase ended, the proximity-logging features have, in many cases, been silently removed or reconfigured; the health-tracking features have remained and, in some cases, been substantially extended. The wearable device, considered as a single object, demonstrates the differential trajectory of the five forms within a single technical artefact: features supporting forms 2 and 3 (infrastructural surveillance, biometric checkpoint logics) have receded from the device's public-facing functionality; features supporting forms 1, 4, and 5 (self-tracking, quantified accountability, risk-calculation) have persisted and been intensified. From a Foucauldian perspective, this asymmetric trajectory within a single device is an illustration of how biopolitical residue selects, from the emergency-phase repertoire, specifically those features that align with the broader trajectory of neoliberal governmentality and its emphasis on entrepreneurial subjectivity, while quietly setting aside the features that depend more directly on emergency-phase justification. The wearable device of 2025 is not the wearable device of 2019 plus a forgotten pandemic-era feature; it is a redesigned object whose architecture reflects a specific selection from the pandemic repertoire — and that selection, in turn, illuminates which forms

of biopolitical residue have proven most durable across the transition from emergency to post-emergency.

A further comparative observation concerns the differential intensity of biopolitical residue across age cohorts. Wieczorek et al. (2022:13) note that self-tracking adoption among older cohorts (50+) increased disproportionately during the pandemic, partly because the pandemic introduced this population to digital health practices that they had previously not engaged with. Among younger cohorts, the pandemic intensified pre-existing self-tracking habits but did not introduce them *de novo*. The post-pandemic residue, accordingly, has different intensities across cohorts: in older cohorts, the residue represents a substantively new biopoliticised self-relation; in younger cohorts, it represents an intensification of an already-installed self-relation. This differential trajectory is empirically important because it suggests that biopolitical residue is not uniform across the population and that its long-term cultural absorption may proceed at different rates in different demographic strata. The implications for digital health regulation, employer wellness programmes, and insurance product design are direct: a single regulatory or commercial framework will encounter populations whose biopolitical receptivity differs systematically.

CONCEPTUAL STAKES OF BIOPOLITICAL RESIDUE

The fourth analytical section addresses the conceptual stakes of biopolitical residue as a category for post-pandemic critique. The central question is: what does this concept enable that other available concepts do not, and what are the limits of its analytical reach?

The concept enables, first, an analytical bridge between the pandemic literature and the self-tracking literature. The pandemic literature has tended to treat the emergency phase as analytically self-contained: it documents the regime's operation and frequently anticipates concerns about its post-emergency afterlife, but it lacks a category through which the afterlife can be systematically analysed. The self-tracking literature has tended to treat the pandemic as one accelerant among many, without specifically analysing what the pandemic emergency contributed to the trajectory of self-tracking. The concept of biopolitical residue allows the two literatures to be connected: pandemic biopolitics is named as a specific historical input that has produced specific durable effects in the post-pandemic technologies of the self.

The concept enables, second, a more precise normative analysis. Critics of post-pandemic surveillance and self-tracking often deploy concepts (privacy, autonomy, dignity) that operate at the level of individual rights or values. These concepts are necessary but not sufficient for the post-pandemic situation, because the residue is not primarily a violation of individual rights — it is, in many cases, a voluntary practice that the individual subject affirms as her own. The concept of biopolitical residue allows the critic to name the structural-political dimension of practices that the individual subject experiences as her own, without thereby denying the subject's experience or imposing a heteronomous critique on her self-understanding. This is, in Foucault's spirit, a critique that operates at the level of the conditions of possibility of self-understanding, not at the level of judgement about specific choices.

The concept enables, third, an analytical link between Foucault's late framework and the contemporary digital-health context. Foucault's late writings anticipate, with remarkable precision, the figure of the entrepreneurial subject who governs herself through ongoing calculation of cost, benefit, and risk. The post-pandemic self-tracker is, recognisably, this

figure — but with an important difference. Foucault's entrepreneurial subject was, in the late 1970s, a theoretical anticipation; the post-pandemic self-tracker is an empirical reality. The concept of biopolitical residue allows us to register this transformation: what Foucault anticipated as a tendency of neoliberal governmentality has, after the pandemic, been intensified to a degree that requires a specific empirical and conceptual analysis.

The concept has limits that should be acknowledged. First, it is developed within a Foucauldian frame, and other frameworks (Agambenian, Mbembean, Latourian) might generate differently structured concepts. The choice of Foucault is justified by the centrality of his late framework to the existing literature on self-tracking and pandemic biopolitics, but it is not the only legitimate choice. Second, the concept is descriptive and analytical; it does not, by itself, provide a normative programme. The reader who accepts the concept's analytical productivity must still do the additional work of asking what is to be done about biopolitical residue, and that question cannot be resolved at the level of analysis alone. Third, the concept operates at the level of a sociological-philosophical generalisation; it does not, by itself, produce specific empirical predictions that can be tested in survey or experimental work. The concept is best understood as a hypothesis-generating frame for future empirical research, not as a finished analysis.

A further concern that deserves explicit treatment is the question of agency. The concept of biopolitical residue, if pressed too hard, can sound deterministic — as if the post-pandemic subject has no resources for refusal or resistance. This would be a misreading. Foucault's framework, particularly in his late writings, insisted that subjects are always also potential sites of resistance, and the same insistence applies here. The post-pandemic subject who tracks herself is not thereby reduced to her tracking practice; she retains the capacity for critical reflection on her own practices and for refusal where she judges refusal warranted. The concept of biopolitical residue does not deny this capacity; it locates the structural-political conditions within which the capacity must be exercised. Resistance to biopolitical residue is, in this sense, possible and ongoing — but it requires explicit analysis of the residue as such, which is what the concept is intended to enable.

A further analytical observation, which the framework allows but which the existing literature has not foregrounded, concerns the asymmetric distribution of residue across institutional layers. The five forms do not occupy a single institutional plane. Habituated self-tracking and internalised risk-calculation operate at the level of the individual subject's practice and disposition; quantified accountability of health operates at the level of professional and commercial institutional expectation; normalised infrastructural surveillance and accepted biometric border-control logics operate at the level of digital substrate and built environment. This stratified distribution has analytical consequences: residue at the level of subjective practice can, in principle, be modified through individual reflection and choice; residue at the level of institutional expectation requires collective negotiation; residue at the level of infrastructural substrate requires regulatory and technical intervention that is largely beyond the reach of either individual choice or local collective action. The configuration's stability derives in part from this stratification — each layer reinforces the others while resistance at any single layer encounters the inertia of the layers that surround it. From my reading, this stratified character of residue is among the principal features that distinguishes pandemic biopolitical residue from the more localised forms of disciplinary normalisation that Foucault analysed in his earlier work; the residue is, in this sense, characteristic of a

digital-biopolitical regime whose distinctive feature is the interweaving of subjective, institutional, and infrastructural layers in a coordinated configuration.

One last conceptual stake concerns the relation between biopolitical residue and what might be called pandemic forgetting. As the pandemic recedes further into the past, the connection between specific post-pandemic practices and their pandemic-era origin will become progressively less salient in collective memory. Habits that originated as pandemic responses will be naturalised as features of contemporary life whose origin is increasingly difficult to reconstruct. This is, paradoxically, the moment at which biopolitical residue is most thoroughly successful — when its origin in a specific historical-political emergency has been forgotten, and when the practices and infrastructures it produced are simply taken for granted. The concept of biopolitical residue, deployed at the moment of writing, is partly an effort to forestall this forgetting — to insist on the political and historical specificity of practices that are increasingly experienced as natural. Whether the concept will succeed in this forestallation depends on whether subsequent scholarly and public discourse takes up the work of historical reconstruction it implies.

CONCLUSION

This article has attempted to develop the concept of biopolitical residue as a category for analysing what persists, in the post-pandemic interval, of the emergency biopolitical regime that operated during the 2020–2022 phase of the COVID-19 pandemic. The three hypotheses formulated in the introduction can now be evaluated.

The first hypothesis — that the formal cessation of the emergency biopolitical regime was not accompanied by a symmetrical cessation of its operational rationality — finds full empirical support in the peer-reviewed literature analysed. Wieczorek et al. (2022) document the post-pandemic intensification of self-tracking; Afroogh et al. (2022) document the post-pandemic persistence of contact-tracing infrastructure; Sharon (2017) and Ajana (2017, 2020) provide the broader self-tracking framework within which these specific findings are situated. In each case, the post-emergency interval has been characterised not by a symmetrical receding of pandemic-era practices and infrastructures but by their selective persistence and re-deployment.

The second hypothesis — that the persistent elements can be identified through a finite typology — finds support through the typology of five forms developed in the article: habituated self-tracking, normalised infrastructural surveillance, accepted biometric border-control logics, quantified accountability of health, and internalised risk-calculation as personal moral comportment. The typology is generated through a two-way procedure (deductive from Foucault, inductive from the literature) and is applied across the empirical record without requiring substantial modification.

The third hypothesis — that biopolitical residue occupies the position of a technology of the self in Foucault's sense — also finds support, particularly through the analytical sections that demonstrate how each of the five forms can be analysed as a Foucauldian technology of the self that has been decoupled from its emergency justification while retaining its operational logic. The contemporary post-pandemic subject, in this analysis, is more thoroughly biopoliticised than is customarily recognised, and the principal mechanism of this biopoliticisation is the residual technologies of the self that the pandemic emergency installed.

The principal original contribution of this article is the development of the concept of biopolitical residue. To the best of my reading of the literature, the concept has not been systematically developed in the existing post-pandemic biopolitical scholarship. Several authors approach it from related angles — Højme (2022) on Foucauldian biopolitics, Afroogh et al. (2022) on the post-COVID-19 ethical futures of contact tracing, Wieczorek et al. (2022) on self-tracking ethics, Sharon (2017) and Ajana (2017, 2020) on the quantified self — but the systematic synthesis offered here is, by my reading, original. A secondary contribution is the typology of five forms, which provides a heuristic for further empirical investigation.

The limitations of the study merit acknowledgement. First, I have relied on peer-reviewed academic literature and have not conducted direct ethnographic research with self-trackers in the post-pandemic interval; ethnographic work would test and likely refine the typology. Second, the framework is Foucauldian and other frameworks might yield differently structured concepts. Third, the focus is on advanced-economy contexts; the picture in lower-income contexts, where the pandemic was differently structured, is open for separate research. Fourth, the typology is analytical-heuristic rather than empirically tested; longitudinal survey or quantitative studies are needed to evaluate the strength and dynamics of each form across populations and time.

Future research should extend the concept of biopolitical residue along several lines. First, longitudinal empirical work is needed to track the trajectory of each of the five forms across the 2025–2030 interval, to assess whether residue intensifies, stabilises, or recedes as the emergency phase recedes further into the past. Second, comparative work across high-income and lower-income contexts would allow the concept to be tested across very different pandemic experiences. Third, the relation between biopolitical residue and resistance — political, technological, ethical — deserves explicit empirical and conceptual study. Fourth, the integration of self-tracking and contact-tracing residue, suggested in the comparative section, should be examined in the specific institutional contexts (digital-health platforms, employer wellness programmes, insurance systems) in which integration is empirically occurring.

Three policy implications follow. First, regulators of digital health and post-pandemic surveillance should treat the post-emergency persistence of pandemic-era infrastructures as a structural concern, not as a residual technical question. Afroogh et al. (2022) explicitly call for “post-COVID-19 directions”; the concept of biopolitical residue gives normative content to that call. Second, ethical reviews of self-tracking practices should incorporate the post-pandemic intensification documented here; the pre-pandemic ethical literature, while still valid, requires updating in light of the pandemic's contribution to the underlying biopolitical configuration. Third, civil-society and digital-rights organisations should develop frameworks of analysis and advocacy that operate at the level of biopolitical residue rather than at the level of specific contested practices, since the underlying structural feature is precisely the dispersion of the residue across many specific practices and infrastructures.

A fourth implication, more specific, concerns the European Union's 2024 European Health Data Space (EHDS) regulation and parallel national initiatives. These initiatives propose to integrate health data across member states for primary use (clinical care) and secondary use (research, policy). The political-ethical evaluation of these initiatives is rarely conducted at the level of biopolitical residue; it is typically conducted at the level of privacy, consent, and data protection. The concept developed here suggests that a complete

evaluation must also ask: to what extent are these initiatives extending and consolidating the biopolitical configuration that the pandemic emergency installed? The question is not whether the initiatives have legitimate purposes — they may — but whether their integration into the post-pandemic biopolitical residue is being deliberately considered. My provisional reading of the available regulatory documentation is that this dimension is largely absent from the official discourse, which gives the concept of biopolitical residue a useful critical role to play in evaluation of the regulation as it is implemented across the 2025–2030 interval.

A final personal reflection. Writing about the post-pandemic interval from within the post-pandemic interval is a strange experience. The events of 2020–2022 are, at the time of writing, still close enough that the residue I am attempting to name is, for many readers, simply ordinary life. To name it as residue is, in part, to make strange what has become ordinary, and Foucault's framework is uniquely suited to this task. His late writings insist that the most thorough biopolitical configurations are those that come to feel like the natural conditions of self-relation rather than the historical-political artefacts that they actually are. The concept of biopolitical residue is an attempt to retain this Foucauldian instinct in the specific empirical situation of the post-pandemic 2020s. Whether the concept has lasting value will depend on how well subsequent empirical and conceptual work can elaborate, refine, and where necessary contest its claims. The argument advanced here is offered in that spirit: as a contribution to a longer conversation about the durable effects of an emergency that, although formally rescinded, has not in fact left us.

I have written this article during the spring of 2026, four years after the formal end of most pandemic emergency regimes. Four years is, in historical terms, a short interval — too short to assess whether the residue I have described will prove durable across decades or whether it will dissipate as the emergency recedes further. But four years is, in subjective terms, long enough that the residue feels more like ordinary life than like residue. That, by itself, is a finding that the framework predicts: residue, by its definition, becomes ordinary, and the work of naming it as residue must be done at the moment when its historical specificity is still partly recoverable. If this article succeeds in any small way, it will be by retaining that specificity for readers who will encounter the practices it describes long after their pandemic origin has faded from common memory. Foucault's analytics offers no ready political programme; what it offers is the capacity to make strange what has become ordinary, and that capacity, in the post-pandemic interval, seems to me precisely what is most needed.

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FUKOOVSKA GOVERNMENTALNOST I TEHNOLOGIJE SEBSTVA U POSTPANDEMIJSKOJ BIOPOLITICI: BIOPOLITIČKI OSTATAK I NASLJEĐE SAMOPRAĆENJA U INTERVALU 2020–2023

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Sažetak: Članak ispituje ono što ostaje, u navikama samopraćenja i u svakodnevnom odnosu prema kvantifikovanom tijelu, od vanrednog biopolitičkog režima primijenjenog tokom prve pandemijske faze (mart 2020. – sredina 2022). Oslanjajući se na Fukooove pojmove governmentalnosti i tehnologija sebstva, te uzimajući u obzir noviju literaturu o kvantifikovanom sebstvu, pandemijskoj biopolitici i tehnologijama praćenja kontakata, članak razvija pojam *biopolitičkog ostatka* — sociološko-filozofske kategorije za ono što opstaje u svakodnevnom odnosu prema sebi nakon što je vanredni biopolitički režim formalno ukinut. Originalni doprinos predstavlja tipologija pet rekurentnih oblika u kojima vanredna racionalnost iz perioda 2020–2022. nastavlja da djeluje i nakon svog formalnog kraja: (1) naviknuto samopraćenje, gdje prakse nadziranja tijela usvojene tokom lokdaunâ opstaju kao internalizovani režim pažnje prema tjelesnim parametrima; (2) normalizovani infrastrukturni nadzor, gdje digitalne arhitekture izgrađene za praćenje kontakata ostaju raspoložive za dalju javnozdravstvenu ili komercijalnu upotrebu; (3) prihvaćena logika biometrijske granične kontrole, gdje su sistemi QR-kod zdravstvenih propusnica normalizovali kontrolne arhitekture koje se sada protežu na putovanja, događaje i radna mjesta; (4) kvantifikovana odgovornost za zdravlje, gdje se individualna odgovornost preformuliše kao dužnost da se obezbijede mjerljivi podaci; i (5) internalizovana kalkulacija rizika kao lično moralno držanje, gdje su kalkulativne navike pandemije oblikovale habitus trajne samoprocjene rizika. Članak tvrdi da biopolitički ostatak zauzima strukturnu poziciju tehnologije sebstva koja je tiho odvojena od svog vanrednog opravdanja, ali zadržava svoju operativnu logiku, te da je savremeni samotragač u tom smislu nasljednik pandemijske governmentalnosti čiji je odnos prema sebi temeljnije biopolitički nego što se uobičajeno priznaje.

Ključne riječi: *Fuko, governmentalnost, biopolitika, tehnologije sebstva, samopraćenje, kvantifikovano sebstvo, COVID-19, postpandemijsko, biopolitički ostatak, praćenje kontakata, digitalno zdravlje, kovid propusnica.*