

# LIVING WITHIN AFFECT AS CONTAMINATION: BREATHING IN BETWEEN NUMBERS



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It is the 11<sup>th</sup> of March 2020. At the moment I started writing this, there were 12,1246<sup>1</sup> cases of infected people worldwide and 4628 deaths, and rising. In the Netherlands, where I live, there are now 501 infected people and 5 deaths since the first case on the 27<sup>th</sup> of February.<sup>2</sup>

But numbers will not capture the variety and complexity of responses, cultural, social and economic realities that condition them. Especially in Europe, we have already witnessed and experienced: racism against Asians; economic opportunity in the face of massive buying to raise prices of masks and disinfectants; ignorance and carelessness around wearing masks including fear of being exposed to public shaming when you do; reporting on national news that the Christmas decoration will be a month late due to closing of factories in China (Schutijser 2020); massive buying of painkiller drugs, soaps, thermometers, vitamins and toilet paper; disciplinary measures by the government not to panic in fear of losing on stock markets; ageism and ableism that grow from the premonition that only old and sick die; online forms of resistance through group chats and sharing of hacks for

medical care supplies; speed of communication and misinformation about new corona treatments from garlic, vodka, drinking a lot of fluids, to masturbation; new forms and strategies of mapping, archiving, and monitoring how the virus spreads and governmental ideas of herd immunity as the strategy of containment that caused a general loosened approach in the Netherlands; shifting from happy clapping on balconies at 8pm for all the health workers that work hard saving lives, to an *en masse* walk outside despite the phone alarm text reminding all of us about social distancing.

Meanwhile, the virus spreads. The number of infected grows revealing established and new ways of capitalist discipline, control, and surveillance. While all over the world, institutions and schools are closing down, here in the Netherlands, with one of the highest population densities in Europe, I kept receiving emails from the university to work and not to panic, until the 18<sup>th</sup> of March. After that date all the schools were closed with work moved to online-learning at the speed of light. I am still receiving those emails, to keep on working, learning new online tools, and maintaining the business, deadlines, and program as usual. By the 22<sup>nd</sup> of March, we have 4204 registered corona patients and 179 deaths in the Netherlands.

## Contaminating

Disease is never neutral. Treatment never not ideological. Mortality never without its politics.

—Boyer 2019

I have spent the last six or so years working on the concept of affect as relation of transformation, of what I call affect as contamination—an onto-epistemo-ethical condition of our living bodies (Wołodźko 2018). While looking for a nongeneric understanding of how to practice our bodies in the age of biotechnological manipulation and governance, the idea of contamination grew into the inescapable condition and a desire to rethink how we live. But never did I imagine the radical urgency of its call as it came with the great viral pandemic of the Covid-19. My first reaction was feeling guilty over my own naivety: how could I continue to praise, often in the context of what is called bioart and biodesign, such an invasive

and risky concept as contamination and call for it to be materialised and affirmed? Is contamination not what we have to fight against now? My anxiety gradually grew to pervade my whole body, and I thought that there must be some rational way to respond philosophically to the pandemic that would make things clearer. And then, like a kick into my stomach, I caught myself accepting that which I despise—the philosopher’s trust in reason. As Anne Boyer notices, philosophers tend to neglect pain due to its supposedly uncommunicative character. But pain, Boyer argues, is that which is unequivocal and egalitarian in its recognition beyond even species divisions (Boyer 2019, 213–214). Through the pain of my own anxiety, I thus rescued contamination from its shame. Embracing contamination is staying with the trouble, its anxiety, its uncertainty. To live with it is to pay attention to troubles you find yourself in, not escaping to false assurances, disavowals of responsibility, and comforts of quick explanations. Contamination is living in the stickiness of things and bodies that are never fixed and never given, but mutating, changing, and escaping normalisations. Donna Haraway’s idea of “staying with the trouble” (2016) thus began vibrating anew.

Contamination, as a condition of our living bodies, expresses their relational character. That our bodies have never been pure, that we are porous and leaky bodies, conditioned by the encounters with multiple human and nonhuman bodies—be it other humans, animals, plants, bacteria, viruses, yes viruses, particles, thoughts, experiences and minerals. As Alexis Shotwell argues, “we are in and of the world, contaminated and affected” (Shotwell 2016, 10). In contamination, we find our ways of symbiotic survival and sustenance, our creativity and care—only through relations of transformation we can become, we can grow, we can learn. Contamination, however, is not a neutral state, and it cannot be controlled. As Spinoza was writing, we do not know what a body can do, what its capacities are, until we test it (Spinoza, 2001). Each encounter may change you, transform you, you may flourish when meeting another body, you may mutate or die. Living within contamination is living within the omnipresence and inescapability of uncertainty. It is not a state of choice or control, but care.

In life after Covid-19, the contaminating condition of bodies is at stake. But not only because now we have a common viral enemy that threatens our lives. The challenge that we are all facing also concerns how to live and practice our bodies with care, how we can sustain bodily transformation and contamination, rather than harm it or kill it.

## Caring

The word 'care' rarely calls to mind a keyboard. The work, often unwaged or poorly paid, of those who perform care [...] is what many understand to be that which is the least technological, the most affective and intuitive. 'Care' is so often understood as a mode of feeling, neighbouring, as it does, love. Care seems as removed from quantification as the cared-for-person's sensation of weakness or pain seems removed from statistics class [...]. But strange reversals reveal themselves during serious illness. Or rather, what appears to be reversal becomes clarification. Our once solid, unpredictable, sensing, spectacularly messy and animal bodies submit—imperfectly, but also intensively—to the abstracting conditions of medicine. Likewise, care becomes vivid and material.

—Boyer 2019

It is 24<sup>th</sup> of March. We have 5560 registered corona patients and 276 deaths in the Netherlands. Our bodies are dominated by the virus that is neither alive nor dead, so we become with it in this state of limbo. Most of us are locked in our houses and we struggle to learn what care might involve now, how does it materialise when physical contact becomes illegal. I wear a mask when I am going to the grocery shop. People laugh when they see me, I hear an elderly lady talking to her partner: "Look, like Chinese!" Some of the shoppers wear gloves. These are a facade of protection as they still touch themselves and their surroundings, maybe even more than without any protection. When I am going back home through the parking lot, I see some men waiting in their cars, their women approaching with the full baskets. I am one of them.

Anne Dufourmantelle, in her "In Praise of Risk," notices how risk, that which is a lived intensity, became a commodified value, absorbed by the market made omnipresent and therefore unquestioned (Dufourmantelle 2019). We are trained by the commodification of risk, to release ourselves from dependency on the body, liquids, objects by putting them into the categories of fetishizations of the logic of market economy. We are told to value independence and autonomy of identities because only in the logic of firm identities can hierarchies sustain themselves. To take the risk of dependency is, as Dufourmantelle writes, to take a vaccine, to allow small doses of that which might harm you to grow and build your strength. Writing this and thinking about the metaphors of vaccine - in a time when there is none against a great virus- seems reckless. It reminds me of the call of Dutch

and English prime ministers for the experimentation of herd immunity (Cohen 2020; Yong 2020). The risk Dufourmantelle proposes, relies on understanding that immunity comes not from dying, but from interdependence, porosity, and relationality of bodies – what I would call 'contamination by transformative encounters.' Living within the risk of contamination is living within Spinozian affect – as *affectus* that conditions bodies' life. Affect as contamination demands a constant attention and responsibility before each encounter, it demands from bodies a constant attentiveness to transformations that might happen, that might change all bodies in the encounter, and not always into a desirable and safe state. In that sense, Spinozian affect must be understood beyond any given moral rules because it demands, with each new encounter, new ethical decisions – and in that sense, living within contamination is living with the risk of care (Wołodźko 2015, 2017, 2018). Risk, as such, becomes a practice of depending on change, of allowing to be changed and anticipating the implications of changing others, where both bodies, not only the selected few, can flourish. Such an understanding of co-dependency is risky, because it involves a different practice. It involves care and attention to changing reality, not relying upon and trusting in a set of rules and institutional hierarchies. It is your body that depends on other bodies; it is immediate, actual and therefore beyond any rules of habits established *a priori*. What is good or bad, each time, has to be reinvented – that is why caring is risky, because it is ethical.

Dufourmantelle calls for risk to be carnal, forcing us to encounter the porosity of our own bodies. In the time of Covid-19, risk makes clear how it involves not only the carnality of our human bodies but of human and non-human, organic and inorganic bodies; in other words, the materiality of things and of bodies that are fuzzy and beyond a clear cut definition of life and death. All bodies are porous, sticky, and we need to not only learn how to live with them, but mostly, *as them*, as those sticky, mutating and contaminating/contaminated bodies. Our understanding of relationality and materiality of bodies so far has tended to operate according to the tools and mechanism of ignorance: toxic and animal based ingredients in our food, in our makeup, in our clothes, in our air we breathe every day – these have been just labels and quantities from a supposedly distant world. We have been living as if our bodies have an invisible border, impenetrable. We have not really lived according to our bodies' capacities and dependencies. And now, we are hit by the consequences of what is at stake when ignoring their demands: the care for the material contamination of our bodies that shape and rule our desires.

Meanwhile, we have all seen the many heads of nations of the western world, after introducing the first biopolitical measures of not touching your faces and not shaking hands (what is now called "social distancing"), either licking their fingers to turn the next page of their speech or greeting each other with a warm hand shake. We all have bodies, but it seems that the most difficult thing is to become a body.

## Commoning

If capitalism has been able to reproduce itself it is only because of the web of inequalities that it has built into the body of the world proletariat, and because of its capacity to globalize exploitation. This process is still unfolding under our eyes, as it has for the last 500 years. The difference is that today the resistance to it has also achieved a global dimension.

—Federici 2004

It is 28<sup>th</sup> of March. The number of cases in the Netherlands has risen to 9762, deaths to 639. My mother, who lives in Poland, is awakened by the police using loudspeakers to make their daily announcements instructing people to stay at home. My father has been told that he will get a special pass next week, allowing him to go to his work in the grocery shop. It is forbidden now to leave your district, and he works on the other side of the city. I asked my mother how she feels: does it remind her of the communist state of war that happened between 1981-1983? She demurred - back then there was army on the streets and problems were different. There are 1638 registered infected patients in Poland and 18 deaths. But we suspect that the low numbers are due to limited access to tests, and the active restriction by the government to provide data so as not to introduce heightened panic. Thus, the presidential election in May may happen as planned (Cienski and Wanat 2020).

Living in the pandemic of Covid-19 has brought a longing for the optimization and normalization of surveillance. Monitoring and digital mapping of the people with the virus, enforced video and drone surveillance within the cities as governmental digital tracking works in collaboration with Facebook and Google (Romm, Dwoskin and Timberg 2020; Singer and Sang-Hun 2020). And a few

new measurements slip in unnoticed. Though individual privacy can be easily undermined by the argument of common good, when it comes to the pharmaceutical corporations, different standards are upheld. The commodification and hegemony of the market economy, that our governments protect, unveils itself shamelessly. We are told that we cannot test for the presence of the Covid-19, because there is a world-wide shortage of tests, while the most likely reason is that we have to protect the ownership rights of the companies that monopolise the equipment running these tests (Ark and Strop 2020). We are assured daily about the world-wide chase for a vaccine against the virus: meanwhile this research is fuelled not by co-operation, but by competition for the first patents, launched among others in the Netherlands, and proudly owned by Johnson and Johnson (Steenhuysen 2020). While we are facing the lack of medical protective and life-saving equipment, pharmaceutical corporations become the one winner in this state of exception, drowning countries in fresh debt. But patterns of resistance have erupted with people sewing masks, making face shields, 3D printing respirators and donating to local hospitals. Biohackers, makers, designers, artists and academics are distributing open source designs, recipes, manuals, and protocols against spreading the virus along with guides on how to cope with various difficult situations caused by the pandemic.<sup>3</sup> These are forms of collective sharing that Federici argues must be conditioned by the patterns of commoning that not only precede the market regime but constitute an alternative to capitalism (Federici 2004, 21–22).

As David Bollier and Silk Helfrich write, “The ‘free market’ is not in fact self-regulating and private, but extensively dependent upon public interventions, subsidies, risk-mitigation and legal privileges. The state does not in fact represent the sovereign will of the people, nor does the market enact autonomous preferences of small investors and consumers. Rather, the system is a more or less closed oligopoly of elite insiders” (Bollier and Helfrich 2012, xiii–xiv). Capitalism is based on the premonition of a radical hierarchy between opposing autonomous individuals. The market is thus driven by the ideology of autonomy and deeply depends on the exploitation of that belief. A way to challenge this hegemony is by changing how we understand not only the individual, but how we establish what is valuable. Bollier and Helfrich propose that we see commons not as goods but “politics of belonging” where, rather than a resource or a thing, we view commons as a system of relations and practices that they call “life-forms” (Bollier and Helfrich 2019, 3–4). Commoning thus means a new way of relationality between people as an “identity shift,” where “people evolve into different roles and perspectives [...] by creating value networks of mutual commitment” (Bollier and Helfrich 2019, 5).

Moreover, commons are shared but not sold; they require community as they are established by relations that are cooperative and reciprocal. Commoning, as Federici writes, means a radical “re-enchantment of the world” that does not belong to humans alone, but to multiple human and non-human bodies (Federici 2018). Commoning, in other words, is practicing bodies beyond fixed identities and against their hierarchization—it is practicing a shared responsibility where risk is not a commodified value but a condition of our bodies that gives force for taking the position of care. Commoning, in other words, is about practicing living within contamination, where our bodies are cared for and caring through the catalyzation of joyful transformations despite their uncertainty and volatility. To contaminate and sustain contamination is risky, it demands care and sensitivity to changing conditions and bodies. It demands constant attention to bodies’ precarity.

Apart from threatening our health and lives, Covid-19 revealed the political and economic power relations battling over ownership of our bodies and their data. We should ask: who profits from the tracking of our whereabouts? Who has access to our phones when we are infected? Who profits from the samples you give in order to discover whether you are positive for corona? Will they stop surveilling us when the pandemic ends? What will happen with all the digital data stored now for virus control? We trust it is for common good, to stop the pandemic, to save lives, to help future generations, to know ourselves better. But trust is the worst of enemies. It melts down your sensitivity and strengthens existing inequalities and hierarchies. It justifies negligence, denial, and indifference. In trust we cannot trust. What we need is to distrust, to defamiliarize, to destabilize. I am not arguing for distrust as a catalyst for revenge and conspiracy. What I am arguing for is the distrust that is driven by care, by an affirmation of the ambiguity of things and bodies, by the uncertainty and precarity of encounters and their materialities. By distrust we thus take responsibility for action outside the state control. By affirming this uncertainty, we expose the governments’ disavowal of it that only works to support big pharma and their centralization of access to medical care and equipment. This is what ‘living within contamination’ forces us to encounter: each relation might kill you, might change you, might endanger not only you but your loved ones. But it can also help you, give you a means for survival. We need to learn how to reenchant the world, where we already practice life with viruses, microbes, animals and plants. In other words, we reenchant the multiplicity of bodies that are here, that live with us, as us, that might enrich us,



make us different, mutate us or kill us. Each relation thus matters, each relation, each encounter becomes an existential reconfiguration that demands an affirmation of uncertainty through practices of care. This is what contamination, as condition of our living bodies, forces us to do, and it might be what saves us.

## Breathing

It is the 3<sup>rd</sup> of April and the numbers are rising. We have already known for some time now that the actual numbers are way higher, because they cannot test everyone, mild or severe symptoms are not the case any longer. And then there is the whole matter of privilege and access. On top of that, the available tests are not even entirely reliable, causing people with the virus to be accidentally released from hospitals (Chen 2020).<sup>4</sup> But the lubricant of counting determines all the prognosis and actions, graphs and lines with mystic curves and quantifications, this is who we are now—a dance macabre of cyphers.

I am writing these words mostly feeling angry and numbed. At night my sleep is interrupted usually by fear of not only falling ill with corona, but also of other sickness. I fear that I will not get access to medical care because priority is given to Covid-19 patients. I worry for my husband's health. He was waiting three months for his hospital appointment and it was cancelled—there was one explanation but without any guidance for how to deal with pain. I worry for my parents. But then I force myself not to go further with these thoughts, and the fear fades away quickly leaving the sense of emptiness.

It seems that overcoming the fear through acceptance of the precarity from which it has arisen is what is at stake now. It is the coming of a new form of fear, one that will not numb us into ignorance and carelessness, that will not revitalise desires for borders and clear answers that have never been. I am constantly learning about the challenges of practicing living within contaminations. There is no recipe I can follow, no clear rule. I thus map and learn each day what the care for contamination implies. I know I am the privileged one. I know there are millions of people on the borders of Europe, refugees unwanted in unsanitary camps. I know that I am in the country that proudly believes in its own capacity to do well, in the exceptionality of its “intelligent lockdown” while calling “stupid” the first measurements of desperately fighting Italians.<sup>5</sup> I know that the virus became the perfect smokescreen for enforcements of powers: be it old school totalitarian regimes or new iterations of surveillance capitalism.

I continue to teach my students, but teaching has turned into coaching and sharing ways of coping. My classes on biomatters (now outside our biolab) have turned into a rhizomatic biohacking net of how to find materials in your waste bin or in the local forest; on guides for how to be safe and implement our biolab rule, “dirty hand and clean hand,” when collecting materials in the grocery shop. I am mostly proud of how resilient they are, and how eager to learn new things – I hope it is not a mask worn specially for me, I hope they stay healthy. Our course on ecologies within art and design, on how to work with living bodies in creative practice has become now a survival pedagogy—how to grow things, how to work with microbes, how to engage with plants in a creative yet responsible way. And what does it all mean now, when the world is in quarantine? I imagined these skills to be urgent for the precarious future, but the future has always been now.

The mutation would manifest as a crystallization of organic life, as a digitization of work and consumption and as a dematerialization of desire.

—Preciado 2020

Life with the virus is not an easy life. It is a risky life of encounters, of realizing how much we need material engagement and love, how much we need relationality and daily contaminations. Within the pandemic of Covid-19 we have found ourselves in the life of sterilization, surveillance, abuses of power, physical distancing and overwhelming digitalization – I have never been in contact with so many people as I have been during this quarantine. In his letter regarding life after Covid-19, Paul B. Preciado is revealing -- it is the fear of loneliness and the threat of its acceptance that is scarier than the virus itself (Preciado 2020). It thus seems that what we need now is to overcome the numbness that comes after fear: that we accept the calls that say we must normalize life against the virus, that we accept the borders, fixed identities, and an interest in quantification. What we need now is to practice life not *against* but *with* contamination.<sup>6</sup>

## Endnotes

1. Number of infected registered patients that tested positive for Covid-19 taken from <https://www.worldometers.info/coronavirus/>

2. Numbers of infected registered patients in the Netherlands that tested positive for Covid-19 taken from *National Institute for Public Health and the Environment Ministry of Health, Welfare and Sport*, <https://www.rivm.nl/actuele-informatie-over-coronavirus>

3. See some of the archived links by the “Open Design Lab” at *Waag Society*, Amsterdam, <https://waag.org/nl/event/waag-talks-diy-maker-initiatieven-tijden-van-corona>, accessed 3 April 2020.

4. I thank Špela Petrič for this information.

5. “The response from Italy is very stupid and over the top,” said Ira Helsloot, professor of safety management at Radboud University Nijmegen, in conversation with NU.nl. “They are now shutting down their entire economy and unable to maintain their health care, which will only add to the crisis,” (translated from Dutch) Lennart 't Hart, “What if all Dutch corona measures have not worked so far?”

6. I thank Špela Petrič, Robert Zwijnenberg and Gregory Seigworth for their comments on the first drafts of this text.

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