

EDITORS' INTRODUCTION

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I came to theory desperate, wanting to comprehend – to grasp what was happening around and within me. Most importantly, I wanted to make the hurt go away. I saw in theory then a location for healing.

– bell hooks, “Theory as Liberatory Practice”¹

I. MOTIVATIONS AND CONCERNS

As the lived realities of the COVID-19 pandemic set in, academics in the humanities and social sciences quickly began interpreting and making sense of this period of transition, uncertainty, and cascading crises (Baraitser and Salisbury 2020; Bambra, Lynch, and Smith 2021; Bratton 2021). However, since the very early days of the pandemic, some commentators sought, and indeed continue to seek, pathways to our so-called “normal” pre-pandemic lives. Much of this commentary has failed to acknowledge the burden of the pre-pandemic status quo for many marginalized people, as well as foreclosing space

¹ This Special Issue, including this introduction, was largely written and prepared in early 2021. As co-editors, we had found ourselves returning to bell hooks’s extraordinary work for guidance throughout this endeavor. Not long before publication, we received news of bell hooks’s passing on Wednesday 15th December 2021 (Busby 2021). We remember and honor bell hooks, whose foregrounding of radical possibility and love in her Black feminist approach to understanding the world has taught so many of us so much. May she rest in power.

to grieve for what and whom have been lost, or to imagine life otherwise (Leotti 2020). For many people, these challenges present viscerally in lived experience, as Molly Osberg (2021) writes:

I don't know how to metabolize such a towering sense of collective grief, and one that's infused practically everything I've ever known . . . COVID-19 is not a phase or an era or a series of habits to be unlearned. It was a largely preventable horror that altered the fabric of reality and there are people responsible.

From a critical-phenomenological perspective, this preoccupation with returning to the “normal,” along with contested definitions of a “new normal,” highlights a number of problematic assumptions about our shared lived reality. These assumptions largely fail to acknowledge the remarkable disparities in social privilege and power within and between societies across the globe, occluding the inextricable intercorporeality and interdependency relating individuals within communities and societies.

The idea that COVID-19 has been a “great equalizer” has long been dispelled as a “hollow platitude” evidenced through the entanglement of the pandemic with a number of contemporaneous events and social causes (Bowleg 2020, 917). Alongside the pandemic, the murders of George Floyd, Breonna Taylor, and many others demonstrated the additional public health threat of racist police violence, leading to what many described as “twin pandemics” or the “two public health crises” of COVID-19 and racism (Altschuler and Wald 2020, 15). Meanwhile, COVID-19 cases have been disproportionately severe among racialized minorities of lower socio-economic backgrounds in the UK and in the USA, where “Pacific Islander, Latino, Indigenous and Black Americans all have a COVID-19 death rate of double or more that of White and Asian Americans” (APM Research Lab Staff 2021)—thus demonstrating multifarious social determinants of health that are largely accepted or ignored on a systemic level (Sandset 2021; Dalsania et al. 2021). Frontline workers, including health professionals, carers, sanitation and hospitality workers, and teachers, have experienced increased workloads and exposure to the virus (Salve and Jungari 2020; ONS 2020). Disabled people have contended with policies of responsabilization that have required self-protection through shielding, often without sufficient support or accessible information and involving exposure to many other risks (Rotarou et al. 2021; Shakespeare, Ndagire, and Seketi 2021). More recently, the relinquishment of compulsory mask-wearing policies has presented new challenges, with many concerned by the exclusion of immunocompromised people from public spaces, risk of new variants, and increased infection rates associated with more widespread Long COVID (Phillips and Williams 2021). These issues, to name just a few, impact variably on individuals and communities, largely depending on their social position and social power.

Many national pandemic responses have, as Benjamin Bratton (2021) notes, been dominated by a politics that “sees society not as an interdependent biological community but as a collection of atomized agents who may or may not choose to enter into social

relations” (96).² As Bambra, Lynch, and Smith (2021) summarize, the pandemic is “killing unequally,” “experienced unequally,” and “impoverishing unequally,” and these inequalities are shaped by politics, policies, and preparedness that preceded the pandemic (99-100). Moreover, without redistribution of wealth, resources, and vaccinations, future waves of the pandemic will continue to disproportionately affect those already most marginalized and oppressed (112). In these ways, contemporary public health policies engage explicitly with questions of necropolitics—“under what practical conditions is the right to kill, to allow to live, or to expose to death exercised?” (Mbembe 2003, 12)—and these pandemic responses raise key critical concerns about “the affectual and affective motives for why we allow necropolitical conditions not only to emerge but to be sustained” (Sandset 2021, 1423). It is the lifeworlds (and deathworlds) of these marginalized people to which critical phenomenologists must be most attentive in seeking “not only to describe but repair the world” (Weiss, Murphy, and Salamon 2020, xiv).

When the first public health measures were introduced in 2020, it became clear to us, as phenomenologists, that the fabric of our lived experience was going to be transformed—with respect to our relationships with others, the world, and ourselves, as well as the management of our bodies and daily lives. Lockdowns, social distancing, and the widespread use of face masks immediately reordered our social and material worlds. Witnessing how some commentators were accounting for these changes in problematically general terms, we felt strongly that critical phenomenology, as an approach, could positively put forth forms of analysis that would engage with the social complexity of the situation. Such a time warrants careful phenomenological analyses concerning how public policies and power affect the lives and lifeworlds of people in differential and exclusionary ways.

In the summer of 2020, therefore, we invited phenomenologists to reflect critically on how the global COVID-19 public health crisis was affecting and modifying lived experience, both through first-personal realities—such as embodiment, affect, and identity—and through relational senses of intersubjective understanding. We invited phenomenologists to engage with critical phenomenology—that is, to explicitly thematize power relations, structural forces, and unequal distributions of privilege in their phenomenological analyses of lived experience. For this reason, we titled this Special Issue “Pandemic Politics and Phenomenology.” We hoped that, by bringing together a plurality of phenomenological perspectives on the pandemic, we could begin a collective dialogue

²It is worth noting that responses to the COVID-19 pandemic have varied significantly worldwide and across something resembling a global north-south divide. Ekpenyong and Pacheco (2020), for example, note how “[r]esource rich and advanced health systems, like Italy’s, were rapidly overwhelmed” whereas others with fewer resources but expertise developed during previous outbreaks, like Vietnam, “managed to control the outbreak without jeopardizing their health system’s capacity” (388). Indeed, COVID-19 responses operate within very different affective cultural lifeworlds, external commentary of which has often failed to grasp nuance and can be spun to political ends, as in how media coverage in the UK and USA last year affected relations with China (Walker 2021). This raises serious questions about the “directionality of the knowledge transaction” in global health policy (Ekpenyong and Pacheco 2020, 388), and the necessity of a decolonial “geopolitics of knowledge” that can question whose epistemologies are privileged and to whose (dis)advantage (Ndlovu-Gatsheni 2020, 366). As editors, we acknowledge how our positionality has influenced the perspective offered in this introduction in these respects, giving context to a Special Issue which is largely premised on experiences in the global north.

about how phenomenologists might offer a distinctive means to make sense of ongoing world events, attending to lived experiences in their situated and particular contexts. Little did we know even then how events would transpire. Still, we ask: how does a critical-phenomenological lens serve an engagement with politics at a time like this, but also how might marginalized lived experiences challenge dominant phenomenological concepts during a time of transition in global public health?

II. WHY CRITICAL PHENOMENOLOGY?

Phenomenology has understood from its inception that all accounts of lived meaning are impoverished when the world is rendered in mere facts and through a scientific logic of calculation (Husserl 1970, 6).³ Critical phenomenology has subsequently highlighted how this effacement of lived experience from descriptions of the world further marginalizes those already pushed to its margins. It is often such difficult friction within lived experience that drives people to theory and praxis, and this critical-phenomenological perspective has motivated this Special Issue on “Pandemic Politics and Phenomenology.”

As a theoretical approach, critical phenomenology combines insights regarding embodied lived experience with analyses of socio-political structures and power relations which frame, inform, and shape that experience. The approach follows from the pioneering work of twentieth-century phenomenologists Simone de Beauvoir and Frantz Fanon, who coupled phenomenological inquiry with analyses of how uneven distributions of social power shape lived experience and its concomitant social and political possibilities. As such, critical phenomenology foregrounds experiences of oppression, marginalization, embodied difference, and power. As Lisa Guenther (2020) argues, critical phenomenology aims to render salient common and invisibilized forms of injustice, through interrogating “the familiar” as a site of oppression, demonstrating how social structures—such as white supremacy, patriarchy, and heteronormativity, for example—constitute not only the “norms of our lifeworld,” but are also “deeply constitutive of who we are and how we make sense of things” (12-13). In this way, critical phenomenology is both a philosophical practice *and* a political practice which aims to affect “liberation from the structures that privilege, naturalize, and normalize certain experiences of the world while marginalizing, pathologizing and discrediting others” (15). These structures, as Guenther points out, are both “out there” in the world through “the documented patterns and examples of hetero-patriarchal racist domination,” but they are also intrinsic to the fabric of subjectivity and intersubjectivity, “shaping the way we perceive ourselves, others and the world” (15-16).

Critical phenomenology is an approach that can take seriously the diversity of lived experiences, cultural lifeworlds, and their political contexts. It matters how we are able

³ As Husserl (1970) writes in the *Crisis*: “Merely fact-minded sciences make merely fact-minded people. . . . What does science have to say about reason and unreason or about us men as subjects of . . . freedom? The mere science of bodies clearly has nothing to say; it abstracts from everything subjective” (6).

to think through and relate the political and intersubjective with embodied firsthand experiences, now as much as ever. It matters whose narratives guide and mold the frameworks through which we will experience future global events, such as pandemics. Recent work in critical phenomenology has generated a toolkit of conceptual resources that have powerfully illuminated particularities of lived experience, addressing how first-person textures of embodiment are intertwined with socio-political structures and their power dynamics. Critical-phenomenological insights—regarding intercorporeality, the body schema, social isolation, affect, confiscated bodies, alienation, and marginalization, along with the lived experiences of disability, illness, and racism, among many others—have already proven useful in articulating the disruptions and upheavals in lived experience to which COVID-19, along with the public health measures introduced in its wake, has led.

To the time of writing, contemporary phenomenologists have made important critical contributions in relation to how we understand and theorize lived experience within pandemic politics, reflecting on experiences such as: social distancing (Carel, Ratcliffe, and Froese 2020; Dolezal 2020), lockdown (Carel 2020), intercorporeality (Dolezal 2020; Butler 2021), grief (Richardson et al, 2021), the uncanniness of experience (Aho 2020), anxiety (Trigg 2022), illness (Finlay 2020), racism (Yancy 2020), temporality (Heyes 2020), and contagion (Dahiya 2020).⁴ Contributing to this growing body of work, this critical-phenomenological Special Issue consists of four articles and three musings—a range of new perspectives foregrounding various lived experiences affected by the COVID-19 pandemic.

III. LIVED EXPERIENCE AS EVIDENCE, CRITICAL PHENOMENOLOGY AS APPROACH

The articles in this Special Issue offer reflections on the COVID-19 pandemic through multiple methodological approaches. While a common denominator of critical interdisciplinarity brings these phenomenological perspectives together, authors have drawn diversely from sources ranging from qualitative analyses and autoethnographic notes to contemporary journalism and empirical health studies. Taken together, these perspectives attend to the lived complexities of the contemporary global health crisis, but they also provide a glimpse at the rich theoretical toolkit and methodological potential within critical phenomenology today.

In their article, “We Feel Grateful and Alive to be Doing This Work Together: Phenomenological Reflections on a 2020 Summer of Feminist Research Across Difference,” Qrescent Mali Mason, Noorie Chowdhury, and Sofia Esner together give voice to their experiences of the pandemic through autoethnographic vignettes and careful phenomenological reflection. As women situated across various intersections of difference,

⁴ As Judith Butler (2021) noted at the end of their recent lecture on Merleau-Ponty and the pandemic, critical phenomenology can supplement other modes of critique by offering “a more textured understanding” of how power operates in lived experience.

they each reflect upon how their plans to conduct research on Black feminism and ambiguity were affected and complicated by the COVID-19 pandemic and the social climate resulting from widespread responses to the deaths of George Floyd and Breonna Taylor in the United States during the summer of 2020. They show how refusal of, and resistance against, dominant modes of academic practice (i.e., to compartmentalize research from its context) led them to make space for working differently and compassionately together.

Hans-Georg Eilenberger, Annemie Halsema, and Lotte Schuitmaker offer a detailed analysis of contemporary discourse in their article, "Becoming a 'Vulnerable Senior' in the Days of COVID-19," through a distinctive critical-phenomenological lens. Taking an approach that combines philosophical reflection with an empirical study, the authors consider how older people in the Netherlands were discursively framed and essentialized as vulnerable as the COVID-19 crisis unfolded in 2020. They draw from phenomenological and post-structuralist work on vulnerability and precarity to interpret quotes from daily newspapers and other media to show how older people have actively contested and re-interpreted the imposed discursive framework according to their lived realities.

Danielle Petherbridge critically examines how the phenomenology of habit cultivation relates to COVID-19 public health measures in her article, "Embodied Social Habit and COVID-19: Unsociability or Ethical Responsibility?" Drawing from a range of phenomenological literature, she foregrounds the ethical obligations implicated by social interdependence and vulnerability, relating these to the responsibility entailed in active habit cultivation. Petherbridge compares COVID-19 measures, including social distancing and mask wearing, to previous public health campaigns and their relative up-take, raising important questions about agency over, and resistance against, collective responsibility in the context of a cultural habitus.

Through Ragna Winniewski's article, "Disrupted Intercorporeality and Embodiedness in Dementia Care During the COVID-19 Crisis," we are invited to consider how social distancing affects interpersonal dementia care and self-experience for people with dementia. Drawing from literature on phenomenologies of illness, psychiatry, and psychopathology, as well as medical and social science, Winniewski offers a highly interdisciplinary perspective, motivated out of critical concern for how public health measures can affect people with dementia in differential and exclusionary ways. In particular, she argues that intercorporeality is crucial for holistic dementia care, shedding light on the significant disruption caused by the COVID-19 pandemic for people with dementia and their carers.

In addition to the four peer-reviewed articles presented in this Special Issue, we are very pleased to include three further reflective pieces through *Puncta's* musing format. These shorter form reflections open up additional spaces for phenomenological consideration and draw our attention to other important issues relating to the pandemic.

In their musing, "Differential Experiences of Social Distancing: Considering Alienated Embodied Communication and Racism," Luna Dolezal and Gemma Lucas heed various Black writers who have drawn parallels between the alienated bodily communication of social distancing and their prior experiences of marginalization as a result of racism. The authors thus reflect on how social distancing may differentially impact individuals with lived

experiences of racism, since both kinds of social encounter can feel laden with suspicion, avoidance, fear, and distrust. Dylan Trigg reflects in his musing, “COVID-19 and the Anxious Body,” on how COVID-19 as a phenomenon has rendered the body an object of anxiety and has disrupted bodily potential for intersubjective expressivity. His explorations of pandemic-related contingency trace several key phenomenological concepts, ultimately affirming that a critical approach is not only illuminating but necessary when engaging phenomenologically with a major public health crisis. In the final musing, “Embracing Misfit Bodies: A Reflection on My Brother’s Dementia in the Time of COVID-19,” Sara Cohen Shabot explores issues relating to the spread of COVID-19 and her brother’s dementia on both personal and philosophical levels. Reflecting on concepts of vulnerability and “misfitting” in particular, as well as anxiety, uncertainty, grief, and privilege, Shabot here offers a moving account of personal crisis in times of global crisis.

As editors of this Special Issue, we have been struck by the diversity of methodology offered in response to the theme “Pandemic Politics and Phenomenology.” In particular, these articles demonstrate the range of lived experiences available as “evidence” to phenomenologists, and the necessity of careful attendance to the social and political context within which these lived experiences are *made available*—particularly when researchers turn from first-person reflections to broader qualitative studies and reports. After all, first-person experience often motivates critical and theoretical undertaking. As bell hooks (1991) says in “Theory as Liberatory Practice”:

When our lived experience of theorizing is fundamentally linked to processes of self-recovery, of collective liberation, no gap exists between theory and practice. Indeed, what such experience makes more evident is the bond between the two—that ultimately reciprocal process wherein one enables the other. (2)

Phenomenological research often involves engaging with plural experiences in different ways—through self-reflection, collegial dialogue, qualitative research, or community engagement, to name just a few examples. As critical phenomenologists, we remain attentive to how power structures the ways in which these experiences are rendered, legitimized, or ignored as “evidence” (Stanier and Miglio 2021).⁵ At a time when research

⁵ There is growing public acknowledgement of the relevance, and indeed the importance, of approaches and analysis that are attuned to differential experiences of health phenomena as they are lived through. Many high-profile medical bodies offer public and community engagement policies; for example, the World Health Organization’s “Global Action Plan for Healthy Lives and Well-being for All” (n.d.) underscores the importance of centering “lived experience” in “knowledge generation, policy-making, and health responses.” It is also important, however, to emphasize that these policies have been adopted following decades of disability activism and patient-led initiatives, which have pushed for lived experiences to be taken seriously in the context of health care (Ginsburg and Rapp 2013). As Miles Sibley (n.d.), co-founder of the Patient Experience Library, discusses, there has always been a major discrepancy between the way medical evidence has been treated in contrast with patients’ experiential evidence; despite significant volumes of feedback being gathered, it is not “seen as evidence” or “deemed worthy of investigation.”

and evidence are such important and contested fields of biopower, we suggest that the articles in this Special Issue show how critical phenomenology distinctively offers an approach to evidence (rather than a form of evidence as such). As studies of COVID-19 proliferate, critical phenomenologists can helpfully intervene in, and enrich, ongoing discussion of public health by emphasizing the relevance of meaning and sense-making, by problematizing generic statements about shared experiences, and also by helping to mobilize collective endeavors.

IV. A NOTE ON PUBLISHING DURING A PANDEMIC

We believe strongly that critical phenomenology offers a distinctively valuable lens through which to understand pandemic politics. However, the pandemic and its political fallout have, of course, been lived realities for everyone, including scholars of phenomenology. The editors of *Puncta*'s 2020 Special Issue—"Critically Sick: New Phenomenologies of Illness, Madness, and Disability"—highlighted how the pandemic was exacerbating deep-seated inequalities and affecting marginalized people with profound material consequences (Lajoie & Douglas 2020). People across the globe have endured much and more since then, and the cost and grief of such endurance should not be underestimated; to borrow an expression from Alia Al-Saji (2020), "the weight of its own duration makes a difference" (99).

In producing this Special Issue, we have wanted to acknowledge the exceptional circumstances under which everyone has been working. Writing for publication has simply not been a possibility afforded to everyone during such a challenging period, especially those experiencing multiple intersections of marginalization. Many people have been balancing various responsibilities of work and care and have been pressured to work "as usual." We have tried to offer flexible editorial support, taking into account where possible that personal circumstances would evolve over the course of writing. However, there are many perspectives that might have spoken to the theme of "Pandemic Politics and Phenomenology" which have not made it into this final issue. Several authors submitted wonderful papers that unfortunately could not be completed for this Special Issue. We also note the lack of perspectives from the global south, and that the pandemic is entangled with many other collective issues, such as ecological crisis, physical gatherings of protest and vigil, and unequal internet access, which also warrant careful reflection. Many more lucid critical-phenomenological interventions, we suspect, will develop in the months and years to come. We hope this Special Issue contributes constructively to ongoing discussion, and we look forward to reading future contributions to critical phenomenology of pandemic politics in *Puncta* and elsewhere. We offer our sincere and heartfelt thanks to all authors and contributors, as well as our generous reviewers and the *Puncta* editorial team, for their work in bringing these articles and musings to fruition.

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REFERENCES

- Aho, Kevin. 2020 "The Uncanny in the Time of Pandemics: Heideggerian Reflections on the Coronavirus." *Gatherings: The Heidegger Circle Annual* 10: 1–19.
- Al-Saji, Alia. 2020. "Durée" In *50 Concepts for a Critical* Phenomenology*, edited by Gail Weiss, Ann V. Murphy and Gayle Salamon, 99-106. Evanston, IL: Northwestern University Press.
- Altschuler, Sari and Priscilla Wald. 2020. "Covid-19 and the Language of Racism." *Signs*. 47 (1): 14-22.
- APM Research Lab Staff. *APM Research Lab*. 2021. "The Color of Coronavirus: COVID-19 Deaths by Race and Ethnicity in the U.S." Accessed July 23, 2021. <https://www.apmresearchlab.org/covid/deaths-by-race>.
- Bambra, Clare, Julia Lynch, and Katherine E. Smith. 2021. *The Unequal Pandemic: COVID-19 and Health Inequalities*. Bristol: Bristol University Press.
- Baraitser, Lisa and Laura Salisbury, eds. 2020. "Waiting and Care in Pandemic Times Collection." *Wellcome Open Research* 2020. 5: 128. <https://doi.org/10.12688/wellcomeopenres.15971.1>.
- Bowleg, Lisa. 2020. "We're Not All in This Together: On COVID-19, Intersectionality, and Structural Inequality." *American Journal of Public Health* 110 (7): 917.
- Bratton, Benjamin. 2021. *The Revenge of the Real: Politics for a Post-Pandemic World*. New York: Verso Books.
- Busby, Margaret. 2021. "bell hooks obituary." *The Guardian*. December 17. Accessed December 20, 2021. <https://www.theguardian.com/world/2021/dec/17/bell-hooks-obituary>.

- Butler, Judith. 2021. "Touching, Breathing: Merleau-Ponty for the Pandemic." *Simon Silverman Phenomenology Center Symposium 2021 Lecture*, March 12. Accessed April 08, 2021. <https://youtu.be/Xb1hwT8D0L8?t=5533>.
- Carel, Havi. 2020. "The Locked-down Body: Embodiment in the Age of the Pandemic." *The Philosopher* 108 (3): 12-17.
- Carel, Havi, Matthew Ratcliffe, and Tom Froese. 2020. "Reflecting on Experiences of Social Distancing." *The Lancet* 396 (10244): 87-88. [https://doi.org/10.1016/S0140-6736\(20\)31485-9](https://doi.org/10.1016/S0140-6736(20)31485-9).
- Dahiya, Annu. 2020. "The Phenomenology of Contagion." *Journal of Bioethical Inquiry*. 17 (4): 519-23.
- Dalsania, Ankur K., Matthew J Fastiggi, Aaron Kahlam, Rajvi Shah, Krishan Patel, Stephanie Shiau, Slawa Rokicki, and Michelle DallaPiazza. 2021. "The Relationship Between Social Determinants of Health and Racial Disparities in COVID-19 Mortality." *Journal of Racial and Ethnic Health Disparities*. <https://doi.org/10.1007/s40615-020-00952-y>.
- Dolezal, Luna. 2020. "Intercorporeality and Social Distancing." *The Philosopher* 108 (3): 18-24.
- Ekpenyong, Aniekan and Mariana Soto Pacheco. 2020. "COVID-19: Reflecting on the Role of the WHO in Knowledge Exchange between the Global North and South." *Global Social Policy* 20 (3): 388-92.
- Finlay, Linda. 2020. "COVID-19 Took My Breath Away: A Personal Narrative." *The Humanistic Psychologist*. 48 (4): 321-39. <https://doi.org/10.1037/hum0000200>.
- Ginsburg, Faye and Rayna Rapp. 2013. "Disability Worlds." *Annual Review of Anthropology* 42: 53-68. <https://doi.org/10.1146/annurev-anthro-092412-155502>.
- Guenther, Lisa. 2020. "Critical Phenomenology." In *50 Concepts for a Critical* Phenomenology*, edited by Gail Weiss, Ann V. Murphy and Gayle Salamon, 11-16. Evanston, IL: Northwestern University Press.
- Heyes, Cressida. 2020. "The Short and Long of It: A Political Phenomenology of Pandemic Time." *Philosophy Today* 64 (4): 859-63.
- hooks, bell. 1991. "Theory as Liberatory Practice." *Yale Journal of Law and Feminism* 4 (1): 1-12.
- Husserl, Edmund. 1970. *The Crisis of European Sciences and Transcendental Phenomenology*. Translated by David Carr. Evanston, IL: Northwestern University Press.

- Lajoie, Corinne and Emily R. Douglas. 2020. "A Crip Queer Dialogue on Sickness: Editors' Introduction." *Puncta: Journal of Critical Phenomenology* 3 (2): 1-14.
- Leotti, Sandra M. 2020. "The Imaginative Failure of Normal: Considerations for a Post-Pandemic Future." *Qualitative Social Work* 20: 200-05.
- Mbembe, Achille. 2003. "Necropolitics." *Public Culture* 15 (1): 11–40.
- Ndlovu-Gatsheni, Sabelo J. 2020. "Geopolitics of Power and Knowledge in the COVID-19 Pandemic: Decolonial Reflections on a Global Crisis." *Journal of Developing Studies* 36 (4): 366-89.
- ONS. 2020. "Which Occupations Have the Highest Potential Exposure to the Coronavirus (COVID-19)?" *UK Office for National Statistics*. Accessed July 17, 2021. <https://www.ons.gov.uk/employmentandlabourmarket/peopleinwork/employmentandemployeetypes/articles/whichoccupationshavethehighestpotentialalexposuretothecoronaviruscovid19/2020-05-11>.
- Osberg, Molly. 2021. "There Is No After." *Jezebel*. Accessed July 14, 2021. <https://jezebel.com/there-is-no-after-1846664027>.
- Phillips, Steven and Michelle A. Williams. 2021. "Confronting Our Next National Health Disaster —Long-Haul Covid." *The New England Journal of Medicine* 385: 577-79. <https://doi.org/10.1056/NEJMp2109285>.
- Richardson, Louise., Matthew Ratcliffe, Becky Millar, and Eleanor Byrne. 2021. "The COVID-19 Pandemic and the Bounds of Grief." *Think*. 20 (57): 89-101. <https://doi.org/10.1017/S1477175620000366>.
- Rotarou, Elena. S., Dikaios Sakellariou, Emily J Kakoullis, and Narelle Warren. 2021. "Disabled People in the Time of COVID-19: Identifying Needs, Promoting Inclusivity." *Journal of Global Health* 11: 03007. <https://doi.org/10.7189/jogh.11.03007>.
- Salve, Pradeep S. and Suresh Jungari. 2020. "Sanitation Workers at the Frontline: Work and Vulnerability in Response to COVID-19." *Local Environment* 25 (8): 627-30.
- Sandset, Tony. 2021. "The Necropolitics of COVID-19: Race, Class and Slow Death in an Ongoing Pandemic." *Global Public Health*. 16 (8-9): 1411-23. <https://doi.org/10.1080/17441692.2021.1906927>.
- Shakespeare, Tom, Florence Ndagire, and Queen E. Seketi. 2021. "Triple Jeopardy: Disabled People and the COVID-19 Pandemic." *The Lancet* 397 (10282): 1331–33. [https://doi.org/10.1016/S0140-6736\(21\)00625-5](https://doi.org/10.1016/S0140-6736(21)00625-5).
- Sibley, Miles. n.d. "The Evidence Blind Spot in Healthcare." *Index of Evidence*. Accessed July 10, 2021. <https://www.indexofevidence.org/patient>.

- Stanier, Jessica and Nicole Miglio. 2021. "Painful Experience and Constitution of the Intersubjective Self: A Critical-Phenomenological Analysis." In *Phenomenology of Bioethics: Technoethics and Lived-Experience. The International Library of Bioethics, Vol 84*, edited by Susi Ferrarello, 101-14. Cham: Springer. https://doi.org/10.1007/978-3-030-65613-3_8.
- Trigg, Dylan. 2022. "Atmospheres of Anxiety: The Case of Covid-19." In *Atmospheres and Shared Emotions*, edited by Dylan Trigg, 77-95. London: Routledge.
- Walker, Robert. 2021. "WCCEH Public Lecture: What Can We Believe About COVID-19?" *Wellcome Centre for Cultures and Environments of Health YouTube Channel*. Accessed July 21, 2021. <https://www.youtube.com/watch?v=FSg61vRNlp8>.
- Weiss, Gail, Ann V. Murphy, and Gayle Salamon. "Introduction: Transformative Descriptions." In *50 Concepts for a Critical* Phenomenology*, edited by Gail Weiss, Ann V. Murphy, and Gayle Salamon, xiii-xiv. Evanston, IL: Northwestern University Press.
- World Health Organization. n.d. "Stronger Collaboration, Better Health: Global Action Plan for Healthy Lives and Well-being for All." Accessed April 08, 2021. <https://www.who.int/initiatives/sdg3-global-action-plan>.
- Yancy, George and Woojin Lim. 2020. "To Be Black in the US is to Have a Knee Against Your Neck Each Day". *Truth Out*, July 18. Accessed June 10, 2021. <https://truthout.org/articles/george-yancy-to-be-black-in-the-us-is-to-have-a-knee-against-your-neck-each-day>.

WE FEEL GRATEFUL AND ALIVE TO BE DOING THIS WORK TOGETHER: PHENOMENOLOGICAL REFLECTIONS ON A 2020 SUMMER OF FEMINIST RESEARCH ACROSS DIFFERENCE

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NOORIE CHOWDHURY
Haverford College, Pennsylvania

SOFIA ESNER
Haverford College, Pennsylvania

[a]t some point. all the dead being here anyway and all of us here being obviously doomed, we let go of that particular game. and started breathing. and saw our hands.
—Alexis Pauline Gumbs, *M Archive: After the End of the World*

*Research: 1590s, from French *recher*, from Old French *recher* “seek out, search closely,” from *re-*, intensive prefix (see *re-*), + *cercher* “to seek for,” from Latin *circare* “go about, wander, traverse,” in Late Latin “to wander hither and thither,” from *circus* “circle” (see *circus*). Related: *Researched; researching.*
—Online Etymology Dictionary, “Research”*

We are three feminist phenomenologists who thought and wrote together through the global conditions of the COVID-19 pandemic and uprisings in response to the murders of Breonna Taylor, Ahmaud Arbery, and George Floyd, and other state killings of Black people, during the summer of 2020.

We are three feminist phenomenologists experimenting with the opportunities provided for critical phenomenological research during this moment, feeling and writing through what it yields.

We are three feminist phenomenologists exploring what it means to write phenomenology in multiple voices, interested in the possibilities of intersubjective phenomenologies that unfold as a process.

We are three feminist phenomenologists who are thinking about the future of “research” through the intersections of our ambiguous experiences during the political moment of the pandemic.

We are three feminist phenomenologists taking seriously the task of laboring across difference, by inquiring about how our individual situatedness might probe, inform, or bring to light one another’s situation.

Considering the multiple dynamics of oppression that were brought to the surface during the summer of 2020, we ask ourselves: how can we use feminist critical phenomenological research to heal, to resist oppression, and to fight white supremacy?

We offer this writing together as a demonstration of the possibilities afforded by critical feminist phenomenological research as it continues to develop and expand to include diverse lived experiences and practitioners.¹

ON THE OPPORTUNITIES FOR A CRITICAL PHENOMENOLOGY OF RESEARCH UNDER PANDEMIC CONDITIONS

In the June 22, 2020 issue of *The New Yorker Magazine*, historian Jelani Cobb reported on the multiple crises of the pandemic moment:

What is the product of a crisis multiplied by a crisis? The official mortality count of the COVID-19 outbreak in the United States swept toward a hundred thousand, while the economic toll had left forty million people out of work. It was difficult to countenance how so much misery could come about so quickly. But on Memorial Day we became video witnesses

¹ In “How is this Paper Philosophy?” Black feminist philosopher Kristie Dotson (2012a) illustrates the ways that the discipline of philosophy, from which phenomenology emerges, and its subsequent professionalization, through its disciplinary norms, have kept a range of diverse voices from engaging with the

to the horrific death of George Floyd, at the hands of the Minneapolis Police Department. By Friday [May 29], the looted shops, the charred buildings and cars, the smoldering Third Precinct—these were evidence of what the world looks like when a crisis is cubed. (Cobb 2020)

The three of us initially embarked on the task of researching together, but, as the summer began, found ourselves in a world drastically different from the one in which we had intended to do research; the compounding circumstances of the coronavirus pandemic and racial unrest resulting from police violence put into relief for us the concept of research itself. Because of this cubed crisis, the conditions under which we intended to conduct research were broken and provided the “crisis”: the moment which opens up the very possibility of phenomenology itself (Zaner 1970; Henry 2005; 2011). This break presents a prime opportunity to turn toward the phenomenological. Referencing the Heideggerian hammer, Sara Ahmed (2019) notes that: “when the hammer is working, it disappears from view. When something stops working or cannot be used, it intrudes into consciousness. We might call what cannot be used *broken*. A break can be how something is revealed” (21). In her lecture “Phenomenology of Social Distancing,” Havi Carel (2020) also takes up the idea of the Heideggerian hammer to contextualize the disorientation of being forced to distance from one another because of coronavirus restrictions. The broken hammer, as taken up by Carel and by Ahmed, illustrates that when things are broken, we come to understand their usual function through their dysfunction. Brokenness, then—precisely because it allows us to see normative function—also brings opportunity to see the flaws, or dysfunctions, in usual practices. The pandemic, for example, supposedly “revealed” such flaws in the structures and institutions of “imperialist white supremacist capitalist patriarchy” such as the healthcare system and models of policing. Because the political and social structures we had taken for granted were in deep states of flux, the horizons of our world felt unstable. One such structure was the ability to think together in person and to travel to do research in traditional research repositories and environments. The dysfunction of our research methods during the summer revealed the norms (and the flaws) of a usual research project. Reflection on the ways in which traditional research did not happen this summer offers up a unique opportunity to understand research’s usual form. Disorientation caused by the pandemic also offers the opportunity to take on some of the challenges of critical phenomenology itself. As Duane H. Davis (2020) writes:

The phenomenological method is an attempt to offer prescriptive descriptions of the world in which we live. It involves the transformation of the way we understand our world such that we can be astonished before it—the attempt to see our world as if for the first time. (4)

tools of the discipline. In response to this, Dotson proposes that philosophy shift to a culture of praxis, where the efficacy of philosophical arguments are based in part on their usefulness to diverse practitioners in the field.

As a contemporary dimension of the phenomenological project, critical phenomenology invites us to take seriously the embeddedness of the phenomenological subject and the notion that *who* enters the phenomenological enterprise matters to the enterprise itself. When we consider the use of the method of phenomenology, we must ask ourselves why we do this re-casting and re-viewing of our experience and relationship to and with subjecthood. “Maybe methods are not simply tools,” Ahmed (2019) suggests, “or if they are tools, maybe they do different things depending on who uses them, with this *who* being understood as not simply an individual but someone shaped by many histories—intellectual, social, other” (17; italics in original). If methods are tools that change depending on who is using them, then we recognize that we come to phenomenology—our tool—through our own particularities and ambiguities.

In this work, we call attention to what has been previously termed “intersectional ambiguity” as a Black feminist critical phenomenological framework that guides the work and situates how we approach the multiplicities of our ambiguities (Mason 2018). We inherit the concept of ambiguity from the feminist existential phenomenologist Simone de Beauvoir (1991), who uses it to describe our ontological and situated orientations toward being: the ways in which we are both/and, as well as either/or. We also inherit from the decolonial feminist philosopher María Lugones² (2003), who uses the concept of ambiguity to extend the dynamism of the both/and, pointing us toward the

[a]mbiguous, neither this nor that, unrestrained by the logic of this and the logic of that, and thus . . . not mapped, traced already in movements, words, relations, structures, institutions; not rehearsed over and over into submission, containment, subordination, asceticism—creative, changing, defiant of norms meant to subdue it. (11)

Beauvoir and Lugones remind us that our ambiguities are felt and experienced both subjectively and intersubjectively. Theories that attend to the lived experiences of those whose particular ambiguities situate them adversely within matrices of power, including the framework of what might be widely understood as “intersectionality” offered by such Black feminist thinkers as Kimberlé Crenshaw (1989; 1991), bell hooks (1987), and Patricia Hill Collins (1991); Collins and Bilge (2020), also guide this work. By melding these concepts to locate our intersectional ambiguities—those ambiguities that are each political subject’s intersecting orientations toward institutional structures of power and domination—each of us is empowered as (political) subjects to name our ambiguities.

² Lugones contrasts the logics of purity and curdling in her essay, “Purity, Impurity, and Separation,” suggesting that curdling resists the Western philosophical impulse toward either/or conceptual frameworks. For more on this concept, see Lugones 2003 and Bailey 2007.

QMM:

I am Qrescent Mali Mason, a 37-year-old bisexual Black feminist assistant philosophy professor at what is known as a “selective private liberal arts college.” I live in West Philadelphia, Pennsylvania, in the United States, and my people are from Montgomery, Alabama, and Montego Bay in Jamaica. I am a third-generation college graduate whose mother is also a professor. I was initially trained in philosophy at Spelman College (a private all Black, all women’s liberal arts college).

NC:

I am Noorie Chowdhury, a 22-year-old queer brown second-generation undergraduate student at a “selective private liberal arts college.” I grew up in Bombay, India, and study philosophy, politics, and economics. I was educated in an English-medium school, but also speak Hindi and Bangla at home, stemming from ethno-linguistic backgrounds I inherited from my parents. Although I come from an upper middle-class family in India, I am considered a low-income student on campus, where I spent the summer of 2020 unexpectedly.

SE:

I am Sofia Esner, a 20-year-old queer white Philosophy major at a “selective private liberal arts college.” Though I currently live in North Salem, New York, I grew up and spent the vast majority of my life in various parts of Brooklyn, New York. I attended a K-12 private school for the entirety of my pre-college education and, though in that space I was surrounded by those with greater wealth than me, I would be categorized as firmly middle class. I am ethnically half Ashkenazi Jewish but, as I am baptized Greek Orthodox, it is not a religious affiliation.

We offer these descriptions as a means through which to illustrate our diversity of lived experience and to emphasize the ways in which our positionalities situate us ambiguously within various axes of power. For example, while we all commonly identify as feminist phenomenologists, we are differentially located with regard to our age, race, nationality, ethnicity, class background, etc. These differential locations place us not only in differential relationships of privilege and power among the three of us, but also *within*

each of us, as we each navigate how our individual situations are comprised of the tensions among our lived experiences and situations of oppression and power. With respect to the theoretical importance of naming these intersectional ambiguities, and the dangers of not doing so, Lugones (2003) helpfully suggests: “When I do not see plurality stressed in the very structure of a theory, I know that I will have to do lots of acrobatics—like a contortionist or a tight-rope walker, to have this theory speak to me without allowing the theory to distort me in *in my complexity*” (74; italics in original). We recognize that our attempt to name these complexities will always already rupture our acknowledgement of the breadth of our complexities. But we attempt to name these nonetheless, as we understand the work of phenomenology to be that of moving not only beyond distortion (by theory), but towards difference, using the latter to enrich and mold existing theory.

We face the challenges of the multiple dimensions of our intersectional ambiguities through the process of writing and thinking together. These reflections, we hope, will open up further opportunities within critical phenomenology by demonstrating how it unfolds as a process. Davis (2020) suggests that when “personal identity is disclosed to be intersectional, we can come to disclose our sociopolitical identities as the difference of differences” (8). Critical phenomenology allows us to consider our intersecting differences because it attends to the power relations that infuse our situations and material capabilities. A critical phenomenology is one that “mobilizes phenomenological description in the service of a reflexive inquiry into how power relations structure experience as well as our ability to analyze that experience” (Weiss, Murphy, and Salamon 2020, xiv). As such, we name and center our particularities here for the sake of pointing toward those critical differences and in order to highlight the ways that power infuses our own relations toward and with one another. As Black feminist philosopher Audre Lorde (1984) cautions, “It is not those differences between us that are separating us. It is rather our refusal to recognize those differences, and to examine the distortions which result from our misnaming them and their effects upon human behavior and expectation” (Lorde 1984, 1). We believe that by acknowledging our differences, we contribute to the work of examining such distortions.

In this way, a critical phenomenology leaves room for yet another use of phenomenological methodology—for healing and ameliorative ends, for future possibility-making, and thinking about ways of future being. We are encouraged by the claim that a critical phenomenology “is also an ameliorative phenomenology that seeks not only to describe but also to repair the world, encouraging generativity, respect and compassion for the diversity of our lived experiences.” And we tarry with the notion that, “[s]uch a project can never be an individual endeavor, moreover, but requires coalitional labor and solidarity across difference” (Weiss, Murphy, and Salamon 2020, xiv). Throughout the process of working and writing with one another, we have thought seriously about what it means to engage across our various areas of difference. Indeed, the conditions of the pandemic call us to such thought, as we look toward rebuilding a “post-pandemic world” and attempt to locate and articulate which chasms and areas of difference remain untold, unthought, and untested. An additional dynamic of Beauvoir’s concept of ambiguity guides us here—that of the inevitability of failure. Of this, Beauvoir (1991) writes that it is possible for us to desire the tension of ambiguity “even with the failure which it involves” (13). This “taking

up” of ambiguity, in both the Beauvoirian and Lugonesian sense, requires that “the failure is not surpassed, but assumed” (Beauvoir 1991, 13). And indeed, the assumption of this failure also carries political weight. Sonia Kruks (2012), writing of Beauvoir’s politics of ambiguity, also reminds us that a commitment to ambiguity requires that when we labor in solidarity, we do so with this assumption of failure. We recognize that the possibilities for the rebuilding of new worlds rest on such vulnerable labor. We make no claim to having achieved solidarity or having jumped over the many hurdles of coalitional politics. We only claim that our naming of our differences has allowed us to think about the disrupted practice of research in the summer of 2020 in ways we otherwise might not have.

This reinforces the importance of the intersubjective nature of our writing here. Following Lugones (2003), this work “takes up, from within, a feel for collectivity without presupposing its ways and constitution. It ‘takes up’ in the sense that it responds with an appetite for moving against entrapment, being cornered, trapped, reduced, conceptually, and sensually invaded” (ix). The interspersal of our three reflections here mimics the way the three of us had interconnected yet different experiences of research during the summer of 2020. Indeed, presenting our reflections in this form reveals the process of critical phenomenology embedded in the summer’s research.

In approaching the phenomenon of research, we take seriously the opportunities that critical phenomenology offers for a resistance to the notion of purification through singularity. Rather, following the guidance of a Black feminist ethics, we want to consider the “praxial promise of . . . instability and encroachment rather than regarding it as something to be overcome through a purification process. Most important, [we] recognize that encroachment and overlapping differences both among us all and as the intersectionality of differences *which we are*” (Davis 2020, 8; italics in original). We assert the ubiquity of ambiguity against the logic of purity and separation by presenting the following interspersed reflections in experimental form as an intersubjective critical phenomenology of embodied difference.

We have written this piece for this journal with intention. Insofar as we are interested in the possibilities and boundaries of critical phenomenology, we view our offering here as an attempt to contribute to this open future. We are encouraged that this journal itself is a forum and space in which the terms and possibilities of critical phenomenology are up for debate. We offer the following contribution in hopes that it might directly take on some of the very challenges of the project of critical phenomenology through non-hegemonic forms of writing, as we seek—as critical phenomenologists—not only to describe the world, but to also change it.

The following reflections are presented here as they were, unedited by the three authors. Some parts of the subsequent section are written in verse form that uses “/” breaks in lieu of traditional punctuation. This is an intentional decision on the part of the authors that reflects the original autoethnographic writing style in which the passage was written. As such, we find the style to be integral to the content here within.

INTERSUBJECTIVE PHENOMENOLOGY OF RESEARCH

QMM:

December 2019

A major concept I employ in my book manuscript is that of ambiguity by way of Beauvoirian existentialism. I have also most recently begun to employ Maria Lugones' use of ambiguity, to what seem to be fruitful ends. As such, one chapter of my manuscript is dedicated to the concept of ambiguity in the history of Western, post-colonial, and decolonial philosophy and I will recruit one research assistant to help me research this concept.

One of the major figures in my next project will be the feminist thinker bell hooks, whose archives and institute are located at Berea College in Berea, Kentucky. To my knowledge, no researchers have yet made published use of the available artifacts (particularly letters) in the bell hooks archives. Because I have relationships with the archivists at Berea College and bell hooks, I plan to make use of the archives in my future work. As such, I would like to have a student assist me in the organization and research indexing of the particular artifacts that are of interest to my research.³

April 21 2020

I am thinking about a return to my work on Black feminist phenomenology and dying/ and about how I think there is some/ purpose/ to venturing within the self/ to alter/the pattern . . .

April 22 2020

I have been thinking about *eros* and pedagogy/thinking about bell/ writing:

Professors rarely speak of the place of *eros* or the erotic in our classrooms. Trained in the philosophical context of Western metaphysical dualism, many of us have accepted the notion that there is a split between the body and the mind. Believing this, individuals enter the classroom to teach as though only the mind is present (hooks 2014. 91)

³ It was clear by the end of the spring semester 2020 that the COVID-19 coronavirus pandemic would be radically changing my research plans. Because of the age and the health of my interview subject, and because the college had halted all research travel funding and ability to travel with students for the summer, I knew that I would be unable to travel with my research assistant and unable to access the archives.

And

To call attention to the body is to betray the legacy of repression and denial that has been handed down to us by our professorial elders, who have usually been white and male. (hooks 2014, 191)

And Audre writing:

For the erotic is not a question only of what we do; it is a question of how acutely and fully we can feel in the doing. Once we know the extent to which we are capable of feeling that sense of satisfaction and completion, we can then observe which of our various life endeavors bring us closest to that fullness...Within the celebration of the erotic in all our endeavors, my work becomes a conscious decision—a longed-for bed which I enter gratefully and from which I rise up empowered. (Lorde 1993, 55)

NC:

I was born and raised in Mumbai, and I learn more about how that distinguishes me with every moment in time that I spend away from it. The chaos of Mumbai's streets makes for a stern teacher, fueled every day by some nineteen million people who cross each other's paths on them. If the pedagogy of the city could be named, I would call it a strategic blend of exposure therapy (almost nothing jarring is hidden from plain sight) and the Socratic method (one is frequently confronted by agents of the city for interrogation). Fate, karma, inheritance, caste, and several other inherited frameworks of knowledge are interwoven into the fabric of sociality that make coexistence in the face of vast differences between people possible. Difference stays silent, goes unnoticed. This unnerved me because whenever I got close to trying to make sense of difference, I would hit walls of deep-seated and unbreakable ideological justifications.

I came away from home to study in the US mainly because I wanted to get some space from those walls, to try and make sense of them because I had grown habituated to one way of seeing difference which wasn't serving me. To unlearn. I came in pursuit of a new vocabulary, which is to say, finding a new way of doing research.

I remember when I was first introduced to the concept of research, it was in middle school and before I barely even understood the dictionary definition of the word. I was told by my

teachers, “Research is NOT MEsearch!” I remember the slow process of indoctrination, the initial hurdle of being unable to stop myself from alluding to my subjective experiences of the world in my exploration of things that excited me, or using the first person. The hurdle turned to habit, and as late as until my first year in college, I would still feel uneasy using the first person or claiming any authority over my own philosophical views or embodied experiences.

SE:

The project of the summer, that which was supposed to be my escape and my distraction, was our research. My role, as it was first described to me, was to assist Professor Mason with her research into the history of the concept “ambiguity.”

Back in March of 2020, when I had just found out I would be working with Professor Mason, I was filled with a flush of nervous excitement, embarrassed pride, and a sense of the importance in the work to be done. Then, the pandemic was still new in the U.S. There were vast quantities of uncertainty, that is for sure, but the worst of the devastation had not yet arrived. I felt, in the earliest tendrils of spring, that research would be grounding, fulfilling for me.

I had planned, then, to sink into it, to take my time sorting through virtual mountains of literature to find ancient traces of “ambiguity.”

QMM:

April 27, 2020

Another week in quarantine. We might not get out until June. So . . . just keep riding these waves/learning how to flow/how to deal with water/how to be less/ tied to the earth/ and my plans/ and the uncertain future

May 28, 2020

The Black community is once again dealing with/ the senseless killing of another unarmed Black man by the white supremacist police

This disgusting nausea of losing and mourning Black life/ and Black death/ make me want/

or makes me feel so angry/ so mad to love B/ so angered to love Black people/to be *in* Black love/ through resistance/ as a resistance/ is a resistance/ y'all can kill us/ but watch this fucking love grow, motherfuckers.

June 1, 2020

Today feels like a regular day/ the sun is out/ it's quiet/ but yesterday/ the sounds/ it felt like I was living in a war zone/ helicopters/ sirens of various sorts/what sounded like shots/ or fireworks/ all day long/ I was able to get outside a bit yesterday morning/ but then things started to sound scary again/ the phenomenology of hearing all those sounds/ all day/ was so traumatizing/ I won't forget it/ the context: protests began on Saturday throughout the country/ in response to the killing of George Floyd/by the police/ which was filmed and tossed around/ social media/ the official protests were on Saturday/ although they had been protesting in Minneapolis, since it happened last Monday/ the protests began at the Philadelphia Art Museum/ and then were incited by outside movements/ so looting/and rioting began in Center City Saturday night/ protestors tried to burn the Frank Rizzo statue/ and that looting and rioting spread/and reached Market and 52nd/ yesterday/ where everything is now torn up and gutted/ I live at Market and 55th/ so it was close/ and it felt so present in my body⁴

June 4, 2020

Today/okay/ thinking about work. And I met with my research assistants/ yesterday/it might be the case that I can actually get this book done this summer/Noorie was like, what is your book about?/ and I was like, fuck/ I have no idea/ I feel like I don't quite know where/ the book is going right now/ or even what the point is of having a book right now/I am so furious to look at their young innocent white and brown faces/as a Black woman/what do they know or understand about what it means to be me right now/ what do I know?

NC:

My gut reaction to feeling clogged over the summer would be to burst out of my apartment and out into the nature trail surrounding our campus. I am not a runner; I have not always enjoyed running per se, or been a regular at working out. And if you asked me I really couldn't tell you how it started or how it helped; but moments in which I felt the most emotional or directionless or confused or uncertain or plagued by questions with no answers were also moments where the urge to move my body was the strongest. Somehow, sweating did it, it helped resolve the tensions incoherently but surely; and I came back fresh,

⁴ For more on the excessive use of police force on this day and the subsequent suing of the Philadelphia Police, see Whelan et. al. 2020; Briggs and Bryan 2020.

having remembered a direction to answering said questions or finding useful digressions.

Meditation served the same purpose. Focusing on my breath helped me get further and closer to healing than focusing on the way I was feeling or the thoughts I was having.

It was through spontaneous long conversations with friends that I think I came closest to understanding what was going on. We wondered why time felt so warped, why we couldn't keep track of what day it was, why March felt like it was a week long while June lasted for a year. One summer afternoon, we talked about velocity.

Velocity a.k.a speed, movement, momentum. Where velocity is what keeps us moving, it is constantly happening to us. Gravity is velocity, air is velocity, the earth moving around the sun - velocity. The physical formula for velocity is space over time.

Pre-pandemic, it was the changing of space and physical context that was what was defining our experience of time and causing movement. But during the pandemic, it seems to be the inverse. Time supersedes space; the changing (or lack thereof) of time defines our experience of space, which remains constant. Earlier, space was changing and time moved at its whim, now we are stationary and our experience of space is defined by our experience of time.

SE:

When I think of this summer, I think of the baking heat, the bright green grass, and the never ending days. I like to say that I was not bored, just unstimulated, but I'm not sure either one is the truth.

In June, just as I began the work, my feelings towards research had already shifted.

June—with the pandemic ranging and BLM protests against police brutality following the murders of George Floyd, Breonna Taylor, and innumerable others—carried a profound sense of urgency with it.

Finding texts from “pastmasters.com” and citing uses of ambiguity as related to syntax and meaning was a stark contrast to the movement I was watching unfold on every media

platform. The kind of research I was doing felt like playing into the very systems I wanted to be fighting against. It felt like climbing in the ivory tower with every white academic before me—ignoring the complex reality that lay before and outside me.

This is not to say that I did not start the research project as it had been set before me, but that I (we) did not complete it. I worked, I tried to work, I stared at my computer screen, dazed from the pure lethargy of isolation and completely lost in thought.

QMM

June 6 2020

Something about that/ makes me feel guilty for the ease of what I have with B/ can't believe the way we flow/ all the shit going on in the world/ I feel like building this relationship/ is what I'm offering to the revolution/ right now/ I have to get back to reading and writing and go back to work/but it's a taxing time

June 7, 2020

It's like my own academic work is my shadow work

July 10, 2020

What is the queer thing about me? What aspect of who I am or of my life right now is not fitting into the terms of the world, an institution or organization I am involved in? (from Alexis Pauline Gumbs, "God Is Change: Octavia Butler Immersion" n.d.)

I was just reminded again/ of my/ of having to think about where and how I fit in philosophy/ and where I don't fit in philosophy because the literature is not there/ and yesterday/ noorie/ my research assistant/ said that when she reads my philosophical work/ what I write/ is very different than what/ she feels/ when she talks with me/ and I know/ this/ she said it sweetly/ but it is true/ I do/ not fit well/ or I feel like I am a queer thing in the world of philosophy/ and I feel in some way/ disconnected from my own true and authentic philosophical voice/ so the queer thing about me/ is my trying/ to use words/ to make sense using the hybrid language and perspective that I've developed/ this reappointment shit is me trying to fit into the terms/ of an institution/ that right now I despise/ or at the very least/ am exhausted of

July 13, 2020

the other morning/ B asked me/ how it felt to love him/ and then/ how it/ felt/ to be loved by him/ and I told him I would think about it/ and the answer I came up on/ was/ this image/ I will have/ forever/ of him/ naked/ and Black/at the top of the stairs/ pulling a towel back/ and forth between his legs/ with such glee/ and such delight/ and his big hair is all wet/ and shaking/ and he's smiling/ that gorgeous smile/ and that's how it feels to love him/ like that/ so childish/ and fun/ and innocent/ and/ liberated/ without care/ without worry/ youthful/ naked/ and then also thought to myself that loving him/ being loved by him/ is like/ shiny/ like he makes everything shiny/ I had a fleeting thought as I was falling asleep one night to just thank him/ and the thought was that he makes me feel safe to be a Black woman/ which feels so gross and cliché/ but it is how I feel/ it felt so strong/ that I got the nerve/ to ask him back/ he said/ at the time I was asking him/ we were standing on the porch/ and I was facing him with the side of my face buried in his chest/ and my hands were scooped up underneath his armpits and holding on to his shoulders/ like an underhanded pull up/ and we were swaying back and forth together/me slightly hanging off of him/ and he said that being loved by me felt like that/ like embodied/ content/ like a breeze/ like not too much weight/ and that loving me felt like/ a new green thing/ like a plant/ a shoot/ coming out of the ground/ new/ and not yet blemished/full of possibility/ who knows what this will turn out like/I emailed lior and sue/ complained about not being able to get paid for falling in love/ and they reminded me that/ I am a philosopher of love and the erotic/ and that life/ informs my thought and my/ writing/ so if I write about this/ then /in some way/I am/ getting paid to/ write about love/ and I /actually think there's something to that/ hanae said that I might also view this as a kind of Black feminist praxis/ erotic praxis/ the fireworks every night have stopped/ it was so beautiful to fall in love during the summer of fireworks/ and the research agenda that I made is mine to change/my mind is mine to do with what I want/ and as I sit in his lap/ facing him on the porch/ and my legs swing/ and I breathe/ open-mouthed into his neck/ the swamp of the inside of my mouth/ creating an ecosystem/ he tells me—don't fumble the ball/ about the bell/ project/ I have the opportunity to do something/ that is important to me and to/ other people/ and I'm doing a lot of waiting . . .

July 24, 2020

Talked to bell last night/ yesterday/after stalling . . . I thought it wouldn't be the right time to go there/ but adanma assured me/ it will be the perfect time/ because no one is going anywhere/so/ the plan is to go during the first week of august/ so now I can have my research assistants help me/ figure out exactly what/ I need to do between now and then/ B will go will me

July 25, 2020

Gave an impassioned speech this week to my research assistants about the changing value of research/ during this pandemic/ during this time/ what it means to take seriously/ rest as

a part of/ the revolution/ I have rested and loved/ all summer/ I don't necessarily feel ready again to write/ but maybe/ ready to think

NC:

This is the first summer I ever spent living on campus and in the US, out of lack of choice. Ever since I came to college, summer was always a time that had to be desperately filled with travels, work experiences, anything that would fill the void that would result in the face of the unstructured silence. But this summer, somewhere between my making a decision about going home and buying flight tickets, borders had closed.

Research specifically during the summer took on a languid, unstructured (“self-paced”) temporality. Prof. Mason had told me that it was supposed to be about ways of engaging with writings that are erotic and life-giving, not for feeling like you are labored or cornered into producing work. This was new, because I have been conditioned to think that time not spent labored is time wasted. Time not structured as a means to the end of producing work is time not spent wisely. Although I realized how much I wanted to break free of this internal script; it still fogged my vision/ability to work.

What I always found difficult to pinpoint in research work, then, was where I fit. In between all the citations and source materials and my interpretations and building on the text and piecing together the puzzle, was there room for the awkward insertion of my own subjectivity?

There is something to be said about the willingness to risk what you know and to be vulnerable to knowledge, to be open to being changed by what you learn and read, to look through a kaleidoscope of ideas to discover the point you were trying to make. But this seems to me to be different from the erasure that I was used to, the clinical separation between my personal subjective experience of the world and what I was taught in the classroom; as things that can inform each other only in one direction.

The pandemic was a moment where through confused iterations of spiraling thoughts it became clear to me that I had yet to become aware of and overcome much of the colonial residues in my upbringing. The main challenge of diving into work over the summer involved letting go of the learned and embodied expectations of the ivory tower and of what it means to be successful, of what it means to use time for me and not for some flashy corporate ladder-climbing gains that look good on a resume; to go on a walk with no agenda and let the mind juices and excess baggage flow out of my system and not necessarily on to a page; to think about how alone and confused yet sometimes comfortably at ease I felt living with my best friends through the beginning of this global pandemic. To think of these things as worthy of being written about.

SE:

My research was constantly, continually interrupted. It was interrupted by daily breaking news, by FaceTime calls, by my dogs and my sister, by chickens and warm breezes . . .

And it felt, I have to confess, more important to spend my time on these so called “interruptions.” Not more important in some illusory, grand way, but in the sense of what kind of activities resonated deep within me. What felt fulfilling, and healing—what felt relevant, what really mattered to me.

My sister (12 years old and stuck in our house with nothing to do) would visit me each hour like clockwork. When there was nothing else to do, which was often, we made cinnamon rolls. They would emerge from the oven warm and golden brown, tasting of sugary sweetness and the fermentation of yeast.

I spent countless hours, too, on the phone with my best friend. She had gone back to Shanghai, China, in March after Haverford College shut down due to COVID. Summer, then, found her trapped there by her expired Visa, closed American consulates, and international travel restrictions.

I processed the strangeness of the summer with her—we talked of how, out of the disasters we thought we might see in our lives, a pandemic was the only one we hadn’t foreseen. We talked about what it was like to have everything we had planned to do go up in smoke, how when I said goodbye to her in March for Spring break we said “see you in a week.” We talked about what it was like for a world that had seemed to be global to be shut down, what closed borders meant for us, what they meant for others.

I was drawn, as well, to focus on what was happening in the world around me.

I felt lost in scrolling through Instagram, reading the news hour after hour, watching my friends and acquaintances’ stories of protests, BLM infographics flooding my feed, and downloading readings on anti-racism.

Maybe this is something that does not need saying, or something I should not be saying—but I find it difficult to write about race.

Yet, I tried. I sunk into thinking and reading and writing. Though perhaps I shouldn't have, I turned inwards—I thought about race, about myself, I began to work seriously against taking my own whiteness as the blank given against which all else is measured. I thought of the parts of my identity (“woman” or “queer” or “white”) not just as overlapping, but as inseparable.

QMM:

August 18 2020

Today when I talked with bell, she asked me when I was coming back/and said that she felt that she didn't feel that we'd had enough time/ with each other/ that men/ take up so much space/and we should run away and become lesbians/ to not delay on getting pregnant/ that while 37 is “not bad”/ I shouldn't delay and delay...

And so it/ is/ with life/ and with loving/ the joy/ and the loss/over/ and over/ again/ and the heart-sinking feelings/ and the mourning/ which I guess is what I'm/ in the process of doing/ now that the summer has winded down/ or is winding down/ and/ the time of play/ and exploration is coming to a close/ back to business/ back to labor/ back to taking seriously the goals/ and achievements/ what there is/ to/ plan for/ what there is to say/ why to say it/ how to say it/ whether to say it/ I don't have the same compulsion to write to others that bell does/ I don't *need* to share what I discover through my writing and my own exploration/ with others/ it is never clear/ that or how any of this benefits/others/ why anyone would care/ or how it would be helpful to others/ or healing to others

August 21 2020

Trying to figure out how to articulate things/ how to work/ on putting things back into words/ I feel like I lost all my words this summer/ and perhaps

Perhaps/ I needed to lose the words in order to recover them again/ to infuse them with new meanings and new experiences/ but the writing has to come/ in order/ at the very least/ to keep the job/ that provides the life/ that allows the living/ and the doing/ and because maybe there *is* value in the words?

NC:

Lately I'm confronted with empty spaces/ spurts of time that I would've otherwise spent

aimlessly with my now-departed housemates in classic summertime languor, almost peacefully in denial of the pandemic wreaking havoc around us. Such is the uplifting and blinding potential of close company. It's been a week, and I feel okay about this, just feel the urge to tune in to how readjustments are in order—how will I take breaks now? How do I expose myself to different perspectives and voices as I take walks by myself in nature? Let a path be chosen for me by some random breeze rather than investing energy on intentionality—how do I become a friend to myself? Which is to ask, how do I surprise myself with ideas and thoughts and feelings and surprises that seem foreign to me? How do I learn to see myself as separate from the parts of myself that I am compelled to think are set in stone—to be open to interpretation, open to random nudges and nourishment from humor, from old memories, from binge-drinking, from playfulness, diving into and finding solace in another worldview?

SE:

I wonder if I will ever be able to write again. I wonder if I can be one person long enough to write something. I wonder if I will ever find the edges of myself again. I wonder what this summer felt like because I can't remember.

By August, with the summer nearly done, it felt like everything I had done collapsed into itself. Like the summer had slipped through my fingers before I could get a firm grasp on it.

I had let go of the research that was supposed to be done, turned entirely to reading and writing and doing that which felt important to me.

I wondered how any of us were going to move forwards. I have always been fascinated by the healing process. By the slow and gentle way the skin knits itself back together. The way it changes in color and texture. It reminds me that healing is not a process of reversion, but of generation.

ON WHAT WE HAVE COME TO KNOW, DIFFERENTLY

In sketching out what we have come to know about doing research during a pandemic, we find ourselves returning to the phenomenon of research itself. As with all good phenomenological projects, our engagement with the concept of research leads us back to the concept itself. This returning, again and again, has typified our experience of research. We have turned back to our experiences, to the histories that inform our engagements with

the phenomenon, to the intersecting ambiguities that constitute our varied lifeworlds, and to ourselves—changed, stretched, transformed.

Research, the work of searching and discovering (though not necessarily in that order), undoubtedly happened in the summer of 2020. Our phenomenological reflections of the summer illustrated how the conditions of the pandemic provided us with a much-needed opportunity to rethink and reframe what we take to be the importance or the use of our intellectual projects and where we look to provide the authority and authorization for such projects. While the planned intent was to look to the traditional sources of authority to provide the foundation for our investigation into the concepts of ambiguity and intersectionality (e.g., the archives, the library), what we experienced instead was something much more rich and profound. The research here was both theorized *and* lived, through the intersecting of our experiences.

In this way, we attempted to bring intersectionality and the “difference that difference makes” to the fore in our phenomenological reflections, in an attempt to experiment with the possibilities of critical phenomenological writing (Marcano 2010). Hence, intersubjectivity, which is assumed at the critical phenomenological outset, also figures predominately in our phenomenological investigation of research. “True to the spirit of the phenomenological method,” as Davis (2020) suggests, our returning to the phenomenon of research, through a turn to the location of authority in our own intersecting lived experiences, allowed us to see “our identities, personal and public, as intersectional phenomena—as coming-to-appear as encroachment or overlapping”; hence, reinforcing phenomenological claims that “all subjectivity is intersubjective.” Furthermore, our intersubjective phenomenological reflections point back towards the central point with which Davis ends his essay: that “*all intersubjectivity is subjectivity*” (8; italics in original).

This realization was coupled with an insight—that our lived experiences truly do inform and serve as the fertile soil of our “research.” While this feels like a hyperbolic claim, one that we have been taught to distrust as marginalized thinkers, we are again guided in this insight through the Black and decolonial feminists that are, in part, a topic of this work.⁵ Indeed, in our turn toward intersectional ambiguity, we have taken seriously/lived with the complexities and challenges of the connections and ambiguities of the mind and the body, race and gender, praxis and theory, class and ethnicity, student and teacher, the material and the ontological, the self and other . . . through a critical phenomenological framework.

We have tried to demonstrate in this piece how the practice of critical phenomenology unfolds as a process. In our phenomenological reflections on doing research, not only did we find ourselves mining untapped sources and methods of discovering knowledge (e.g., accessing research through our embodiment; discovering fuel for survival in time spent with a chosen, stranded family without access to their homes; friendship across distance etc.), but also wrestled with old ones to rewire or refresh them. We see this as

⁵ For more on how marginalized women are taught to distrust their experiences and feelings, see Lorde 1993; Lugones 2003; Dotson 2012b.

anti-oppressive praxis. We found that the answers to our questions about research often presented themselves through different mediums: through dialogue with a friend, through the experience of love, in taking a walk, in reflecting on what it means to have a border between oneself and a loved one. Our research in the summer of 2020 was about learning to love and to live amidst a global pandemic and personal/political upheaval. That the personal is political took on for us a radically new meaning.

Our work led us to confirm the need for critical phenomenology to address the ambiguities brought to the fore by intersectionality. We assert with Davis (2020) that

the praxial promise of this project is to describe intersectionality as the occasion for the *redeployment* of phenomenology. Thus, race, gender, and class [and other markers of difference] and their intersection are not ancillary to phenomenology if it is to be relevant today for addressing the ongoing crises we face daily. (3)

While various differences typify each of our critical phenomenological lenses, our reflections collectively propose the following: first, that relationality is a fundamental aspect of thought work, and second, we assert that power structures which disrupt and complicate our access to and experiences of relationality serve as barriers to anti-oppressive thought and action.

Third, our reflections hint at the possibilities for critical phenomenological inquiry to serve as a methodology of healing and sustenance. As examples of the potential for life-sustaining philosophical methodologies, our phenomenological reflections demonstrate how this method/register has served and might serve as a safe haven and empowering means for women and those with various other intersectional dimensions of difference. In turning to writing about the self during the summer, each of the authors of this piece found, in the investigation of her lived experience, a means through which to connect back to the research. Insofar as the writing and sharing of these phenomenological reflections amongst the three of us involved a bracketing of the natural hegemonic attitude toward research, we were able not only to share our lived experiences of the pandemic political moment, but also to confront how our differential social locations affected how we were positioned differently within the politics of the pandemic. For example, while each author lived through and responded to the uprisings of the summer, the differential social and political locations of each author, especially with regard to race and the context of her physical location during the summer, affected how each was able to articulate these as a dimension of the research in question here. Importantly, the fact that these differences were articulated allowed the authors to intersubjectively investigate the power and privilege differentials themselves. To announce them—not to hide them in an attempt to depersonalize or lend objective credence to the research—allowed each to access new and challenging aspects of feminist solidarity and difference. For each of us, our differences served ambiguously as barrier and opportunity to produce radically engaged research as a practice of resistance.

As such, we hope that this project takes up the challenge of the ameliorative political possibilities of critical phenomenology. Lisa Guenther (2020) asserts:

As a transformative political practice, critical phenomenology must go beyond a description of oppression, developing concrete strategies for dismantling oppressive structures and creating or amplifying different, less oppressive, and more liberatory ways of Being-in-the-world. (Guenther 2020, 16)

Our research during the summer transformed us. We hope that this offering—in its juxtapositional experimental form—might provide an example of a strategy of including diverse voices in critical phenomenological inquiry. Again, we take up the failures and limitations of this approach in the spirit of ambiguity. Insofar as our project seeks to experiment with the political possibilities of intersubjective phenomenological writing, we invite this failure, assume this failure, and hope that it inspires other diverse practitioners of phenomenology to attempt their own means of wrestling with taking seriously the intersubjectivity experienced by the phenomenological subject. Indeed, it was healing to write this piece together and to partake in the process of revisiting its failures. To take up a politics of refusal, to refuse the hegemonic presentation of phenomenological research in our chosen form has healed wounds that each of us carried about who has the authority to speak and how, about whose lived experiences count as authoritative and whose do not. We hope that the ambiguities of this work—its successes and failures—inspire and open the door to diverse approaches to meet the aspirations of critical phenomenology.

TOWARD FUTURES

We are three feminist phenomenologists who look forward to living in the space that the summer of 2020 opened up for an anti-oppressive world, a world where we honor, name, and come to know through the socio-political ambiguities of our bodies and our selves.

We are three feminist phenomenologists who find it difficult to articulate our differences here, yet hope that in doing so that we contribute to sources of healing, for ourselves and for others.

We are three feminist phenomenologists who had epiphanies by thinking together, co-constructing thought through being in conversation intersubjectively, being embodied with one another to the extent that we could, by our mattering to one another.

We are three feminist phenomenologists who found ourselves claiming to one another, quietly and skeptically at first, and now with more and more strength: if life itself is research, then our mattering matters.

We are three feminist phenomenologists who hope you decide to fall in love, or take a walk, or take a nap in the afternoon.

We are three feminist phenomenologists who feel grateful and alive to be doing this work together.

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REFERENCES

Ahmed, Sara. 2019. *What's the Use?: On the Uses of Use*. Durham, NC: Duke University Press.

- Bailey, Alison. 2007. "Strategic Ignorance." In *Race and Epistemologies of Ignorance*, edited by Shannon Sullivan and Nancy Tuana, 77-94. Albany: SUNY Press.
- Beauvoir, Simone de. 1991. *The Ethics of Ambiguity*. Translated by Bernard Frechtman. Kindle Edition. Princeton, New Jersey: Carol Publishing.
- Briggs, Ryan, and Miles Bryan. 2020. "Protesters, Residents Sue City over Tear Gas on 52nd St., 676." *WHYY* (blog). Accessed June 21, 2021. <https://whyy.org/articles/protestors-residents-sue-city-over-tear-gas-on-52nd-st-676/>.
- Carel, Havi. 2020. "Cardiff Annual Lecture— RIP— Havi Carel, 'Phenomenology of Social Distancing.'" *Royal Institute of Philosophy*. Accessed February 5, 2021. <https://www.youtube.com/watch?v=BT8CPW3b3Cw>.
- Cobb, Jelani. 2020. "An American Spring of Reckoning." *The New Yorker*, June 14. Accessed January 30, 2021. <https://www.newyorker.com/magazine/2020/06/22/an-american-spring-of-reckoning>
- Collins, Patricia Hill. 1991. *Black Feminist Thought: Knowledge, Consciousness, and the Politics of Empowerment*, Vol. 2. New York: Routledge.
- Collins, Patricia Hill and Sirma Bilge. 2020. *Intersectionality*. Cambridge, UK; Medford, MA: Polity Press.
- Crenshaw, Kimberlé. 1989. "Demarginalizing the Intersection of Race and Sex: A Black Feminist Critique of Antidiscrimination Doctrine, Feminist Theory and Antiracist Politics." *The University of Chicago Legal Forum* 140: 139–67.
- . 1991. "Mapping the Margins: Intersectionality, Identity Politics, and Violence against Women of Color." *Stanford Law Review* 43 (6): 1241–99.
- Davis, Duane H. 2020. "The Phenomenological Method." In *50 Concepts for a Critical* Phenomenology*, edited by Gail Weiss, Ann V. Murphy, and Gayle Salamon, 3–9. Evanston, IL: Northwestern University Press.
- Dotson, Kristie. 2012a. "How Is This Paper Philosophy?" *Comparative Philosophy* 3 (1): 3-29.
- . 2012b. "A Cautionary Tale: On Limiting Epistemic Oppression." *Frontiers: A Journal of Women Studies* 33 (1): 24-47.
- Gumbs, Alexis Pauline. 2018. *M Archive: After the End of the World*. Durham, NC: Duke University Press.
- Gumbs, Alexis Pauline and Olorisa Sangodare Akinwale. N.d. "God Is Change: Octavia Butler Immersion." Mobile Homecoming Trust. Accessed July 1, 2021. <https://sangodare.podia.com/octavia>.

- hooks, bell. 1987. *Ain't I a Woman: Black Women and Feminism*. London: Pluto Press.
- . 2014. *Teaching to Transgress*. EBL. Hoboken, NJ: Taylor & Francis.
- Lorde, Audre. 1984. *Sister/Outsider*. Berkeley, CA: Crossing Press.
- . 1993. *Zami; Sister/Outsider; Undersong*. New York: Quality Paperback Book Club.
- Lugones, María. 2003. *Pilgrimages/Peregrinajes: Theorizing Coalition against Multiple Oppressions*. Lanham, MD: Rowman & Littlefield Publishers.
- Marcano, Donna-Dale L. 2010. “The Difference That Difference Makes: Black Feminism and Philosophy.” In *Convergences: Black Feminism and Continental Philosophy*, edited by Maria del Guadalupe Davidson, Kathryn T. Gines, and Donna-Dale L, 53-65. Albany: SUNY Press.
- Mason, Qrescent Mali. 2018. “Intersectional Ambiguity and the Phenomenology of #BlackGirlJoy.” In *Re-Thinking Feminist Phenomenology: Theoretical and Applied Perspectives*, edited by Sara Cohen Shabot and Christinia Landry, 51-68. New York: Rowman & Littlefield Publishers.
- Online Etymology Dictionary*, s.v. “research.” Accessed January 13, 2021. <https://www.etymonline.com/word/research>.
- Whelan, Aubrey, Oona Goodin-Smith, Jason Laughlin, Mike Newall, and Jeremy Roebuck. 2020. “Beseiged, then Betrayed.” *The Philadelphia Inquirer*, July 17. Accessed January 31, 2021. <https://www.inquirer.com/crime/a/west-philadelphia-52nd-street-protest-police-response-tear-gas-20200717.html>.
- Weiss, Gail, Ann V. Murphy, and Gayle Salamon. 2020. “Introduction.” In *50 Concepts for a Critical* Phenomenology*, edited by Gail Weiss, Ann V. Murphy, and Gayle Salamon, i–xiv. Evanston, IL: Northwestern University Press.

BECOMING A “VULNERABLE SENIOR” IN THE DAYS OF COVID-19

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I. THE FIGURE OF THE VULNERABLE SENIOR

In the Netherlands, the beginning of the coronavirus crisis was marked by a new figure of public discourse: the vulnerable senior. Heeding the advice of public health experts, the government and the media repeatedly called on the public to “protect our elderly” and advised older people to stay at home. While certainly well-intentioned, these calls have come with problematic generalizations. In a culture steeped in ageism, the figure of the vulnerable senior runs the risk of reinforcing the association of old age with frailty and weakness.

The evocations of the vulnerable senior were part of an overall strategy to impose an “intelligent lockdown” on the country that would be more selective and lenient than the measures adopted in other parts of Europe. The aim of the intelligent lockdown was to shield vulnerable populations while at the same time allowing the virus to steadily spread across the least vulnerable groups. Yet, this attempt to establish “herd immunity” was quickly abandoned as ICU beds filled up and the long-term effects of COVID-19 became apparent. Older people experienced this early phase of the coronavirus crisis with mixed feelings. A well-funded pension system and other welfare provisions ensured that most of them emerged from the crisis without great economic losses. As in other countries, however, social isolation was and remains an issue, as were the high mortality rates in nursing homes.

In this paper, we investigate the figure of the vulnerable senior by mapping the ways in which vulnerability is constructed and experienced. Our interest in the concept of vulnerability reflects a powerful current in public and academic debates.¹ Vulnerability plays a prominent role in feminist ethics, where it is understood as a “universal, inevitable, enduring aspect of the human condition” (Fineman 2008).² Judith Butler’s (2004; 2009) work on vulnerability and precarity has opened up new vistas by highlighting the moral and political implications of embodiment. But while Butler’s ethics is firmly grounded in an ontology of vulnerability, she has grown weary of the use of vulnerability in political discourse—a matter that we will discuss in more detail below.

To approach the figure of the vulnerable senior, we combined an empirical study with philosophical reflection. Collecting and analysing quotes from daily newspapers and other media, we found multiple ways in which vulnerability is constructed and experienced. We then interpreted these different senses of vulnerability by drawing on phenomenological and post-structuralist sources. This combination of various research techniques has allowed us to see the figure of the vulnerable senior as a multi-layered phenomenon. The quotes we collected were deliberately hybrid, situated both in an ongoing media discourse and expressive of personal experience. Initially, we considered how, in these data, the vulnerable senior is constructed discursively: which assumptions are at play in the discourse and which images of old age does the discourse project?³ In the next step of our interpretation, we asked how the figure of the vulnerable senior relates to lived experience: how do concrete subjects encounter the label of vulnerability that the discourse imposes on them? How do they make sense of their new situation? It is this attention to the entanglement of discourse and lived experience, this probing into the “quasi-transcendental” structure of experience, that situates our research in the broader field of critical phenomenology (Guenther 2020, 12).

II. METHOD

Data Collection

This paper starts from the discourse around vulnerability as it unfolded in a number of Dutch newspapers. Our data set consisted of newspaper articles and online comments that span the period between March and November 2020. We initially searched for articles in the databases of the Dutch newspapers *NRC*, *Volkskrant*, *Parool*, *Trouw*, and the

¹ Google Trends shows that globally search queries using the term “vulnerable” have steadily increased since 2004; unsurprisingly, there is a dramatic peak of such searches in March 2020 when the coronavirus crisis hit the English-speaking world. For an overview of the usages of vulnerability in different disciplines, see Wisner (2016).

² For an overview of feminist approaches to the ethics of vulnerability, see Mackenzie et al. (2014).

³ By “discourse,” we mean the totality of socially, culturally, and historically situated sense-making practices that involve the usage of signs (Blommaert 2005). Discourses, on our understanding, do not

Correspondent, and the journal *Medisch Contact*. We then screened and selected articles that included the terms “coronavirus,” “vulnerability” (*kwetsbaarheid*), and “elderly” (*ouderen*) in the title, header, or sub-header. Additional articles and texts from other sources (i.e., comments on video-broadcasting websites) were selected through snowball sampling. To be included in the sample, articles needed to address the vulnerability of older people in the coronavirus pandemic.⁴ In addition, the articles needed to include narrative elements, as found in opinion pieces and reportages with extensive quotes.

Data Analysis

We analysed the data using the Thematic Analysis method (Braun & Clarke 2006). Data collection and data analysis were conducted simultaneously. A bottom-up approach was used, meaning that codes were derived from the data instead of using a pre-existing code sheet. During the initial coding of the texts, we identified overlapping, recurring, and common topics and searched for quotes that illustrate them. In the second phase, we identified themes that emerged from these topics and quotes.

A total of twenty-five articles from eight different databases were included in the analysis. Below, we have outlined how the quotes from the different articles—each of which are numbered Rn—support the philosophical analysis of the phenomenology of vulnerability and old age during the COVID-19 pandemic.

III. THREE GUISES OF VULNERABILITY

Collecting and analysing articles from the mentioned Dutch newspapers, we were able to distill a number of patterns in the way that vulnerability appeared. We have distinguished three main forms that we further elucidated by drawing on philosophical concepts from post-structuralist and phenomenological sources:

1. Vulnerability as discursive effect: political and social forces label the bodies of older people as vulnerable. We further explain this labelling effect by turning to a recent article by Judith Butler (2021) in which she discusses the consequences of labelling certain groups as “vulnerable.”

simply impose ready-made identities but co-constitute a subject’s field of possibilities. Together with other motivating forces, then, the discourse around vulnerability organises lived experience; it brings certain possibilities to the foreground while obscuring others. In this respect, our approach is inspired by Husserl’s (2009) understanding of phenomenology as a science of possibilities.

⁴ We roughly defined “older people” as adults above the age of 65, which is in line with the definition used by the American Psychological Association (2014).

2. Vulnerability as unrealizable: vulnerability enters people’s lives as an external reality, a fact about their bodies that they do not experience as such. We use Jean-Paul Sartre’s (2003) and Simone de Beauvoir’s (1996) notion of the “unrealizable” to elucidate this experience of being named with a name that remains foreign to you.
3. Vulnerability as creative appropriation: even though “vulnerability” may be imposed from the outside, those who are named as vulnerable still need to make sense of this label. “Vulnerable seniors” assume their label in relative freedom; they challenge and deform it through the use of figurative language. In this section, we refer to Maurice Merleau-Ponty’s (2012) distinction between the spoken word and the speaking word as well as to his notion of conditioned freedom.

Vulnerability as Discursive Effect

Us versus Them

In the first step of our analysis, we considered how the trope of the vulnerable senior was discursively constructed in the early stages of the coronavirus crisis. Based on our sources, we found that newspapers relied on particular assumptions and patterns of speech when referring to these alleged vulnerable seniors.

The assumptions and patterns of speech that we identified imply the disempowerment of those who come to be labelled as vulnerable seniors. Judith Butler (2021) describes the dynamics and the dangers of this disempowerment in a recent article, where she deals explicitly with the situations of refugees and Latin-American women who are the targets of *femicidio*. These groups find themselves in particular historical circumstances that render them vulnerable to violence. Yet these same circumstances also foster support, resistance, and networks of solidarity. To frame refugees and Latin-American women as vulnerable is to abstract from this reality in which counter-power and resistance feature heavily; it constitutes an act of naming that, on the one hand, designates who is in need of protection, but, on the other hand, risks effacing their agency. Butler associates this act of naming with humanitarian interventions and rights-based takes on politics. Though well intentioned, these approaches tend to treat marginalised groups as passive objects of care. Subsumed under an abstract notion of vulnerability, marginalised groups are being deprived of their power. “And this is a bind,” Butler writes, “since we call them vulnerable because they have been deprived of power” (2021, 181).

Butler’s account chimes with our analysis of the discourse around the vulnerable senior.⁵ In our sources, “vulnerable seniors” were generally referred to as a homogenous group, whose precarious health condition sets them apart from the rest of society. Consider the following quote:

⁵ Butler does not explicitly refer to older people, even though her insights hold for them as well. For Butler’s first take on the COVID-19 crisis, see her blog post “Capitalism Has Its Limits” (2020).

Rolling out a towel on a crowded beach? They [vulnerable people] can only dream of that. Visiting family or friends is already too much to ask sometimes, because just suppose they get infected.⁶ [R25]

The speaker does not consider the possibility that vulnerability could manifest itself to varying degrees or in variable ways. On this view, vulnerability denotes a uniform identity with the group of vulnerable people appearing as discrete and closed. Through a series of collapsed identifications, the group of vulnerable people comes to coincide with the group of vulnerable seniors. This assumption of homogeneity is expressed through speech that pits vulnerable seniors against the rest of the population in the manner of us versus them.

The concrete position that a subject occupies across the us versus them divide depends on the perspective one adopts. "Non-vulnerable people" assume a we-identity that is built around the exclusion of the vulnerable minority, which not only affects older people but also immigrants, migrant workers, and people with disabilities and underlying health conditions. "Vulnerable seniors" themselves, on the other hand, construct the notion of "we" in a contrasting way, based on shared marginalization and the resentment against *those over there* who enjoy themselves at *our* expense. Consider this quote:

And then we have to stay inside so that the people above can enjoy their terraces and dinners. I think it is a disgrace that people even dared to say it. [R26]

Not everybody joined in on the antagonistic rhetoric, however. Certain commentators attempted to bridge the divide between "us" and "them" and advocated a softer attitude toward older people, in which they are cared for instead of set aside:

Call it a wry side effect, but at least the corona crisis is causing the vulnerable people of this world to be viewed with different eyes once again. Softer eyes. [R21]

The world turned out to be very different from what was often thought. It turned out that it was not about money, but about life, about protecting the weakest and most vulnerable, elderly people who no longer represented any economic benefit. [R19]

At the same time, a column by writer and media entrepreneur Marianne Zwagerman led to a fierce debate in the Dutch newspapers. In her column, she compared vulnerable seniors to "dry wood" that might as well be cut down to make room for "fresh twigs" to grow:

⁶ For a complete list of original quotes and their sources, see appendix.

The dry wood is being cut down, perhaps a few months earlier than without the virus. Must everyone who is in the prime of life sacrifice everything for that? [R13]

It is evident that the figure of the vulnerable senior appeals to a politics of vulnerability. Like the refugees or Latin-American women to whom Butler refers, older people may be vulnerable in one particular respect, but that does not remove their agency in other areas of life. The figure of the vulnerable senior, however, occludes this messy reality. It subsumes people above a certain age under a uniform identity associated with victimhood and passivity. The disregard for diversity and intra-group differences was underlined by the emergence of two distinct camps—the vulnerable and the invulnerable—whose borders were policed by the rhetoric of us versus them.

As Butler’s (2021) analysis would suggest, the responses to the COVID-19 crisis have followed a paternalistic mindset. We can catch a glimpse of this in the more positive responses to the us versus them opposition, which, although well-intended, carry a distinctly patronizing tone. One consequence that Butler’s analysis did not include, however, was the re-appropriation of vulnerability enacted by Zwagerman. As the potentiality of being wounded, vulnerability does not only elicit care and concern; it can also carry the imagination to the opposite conclusion, resulting in a call to hurt, abandon, and sacrifice. This is another complication that should caution us against harnessing the label of vulnerability for progressive political ends, such as the protection of marginalized populations.

Labelling

According to Butler (2021), vulnerability “is always contextual since it belongs to the organization of embodied and social relations.” Vulnerability, then, is not an individual disposition but rather a socially produced label that is assigned to people and assumed by them on the basis of their embodiment. In other words, vulnerability is relational:

Vulnerability is not a simply subjective state or disposition, but is always related to an object, a prospect, an impinging world (and for that, “intentional” in the phenomenological sense). Vulnerability might take the form of excitability, susceptibility, longing, delight, fear, anxiety, or dread, but whatever form it takes, it is already and from the start a relational predicament. (177)

Butler’s relational notion of vulnerability implies that “the body, perhaps precisely by virtue of its boundaries, is differentiated from and exposed to a material and social world that makes its own life and action possible” (191). This conception does not deny the physical body, but instead reflects on its social and political conditions of possibility.

Our sources echoed the idea of vulnerability as relational and discursive. “Vulnerable seniors” did not discuss their situation in terms of a bodily condition, but in terms of a new status or category. In the perception of both older and younger people, the COVID-19

pandemic gave rise to the distinctively new label of the vulnerable senior. Through the label, some people realized for the first time that they belong to the category of vulnerable people—something which had not occurred to them before the crisis. In other cases, the label added a new dimension to a condition that people already experienced as their own:

The coronavirus, and the policy around it, have made me realize that I clearly belong to a category. A category that has high priority in policies. [R2]

Recently, I got a new status: that of a “vulnerable senior.” Who must be protected. [R5]

Now I belong to a vulnerable group and I must say that I’ve missed the benefits of Corona so far. [R3]

As the second quote suggests, people did not suddenly realize they belong to a pre-existing category. Rather, the discourse around COVID-19 produced a wholly new group of people: vulnerable seniors. In line with Butler’s analysis, the vulnerability of the vulnerable senior does not so much pertain to a person’s bodily condition as it is an embodied expression of the social and political organization of which people are part.

“Vulnerable seniors” received their label also from the people in their environment. The way people talked about older people during the pandemic is an important aspect of vulnerability’s relationality, as the following quote illustrates:

Other people feel sorry for me when they hear about my heart condition. “How terrible for you.” But now I see the same people going to a crowded beach. They ignore the corona measures. [R12]

This person’s medical condition marks her as belonging to the group of people who are in need of special concern in the days of the pandemic. Yet, she resents the incoherent compassion of her environment.

While many experienced the label of the vulnerable senior as a new phenomenon, some were already well-acquainted with vulnerability:

You know what it is, I am extra vulnerable, but vulnerable people know that about themselves, don’t they? I’m always careful. Even with the flu I stay away from others. Actually, not much has changed for me with the current restrictions. [R10]

In sum, the label of the vulnerable senior was assigned to people on the basis of their age alone. Somebody’s bodily condition did not matter in the assignment, but it influenced the

way in which people responded to the label. People were surprised in cases where the label of the vulnerable senior disrupted their habitual self-image as healthy and independent. In other cases, people accepted the label as an expression of a bodily condition they already experienced as their own. It is in this sense that vulnerability is not so much “physical” as it denotes a relational and socio-political category.

Vulnerability as Unrealizable

While construing vulnerability as relational, Butler does not specify what being labelled as such implies for a person’s self-experience. In this section, we aim at a phenomenological description of the experience of older people that are named as vulnerable. We argue that the label of the vulnerable senior, as it is used in the COVID-19 pandemic, can be understood in terms of what Sartre and Beauvoir call an “unrealizable.” In contrast to Butler’s approach, which addresses the way in which vulnerability is produced as a social and political label, Sartre’s and Beauvoir’s social phenomenology of the body addresses how such labels are experienced from a first-person perspective.

As the quotes above (R2, R3 and R5) illustrate, during the pandemic, some people felt overwhelmed by being labelled as vulnerable, which implied their sudden merging into a unified category: a group of endangered people in need of protection because of their age or health conditions. We have seen that for many people, being assigned this label was a new experience which marked a change in their self-images when compared to their previous ideas about themselves:

I need to get used to the last, now often mentioned, expression [vulnerable seniors]. [R1]

To capture this experience of being labelled from the outside by others, Sartre introduces the term “unrealizables” [*les irréalisables*] (2003, 548). This concept is also used by Simone de Beauvoir (1996) in *The Coming of Age* in order to describe the embodied experience of an older person. In aging, we need to accept a reality that is properly ours but that comes from outside and remains ungraspable for us. There is an indissoluble tension between our inner conviction that we remain who we always have been and the objective certainty of being considered old. This objective certainty, this unrealizable, forms the other side of our situation, according to Beauvoir.

The notion of situation as used by Beauvoir describes the particular way in which we are opened onto the world. It “encompasses both the objective and subjective aspects of experience” (Moi 1999, 68; Knowles 2019).⁷ Unrealizables, however, are not part of a

⁷ When Sartre argues that the body is a situation, his conception differs from that of Merleau-Ponty and Beauvoir. Sartre states that our bodily situation needs to be surpassed; my body is my past, an obstacle that is characteristic of my finitude. As such it is a contingent necessity that must be

person's situation.⁸ Instead, unrealizables are "a reality that is certainly ourselves although it reaches us from the outside and although we cannot grasp it" (Beauvoir 1996, 320). Unrealizables can be explained as external labels that are assigned to us by others. The examples Sartre (2003) gives include being a Jew, Aryan, ugly, handsome, but also being a civil servant, teacher, waiter, in Paris, and funny (548). In all of these cases, we are dealing with real forms of existence with an obligatory nature: one cannot *not* relate to them. The unrealizables can be considered as the facts of who we are; we do not have an inner experience of them, and yet we *do* need to take an attitude towards them. Being *unrealizable*, these facts or labels cannot become the purpose of our actions. That does not mean, however, that we can simply ignore the outsider's perspective on who we are, as it is captured by the unrealizable. There is a sense in which we have to realize the outsider's perspective that confronts us, which leads to a paradox: the unrealizables are "revealed as *to be realized*," writes Sartre (2003), even though they cannot be realized (549; italics in original).

For Sartre, realization implies freedom. Freedom is not at stake in the cases where we only conceive of a *possible* end to our actions, but only if a real choice is involved.⁹ Freedom involves realizing something new. In contrast, unrealizables are real forms of existence that we cannot realize in freedom. Sartre explains how they function:

We must be careful not to confuse them with the imaginary. We have to do with perfectly real existences; but those for which these characteristics are really *given are not* these characteristics, and I who *am* them can not realize them. (Sartre 2003, 548; italics in original)

The label of the "vulnerable senior" similarly is a real existence; in the first months of the pandemic, this label was assigned to older people and, as a consequence, they needed to realize the upshot of this label in the context of their lived reality. They had to do this even though some older people did not relate to the experience of "being a vulnerable senior," as we have seen in the quotes above. This label of the vulnerable senior and the danger of getting infected influences a person's activities and daily life, but it is not an end or a positive goal that a person realizes in freedom, as the following quotes illustrate:

Now I'm in exile in my caravan. With a beautiful view of the trees and the birds. It is very annoying though that I'm not with my children. [R22]

transcended by consciousness. In our reading of Sartre, we do not take over this rigid distinction between body and consciousness, yet we are interested in the way Sartre conceptualizes the body's existing for others. Our interpretation of situation is closer to Beauvoir's account. For Beauvoir, situation describes the particular way in which we are opened onto the world.

⁸ See also Sartre (2003, 549): "they represent the reverse side of the situation."

⁹ "We are free when the final term by which we make known to ourselves what we are is an end: that is, not a real existent like that which in the supposition that we have made could fulfil our wish, but an object which does not yet exist" (Sartre 2003, 504).

For me, the corona situation is a disaster. I’m anxious, everywhere I go. The doctors didn’t allow me to go to stores either. Too much risk, because of my age and my eye condition. [R4]

But not all people feel the same about their new circumstances:

Anxious? Thankfully not, I never really was. Life is life! A life as a hermit for fear of viral contamination? That’s much more of a fearful image to me. [R6]

These quotes convey that there are different ways in which people assume the label of the “vulnerable senior.” What remains constant, however, is the need to react to the new reality that emerged from the discourse around the coronavirus. Sartre’s and Beauvoir’s notion of the unrealizable helps us to understand that “vulnerable” is, and remains, a label assigned from the outside by others that is not part of the senior’s existential situation, but which still needs to be taken up and lived through by the ones to whom it is assigned.

Vulnerability as Creative Appropriation

A striking feature of the discourse on “vulnerable seniors” is the abundance of figurative language. Throughout our analysis, we came across metaphors and analogies that offered particular interpretations of the coronavirus situation. Typically, speakers used stylized language to convey strong feelings or certain political messages. For instance, speakers who had lived through the Second World War tended to draw comparisons with that period of recent history. In analysing these figurative elements of discourse, we have relied on Merleau-Ponty’s (2012) distinction between the “spoken word” (*parole parlée*) and the “speaking word” (*parole parlante*). The spoken word denotes established words, expressions, and concepts, the meanings of which the speaker knows and reproduces habitually. The speaking word, by contrast, captures the creative use of language, which draws on established meaning to express something new.¹⁰ While Merleau-Ponty tends to prioritise the speaking word in the *Phenomenology of Perception*, the two sides of language receive more equal treatment in his later works. In *The Visible and the Invisible*, Merleau-Ponty (1968) suggests that the spoken word and the speaking word are in fact reversible: that is to say, interdependent (Baldwin 2007). Just as established meaning goes back to acts of creation, creativity needs acquired material to work with.

¹⁰ On an alternative reading, spoken and speaking speech do not refer to two different kinds of speech, but instead to two distinct moments of experience inherent in all language (Kee 2018).

War Analogies

The war analogies made by “vulnerable seniors” showcase the intertwining of the spoken word and the speaking word. Consider the following examples:

You know what this reminds me of? People who told me about their hiding experiences. Of course, it’s not a war now, but they did say: “rhythm and structure, that’s important.” [R9]

Unprecedented how everything now lies flat, but the war was much worse . . . Personally, I’m not worried, this is also a time for reflection. [R11]

When discussing the lockdown, people of all ages repeatedly referenced the Second World War. This tendency was echoed by political leaders, whose reliance on martial rhetoric has often been noted.¹¹ In the Netherlands, the Second World War, together with the Shoah, is one of the darkest pages in recent history.¹² While the traumas of the War are most alive in older people, they have left a deep mark on the Dutch collective memory. This legacy was palpable in the repeated invocations of the “war on the coronavirus,” which established war as a hermeneutical master key used by many people in their personal interpretations of the crisis. In this light, narrations of wartime memories appear as examples of the spoken word: the reiteration of established meaning.

While war analogies thus belong to a repertoire of common expressions, they also express deeply personal experience. The speakers in the above examples tell stories of the War as a way to highlight the intensity of their present experience. There is an approximation between the War and the lockdown, even though the severity of the War ultimately remains unrivalled (as the second speaker contends). Through analogy, the War becomes a background against which the lockdown measures are interpreted. Thus, the present is transformed into something meaningful, a “time for reflection,” or the right moment to fall back on an old lesson: “rhythm and structure, that’s important.”

War analogies put the speakers’ perspectives in a broader historical context. By virtue of their war stories, older people are able to weigh the odds of the lockdown against past events that were in many respects more restricting and frightening. In this way, they present themselves as resourceful and knowledgeable rather than as victims of circumstance. Unwittingly perhaps, these speakers take a stance not only on the reality of the lockdown,

¹¹ See, for instance, Musu (2020); Westbrook (2020); Levenson (2020).

¹² During the Second World War, the Netherlands was invaded and placed under occupation by Nazi Germany—despite the country’s attempt to remain neutral. Shortly after, the Nazi regime started to persecute Jewish residents and in 1941 also started to deport them to concentration camps with the help of the Dutch police. The Netherlands had a substantial Jewish population at the time. Many were deported and were either killed upon arrival in the camps or died there subsequently. Apart from the horrors that the Jewish population had to endure, the occupied country itself was also afflicted by the war. Parts of the country and even some entire cities were bombed and destroyed.

but also on the reality of their victimization. This constitutes a doubly creative appropriation of their situation—the speaking word in the familiar guise of the spoken word.

The Wall Metaphor

Another example of figurative language conveys an even more acute sense of resistance against prescribed vulnerability: the wall metaphor. In an opinion piece about her status as a vulnerable senior, the writer observes:

Recently, I got a new status: that of a vulnerable senior. Who must be protected. By a wall of antibody-forming, infected non-vulnerable people.
[R5]

The statement illustrates how protective measures can engender an experience of passivity. Unable to fend for themselves, “vulnerable seniors” require the protection of others. They are stuck inside, cordoned off “by a wall of antibody-forming, infected non-vulnerable people.” The wall metaphor suggests a feeling of powerless confinement; it also invokes the image of an unresponsive, wall-like environment, of imposed isolation in private homes and nursing facilities: out of sight, out of mind.

Yet the metaphor also involves an ironic twist. While the wall condemns the speaker to passivity, it is itself an object, passive and devoid of initiative. Non-vulnerable people make up its bricks and mortar, but they don’t act of their own free choosing. In fact, they are themselves but servants of a higher rationale, relegated to the status of a giant human shield. Does the speaker talk bitterly or playfully? Does she view the non-vulnerable as antagonists or allies? It is hard to tell from one statement alone. What is clearly visible, however, is the speaker’s critical distance to prevailing clichés. Using figurative language, the speaker assumes her “new status,” but only ambiguously and ironically. This creates a small moment of subversion that stirs up the stereotypical distribution of agency and non-agency.

Figurative Speech as Conditioned Freedom

Both the war analogy and the wall metaphor offer us examples for the co-appearance of clichés and novel images in the vulnerability discourse. Seen through the lens of Sartre’s and Beauvoir’s unrealizables, the discourse on “vulnerable seniors” works as a constrictive force that limits individual expression. Like a defendant on trial, the “vulnerable seniors” are bound to use the terms of their accusers. They can plead guilty or profess their

The war ended with the “hunger winter” few months before liberation, during which many fatalities were reported due to exhaustion, starvation, disease, and cold. While most of the eyewitnesses of the War’s horrors are deceased, the memory of the holocaust and the dreads of the war is still alive. Every year, the month of May kicks off with the credo “Lest we forget.” During these days, the Dutch people dwell on this dark episode of history, pay their respects during a minute of silence on Remembrance Day, and celebrate their freedom on Liberation day the day after. Cf. Coopmans (2018).

innocence; what they cannot do, however, is ignore the charges and walk out of the court room. Before they can state their case, they need to comment on the label that has been put on them. Surprisingly, this apparent limit to their expressive possibilities becomes the leverage point for the creative reappraisal of their situation.

As the spoken word and the speaking word interlock, we catch sight of what Merleau-Ponty describes as *coherent deformation*. A work of art, Merleau-Ponty (1964) argues, does not arise *ex nihilo*, but in conversation with certain traditions. It expresses something new by “deforming” what has come before, just as “the auxiliary line introduced into a diagram opens the road to new relations” (78). This idea of coherent deformation also applies to the analysis of metaphors (Landes 2013). Masters of metaphor intuitively grasp the similar in dissimilars; they are “geniuses of ambiguity” who sense the possibilities inherent in their linguistic situations. On this view, the art of metaphor involves “taking up the acquired language and bending it to express oneself in an act between pure repetition and pure creation” (30).

Regardless of their respective “mastery,” the figurative responses to the vulnerability discourse clearly bend acquired language and yield an effect of deformation. The interplay of the spoken word and the speaking word that we find in these examples complicates the idea of vulnerability as something imposed or external. While the vulnerability discourse does indeed act as an impersonal force that imposes an unrealizable limit on my being, its power is not absolute. Rather than exercising unchallenged command, the discourse also invites resistance, negotiation, and re-interpretation on the part of its participants.

On the one hand, war analogies reproduce stereotypical and impersonal ways of speaking; on the other hand, they introduce personal narratives of survival and resilience. This ambiguity of figurative speech—which is vividly present in the wall metaphor as well—gives the discourse around the “vulnerable senior” a double identity as both constitutive of subjects and constituted by them. There is thus an intricate dance between, on the one hand, the scientific, political, and social instruments which describe and prescribe vulnerability, and, on the other hand, the manifold manners by which concrete subjects assume their vulnerability.

Following Merleau-Ponty (2012), we can reframe the problem of the “vulnerable senior” in terms of conditioned freedom. Merleau-Ponty posits an inextricable tie of language and expression with embodied experience. In speech as in embodied practice, the subject is never fully determined and never absolutely free. As an older person in the midst of the COVID-19 pandemic, you find yourself in a field of possibilities that you did not create, choose, or even wish for. The field is complex, for it includes not only discursive prompts, but also the opinions of your friends and families, your bodily needs and capabilities, and the sediments of your past choices. It is an uneven landscape, tilted in a way that makes certain possibilities appear close at hand while relegating others to the far distance.

Different situations afford different attitudes toward the label of the vulnerable senior. Recall the reactions that we mapped in the previous section, which included feelings of affliction, resignation, and nonchalance expressed by individuals in similar—though never identical—discursive environments. These cases involve choices of attitude that *make sense*

only against the background of particular fields of possibilities. And while these choices are thus conditioned, this fact does not exclude genuine freedom. There is freedom in picking up and responding to a situation, an impure freedom that allows for nuance and degrees and that is still experienced as agency. On this account of conditioned freedom, there is no clear-cut separation between freedom and the world. According to Merleau-Ponty (2012), “we are mixed up with the world and with others in an inextricable confusion” (481).

IV. ENTANGLED VULNERABILITY

Public discourse around COVID-19, old age, and vulnerability has led us to consider vulnerability as something you become rather than something that you are. Becoming vulnerable has different aspects, three of which we discussed in this paper. Citing Butler’s (2021) most recent work, we argued that vulnerability is discursively constructed—a label with disempowering effects assigned to people from the outside. Subsequently, we considered the ways in which this “foreign element” has entered the lives of concrete subjects, drawing on Sartre’s (2003) and Beauvoir’s (1996) notion of the unrealizable. As we have shown, older people cannot realize the label of the vulnerable senior as a free goal of their action; yet, they are obliged to relate to it, to *make sense* of it. As an unrealizable, the label of the vulnerable senior does not form a part of a person’s situation. Nevertheless, it constitutes a real form of existence that people need to take up and relate to.

While the notion of the unrealizable illuminates the label of the vulnerable senior, it does not specify the ways in which people respond to it. As we have argued, becoming vulnerable not only involves the assignment of a label; it also requires that the people who have been thus labelled make sense of their new status. By tending to metaphors and analogies, we meant to clarify the ways in which older people assume their assigned vulnerability. Figurative language, we have argued, stages the emergence of personal meaning-making in the midst of the vulnerability discourse. In Merleau-Ponty’s account, a person’s basic attitude manifests itself in all their acts of expression—be it speech or basic bodily comportments. Drawing on his distinction between the spoken word and the speaking word, we were able to read different cases of creative language usage as openings into wild geographies of sense.

Almost two years into the global coronavirus crisis, we are starting to realize how pandemic rhetoric has reinforced the entanglement of age and vulnerability. It has led to novel practices of naming, of separating those who are to be protected from those who do not need protection. Older people, however, are not passive bodies that merely endure their being labelled; they are actors in a process of becoming who respond to their new “identity” in diverse ways—through appropriation, negotiation, or rejection. While they cannot escape the label of the vulnerable senior, they still have the conditioned freedom to take it up and interpret their own situation through it (or to reject it). This does not take away, of course, the effects of disempowerment and marginalization that labels such as “vulnerable senior” frequently entail. These effects are in need of critical evaluation,

especially in times of a global health crisis. What we are offering here is a first step in this direction by reckoning with vulnerability as a complex, entangled phenomenon.

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REFERENCES

- Albertson Fineman, Martha. 2008. “The Vulnerable Subject: Anchoring Equality in the Human Condition.” *Yale Journal of Law and Feminism* 20 (1): 1-24.
- American Psychological Association (APA). 2014. “Guidelines for Psychological Practice with Older Adults.” Accessed January 20, 2021. <https://www.apa.org/practice/guidelines/older-adults>.
- Baldwin, Thomas. 2007. “Speaking and Spoken Speech.” In *Reading Merleau-Ponty: On Phenomenology of Perception*, edited by Thomas Baldwin, 87-103. London: Routledge.
- Beauvoir, Simone de. 1996. *The Coming of Age*. Translated by Patrick O’Brian. New York: W.W. Norton & Company.
- Blommaert, Jan. 2005. *Discourse. A Critical Introduction*. Cambridge: Cambridge University Press.
- Braun, Virginia, and Victoria Clarke. 2006. “Using Thematic Analysis in Psychology.” *Qualitative Research in Psychology* 3 (2): 77-101.
- Butler, Judith. 2004. *Precarious Life: The Powers of Mourning and Violence*. London: Verso.
- . 2009. *Frames of War: When is Life Grievable?* London: Verso.
- . 2020. “Capitalism Has Its Limits.” *Verso Books Blog*. Accessed January 20, 2021. <https://www.versobooks.com/blogs/4603-capitalism-has-its-limits>.
- . 2021. “Bodies That Still Matter.” In *Bodies That Still Matter. Resonances of the Work of Judith Butler*, edited by Annemie Halsema, Katja Kwastek, and Roel van den Oever, 177-93. Amsterdam: Amsterdam University Press.

- Coopmans, Manja. 2018. *Rituals of the Past in the Context of the Present. The Role of Remembrance Day and Liberation Day in Dutch Society*. ICS dissertation series 256, dissertation Universiteit Utrecht.
- Grøn, Lone. 2016. "Old Age and Vulnerability Between First, Second and Third Person Perspectives: Ethnographic Explorations of Aging in Contemporary Denmark." *Journal of Aging Studies* 39: 21-30. <https://doi.org/10.1016/j.jaging.2016.09.002>
- Guenther, Lisa. 2020. "Critical Phenomenology." In *50 Concepts for a Critical Phenomenology*, edited by Gail Weiss, Ann V. Murphy, and Gayle Salomon, 11-16. Evanston, IL: Northwestern University Press.
- Husserl, Edmund. 2009. *Ideen zu einer reinen Phänomenologie und phänomenologischen Philosophie*. Hamburg: Meiner.
- Kee, Hayden. 2018. "Phenomenology and Ontology of Language and Expression: Merleau-Ponty on Speaking and Spoken Speech." *Human Studies* 41 (3): 415-35.
- Knowles, Charlotte. 2019. "Beauvoir on Women's Complicity in Their Own Unfreedom." *Hypatia* 34 (2): 242-65.
- Kruks, Sonia. 1990. *Situation and Human Existence: Freedom, Subjectivity and Society*. Boston, MA: Unwin Hyman.
- Landes, Donald. A. 2013. *Merleau-Ponty and the Paradoxes of Expression*. London: Bloomsbury.
- Levenson, Eric. 2020. "Officials Keep Calling the Coronavirus Pandemic a 'War.' Here's Why." CNN. Accessed January 20, 2021. <https://edition.cnn.com/2020/04/01/us/war-on-coronavirus-attack/index.html>.
- Mackenzie, Catriona, Wendy Rogers and Susan Dodds (eds.). 2014. *Vulnerability: New Essays in Ethics and Feminist Philosophy*. New York: Oxford University Press.
- Merleau-Ponty, Maurice. 1964. *Signs*. Translated by Richard C. McCleary. Evanston, IL: Northwestern University Press.
- . 1968. *The Visible and the Invisible*. Edited by Claude Lefort. Translated by Alphonso Lingis. Evanston, IL: Northwestern University Press.
- . 2012. *Phenomenology of Perception*. Translated by Donald A. Landes. Oxon & New York: Routledge.
- Moi, Toril. 1999. *What is a Woman? And Other Essays*. Oxford: Oxford University Press.

- Musu, Costanza. 2020. "War Metaphors Used for COVID-19 are Compelling but also Dangerous." *The Conversation*. Accessed January 20, 2021. <https://theconversation.com/war-metaphors-used-for-covid-19-are-compelling-but-also-dangerous-135406>.
- Sartre, Jean-Paul. 2003. *Being and Nothingness*. Translated by Hazel E. Barnes. New York: Routledge Classics edition.
- Sarvimäki, Anneli, and Bettina Stenbock-Hult. 2016. "The Meaning of Vulnerability to Older Persons." *Nursing Ethics* 23 (4): 372-83.
- Westbrook, Adam. 2020. "Beware of Politicians Who Declare 'War' on the Coronavirus." *New York Times*, April 20. Accessed January 20, 2021. <https://www.nytimes.com/2020/04/20/opinion/coronavirus-war-politicians.html>.
- Wisner, Benjamin. 2016. "Vulnerability as Concept, Model, Metric, and Tool." *Oxford Research Encyclopedia of Natural Hazard Science*. Accessed January 20, 2021. <https://doi.org/10.1093/acrefore/9780199389407.013.25>.

APPENDIX: ORIGINAL QUOTES AND SOURCES

R = respondent number

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“Het uitrollen van een badlaken op een overvol strand? Daarvan kunnen zij [kwetsbaren] hooguit dromen. Een bezoek aan vrienden of familie is soms al te veel gevraagd, want stél dat ze besmet raken.” (R25)

"#GeenDorHout verdient alle steun." *Trouw*, August 20, 2020. Accessed March 2, 2022. <https://www.trouw.nl/opinie/geendorhoutverdient-allesteun~be1edb42/>.

“En dan moeten wij binnen blijven omdat bovenstaande mensen van hun terrasje en etentjes kunnen genieten. Ik vind het een schande dat men het alleen al durfde te zeggen.” (R26)

"Geen wederopbouw zonder de mensen die dit land hebben opgebouwd!" *Max Vandaag*, May 10, 2020. Accessed March 2, 2022. <https://www.maxvandaag.nl/sessies/themas/familie-relatie/geen-wederopbouw-zonder-de-mensen-die-dit-land-hebben-opgebouwd/>.

“Noem het een wrang neveneffect, maar de coronacrisis zorgt er in elk geval voor dat de kwetsbaren van deze wereld weer eens met andere ogen worden bekeken. Zachtere ogen.” (R21)

Robert van de Griend. 2020. "Door het coronavirus kijkt men met zachtere ogen naar de kwetsbaren." *de Volkskrant*, March 27. Accessed March 2, 2022. <https://www.volkskrant.nl/columnsopinie/door-het-coronavirus-kijkt-men-met-zachtere-ogen-naar-de-kwetsbaren~be5e807f/>.

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“De wereld bleek heel anders in elkaar te zitten dan vaak werd gedacht. Zij bleek niet om geld te draaien, maar om het leven, om de bescherming van de zwaksten en de kwetsbaarsten, ouderen die geen economisch nut meer vertegenwoordigden.” (R19)

"Nieuwe ervaringen van het virus zullen de coronacrisis extra schrijnend maken." *de Volkskrant*, August 2, 2020. Accessed March 2, 2022. <https://www.volkskrant.nl/uitgelicht/nieuwe-ervaringen-van-het-virus-zullen-de-coronacrisis-extra-schrijnend-maken~bf341442/>.

“Het dorre hout wordt gekapt, misschien een paar maanden eerder dan zonder virus. Moet iedereen die nog in de bloei van zijn leven zit daar alles voor opofferen?” (R13)

Peter Henk Steenhuis. 2020. "Wie bepaalt of ouderen moeten willen blijven leven?" *Trouw*, April 28. Accessed March 2, 2022. <https://www.trouw.nl/nieuws/wie-bepaaltof-ouderenmoeten-willenblijvenleven~b4352da5/>.

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“Het coronavirus, en het beleid daaromheen, hebben me doen beseffen dat ik nadrukkelijk tot een categorie behoort. Een categorie die hoge prioriteit heeft in het beleid.” (R2)

Peter Adriani. 2020. "De keuze voor kwetsbare ouderen heeft ook een prijs." *Trouw*, May 2. Accessed February 3, 2022. <https://www.trouw.nl/nieuws/de-keuzevoorkwetsbare-ouderenheeft-ookeenprijs~b1492b24e>.

“Sinds kort heb ik een nieuwe status: die van kwetsbare oudere. Die beschermd moet worden.” (R5)

"Kwetsbaar." *NRC*, March 30, 2020. Accessed February 3, 2022. <https://www.nrc.nl/nieuws/2020/03/30/kwetsbaar-a3995268>.

“Nu behoort ik tot een kwetsbare groep en ik moet zeggen dat ik de baten van corona tot nu toe gemist heb.” (R3)

"Ouderen worden gedegradeerd tot tweederangsburgers." *de Volkskrant*, July 20, 2020. Accessed February 3, 2022. <https://www.volkskrant.nl/columns-opinie/ouderen-woorden-gedegradeerd-tot-tweederangsburgers~bbb50c51/>.

“Mensen vinden me zielig als ze horen dat ik hartpatiënt ben. ‘Wat verschrikkelijk voor je.’ Maar nu zie ik dat diezelfde mensen naar een bomvol strand gaan. De coronamaatregelen lappen ze aan hun laars.” (R12)

Isabel Baneke. 2020. "Kwetsbaren laten hun stem horen: Ik ben Freek, hartpatiënt en #GeenDorHout." *Trouw*, August 11. Accessed March 2, 2022. <https://www.trouw.nl/binnenland/kwetsbarenlaten-hunstemhoren-ikben-freekhartpatient-engeendorhout~bcea716e/>.

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“Weet je wat het is, ik ben extra kwetsbaar, maar kwetsbare mensen weten dat van zichzelf, hè. Ik ben altijd voorzichtig. Ook met griep blijf ik bij anderen uit de buurt. Eigenlijk verandert er door de huidige maatregelen niet veel voor mij.” (R10)

"Joop (79) heeft steun aan God en aan Suzanne." 2020. *de Volkskrant*, March 26. Accessed February 3, 2022. <https://www.volkskrant.nl/mensen/joop-79-heeft-steun-aan-god-en-aan-suzanne~bf1827b4/>.

“Aan die laatste, nu veel gehoorde, uitdrukking [kwetsbare oudere] moet ik wennen.” (R1)

Peter Adriani. 2020. "De keuze voor kwetsbare ouderen heeft ook een prijs." *Trouw*. Accessed February 3, 2022. <https://www.trouw.nl/nieuws/de-keuzevoorkwetsbare-ouderenheeft-ookeenprijs~b1492b24e>.

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“Nu zit ik in ballingschap in mijn caravan. Met prachtig uitzicht op de bomen en de vogeltjes. Wel heel vervelend dat ik niet bij mijn kinderen ben.” (R22)

"We willen graag iets doen en we dóén het nog ook." *de Volkskrant*, April 23, 2020. Accessed February 3, 2022. <https://www.volkskrant.nl/nieuwsachtergrond/we-willen-graag-iets-doen-en-we-doen-het-nog-ook~ba4afdb7/>.

“Voor mij is de coronatijd een ramp. Ik ben bang, overal waar ik kom. Van de artsen mocht ik ook niet naar winkels. Te veel risico, vanwege mijn leeftijd en mijn oogaandoening.” (R4)

Rik Kuiper. 2020. "Kwetsbaren zien de coronadiscipline verwateren: ‘Roep niet dat ik een halve gare ben’." *de Volkskrant*, June 28. Accessed February 3, 2022. <https://www.volkskrant.nl/nieuwsachtergrond/kwetsbaren-zien-de-coronadiscipline-verwateren-roep-niet-dat-ik-een-halvegare-ben~b2fe1da2/>.

“Angstig? Gelukkig niet, ook nooit echt geweest. Het leven is zoals het leven is! Een leven als kluizenaar uit angst voor virale besmetting? Dat is voor mij pas écht een angstbeeld!” (R6)

Paul Hustinx. 2020. "Weer werken: heerlijk!" *Medisch Contact*, May 8. Accessed February 3, 2022. <https://www.medischcontact.nl/opinie/lezersschrijven/lezersverhalen/lezersverhaal/weer-werkenheerlijk.htm>.

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“Sinds kort heb ik een nieuwe status: die van kwetsbare oudere. Die beschermd moet worden. Door een muur van antistofvormende, geïnfecteerde niet-kwetsbaren.” (R5)

"Kwetsbaar". NRC, March 30, 2020. Accessed February 3, 2022. <https://www.nrc.nl/nieuws/2020/03/30/kwetsbaar-a3995268>.

EMBODIED SOCIAL HABIT AND COVID-19: THE ETHICS OF SOCIAL DISTANCING

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In a conversation with George Yancy in early 2020, Judith Butler spoke of the COVID-19 pandemic as exposing “a global vulnerability” (Butler and Yancy 2020). The way they articulated it at the time still resonates:

Everyone is vulnerable to the virus because everyone is vulnerable to viral infection from surfaces or other human beings without establishing immunity. Vulnerability is not just the condition of being potentially harmed by another. It names the porous and interdependent character of our bodily and social lives. (483)

The acute awareness of our interdependence has been brought into relief throughout the pandemic, drawing attention to the way in which we share the very air we breathe, the water we drink, and the objects with which we come into contact. Butler describes this interdependence in terms of “reciprocal and material modes of sharing [that] describe a crucial dimension of our vulnerability”; they are as they frame it, the fundamental “intertwinements and interdependence of our embodied social life” (484). Moreover, recalling the horror of watching media images of large numbers of people dying and left to pile up in make-shift morgues, Butler and Yancy reflect on the fact that all lives should be considered grievable: “they are lives worthy of acknowledgment, equal in value to every other life, a value that cannot be calculated” (485). The loss of human life during the pandemic has reminded many of us of the reciprocal obligation we have in protecting the lives of others, especially the most vulnerable. In this context, in the first year of the pandemic, as Peter Murphy (2020) has suggested, “[i]n lieu of a vaccine or an effective therapy” in order to protect the vulnerable and save lives, we were left with one of the few mitigating factors available: “human agency.” As Murphy continues: “In short, the ability

to distance oneself from others” (45).¹ These reflections on human agency, vulnerability, and reciprocal obligation are the themes that guide the considerations on social distancing and embodied social habit in this essay. By this I mean to refer to habit retained at a bodily level that both enables and is shaped by everyday forms of social interaction.

In 2020, to stem the transmission of the disease, most governments devised a range of social policy measures aimed at curbing or modifying embodied habits and social interaction.² In this respect, such habits have been at the core of both the proliferation of the disease as well as the central mitigating factor to stem transmission and save lives. In the first wave of the COVID-19 outbreak in March and April 2020, although scientific evidence was still developing, populations around the world were asked to amend their basic embodied and social habits. Such measures included, but were not limited to, handwashing and sanitizing, coughing into shirt sleeves rather than hands, the avoidance of hand-shaking, the suspension of hugging and kissing friends and family, amending touch in forms of children’s play, and maintaining two-meter social distancing. In addition, as more scientific evidence revealed over the months that followed, it was determined that wearing face masks could help stop the spread of the disease and track-and-trace systems were implemented in many nation-states to monitor close-contacts of persons with COVID-19 (Chaabna et al. 2021; Stuart et al. 2021). Many of these measures had specific political and cultural inflections that varied across nation-states, both in terms of the attitudes of populations and governments, but also in terms of the existing habits that constitute social and cultural life that were already embedded in each context.

There has been much criticism of the social distancing measures adopted in the wake of the COVID-19 pandemic. For example, Giorgio Agamben (2020) presents the public-policy response to COVID-19 as a manipulation of reality under the auspices of what he terms a state of exception, designed to increase the disciplinary mechanisms of state agencies in ever increasing forms of surveillance (Walby 2021); Gerard Delanty (2020) represents an overview of prominent responses to the pandemic that pits libertarian against authoritarian positions, positing the merits of the libertarian critique of a kind of panoptic authoritarianism; Ian James Kidd and Matthew Ratcliffe (2020) seem to suggest that populations have “slipped into” a curious form of false consciousness that they term “Covidworld” whereby the “flag of truth” has been moved “via a process that resembles

¹ The fact is that COVID-19 is a social disease; it is generally passed on through close human contact or proximity. The disease is transmitted by droplets that contain the virus, which are passed on from one person to another through close physical contact or airborne aerosols (Murphy 2020, 15).

² As Murphy (2020) explains, in the first quarter of 2020 (March and April) most governments across the world adopted some form of public policy aimed at curbing social interaction to stem the rate of transfer of the disease (45). As he suggests, there are generally only four other responses that governments might have taken to reduce the reproduction number (R number) of COVID-19: “a vaccine, community immunity, social distancing and environmental conditions” (44). It became quickly apparent that herd immunity was unsuccessful and that vaccines would take months, and, as we have seen, it was almost a year before they could be developed and rolled out. As well as the potential for serious illness and death rates soaring, as we saw in the first wave of the disease, particularly in parts of Europe and the USA, one of the main concerns was the unsustainable pressure put on national health systems, which were struggling to cope (47).

religious conversion,” and they criticize UK government interventions that prioritize the prevention of deaths of the elderly at the expense of others in the population. In a similar vein, evoking Michel Foucault’s theory of biopower and Françoise Dastur’s notion of “the event,” Cressida Heyes (2020) describes the pandemic as “world-destroying” and argues that COVID-19 has normalized a “slow death” that will become a “quiet background condition of late capitalism” (863).³

Here I wish to take a different approach. My interest in this paper is more squarely focused on the ethical obligation of social distancing and the centrality of human action or agency in relation to the amendment of embodied habit at the social level. This is to be distinguished from the more far-reaching and in some cases disproportionate government measures in the context of COVID-19. Instead, this paper offers a consideration of the kinds of ethical responsibility towards one another enacted at the level of everyday life, which is often obscured with the focus on the politicization of COVID-19 measures implemented at state and governmental levels. The social exercise in the mass amendment of embodied social habit, which has been at the core of the pandemic, is phenomenologically rich and interesting. Here I argue that a phenomenological analysis is best placed to help illuminate not only why the disruption to embodied and social habits has been so difficult but also why human agency is central—not only to social distancing but also to the ethical amendment of social and embodied habit more generally. In this regard, I extend Yancy and Butler’s insights about the kind of vulnerability and interdependence the pandemic has laid bare and the kinds of responsibility that we owe to one another as vulnerable and interdependent beings.

The paper then has three main aims. (1) The first is to demonstrate that phenomenology provides a unique and valuable means for understanding the centrality of embodied habit, both in terms of assessing the impact as well as addressing the transmission of the disease in the context of the COVID-19 pandemic. A phenomenological approach reveals the way in which habits or forms of habituality orientate us in our everyday lives and provide both individual subjects and societies with a sense of normalcy and “concordant and coherent” forms of experience (Wehrle 2016, 57). In this sense, a phenomenological analysis demonstrates why there is often resistance to amending embodied social habits, even when such habits pose a risk to ourselves and to others.

(2) The second aim is to consider the ethicality of social distancing measures and the centrality of human agency in the context of social and embodied habit. This requires us to consider the relation between passivity and activity in the uptake of habit. It is also important to note the way phenomenologists understand habit, which is not merely as a form of normalizing bodily technique nor as mindless adherence to social norms that are immune to reflexive and critical orientation. Rather, following philosophers such as Edward Casey and Helen Ngo, here I highlight the active and agential aspects of embodied habit.

³ Also see the important contrasting interpretation offered by Sylvia Walby (2021) in regard to many of the public health responses and Keynesian forms of economic support and intervention adopted by governments in the wake of COVID-19. Also see the phenomenological accounts offered by Havi Carel, Matthew Ratcliffe, and Tom Froese (2020) and Luna Dolezal (2020).

Such an account of habit has been central, for example, to critical phenomenologies of race and racialization that have sought to demonstrate how racializing habits of perception and embodiment are not passive but also actively taken up (Al-Saji 2014; Ngo 2016; Yancy 2008; Petherbridge 2017).

However, to modify or rupture such habits, they need to be ethically challenged or opened to thematization and critical reflection. This means we require a point from which to mobilize critique. In other words, we need a critical and ethical orientation that throws our actions and modes of being into relief.

(3) This leads me to the third aim of the paper. The impetus behind such forms of critique requires an ethical stance that forces a reflexive relation to sedimented attitudes and habits, even ones of normalcy and concordance that orientate us in our social lives. Such an ethical stance in relation to the pandemic cannot be *explicitly* found in the work of phenomenologists such as Edmund Husserl and Maurice Merleau-Ponty. In this essay, I argue for an ethical stance based on an account of mutual vulnerability. An ethics of vulnerability enables us to articulate the kind of critical approach that is required when amending embodied social habits in the context of COVID-19.

With these aims in mind, in the first section (i) I consider the complexity of social distancing through a phenomenological account of embodied and social habit. In section two (ii), instead of a focus merely on passivity, I emphasize the centrality of activity in the individual's uptake of habit and how this might inform an account of ethical modification, before turning in section three (iii) to a discussion of cultural habits and social habitus and the social proxemics of COVID-19. In the final section (iv) I turn to consider the ethics of habitual modification with reference to an ethics of vulnerability. Here I specifically focus on the unprecedented exercise of the amendment of bodily and social habit at the level of everyday life, even though this takes place against the background of government policies.⁴ A phenomenological analysis, brought together with an ethics of vulnerability in relation to COVID-19, provides an important prism through which to consider this complex of issues and the forms of responsibility and care which individuals might owe to each other at the level of everyday life.

I. EMBODIED SOCIAL HABIT AND SOCIAL DISTANCING

In the phenomenological account, habits are generally conceived in a positive manner in the sense that they enable normality and provide the subject with a stable, familiar, and coherent way of experiencing the world (Wehrle 2016). In this sense, habitual behavior is a bedrock for normality and provides “a necessary criterion for every possible experience” (Wehrle 2018, 51). Habitual life largely unfolds at a pre-reflexive level that usually remains

⁴ Note that by late 2021, some governments have relaxed mandated COVID-19 lockdowns and, instead, turned to using a discourse of individual “responsibility” towards others in our everyday actions and interactions with others. See, for example, Department of Health Ireland (2021); Carswell (2021).

taken for granted at the level of everyday life. Certain dispositions, emotional and affective states, and acts of willing become sedimented, and form an enduring habitus that might be described as constituting layers of an “abiding style of the ego” (Husserl 1973a, 400; translated in Moran 2014, 29). These layers are formed at an embodied level and develop an individual’s bodily “habitus” or particular bearing in the world. Gestures, mannerisms, and facial expressions “inhabit” our body and take on particular inflections such as an ease in running or an effervescent laugh. The embodied subject acquires habits and patterns that are incorporated into a particular habitual style, such as the way one walks or talks, writes with a pen or types on a computer, frowns or chuckles. Some of these capacities can be enhanced, developed, or strengthened, for example, through practice in running or training oneself to comport oneself in a particular manner, but all such capacities shape a particular form of individual experiencing. Certain tastes and preferences might also gradually become more prominent or cultivated, but they nonetheless are maintained through a life, even if they recede and remain only as sedimented traces (Moran 2014, 32).

Habit, then, provides a level of normalcy or optimality, and a familiar way of being in the world. We can think, for example, of the way we walk or sit in a chair, or the way we run for the bus each morning taking a particular route. We might also recall the ways we rely on familiar and habitual forms of social interaction, for example, stretching our hand towards another person in a gesture of greeting, smiling or nodding, or even kissing and hugging in some cultures. We mostly undertake these movements and forms of interaction effortlessly and unreflexively, and we only notice them when something goes wrong and familiar patterns are disrupted. In this respect, as Whitney Howell (2015) suggests, most habits at the level of everyday life consist of “discernible patterns of bodily movement that are learned over time, and that give us access to something that was formerly inaccessible” (323). For example, by learning to drive a car, I develop a set of skills and a bodily-practical relation to the world, that once learned is a set of embodied habits and actions that I readily employ on a daily basis without having to reflect upon what I am doing. As Merleau-Ponty (2012) has observed, whilst driving, I can even gauge the spatiality of a narrow laneway as I negotiate my way through it without having to externally observe the ratio of distance between my car and the wall (144). In this respect, as Howell (2015) suggests, as individuals we develop a particular habitual or bodily mode of being in the world “according to which things are meaningful to me” (323).

As Casey (1984) reminds us, drawing on Merleau-Ponty, the body is “our anchorage on the world” and is the medium not only of habit but also extends into the past as much as it is orientated towards the future (284; Merleau-Ponty 1962, 144). In this respect, in habitual life, “our experience is always guided and shaped by expectation, by a directedness towards the future that nevertheless reflects a determinate past” (Howell 2015, 324). Crucial to the understanding of habituality and temporality is the notion of sedimentation, which finds iterations in the work of both Husserl and Merleau-Ponty. We can understand the notion of habit or habituation to signify a sense of temporality or historicity, and the notion of sedimentation is employed to refer to the temporal relations between acts. The notion of habit can then be understood as the relation that connects earlier and later acts or associations—a relation that results in “‘sediments’ of earlier acts” or habits taken-up or

learnt over time (Husserl 1989, 233-34). As Casey (1984) describes it: “Sedimentation is implied by my very being-in-the-world, which must be as continually resumptive of acquired experience as it is pro-sumptive of experience to come” (284). It is important to note, though, that habit and sedimentation are never purely passive. Rather, as we shall discuss further below, sedimentation should be considered as a continual reactivation, “as a precipitation of the past into the present, it is an *active* precipitation *actively* maintained” (285, my emphasis). Husserl (1973b) thematizes this in terms of the relation between passive and active levels of agency or ego-consciousness, or what he refers to as “activity in passivity” (108; quoted in Casey 1984, 285).

In this sense, it is important to note the distinction Husserl (2001) makes in his genetic account between passivity and activity, or active and passive synthesis. The notion of passivity refers to a kind of primordial constitution at the pre-intentional level of experience (Steinbock 2004, 23). At the level of passivity, we are describing pre-reflexive and pre-linguistic forms of experience; these passive forms then create the basis for more active levels of experience and make them possible. In this sense, passive experience occurs in the background of our intentional awareness and can be understood in terms of a “broad lived-experiential field” (Husserl 2001, 18; quoted in van Mazijk 2016, 276). In terms of an analysis of habit, we can distinguish between habits “taken up” at both passive and active levels. For example, we might describe an active decision made about which bus route to take to work that then becomes part of our everyday routine such that we do not reflect upon it as we walk to the bus each morning; at a more passive level, we might refer to the manner in which we each develop a unique way of walking, a habit that is most often “passively” taken up or learned in infancy. As Howell (2015) suggests, though, although habits rely

on a previous course of development that took time and effort . . . necessary for the habit to come into being . . . [m]ost habits, even the most basic ones, such as walking, were developed in the face of some kind of resistance, be it bodily, psychological or otherwise. (324-25)

In this regard, too, although habits acquired at a more passive level might seemingly be more difficult to modify, they are not immune from modification or reorientation, nor should they be considered in purely passive terms such that they are divorced from more active levels of judgement and reflection. In this sense, as shall be discussed below, even habitual modes retained or acquired at a passive level are to some extent “actively” taken up. The significance of the phenomenological account, in relation to both passive and active levels, is that it helps to illuminate an analysis of embodied habit in relation to COVID-19 as well as the potential for an account of habitual modification.

II. THE ACTIVITY OF HABIT AND HABITUAL MODIFICATION WITH COVID-19

Habits are not unwilling or unconscious; they involve action on the part of the subject. This also means that habits can be modified or changed. In this sense we can speak of habits at the level of judgement and cognition as well as bodily habits. In both cases: “*Habits need to be initiated*. They also need to be ‘bedded down’ or burned in through practice and repetition” (Moran 2014, 33, my emphasis). However, modifying or changing habits requires some sense of thematization and reflexive stance towards them, and may involve the development of new movements, routines of habits. For example, I realize that the way I rotate my arm to close a door behind me is causing pain and a slowly developing shoulder injury, despite having routinely used this embodied action to save time upon entering and exiting a building. I continually go to repeat the action unthinkingly, until the pain caused reminds me that the action requires self-scrutiny and it becomes thematized. To break this habit requires me to develop new habits and new bodily movements, but to do so requires reflexive awareness, deliberation, and a conscious attempt to retrain myself to open and close doors differently. However, it may take weeks to achieve such an amendment before a new habit can be “bedded down” through practice and routine.

It is precisely this set of issues that many of us faced when confronted with the need to amend bodily and social habits to halt the spread of COVID-19. In the early months of the pandemic, we witnessed countless images and news footage of world leaders automatically moving to extend a hand in the familiar greeting of a handshake, only to have one or both of them suddenly realize the altered conditions of everyday life within which they were interacting. Likewise, people queuing in supermarkets or for COVID-19 tests slowly became habituated to a new sense of spatiality and social distancing, standing approximately two meters apart. This was often aided in supermarkets with two-meter circles marked on concrete floors, or arrows designating a one-way flow of customers, rather the usual act of congregating or passing in aisles. It is clear, however, that such forms of social distancing and bodily habits seemed difficult to amend; not only did people find it difficult to stand two-meters apart when interacting, but people in cultures whose familiar act of greeting involves kissing, touching, or hugging seemed to find it especially hard to amend such habits (Gelfand et al. 2021; Oliu-Barton et al. 2021). Time and again people mindlessly dwelled in supermarket aisles, impervious to their sense of spatiality and the need to enable others to safely pass, or people gathering in family and friendship groups leant towards one another in familiar forms of greeting involving touch and found social distancing hard to maintain. This is because habitual forms of interaction and social spatiality within our familiar world provide a sense of normalcy, familiarity, and stability that we largely take for granted.

As Maren Wehrle (2018) suggests, habits, skills, and “practical knowledge . . . help orientate and familiarize a subject with their environment” (54). Although the import of “practical knowledge” is not an aspect that Husserl emphasizes in relation to his account of normality, Merleau-Ponty’s notion of the body-schema, as Wehrle suggests, helps to elucidate this confluence of elements more fully. The notion of body-schema points to the unique status of one’s own body in the sense that it points to the particularity of perceptual

access and agency. “I am aware of my body via the world,” Merleau-Ponty (2002) says, just as “I am aware of the world through the medium of my body” (94-95). In this sense, for Merleau-Ponty, the body is the means by which we interact with the world, and the objects with which we interact become an extension of our bodily intentions and also mold and shape bodily comportment through our engagement with them. Habit then works at the level of body schema, and we can speak of the reshaping or reworking of the body-schema as it takes on new orientations to the world or moves in new ways.

However, Merleau-Ponty does not merely understand habit in terms of routinized actions or repetition of gestures—what Casey (1984) terms “habit memory”—but also in terms of the notion of habituation, which refers to the mode of “being orientated in a general situation by having become familiar with its particular structure” (Ngo 2016, 849). This is exemplified in Merleau-Ponty’s (2014) well-known example of the experienced organist, who visits a new venue and has to play on an unfamiliar organ for the first time. In this scenario, despite having to engage with a different instrument with which he is unfamiliar, the organist is quickly able to reorientate himself as he “settles into the organ as one settles into a house” (146; cited in Ngo 2016, 850). As Ngo (2016) indicates, this example points to the way that habits “inhabit” our bodies. What is significant in Ngo’s account is that habit is not merely to be understood in terms of repetitive or habitual gestures that have become *sedimented* in the body in a narrow sense but should also be taken in a broader sense of a general bodily orientation or that to which we have become habituated (854).

Ngo extends the account of habit and sedimentation with a particular emphasis on the active uptake of habit rather than its passivity—an emphasis that is important for an account of habitual modification in the context of COVID-19. She argues that an over-emphasis on the notion of sedimentation rather than habituation “tends to point to the passive and inert” and this results in a closing over of “questions of *responsibility* and persistence of one’s bodily habits” (2016, 862, my emphasis). However, using the analogy of the geological process in which minerals get deposited onto surfaces and then in time turn into rock, Ngo points to a problem with the kind of passivity and inertia that the notion of “sedimentation” evokes. As she explains, surfaces are not just passive—they also *receive* deposits—and this suggests that surfaces also have a certain *receptivity* to materials. Adapting this analogy in relation to bodily habit, the argument is that “the acquisition of new habits hangs not only on one’s cultural or social milieu, but also on one’s own bodily receptivity and compatibility” (863). It is therefore misleading to think of the sedimentation of habit in passive terms for, as the above discussion reveals, habits are not passively inscribed nor externally enforced but are actively taken-up and reiterated by a receptive subject or indeed repudiated and resisted. This means that habits are ever-changing and require constant reiteration and reworking for their continuation.

Habits and forms of habituation are also not always seamlessly integrated into the body and may sit in tension with one another. In this respect, for sedimentation to be viewed in temporal terms as connecting the present with the past, it needs to be understood in more active terms in the sense that “habits are *held* rather than simply possessed; they are both active and continually *activated*.” Ngo’s (2016) argument, then, is that habits are “never truly congealed or calcified, but are held over in our bodily horizons” and this allows for a

consideration of responsibility as well as the modification of habits (864). If we understand habits as “held and activated,” this indicates that the body-subject does not unconsciously take up habits over which she has no responsibility or control and that habits are receptive to change. In relation to the amendment of habit in the context of COVID-19, the import of Ngo’s argument is that although institutions and macro-level structures and policies might be factors in the amendment of social behavior, it is at the level of individual embodied being that “we each play [a role] in the uptake, maintenance and perpetuation” or the modification of specific habits or body schemata (865).⁵ In addition, we could say that, although we might know that something is morally wrong at an epistemological level, we also need to amend habits at the level of affect and bodily habituation. For example, during the pandemic, many people believed the expert scientific advice they heard but nonetheless failed to amend their own embodied habits in everyday interactions.

However, the sense of familiarity and coherent experience discussed above does not merely pertain to the individual’s mode of experiencing the world. We can distinguish between a sense of normalcy and concordance operating at an individual level from this sense at work on an intersubjective level, the latter which involves concordance between individual habits and the whole community (Wehrle 2018). As we shall discuss below, the intersubjective level also has ramifications for understanding the centrality of embodied social habits to both the spread and response to COVID-19.

III. THE SOCIAL PROXEMICS OF COVID-19: SOCIAL AND CULTURAL HABITUALITY

A large part of the familiarity and comfort of individual experience is due to the social and cultural context in which one is embedded. We can speak of habituality not only in terms of the individual but also in regard to social and cultural spheres, or what might be referred to as “social habituality” (Husserl 1973c, 230; translated in Moran 2014, 41). In this sense, “lived bodies” are understood not only as “bearers of sensations” and expressions of particular individuals, but also as “bearers of meaning for all interpretations” at a social and communal level (Husserl 2006, 168-9; quoted in Moran 2014, 41). The notion of social habitus explains certain social characteristics and patterns of interaction that help to create a familiar everyday world in which individuals typically move. The individual is then historically and socially embedded within a particular social habitus or cultural milieu. This may include patterns of normalcy about embodied interaction and spatiality, what is typical in terms of how close or far people stand or sit, whether they hug or kiss

⁵ It should be made clear that Ngo’s analysis of embodied habit and habituation is undertaken in regard to race and racializing embodied habits. I have also previously made similar arguments in relation to racializing perception (Petherbridge 2017, 2020). Although I am drawing on a similar analysis of habit in Husserl and Merleau-Ponty here to understand the role of embodied habit in regard to the context of COVID-19, I do not want to suggest that this should in anyway be equated with racism nor to detract from the very deep-seated and problematic nature of racializing habits. It is, however, fair to say that, in some contexts, responses to COVID-19 have also had overtly racializing elements, particularly against racialized groups within particular nations.

upon greeting, whether they bow at a further distance and maintain an orbit of individual space, whether they eat with a fork or chopsticks, when and how often they visit private homes, or whether they feel more comfortable gathering in public places. These are all factors that are central to the transmission of the COVID-19 virus.

This phenomenological account of embodied and social habit in relation to cultural context can be further extended and understood when brought together with an account of proxemics and social haptics. Edward T. Hall (1990) introduced the notion of proxemics in his attempt to explain cultural differences in personal and public senses of spatiality and the familiar sense of space in face-to-face and personal communication (1-2; Murphy 2020, 22). Hall developed a nuanced account of different cultural senses of space that includes haptics, kinaesthesia, and nonverbal and verbal communication as well as temporality. He considered these aspects in relation to forms of social interaction and the structure of both the internal and external organization of space—for example, in buildings and the design of towns and cities. A key component of his analysis was the distance that people like to maintain between themselves and other people as well as between things in the world. This amounts to something like an invisible component of space in human dwelling, communication, and interaction that is shaped by culture, and in which people feel comfortable and familiar. In Hall's (1990) schema, public and social space differs from personal and intimate space, particularly in domestic dwellings, and determines the different senses of normal space and spatiality in different settings (114). The comfort factor in such spaces can be influenced by elements such as body positioning and movement in relation to other bodies in terms of physical contact, forms of touch, body heat and odor, language and the intensity or the sound level of typical vocal interactions, and whether there is a preference for direct eye-contact or not.

Hall suggests that “proxemic patterns” point to “the basic differences between people” not only in terms of different cultures but also due to factors such as the density of living where “high sensory involvement” might be relevant as well as in architectural space (144). He contrasts the proxemic patterns, for example, between the USA, France, and the UK, as well as those in Japan and the Middle East. Japanese intimate and personal space is noted as being different to public and social space, and this also connects to forms of greeting and the degree of touch involved—bowing rather than hugging or kissing—in contrast to certain European cultures where touching, hugging, and kissing are more common. This also impacts on “intercultural communication . . . [given] the position of the bodies of people in conversation varies with the culture” and can sometimes seem unfamiliar between different contexts (160).

Although, as Husserl demonstrates, there are generalized structures of all human embodied-conscious experience, it is also important to recognize the impact of cultural differences in the ways lived experience is manifested. In the context of COVID-19, these factors have certainly been significant. It is instructive to contrast the rates of infection of the virus as well as the uptake of modified habits of interaction or social distancing in certain cultures and nation-states, and the speed by which the infection rates have been slowed or remained lower than others. At the time of writing, in South Korea, for example, which has a population size of approximately fifty-two million people, there have been just over 184

thousand COVID-19 cases reported, whereas in the UK, with a population size of almost sixty-seven million there have been nearly 5.6 million cases. In Ireland with a population size of nearly five million, there have been 289 thousand cases, whereas in Singapore with a population of just over five million there have been just over sixty-three thousand cases. The death rates in each have also significantly varied—for example, in Singapore there have only been thirty-six deaths recorded, whereas in Ireland there have been over five thousand deaths recorded to date. Many of the Pacific Islands have also recorded much lower case-numbers than Europe or the USA. In countries such as Australia and New Zealand, where uptake of social distancing measures and mask wearing was initially quite high, there have also been low death rates of approximately nine hundred in Australia and only twenty-six in New Zealand.⁶

As this discussion of Hall (1990) demonstrates, understanding “various zones of involvement and the activities, relationships, and emotions associated” with different senses of space has become extremely important in understanding cultural differences (129). In the context of COVID-19, it also helps to understand the role of embodied and social habit in the uptake of social distancing, as well as the difficulty some nation-states faced with lowering the rates of infection and the challenge of amending taken-for-granted habits of interaction and modes of being in the world. As Hall argues, understanding “space requirements simply in terms of the limits of the body” is inadequate on its own; we also need to account for a range of factors in relation to “invisible [spatial] bubbles” around persons in different contexts and cultures (128).

In terms of the COVID-19 experience, the above analysis raises interesting and important questions, for it has largely been at the level of the state and state institutions that the work to amend embodied and social habits has been enacted in terms of developing public policy and health messaging rather than voluntary uptake at the social level. Advertising campaigns asking citizens to wash their hands, stay socially distanced, cough into a sleeve, and enact “masking for a friend” are all a means of actively trying to modify individual habits.⁷ Similar measures have also been aimed at curbing certain social and cultural habits, such as large gatherings and family get-togethers, encouraging people to meet outdoors or to work from home. In some instances, these measures were attempted prior to imposing universalistic lockdowns, effectively trying to encourage people to take responsibility for the amendment of taken-for-granted modes of being in the world, as well as social and bodily habits, that may save lives and prevent the over-burdening of health-systems. This has been achieved to varying degrees but, in many cases, governments have moved to complete lockdowns where such social responsibility was considered to have failed or been inadequate.

⁶ These figures were recorded at the time of writing this essay in early 2021. For the exact population figures see: Australian Bureau of Statistics (n.d.); One World Nations Online (n.d.); Office of National Statistics (n.d.); World Population Review (n.d.). For all statistics on COVID-19 cases and deaths, see World Health Organization (n.d.).

⁷ The term is a slogan taken from an Irish health campaign during the COVID-19 pandemic to encourage caring for others by wearing a mask (Government of Ireland 2020). For an example of this campaign, see Quann (2020).

Of course, such public health campaigns are not entirely new, but they rarely take on such global proportions. For example, in Australia and New Zealand, a public health campaign was rolled out in the 1980s to prevent the growing instances of skin cancer by imploring citizens to “slip, slop, slap” (slip on a shirt, slop on a hat, and slap on sunscreen to protect themselves from the sun), and this was largely taken up as a very successful and voluntary amendment of bodily and social habit (Cancer Council Australia n.d.; Sun Smart New Zealand n.d.). In an alternative vein, in many countries wearing a seatbelt whilst driving is mandatory, and most drivers now habitually put on a seatbelt before they drive without any explicit reflection or thematization; it was not always the case that drivers worldwide have habitually worn seatbelts, but rather this is the upshot of a successful public health campaign. In the context of the COVID-19 pandemic, it has been interesting to witness a similar campaign in relation to social distancing and particularly mask-wearing. Once scientific evidence pointed to the significance of mask-wearing as a preventative factor in spreading the disease, many nation-states moved to introduce some form of masking-up, particularly in public and shared spaces such as workplaces, hospitals, and shopping centers. However, there has been notable resistance to mask-wearing in some places, leading to violent protest in some and avoidance or passive resistance in others. The arguments against mask-wearing have often been made from the basis of claims about the erosion of civil liberties, rather than being taken in the same vein as public health measures that have been introduced with successful long-term consequences such as the prevention of skin cancer, and yellow-vest or seatbelt wearing.⁸ What is particularly curious is that the evocation of mask wearing is equal to those earlier health and safety campaigns in not only protecting one’s own life but also the lives of others.⁹ In this context, it is unclear precisely how wearing a mask is an impingement on freedom. There seems to be very little difference between the call to “mask-up for a friend” and the call to “slap on sunscreen” or “belt up to save lives,” and the kind of habitual amendment each requires, even if temporary (Sánchez 2021). These considerations suggest the need for an ethical response that is based upon the recognition of the other’s vulnerability and the kinds of responses we are called upon to make in the context of COVID-19.

⁸ In other words, those involved in current protests against mask wearing on the basis of civil liberties often neglect to consider the variety of similar public measures in relation to different health issues that have been introduced in different ways and in different parts of the world, where such measures have been successful and uptake has been high based on a similar rationale or the introduction of legislation. This is not to say that in certain parts of the world there have not been protests against such measures by particular groups, but it should be noted that this is neither universal nor resisted in the same way. As is now evident further into the pandemic (by the end of 2021), in certain parts of the world and in certain nation states, up-take of masks or willingness to be vaccinated is extremely high in certain countries and met with very little resistance, compared to other countries where there has been less uptake and higher levels of resistance. These differences are important to take into account.

⁹ Interestingly, in those states where mask wearing was taken up almost universally, both inside and outside in public spaces (including parks, gardens, and walking), COVID-19 cases have been reduced—in some places to zero community transmission. In those states, though, other measures and environmental factors were also significant (Gelfand et al. 2021; Han et al. 2020; Stuart et al. 2021; Howard et al. 2021).

IV. MUTUAL VULNERABILITY AND THE ETHICS OF HABITUAL MODIFICATION

The modification of habits, especially those retained at a passive level, requires thematization and reflexivity to identify the habits in question as problematic and to be able to undertake work to modify them. We can think, for example, of the way someone walks, which may be a habitual mode developed in infancy. Perhaps, later in life, due to pain experienced in my ankle, I realize that I pronate as I walk and that over many years this has caused damage to my ankle. With the help of a podiatrist, I relearn to walk in a manner that relieves the pronation, and I might correct the gait I have held since childhood. In this sense, even a habit acquired and maintained passively, such as walking, is not immune from active thematization and judgment.

We can also think of other important examples at an intersubjective level, such as the gendered habits to which Iris Marion Young (1980) draws our attention regarding throwing a ball which, although a product of socialization, once thematized through reflexivity and critique, can also be changed—not only at an individual but at a social and cultural level. Or we might highlight racializing embodied and perceptual habits such as the ones Yancy (2008) describes in recounting his experience of walking down a street in the USA only to hear drivers locking their car doors as he walks past, powerfully reinforcing habits of racialized perception (xix). In these two cases, a change of habit requires the kind of critique, thematization, and reflexivity that is brought about with the ethical demands made by the social and political critique advanced by new social movements. It is only by way of this kind of normative or ethical transformation that such habits are ruptured and modified.

If we turn to consider the forms of embodied habit that have become central to understanding the spread of COVID-19, we might argue that a parallel mode of thematization and reflexivity is required. In like manner, our taken-for-granted habits and everyday forms of interaction have been brought into relief through a recognition of the vulnerability of others and of our ethical responsibility and obligation towards protecting the lives of others. The claim made here is that, in the context of COVID-19, the recognition of our shared vulnerability and mortality gives rise to an ethical obligation. Here, I conclude by considering the *ethical potential of the habitual self* and how we might conceptualize the grounds for a critical and reflexive approach to habit.

My argument is that ethical attention and awareness of responsibility to the other—resulting in the amendment of embodied habit—requires a feedback loop between higher active levels of ethical reflexivity, cognition, and judgement, and the more passive layers of habit or perception. The claim for ethical responsibility and change therefore requires an interplay between these different dimensions. It might also mean that habits need to be modified and changed not only at an individual level but also at a social and intersubjective one. The implication of this account is that we need a certain reflexive and normative awareness and perhaps discursive articulation to identify those instances where habitual life is disrupted in such a way that habits might need to be opened to amendment. One of these historical moments of disruption to our mundane lifeworld has been experienced

during the COVID-19 pandemic, which requires ethical and reflexive attention towards the other. In the context of the disease, this reflexive awareness and attentiveness to the other requires an ethical reorientation that disrupts the mundane attitude and our familiar ways of dealing with the world and our intercorporeal relations with others.

As Lisa Guenther (2013), drawing on Emmanuel Levinas, suggests, “critique begins with the provocation of the other who puts me in question and commands me to justify myself. This command . . . [addresses] the subject as one who is *both* free and responsible” (234, my emphasis). In this context, Levinas’s “concept of the face of the other” can be understood “as a site of infinite obligation.” The amendment of social and embodied habit, such as “masking [one’s face] for a friend” or “keeping your distance,” is indicative of this kind of ethical demand and responsibility. It represents “solidarity with a community of others” based on recognition of their potential vulnerability (223).¹⁰ In this sense, we could amend Levinas’s insight by arguing that a masked face is a vulnerable face, and that masking one’s face in a reciprocal gesture then recognizes the other’s vulnerability and our ethical obligation to them. In Levinas’s (1969) terms, the face of the other issues a summons or demand, but the other’s face is not to be understood as merely something before me, rather, it is “the whole of humanity.” It is not the case, then, that “there first would be the face” that evokes a concern for justice; instead “the epiphany of the face *qua* face opens humanity” (213).

In a similar manner, Butler (2004) draws on Levinas to conceptualize a related claim in regard to an ethics of vulnerability, suggesting that such an ethics is not a matter of extrapolating from one’s own experience of vulnerability to that of another but of explaining “how it is that others make moral claims upon us, address moral demands to us, ones that we do not ask for, ones that we are not free to refuse” (131). As indicated earlier, Butler suggests there is an ethical claim contained in the experience of vulnerability that enables us to recognize our shared corporeal interdependence, an experience that evokes an empathetic relation to the other (xiii).¹¹

Moreover, Butler’s conception of vulnerability is thought in relation to the concepts of grief, loss, and mourning, and the importance of these states for politics (Murphy 2012, 72). For Butler, this sense of grief, loss, and vulnerability provides the basis upon which one lives beyond or outside of oneself. This notion of grievability is also apt in the context of COVID-19 in the sense that all lives matter regardless of age, ethnicity, race, gender, religion, or socio-economic background. As Butler and Yancy (2020) suggest, the loss of life during the pandemic not only highlights our mutual vulnerability but requires us to recognize such lives by engaging “in public forms of grieving” (485).

¹⁰ If we conceptualize freedom as social and not as individualistic freedom, we also point to a kind of freedom in which I am summoned by the other to recognize their freedom. As Guenther (2013) points out, quoting Levinas (1969): “the other absolutely other – the Other – does not limit the freedom of the same; calling it to responsibility; it founds and justifies it” (Levinas, 197; Guenther, 233).

¹¹ This article builds on work on different forms and amendment of embodied habit in Petherbridge 2017; 2022.

In this respect, Butler (2010) points to the way in which our vulnerability reveals our susceptibility and dependence upon the actions of anonymous others. These are important tropes for understanding the kind of ethical response that is required in the context of COVID-19. It suggests an embodied ethical responsiveness that is based on the notion of shared human vulnerability in the wake of the pandemic—a disease that renders bodies “anonymous” in the phenomenological meaning of the term. The important point is that there is an ethical possibility contained in the experience of vulnerability, which enables us to recognize our common humanity and our collective responsibility for the lives of others. Butler also makes a helpful distinction regarding vulnerability by marking out the difference between what they term “precariousness” as an ontological category or “a generalized condition of living beings”—in other words, a general shared human vulnerability—and “precarity”—as a social and political category that points to the ways in which forms of vulnerability are differentially distributed or allocated. The latter term refers to a political condition that is shaped by social and economic relations and through which “certain populations . . . become differentially exposed to injury, violence and death” (2010, 25). In this sense, in the wake of the pandemic, as Butler recently put it:

Perhaps there are at least two lessons about vulnerability that follow: it describes a shared condition of social life, of interdependency, exposure and porosity; it names the greater likelihood of dying, understood as the fatal consequence of a pervasive social inequality. (Butler and Yancy 2020)

In the context of COVID-19 this seems especially apt; although all humans are vulnerable to the virus, certain populations have been differentially or disproportionately affected. As is well documented, those over the age of sixty-five or with comorbidities are disproportionately vulnerable; certain groups of workers are more at risk, including doctors, nurses, paramedics, and hospital staff, public transport workers, meatpackers, and those in confined spaces, for example. Individuals and groups of people of particular racial and ethnic backgrounds were also at higher risk, in some cases due to contributing socio-economic factors, or they experienced forms of racialization—especially those who were problematically connected to representations of the disease.¹² In addition, as discussed above, different nations were also affected at different rates and were more or less successful at avoiding large mortality rates. It is also important to note that different populations have been more vulnerable to mental health issues or suffered from the experience of social isolation. This distinction between precariousness (or an ontological form of vulnerability) in contrast to precarity (which refers to the differential factors shaped by social and political contexts) provides a useful framework for distinguishing between responsibilities we were all called upon to share due to the social nature of the disease, and those contexts and

¹² In Ireland, for example, a young Chinese-born woman was pushed into the canal in Dublin (Pollak 2020); in Australia, Chinese students were attacked on the street and blamed for spreading the disease in the early wave of the pandemic (Yang 2020).

populations unfairly and disproportionately affected by COVID-19 (or those who need further care or measures of social and government support under such conditions).

As argued above, the impetus for modification of embodied and social habit assumes a reflexive practice that raises an awareness of habitual forms of perception and motivates the interruption and modification of habits, movements, and bodily style. This is underpinned by a normative claim built into intersubjective life that is based on the mutual vulnerability that our embodied interdependence entails. It is about recognizing how our own bodily life impacts upon, limits, or enhances the lives of others and about acknowledging the ethical capacity to respond to the bodily lives of others. The irony about the kind of ethical responsiveness required in the wake of the COVID-19 pandemic is that it requires us to curb and amend our embodied habits and to limit our social contact and proximity to others—and that is difficult—especially given the sense of familiarity, normalcy, and comfort that forms of habituation provide us as social beings. In the wake of the pandemic, though, the recognition of the other as an embodied being like myself is also a recognition of the other’s potential susceptibility to illness and mortality made worse by close proxemics and social habits. As we have seen, an ethical responsiveness to vulnerability provides the kind of ethical orientation that is required for reflexivity and critique, thereby enabling an awareness of the impact of our embodied social habits on the lives of others. This is a form of ethical responsivity enacted at the everyday level rather than one equated with or reliant upon government measures. Such a phenomenological account of habit brought together with an ethics of habitual modification offers the means to consider the ethical responsibility towards others that our mutual vulnerability evokes based on the normative claim that all lives are grievable and worthy of recognition.

REFERENCES

- Agamben, Giorgio. 2005. *State of Exception*. Chicago: Chicago University Press.
- . 2020. “The Invention of an Epidemic.” *European Journal of Psychoanalysis*. Accessed July 19, 2021. <https://www.journal-psychoanalysis.eu/coronavirus-and-philosophers/> Previously published in Italian as “L’Invenzione di un’Epidemia.” *Quodlibet*. <https://www.quodlibet.it/giorgio-agamben-l-invenzione-di-un-epidemia>.
- Al-Saji, Alia. 2014. “A Phenomenology of Hesitation: Interrupting Racializing Habits of Seeing.” In *Living Alterities: Phenomenology, Embodiment, and Race*, edited by Emily Lee, 133–72. Albany, NY: SUNY Press.
- Australian Bureau of Statistics. n.d. “Population.” Accessed March 22, 2021. <https://www.abs.gov.au/statistics/people/population>.
- Butler, Judith. 2004. *Precarious Life: The Powers of Mourning and Violence*. London and New York: Verso.

- . 2010. *Frames of War: When is Life Grievable?* London and New York: Verso.
- Butler, Judith and George Yancy. 2020. “Interview: Mourning is a Political Act Amid the Pandemic and Its Disparities.” *Journal of Bioethical Inquiry* 17: 483–87. Previously published as *Truthout*, 2020. “Judith Butler: Mourning Is a Political Act Amid the Pandemic and Its Disparities.” *Truthout*. Accessed July 22, 2021. <https://truthout.org/articles/judith-butler-mourning-is-a-political-act-amid-the-pandemic-and-its-disparities/>.
- Cancer Council Australia. n.d. “Slip, Slop, Slap, Seek, Slide.” Accessed July 23, 2021. <https://www.cancer.org.au/cancer-information/causes-and-prevention/sun-safety/campaigns-and-events/slip-slop-slap-seek-slide>.
- Carel, Havi, Matthew Ratcliffe, and Tom Froese. 2020. “The Art of Medicine: Reflecting on Experiences of Social Distancing.” *The Lancet* 396: 87-88.
- Carswell, Simon. 2021. “Holohan warns against high social contacts with Christmas looming.” *The Irish Times*. November 04. Accessed December 20, 2021. <https://www.irishtimes.com/news/health/holohan-warns-against-high-social-contacts-with-christmas-looming-1.4718570>.
- Casey, Edward. 1984. “Habitual Body and Memory in Merleau-Ponty.” *Man and World* 17: 279-97.
- Chaabna, Karima, Sathyanarayanan Doraiswamy, Ravinder Mamtani, and Sohaila Cheema. 2021. “Facemask Use in Community Settings to Prevent Respiratory Infection Transmission: A Rapid Review and Meta-Analysis.” *International Journal of Infectious Diseases* 104: 198-206.
- Delanty, Gerard. 2020. “Six Political Philosophies in Search of a Virus: Critical Perspectives on the Coronavirus Pandemic.” *LSE Europe in Question Discussion Paper Series*. Accessed July 19, 2021. <https://www.lse.ac.uk/european-institute/Assets/Documents/LEQS-Discussion-Papers/LEQSPaper156.pdf>.
- Department of Health Ireland. 2021. “Statement from Chief Medical Officer, Dr. Tony Holohan - Sunday 21 November 2021.” Accessed December 20, 2021. <https://www.gov.ie/en/press-release/e2228-statement-from-chief-medical-officer-dr-tony-holohan-sunday-21-november-2021/>.
- Department of Statistics Singapore. n.d. “Population.” Accessed March 22, 2021. <https://www.singstat.gov.sg/modules/infographics/population>.
- Dolezal, Luna. 2020. “Intercorporeality and Social Distancing.” *The Philosopher* 108 (3): 18-24.

- Gelfand, Michele J., Joshua Conrad Jackson, Xinyue Pan, Dana Nau, Dylan Pieper, Emmy Denison, Munqith Dagher, Paul A. M. Van Lange, Chi-Yue Chiu, and Mo Wang. 2021. “The Relationship Between Cultural Tightness–Looseness and COVID-19 Cases and Deaths: A Global Analysis.” *Lancet Planet Health* 5 (3): e135–44.
- Government of Ireland. 2020. “Department of Health and HSE launch new phase of COVID-19 Communications Campaign.” Accessed July 23, 2021. <https://www.gov.ie/en/press-release/1fb5d-department-of-health-and-hse-launch-new-phase-of-covid-19-communications-campaign/>.
- Guenther, Lisa. 2013. *Solitary Confinement: Social Death and Its Afterlives*. Minneapolis: University of Minnesota Press.
- Han, Emeline, Melisa Mei Jin Tan, Eva Turk, Devi Sridhar, Gabriel M. Leung, Kenji Shibuya, Nima Asgari, Juhwan Oh, Alberto L. García-Basteiro, Johanna Hanefeld, Alex R. Cook, Li Yang Hsu, Yik Ying Teo, David Heymann, Helen Clark, Martin McKee, and Helena Legido-Quigley. 2020. “Lessons Learnt from Easing COVID-19 Restrictions: An Analysis of Countries and Regions in Asia Pacific and Europe.” *Lancet*. 396 (10261): 1525–34.
- Hall, Edward. T. (1966) 1990. *The Hidden Dimension*. New York: Anchor Books.
- Heinämaa, Sara. 2015. “Anonymity and Personhood: Merleau-Ponty’s Account of the Subject of Perception.” *Continental Philosophy Review* 48 (2): 123–42.
- Heyes, Cressida. 2020. “The Short and Long of It: A Political Phenomenology of Pandemic Time.” *Philosophy Today* 64 (4): 859–63.
- Howard, Jeremy, Austin Huang, Zhiyuan Li, Zeynep Tufekci, Vladimir Zdimal, Helene-Mari van der Westhuizen, Arne von Delft, Amy Price, Lex Fridman, Lei-Han Tang, Viola Tang, Gregory L. Watson, Christina E. Bax, Reshama Shaikh, Frederik Questier, Danny Hernandez, Larry F. Chu, Christina M. Ramirez, and Anne W. Rimoin. 2021. “An Evidence Review of Face Masks Against COVID-19.” *Proceedings of the National Academy of Sciences of the United State of America* 118 (4): e2014564118. <https://doi.org/10.1073/pnas.2014564118>.
- Howell, Whitney. 2015. “Learning and the Development of Meaning: Husserl and Merleau-Ponty on the Temporality of Perception and Habit.” *The Southern Journal of Philosophy* 53 (3): 311–37.
- Husserl, Edmund. 1973a. *Zur Phänomenologie der Intersubjektivität. Texte aus dem Nachlass. Erster Teil (1905-1920)*. Edited by Iso Kern. The Hague: Martinus Nijhoff.
- . 1973b. *Experience and Judgement*. Translated by James Spencer Churchill and Karl Ameriks. Evanston, IL: Northwestern University Press.

- . 1973c. *Zur Phänomenologie der Intersubjektivität. Texte aus dem Nachlass. Zweiter Teil (1921-1928)*. Edited by Iso Kern. The Hague: Martinus Nijhoff.
- . 1989. *Ideas Pertaining to a Pure Phenomenology and to a Phenomenological Philosophy, Second Book. Studies in the Phenomenology of Constitution*. Translated by Richard Rojcewicz and Andre Schuwer. Dordrecht/Boston/London: Kluwer Academic Publishers.
- . 2001. *Analyses Concerning Passive and Active Synthesis: Lectures on Transcendental Logic*. Translated by Anthony J. Steinbock. Dordrecht: Kluwer Academic Publishers.
- . 2006. *The Basic Problems of Phenomenology from the Lectures, Winter Semester, 1910-1911*. Translated by Ingo Farin and James G. Hart. Dordrecht: Springer.
- Kidd, Ian James and Matthew Ratcliffe. 2020. “Welcome to Covidworld.” *The Critic*. Accessed July 22, 2021. <https://thecritic.co.uk/issues/november-2020/welcome-to-covidworld/>
- Levinas, Emmanuel. 1969. *Totality and Infinity: An Essay on Exteriority*. Translated by Alphonso Lingus. Pittsburgh, PA: Duquesne University Press.
- van Mazijk, Corijn. 2016. “Kant and Husserl on the Contents of Perception.” *The Southern Journal of Philosophy* 54 (2): 267-87.
- Merleau-Ponty, Maurice. 1962. *Phenomenology of Perception*. Translated by Colin Smith. London & New York: Routledge.
- . 2002. *Phenomenology of Perception*. Translated by Colin Smith. Hove: Psychology Press.
- . 2012. *Phenomenology of Perception*. Translated by Donald A. Landes. London and New York: Routledge.
- Moran, Dermot. 2011. “Edmund Husserl’s Phenomenology of Habituality and Habitus.” *Journal of the British Society of Phenomenology* 42 (1): 53-77.
- . 2014. “‘The Ego as Substrate of Habitualities’: Edmund Husserl’s Phenomenology of the Habitual Self.” *Phenomenology and Mind* 6: 24–39.
- Murphy, Ann V. 2012. *Violence and the Philosophical Imaginary*. New York: SUNY Press.
- Murphy, Peter. 2020. *COVID-19: Proportionality, Public Policy and Social Distance*. Singapore: Palgrave.
- Ngo, Helen. 2016. “Racist Habits: A Phenomenological Analysis of Racism and the Habitual Body.” *Philosophy and Social Criticism* 42 (9): 847-72.

- Office of National Statistics. n.d. "Population Estimates." Accessed March 20, 2021. <https://www.ons.gov.uk/peoplepopulationandcommunity/populationandmigration/populationestimates>.
- Oliu-Barton, Miquel, Bary S. R. Pradelski, Philippe Aghion, Patrick Artus, Ilona Kickbusch, Jeffrey V. Lazarus, Devi Sridhar, and Samantha Vanderslott. 2021. "SARS-CoV-2 Elimination, Not Mitigation, Creates Best Outcomes for Health, the Economy, and Civil Liberties." *The Lancet* 397 (10291): 2234-36.
- One World Nations Online. n.d. "Korea (South Korea) – Hanguk." Accessed March 22, 2021. https://www.nationsonline.org/oneworld/korea_south.htm.
- Petherbridge, Danielle. 2017. "Racializing Perception and the Phenomenology of Invisibility." In *Body/Self/Other: The Phenomenology of Social Encounters*, edited by Luna Dolezal and Danielle Petherbridge, 103-32. Albany: SUNY Press.
- . 2022. "Habit, Attention and Affection: Husserlian Inflections." In *Empathy, Intersubjectivity, and the Social World: The Continued Relevance of Phenomenology, Essays in Honour of Dermot Moran*, edited by Anna Bortolan and Elisa Magri. Berlin: De Gruyter.
- Pollak, Sorcha. 2020. "Gardaí Investigate After Woman Pushed Into Royal Canal Following Alleged Racial Abuse." *The Irish Times*. August 15. Accessed July 23, 2021. <https://www.irishtimes.com/news/crime-and-law/garda%C3%AD-investigate-after-woman-pushed-into-royal-canal-following-alleged-racial-abuse-1.4331416>.
- Quann, Jack. 2020. "Coronavirus: New Campaign Reminds People to Wear Masks." *NewsTalk*. August 06. Accessed December 20, 2021.
- Sánchez, Carlos Alberto. 2021. "Wearing a Mask Makes us Face Our Own Morality." *Latino Rebels*. Accessed January 27, 2021. <https://www.latinorebels.com/2021/01/27/wearingamask/>.
- Steinbock, Anthony J. 2004. "Affection and Attention: On the Phenomenology of Becoming Aware." *Continental Philosophy Review* 37 (1): 21–43.
- Stuart, Robyn M., Romesh G. Abeysuriya, Cliff C. Kerr, Dina Mistry, Dan J. Klein, Richard T. Gray, Margaret Hellard, and Nick Scott. 2021. "Role of Masks, Testing and Contact Tracing in Preventing COVID-19 Resurgences: A Case Study from New South Wales, Australia." *BMJ Open* 11 (4): e045941. <https://doi.org/10.1136/bmjopen-2020-045941>.
- Sun Smart New Zealand. n.d. "Be SunSmart." Accessed July 23, 2021. <https://www.sunsmart.org.nz/be-sunsmart>.

- Walby, Sylvia. 2021. "The COVID Pandemic and Social Theory: Social Democracy and Public Health Crisis." *European Journal of Social Theory* 24 (1): 22-43.
- Wehrle, Maren. 2015. "Feelings as the Motor of Perception? The Essential Role of Interest for Intentionality." *Husserl Studies* 31: 45–64.
- . 2016. "Normative Embodiment. The Role of the Body in Foucault's Genealogy. A Phenomenological Re-reading." *Journal of the British Society for Phenomenology* 47 (1): 56-71.
- . 2018. "There is a Crack in Everything. Fragile Normality: Husserl's Account of Normality Revisited." *Phainomenon* 28: 49-75.
- World Health Organisation. n.d. "COVID-19 Explorer." Accessed July 23, 2021. <https://worldhealthorg.shinyapps.io/covid/>.
- World Population Review. n.d. "Ireland Population 2021 (Live)." Accessed March 22, 2021. <https://worldpopulationreview.com/countries/ireland-population>.
- Yancy, George. 2008. *Black Bodies, White Gazes: The Continuing Significance of Race*. Lanham, MD & New York: Rowman and Littlefield Publishers.
- Yang, Samuel. 2020. "Video Shows Chinese Woman Being Racially Attacked in Melbourne Over Coronavirus." *ABC News*. May 6. Accessed July 23, 2021. <https://www.abc.net.au/news/2020-05-06/coronavirus-woman-racist-attack-in-melbourne/12216854?nw=0>.
- Young, Iris Marion. 1980. "Throwing like a Girl: A Phenomenology of Feminine Body Comportment Motility and Spatiality." *Human Studies* 3 (2): 137-56.

DISRUPTED INTERCORPOREALITY AND EMBODIEDNESS IN DEMENTIA CARE DURING THE COVID-19 CRISIS

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During the COVID-19 pandemic, intersubjective experience of *being-in-the-world* has altered; *being-with* has turned, at least in part, into *being-apart*, *being-masked*, or *being-isolated*. The collateral effects of the severe acute respiratory syndrome coronavirus (SARS-CoV) on our lived experiences have confronted us with our fundamentally social and existentially shared nature, since being together can no longer be taken for granted. Sociability has been redefined in terms of “social distancing” and imposed physical distance, with this becoming the “new normal.”¹

In Western societies, health systems tend to be based on principles such as “economies of scale” or “curing the symptom instead of the cause.” Illnesses are considered foremost on a biomedical and individual level, rather than considering social and political context. Both COVID-19 and dementia challenge our social understanding of illness and embodiment with respect to solidarity and sociability. A more widespread understanding of dementia as a culturally and socially shaped illness is needed to better illuminate perceptions of, experiences of, and responses to people with dementia and dementia care.² As Dolezal and Petherbridge (2017) put it, social injustices and inequalities are not abstractions played out in the realm of law or politics; rather, they are matters that impinge on our embodied lives and our lived relations with others (2). In times of social isolation, interrupted and alienated bodily communication, the disruption of care, and questions of triage, this statement is truer than ever. By exploring the entanglement of lived experiences that frame the “new

¹ Sociability, understood as interaction through which solitariness becomes togetherness, has largely been explored without reference to bodily sources of agency. For an expanded discussion on sociability in dementia, including embodied selfhood as a source of interactive practices, see Kontos (2012). In a recent WHO report (2018), dementia is defined as a syndrome of cognitive impairment that affects memory, cognitive abilities, and behavior, and that significantly interferes with a person’s ability to perform daily activities. Alzheimer’s disease is the most common form of dementia, accounting for approximately 60-70% of cases.

² For phenomenological descriptions and empirical findings of dignified dementia care, see Kontos (2011; 2012; 2017), Odzakovic (2021), Leibing and Lawrence (2006), or Dzwiza-Ohlsen (2021).

normal” under social distancing policies, we can understand how intersubjective and intercorporeal relations are simultaneously constitutive of and constituted by subjects and forms of sociality. As much as social distance and mask-wearing offer physical protection against spreading the virus and thus have strong ethical justification, the very same kind of social and spatial distancing undermines certain requirements and demands of care, i.e., being touched and cared for by another person. This kind of distance affects human dignity in differential and arbitrary ways.³ With the risk of infection, disease, death, and resulting post-traumatic experiences, COVID-19 has affected our lives painfully, while dementia remains a major global health concern.⁴ Both of these widespread illnesses contradict and challenge our view of a stable and linear concepts of health, safety, and advanced medicine.

In this paper, I address the effects of social distancing from a critical phenomenological perspective—both with respect to our embodied lived experience and interpersonal dementia care. I also explore changes relating to COVID-19 in the broader structures and discursive practices that shape our perceptual and social frameworks, which have increased and intensified senses of isolation and disembodiment.

The paper is divided into four parts. The first focuses on the problem of marginalization and disembodiment, addressing the issue of social distancing in dementia care homes. The second addresses the social and embodied nature of the self. The third focuses on intercorporeal resonance and therapies which could alternatively address the intersubjective and multisensory dimensions of embodied being-in-the-world. The fourth reflects on our senses of self during illness in general and dementia in particular. In line with Carel’s (2012) *Phenomenology of Illness* and Kontos’ (2011; 2017) concept of an embodied and relational self, I propose overall a reading of illness not as a mere sense of loss or deficit but as a sense of embodied selfhood that corresponds to an existential feeling—even if this means feeling fragmented or partially disembodied.

My analysis resonates with a recent shift in dementia research from a focus on the individual’s loss of abilities to how individuals can use their remaining capabilities in joint activities. For instance, in her phenomenological analysis of joint musical activity in dementia care, Zeiler (2014) defends an intercorporeal understanding of personhood against the prevailing Western conception of a cognition-oriented being-in-the-world. This

³ A distinct clarification is needed as to whether protection and care may restrict the dignity of a given person. Addressing this issue in more detail, however, would go beyond the scope of this paper. We already find an ambiguous formulation in the German phrase “die Würde des Menschen ist unantastbar” (translated as “the dignity of the human being is inviolable”). *Unantastbar* means “not to be touched (upon)” in the sense that someone’s identity cannot be harmed or questioned, and this could be understood also in relation to the body. Ironically, this is precisely what has played out in the care context during COVID-19, in locked care homes where even close relatives were denied access and where necessary protective measures such as masks and gloves have prevented and complicated caring touch between individuals. In this context, one should not forget the extent to which care practitioners and relatives faced a serious ethical dilemma in interpreting how to best take care of people with dementia, since social distancing and embodied responses to existential needs were, at this point, options that were at odds with one another.

⁴ See Kontos (2012) and a report by the WHO (2018).

latter view refuses the importance of pre-reflective social awareness in constituting parts of the self with others and thus cannot appreciate the supportive potential of therapeutic atmospheres in care encounters. Joint musical activities not only evoke philosophical questions regarding bodily dimensions of social cognition but also enable people with dementia to engage meaningfully in their lifeworld (Fuchs and De Jaeger 2009; Fuchs and Koch 2014). While dementia, without a doubt, involves thoroughgoing changes to a person's situation and how her bodily subjectivity is lived and experienced, these changes do not imply that the person is no longer situated in relation to her surroundings or no longer experiences her own embodiment and situation. Nonetheless, many traditional and cognitivist conceptions of personhood often fail to acknowledge the role of embodiment.⁵ By contrast, Lindeman (2014) argues that if we consider personhood as a social practice, others can sustain us in personhood when we can no longer engage socially without support from others. The real “tragedy of Alzheimer's” is therefore not that dementia deprives people of their personhood, but that society is morally responsible for “holding them in personhood”—and often fails to do so. By questioning a strict one-body-one-person logic, Zeiler (2017) provides a philosophical basis for this idea that others can hold us in personhood. She thereby offers an alternative conception of personhood from within the tradition of phenomenology of the body. Thus, in a phenomenological framework, a loss of cognitive and other bodily functions does not automatically lead to a disappearance of the person. Instead, the person is understood in terms of their lived embodiment, situated in a world, and interrelated with others.

For the reasons stated above, considering the social distancing measures during the COVID-19 pandemic, questions about the constitution of our shared incorporeality are more pertinent than ever. Just as important is the question as to what ethical obligations are implied by our embodied relationality to ensure humane and person-centered dementia care. Attending to personhood is an important effort in recovering the strengths and potential of the person with Alzheimer's Disease (AD). This approach helps to counterbalance theoretical focus on cognition and neurological changes in the brain, which has dominated the dementia discourse for a long time. According to Leibing and Lawrence (2006), these different approaches—focused alternately on holistic personhood and on abstracted cognition—elicit very different responses from people with AD in practice. These different types of bodily responses will be addressed in this paper.

⁵ Fuchs (2020), Tewes (2021), and Kontos et al. (2017) argue against rationalist Cartesian assumptions of a dualistic nature of the person that traditionally account for a separation between body and mind. In rationalist or cognitivist views, the person's body is regarded as the mere carrier of a brain, which is an organ that produces and processes only mental states. A person's identity only extends as far as their proper memory. Relatedly, the cognitive theory of personal identity is characterized by psychological continuity, a capacity for thought and memory, and the ability to make rational decisions. Under this premise, dementia threatens personhood as soon as a person with dementia can no longer remember previous experiences (Fuchs 2020, 49). A cognitivist mindset therefore contributes to the subordination of the body in analysis. What is neglected and therefore critical here is the importance of pre-reflective bodily processes of perception, which are formative of our experiences and constitute the identity of the self.

I. MARGINALIZATION AND DISEMBODIMENT IN DEMENTIA CARE

The phenomenon of “social distancing” can be regarded critically in order to examine relations such as proximity and distance, self and other, body and mind, and nature and culture. If a relatively healthy and fit person can suffer as a result of social distancing requirements, then it is not very hard to imagine that they could negatively affect someone already experiencing illness.

In the context of dementia care, the bodily and expressive dimensions of communication are of utmost importance. Social distancing, however, undermines these aspects severely. Wearing facemasks affects intersubjective understanding and participatory sense-making, and not just in clinical and care environments. So far, a small number of representative studies have shown how difficult it is for people with dementia in long-term care facilities to adhere to the new health and social policies. In qualitative studies, Brown et al. (2020) and Wang et al. (2020), as well as Geyer et al. (2020), emphasize that the measures implemented to combat the pandemic have far-reaching consequences for the everyday lives of people with dementia and their carers. Brown et al. (2020) describe the negative effects caused by limited or suspended care interaction as follows:

Common non-pharmacologic interventions for ADRD in general, and BPSD in particular, involve social and physical contact such as social groups, exercise groups, and pet therapy. A limitation on resources and a need for physical distancing will not merely suspend these interventions, it will also result in increased isolation, a lack of physical exercise, decreased social engagement, and a suspension of purposeful activity. While confined at home, many people are now using technology to socialize and even exercise in group; individuals with ADRD may not be able to use electronic tools and software. (714)⁶

The disruption of a structured daily routine due to the closure of day care facilities and treatment—such as singing groups or physiotherapy services—as well as temporary bans on admission to nursing homes, increase stressful experiences for people with dementia, since this social contact provides a sense of regularity and security. At the same time, it is difficult for people with dementia to understand the necessity of wearing masks or keeping a distance and to adhere to them accordingly, which in turn increases the risk of infection. Of course, the effects and consequences of the social distancing requirements vary in certain degrees—for example, these will be experienced differently in institutionalized long-term care homes compared to the context of care provided by family at home. In many cases, there is a mixture of these two care situations. That is, in the mid-stages of dementia, people will likely go to day care facilities to meet other people with dementia and get

⁶ ADRD stands for Alzheimer’s Disease and Related Disorders whereas BPSD stands for Behavioural and Psychological Symptoms of Dementia, which include emotional, perceptual, and behavioral disturbances that are similar to those seen in psychiatric disorders.

involved in shared activities, such as singing, drawing, eating together, and the like. Jiloha (2020) and Brown et al. (2020) indicate that older people with cognitive impairment, such as dementia, are likely to suffer increased symptoms of anxiety, agitation, and anger as a result of social distancing. Consequently, they withdraw more from their habitual lifeworld interactions and engagement. These studies suggest how protection of older people from COVID-19 can, in fact, further isolate and marginalize them. Such social constraints could potentially compound cognitive impairment, creating a vicious circle. All this raises serious questions about how the measures put in place to protect those most at risk are also harming these people's overall quality of life.⁷

Moreover, personal protective equipment (PPE) in general, and face masks in particular, can and should be seen as having caring intentions, in that they aim to protect others from droplets and sources of infection from the wearer. However, they are not unproblematic in the context of care. For instance, people with hearing impairments have called for transparent masks to be made more readily available, since the impossibility of lip-reading through a mask has created exclusionary communication difficulties. PPE also veils facial features and expressions that play a significant role in expressing emotion and forming relationships between people. In fact, Rushton and Edvardsson (2020) describe depersonalization as a risk of face masks and PPE due to the reduced visual cues relating to subjectivity and identity.

Kitwood's (1997) work is relevant here, which argues that a "malignant" social context can create a vicious circle of cognitive and bodily deterioration for someone with dementia. Where social context is "benign," neurological impairment can be mitigated by positive interaction, such that it becomes possible for the person with dementia to make sense of herself and her surrounding world as much as possible, and thus retain a sense of well-being, self, and personhood. A "malignant" social context (e.g., an isolating or monotonous one) triggers stress and might contribute to structural changes in the brain and behavior, while a "benign" social context—coupled with an enriched environment—might even facilitate some regeneration (WHO 2018; Odzakovic et al. 2021). In Kitwood's model, the central implication is the need for high-quality interpersonal care that affirms personhood. At the basis of this person-centered approach to care, there are four key aspects: 1) valuing people with dementia and those who care for them, 2) treating people as individuals, 3) looking at the world from the perspective of the person with dementia, and 4) providing a positive social environment. The current pandemic politics of care for people with dementia is marked by isolation and distance, which seem at odds with Kitwood's recommendations. So how can the risk of depersonalization be counteracted? A possible answer is given by Rushton and Edvardsson (2020):

As nurses, we may now need to increase our attention to how to convey caring actions as well as caring expressions of familiarity, compassion, welcoming, happiness and care more with our eyes, and in other embodied ways beyond the facial. Reflective and purposeful nursing presence and

⁷ For a controversial discussion of the COVID-19 measurement implications, see Kidd and Ratcliffe (2020).

use of touch may be a strategy to counteract depersonalization, despite some of the intuitive and physical barriers to touch introduced by PPE. (2)

It seems that the COVID-19 crisis might prompt reflection on a much-needed paradigm shift, potentially integrating aspects of a phenomenological view of the body as the foundation of our lived experiences and as the means of expressivity and communication in the care process.

II. SOCIAL AND EMBODIED PERSONHOOD IN DEMENTIA

Against theories of a progressive loss of the self in people with dementia, several scholars—for instance, Kitwood (1990), Kontos (2017), and Fuchs (2020)—have argued that the selfhood of dementia patients is and can be preserved. Hughes et al. (2006), for instance, propose that it is possible to recognize a narrative self in dementia patients, even though disturbances to explicit (autobiographical and semantic) memory can undermine the possibility of these people relating a self. As such, phenomenological descriptions, together with the results of more recent empirical research on self-experience in dementia patients, allow us to consider how loss of memory affects the reflective layer of the autobiographical or narrative self.⁸ While largely accepting the notion of a basic layer of pre-reflective self-awareness, Summa (2014, 20), Kontos (2012), and others link self-narratives strictly to participation in an intersubjectively shared contexts of meaning. They suggest that other people, by integrating their own narratives with the life history of the dementia patient, may help to keep the patient’s narrative and autobiographical self alive.⁹ The question of how therapeutic encounters can access this self is thus highly important for empirical research and philosophical investigation.

The ambiguous conception of personhood in dementia is addressed by a wide range of authors (Hydén et al. 2014; Kontos 2012; Summa 2014; Snyder 2006; Tewes 2021; Wray 2020). Many of them argue that personhood is constituted in social practices. Such a view accounts for the bodily expression of the feelings, thoughts, desires, and intentions that constitute a human personality, recognized by others, through which a person responds to situations they encounter. Käll (2018), for instance, discusses the case of Auguste Deter, a

⁸ With reference to Summa (2014), Fuchs (2018), and Zahavi’s (2017) descriptions of the self in dementia, we might conclude that, in ADRD, there is limited access to explicit and reflective knowledge of spatio-temporal and social situations. That is why, despite the fact that minimal situational orientation is preserved in ADRD—via the “situational body-memory” and a pre-reflective “perspectival ownership”—persons with ADRD find it increasingly difficult to mentally transcend their current situation and integrate contextual information such as addresses, dates, weekdays, or names (Fuchs 2018; Zahavi 2017; Dzwiza-Ohlsen 2021).

⁹ For critical remarks on Zahavi’s notion of the “minimal self” (2017), see Summa (2014) and De Monticelli (2020). Unlike Zahavi’s minimal self, which refers to basic layers of pre-reflective experiences made by the self, these authors present a more nuanced theory of selfhood in which the pre-reflective self amounts to an integral and substantive part of a “narrative self.”

51-year-old known for having the very first diagnosed case of dementia (Alois Alzheimer diagnosed her in 1901). She was unable to remember her own name and explained, “I have, so to speak, lost myself.” This should not be considered testimony of simple loss of selfhood. What makes this self-observation remarkable and valuable, according to Käll (2018), is that it precisely demonstrates a “presence of self, experiencing the loss of her own self.” It is an account of a “unique and irreducible subjective first-person perspective on the world and on her own self-experience of losing herself” (22). Ironically, in Western culture, many illnesses are conceptualized as losses of selfhood, which leads to depersonalization, devaluation, and inhibition of agency and being-in-the-world. The experience of losing oneself, while remaining a self who is experiencing that loss, requires other ways of conceptualizing loss as such. It is precisely a phenomenology of embodied subjectivity and phenomenology of illness that can help us to make sense of loss not primarily in quantifiable terms of reduction, but instead in qualitative terms of transformative experience.

In *Phenomenology of Illness* (2012), Carel advises us that all disorders—acute, somatic, and mental; congenital or acquired—give rise to a change in one’s body and world. When studied phenomenologically, it is therefore no surprise that mental disorders, which may seem to affect the mind rather than the body, reveal substantial changes to one’s sense of embodiment, bodily possibilities, and bodily feelings (74). In Carel’s phenomenological account, she refers to Toomb’s (1972) conception of illness as states of losses. According to Toombs, illness disrupts the fundamental features of embodiment, which would be: “being in the world, bodily intentionality, primary meaning, contextual organization, body image, and gestural display” (72). Consequently, illness is experienced as a chaotic disturbance and a sense of disorder (Carel 2012, 45).

In the following I would like to emphasize that this picture, while not wrong, is one-sided; Toombs’ reading of illness as loss needs an extension to emphasize a person’s positive capacities. Such a complementary view would shift the focus from a totally pathological embodied being to a relatively capable embodied being who shares a sense of being in the world with others—something which Fuchs and De Jaeger (2009) have proposed, from an enactivist perspective, as “participatory sense-making.” Instead of reading illness merely as a series of losses, I suggest we should seek to understand the existential feelings associated with loss as potentially reducing senses of disembodiment and disorientation. This could facilitate more acceptance and tolerance for experiences such as feeling fragmented, uncertain, limited, unstable, or alienated. In the encounter with the other we should consider that:

- (1) loss of experienced wholeness creates a sense of being fragmented,
- (2) loss of experienced certainty creates a sense of uncertainty,
- (3) loss of experienced control creates senses of contingency and limitation,
- (4) loss of experienced freedom creates a sense of limitation, and a
- (5) loss of the familiar world creates senses of instability and alienation.

If the self is not an atomistic entity with clearly defined boundaries, a loss of self cannot be thought in terms of a simple quantitative subtraction from an original whole (Käll 2018, 24). Instead, loss may be regarded as resulting in a qualitative restructuring of the self, so that the self after loss is qualitatively presented in a different way. In this sense, having undergone a life-changing experience during the COVID-19 pandemic, we could normalize the aforementioned existential feelings as simply part of our existence, regardless of whether we experience illness directly or indirectly. This view acknowledges health or illness as a process of bodily transformation, i.e., healthy and ill bodies are on a continuum. Alternatively, we might think about the healthy and ill body as discontinuous. Health and illness are distinctive bodily states in which modes of being and experience differ radically (Carel 2012, 58). This latter assumption operates through binary dichotomies and categories of experience instead of providing a more inclusive and processual approach to understanding bodily existence.

A phenomenological or existential perspective acknowledges the importance of bodily perception, as understood and assessed by others, as impacting how the body is subjectively experienced and lived. Husserl and Merleau-Ponty's distinctions between the body-object and the lived body, along with their concept of habitualization, show that the lived body is more than a manifestation of individual intentions.¹⁰ Social and cultural norms and values are inscribed in our bodies. Our concepts of subjectivity, body, and mind in relation to dementia also have ethical and political implications, as do the COVID-19 protective policies in relation to senses of self and agency in dementia. Theories that conceive of dementia as a slow deterioration and disappearance of the person ignore these insights and, I argue, prevent practitioners from being able to respond to people with dementia with respect, dignity, and justice.

III. INTERBODILY RESONANCE AND BODY MEMORY

By examining clinical practice in dementia care, Fuchs, Käll, Kontos, and Zeiler have revealed how subjective capacities are intercorporeally constituted and how such practices ground relational capacity building. Here, intercorporeality opens new possibilities for the ongoing, dynamic configuration of bodily space, which is important for understanding dementia (Käll 2017). Subjectivity can be understood phenomenologically as an expressivity experienced through our intercorporeal relations with others, in which interiority is expressed and disclosed. As we share a corporeal existence with other beings, we have a level of shared knowledge of sensory experience that is both tacit and explicit. Shared corporeal existence gives us an understanding of the experience of others—such as hunger, fear, and sadness—and thereby facilitates connection to the selfhood of another person.

¹⁰ This distinction goes back to Husserl's (1989) *Ideas* in which he differentiates between the sensible body in the sense of a *Leib* and the physical body in the sense of *Körper* (240). In *Phenomenology of Perception*, Merleau-Ponty (1962), focuses further on the lived body (*Leibkörper*) and introduces, for instance, the concept of motor intentionality in order to emphasize the intertwinement of body and mind.

Thus, intercorporeal capabilities do not exist outside of specific interactions and shared space.

Fuchs (2018) emphasizes that the life story of a human being manifests itself in their body memory, and he presents a phenomenological understanding of the lived body as situated in a specific lifeworld. Body memory is derived through habitualizations that can be differentiated as *procedural*, *situational*, and *intercorporeal*.¹¹ If body memories are reactivated in specific ways, they make autobiographical aspects of life history available that are no longer accessible as explicit memory. Body memory is therefore an implicit form of memory and pre-reflective capacity that is maintained in dementia until the latest stages (Summa 2014). This is why Fuchs speaks of a basic self-experience in dementia: we have always been familiar with ourselves, and this self-familiarity is something that is felt physically, rather than explicitly known (50). In other words, the knowledge of the “self-as object” is preceded by the experience of the “self-as-subject,” which is a continuous pre-reflective self-experience that does not have to be made explicit or put into words. For the vast majority of our everyday lives we are not made aware of who we are, do not think about ourselves, and do not have to call up autobiographical memories in order to be self-evident and present. On the one hand, “possible access to that knowledge for our narrative identity” seems important; on the other hand, “self-being in a fundamental sense . . . is not bound to biographical memory or knowledge of one’s own person.” Basic self-experience is therefore “a characteristic of the continuous stream of consciousness itself . . . which ultimately represents the subjective side of the life process itself and does not require a reflexive form of self-identification” (Fuchs 2020, 51, author’s translation). According to Fuchs, it is precisely this self-experience that is maintained even in the late stages of dementia.

On this view, in every social encounter, two features of embodied affectivity become intertwined and thereby continuously modify each person’s affective affordances and resonance. In fact, research about infants demonstrates how the mutual bodily resonance of facial, gestural, and vocal expression engenders our primary affective attunement to others. Such processes of embodied interaffectivity are of major importance for psychiatry and psychotherapeutic interactions and are often addressed in embodied music and dance therapies (Fuchs and Koch 2014). Interestingly, the emphasis on the pre-reflective, atmospheric dimension of such encounters is important, as people with advanced dementia stages are particularly susceptible to atmospheres (Sonntag 2013). This susceptibility is due to their dwindling ability to shape their own environment or to distance themselves cognitively (especially from atmospheric effects). Their affective focus on physical sensations means that people with dementia often depend on the caring attention of accompanying persons. However, this also enables them to rediscover elementary aspects of human lived experience.

In these social and therapeutic encounters, we often find the double effect of moving and being moved, similar to Merleau-Ponty’s concept of intercorporeality. A bodily

¹¹ Fuchs refers to Husserl’s concepts of *habitus* and *lived body*. In Husserl’s (1989) work, the lived body is the most familiar “organ of the will” that we use from our early childhood to learn and to evolve (153).

organism responds to the stimuli of the environment through resonance in the body or by “tuning into” them. Merleau-Ponty (1962) speaks here of a “pairing of bodies” in the “attunement of their intentions” as a “reference to a single sensual world in which all can participate” (295).

One example of such an encounter is provided by a filmed validation therapy session between the 87-year old Gladys Wilson, diagnosed with AD, and her therapist Naomi Feil.¹² In this session, we can witness how both Gladys and Naomi “create a shared space of dynamic intercorporeal engagement” (Zeiler 2014). By expressing themselves through posture, touch, eye contact, and movement, this shared space is created through intercorporeal capabilities such as singing or engaging in a rhythm. This is one particular example of intercorporeal and interaffective processes in therapy, which Fuchs and Koch (2014) call *interbodily resonance*. The film thus presents us with a moment of transition during which a highly asymmetrical relation turns into a symmetrically resonating one, exemplifying participatory sense-making principles and meaningful affordances created by bodily responsiveness through intercorporeality (De Jaeger and Fuchs, 2009). Consequently, such practice should be understood as a relational practice or a form of *responsive therapy* in dementia care, in particular highlighting how the capabilities of dementia patients are fostered and encouraged intercorporeally (Waldenfels 2019).¹³ Such practices of relational capacity building powerfully show how subjective capacities are intercorporeal.

IV: THE RELEVANCE OF SOCIAL TOUCH IN EMBODIED PERCEPTION AND DEMENTIA CARE

Philosophers such as Ratcliffe (2018), Kearney (2020), and Paterson (2020) emphasize the importance of touch for theories of embodied perception and its meaning in interpersonal engagement.¹⁴ According to Ratcliffe (2018), touch is “an effective exemplar for enactivism because it depends upon bodily activity to a greater *extent* than the other senses and/or in a distinctive *way*.” Bearing this in mind, he later claims that “one might consider various claims that touch is the most fundamental sense, the only sense that is essential to the having

¹² A link to the video can be found in the references list (Memory Bridge 2009).

¹³ Bernhard Waldenfels’ responsive phenomenology is a rethinking of the self by highlighting the experience of the other. Since a self is generated due to its response to the demand of the other in the broadest sense, the self and the other co-originate in this responsive process and bring to light the significance of the sentient or lived body of a self. In therapeutic dialogue or interaction this interbodily co-constitution is particularly emphasized. See Käll (2017) or Fuchs (2018, 2020).

¹⁴ According to Käll (2017), this kind of social encounter is based on a constitutive openness and accessibility to the other, which is prefigured in the experience of the “double sensation,” in which the subject has a double experience—for example, when touching one hand with the other. The self becomes self through the interactive engagement with, and bodily presence of, the other. The double sensation as described by Husserl discloses a reversible structure, one that is constitutive of identity and extends to interrelation with others and the world. Husserl (1989) refers to the double-sensation and offers an explication of the relationship between tactile and visible domains in *Ideas II*.

of a body, to the capacity to interact with one's surroundings, to animal being" (Ratcliffe 2018, 2). He argues, however, that there are insufficient grounds for maintaining that touch is somehow "more enactive" or embodied than other senses. I agree with Ratcliffe that touch is not more fundamental than the other senses, or more intimately bound up with bodily nature. It can be said, however, that touch is a highly heterogeneous way of perceiving, and it does not present as a single sense modality. The multimodal nature of touch contributes to its diversity and enrichment of meaning-making in interactive encounters.¹⁵ We know, for example, how important touch is for newborns to thrive and fully develop their communicative and cognitive skills (Aguirre et al. 2019). As Kearney (2020) summarizes:

"Tender touch" alleviates anxiety, bolsters the immune system, lowers blood pressure, helps with sleep and digestion, and wards off colds and infections. It feeds us in body and soul. In short, tactile communication is absolutely vital to our physical and mental wellbeing. (4)

This holds true for everyone but is even more vital for people experiencing a greater degree of dependence in illness. As much as new technologies help us communicate across distance, what they cannot overcome is bodily distance. Interpersonal touch is often communicative, and patterns of communicative tactual interaction with another person can feed into holistic perceptions of that person. It is unclear whether or how the communicative and perceptual functions of touch can be separated (Ratcliffe 2018). In a recent study, Kelly et al. (2020) describe how physicians use touch to share emotions and to demonstrate empathy and presence to patients. Touch is described as embodied empathic communication, in which non-verbal patient cues like facial expressions and body language are carefully interpreted to determine whether touch is appropriate. Since this kind of "social touch" is vital for our embodied perception and self-experience, I argue that it is not simply desirable but essential to maintain touch as part of therapeutic encounters. It may help counter the risks of depersonalization generated by masks and full PPE, as well as the sense of bodily alienation fostered by social isolation.

Among other examples of embodied therapies applied in dementia care, Snoezelen rooms represent a multisensory environment (MSE) that offers varied sensory stimuli and interaction.¹⁶ By means of music, aroma or special light diffusions, a varied sensory

¹⁵ To consider how touch is multimodal, one just has to think of temperature, pressure, or different surface qualities that feed into the sense of touch. Recent research on the so-called "C-tactile fibers" indicates that we experience touch by others in a completely different manner than self-touch (Aguirre et al. 2019). It thus reveals the social nature of touch as being a kind of "social sensitivity," which sustains phenomenological interpretations of touch as a form of interbodily resonance.

¹⁶ The Snoezelen approach was initiated in the Netherlands in the late 1970s. Snoezelen stands for *doezelen* (to doze) and *sniff* (to sniff). It refers to a multisensory therapeutic setting in which environmental and interpersonal affordances offer a space of relaxation and controlled sensory stimulation. It is used in around 75% of nursing homes in the Netherlands. The aim of the intervention is to strike a balance between relaxation and activity in a safe, adapted environment supported by an intermediary.

environment creates a vivid or relaxing atmosphere. As mentioned before, joint activities such as making music or cooking can also support a multisensory experience and create meaningful engagement. The benefits of MSE and Snoezelen for dementia patients suffering from hearing, sight, smell, and taste disorders have been identified in an increasing number of studies in the field of integrated sensory therapy (Fowler 2008), showing improvements in physical and mental health. Sensory, cognitive, and affective stimuli are offered to each client through visual, auditory, tactile, and olfactory modalities and according to their personal choice (Van Weert 2003). The mutual benefits can be described as follows. First, it is easier for the nurses to get in touch with residents, which in turn provokes a positive response. Second, nurses found that residents who exhibit agitation, restlessness, or aggression become calmer and more relaxed through these embodied therapies. There are a number of studies on the effects of multisensory therapy which show a link between intermodal embodied perception and enhanced wellbeing that requires further analysis (Van Weert 2003, Fowler 2008, Nocon 2008). From a phenomenological viewpoint, the Snoezelen or MSE approach implies a potential break with the traditional idea of strict modularity and hierarchy in sense perception. Instead, they emphasize an intermodal, integrated, and pluralistic form of embodied perception. From an embodied and enactive perspective, it would indeed make sense to integrate more natural sensory stimulation into the person's regular environment. To overcome their institutional character, I suggest that care homes should design common and individual spaces with respect to their residents' needs and facilitate their participation in the design. Ideally speaking, they would offer both access to a natural environment—such as a small garden or park—and a space for social, synaesthetic bodily encounters.¹⁷

All this is a far cry from lived realities under COVID-19. Bodily alienation through social distancing and masking has revealed to us the ontological ambiguity of being a body among others and having a body resonating with others (Dolezal 2020). Experiences of the pandemic ought to push philosophers to more seriously consider how the body contextualizes perception, always with awareness of the body as “a being that relates to itself and at the same time withdraws from itself” (Waldenfels 2016, 79, author's translation). Vulnerability and finitude (including limits to our ability to think and imagine otherwise) under COVID-19 call for an ethical response. I argue that awareness of loss and fragmentation of the self, in the ways I have examined in this article, will help practitioners to attend to vulnerability and finitude responsibly as the pandemic evolves. These aspects of selfhood factor into dynamically negotiated states of health and illness in which a lifeworld horizon of the “I can” is central; this insight could help facilitate better understanding of the relation between embodied knowledge, vulnerability, and responsiveness, improving intercorporeal communication processes and making the lifeworld of people with dementia more accessible.¹⁸

¹⁷ Buist et al. (2018) refer to recent examples of innovating dementia care providing green care farms in long-term care settings.

¹⁸ Richard Taylor (2007) eloquently voices his concern at how, as his disease progresses, the ground rules change regarding what he is permitted to do, of what he is considered capable, and how others view and judge him. From his perspective, he is still the same person, just undergoing alarming and difficult

Such an embodied phenomenological approach to dementia and care enables us to take account of how particular practices and habits are reiterated in our lived bodies in an active manner, becoming sedimented embodied habits and forms of perception (Fuchs 2020; Dolezal and Petherbridge 2017). Moreover, the phenomenological approach helps to highlight what happens when these social and cultural embodied practices are suspended before, during, and after the COVID-19 pandemic. Brooker (2007) phrases the existential needs of people living with dementia as follows:

Many people [living with dementia] never get to put on a hat and a coat and outdoor shoes, to go on a bus or to visit the pub, shop or place of worship. These are the activities that people take as part of ordinary life. They help us to maintain our identity and our interest in life in all its variety. People with dementia need this variety as much as anyone else.
(110)

Practitioners should bear in mind that the lived embodiment of a person with dementia is not exclusively pathological. Given that people with dementia continue to explore their lifeworlds through intercorporeality, it is crucial that appropriate responses in dementia care, during the pandemic and afterwards, are sought out.

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challenges. Wray (2020) argues that recognizing difference in *degree* rather than *in kind* makes response-based empathy both possible and appropriate. We could, for instance, start by asking ourselves how we conceptually position people with dementia in the social encounter i.e., as *different in kind* or *different in degree*. Furthermore, by applying *response-based empathy* rather than *self-based empathy*, we gain a better understanding of the person with dementia through her reactions and responses: “We all know what it’s like not to recall what we went upstairs for or where we parked the car. We’ve all realized we couldn’t recall someone’s name. . . . Everyone deserves to be understood and, on the basis of that understanding, treated according to the same social codes. Caring for people different only in *degree* entails creating experiences for them that we would want for ourselves: we look at their situation from the inside.” (212)

REFERENCES

- Aguirre, Marie et al. 2019. “Infants Discriminate the Source of Social Touch at Stroking Speeds Eliciting Maximal Firing Rates in CT-Fibers.” *Developmental Cognitive Neuroscience* 36: 100639. <https://doi.org/10.1016/j.dcn.2019.100639>.
- Brooker, Dawn. 2007. *Person-Centred Dementia Care: Making Services Better*. London: Jessica Kingsley Publisher.
- Brown, Eric et al. 2020. “Anticipating and Mitigating the Impact of the COVID-19 Pandemic on Alzheimer’s Disease and Related Dementias.” *American Journal of Geriatric Psychiatry*. 28 (7): 712-21.
- Buist, Yvette et al. 2018. “Innovating Dementia Care; Implementing Characteristics of Green Care Farms in other Long-term Care Settings.” *International Psychogeriatrics*. 30 (7): 1057-68.
- Carel, Havi. 2020. “Cardiff Annual Lecture - RIP - Havi Carel, ‘Phenomenology of Social Distancing.’” *Royal Institute of Philosophy*. Accessed September 3, 2020. <https://www.youtube.com/watch?v=BT8CPW3b3Cw>.
- Carel, Havi. 2016. *Phenomenology of Illness*. Oxford: Oxford University Press.
- De Monticelli, Roberta. 2020. “The Lesson of Coronavirus: Experiencing Values, Experiencing Oneself.” Presented at the online workshop, “Conversations on values and value experience.” IEA, Paris.
- Diprose, Rosalyn. 2017. “The Body and Political Violence. Between Isolation and Homogenization.” In *Body/Self/Other: The Phenomenology of Social Encounters*, edited by Luna Dolezal and Danielle Petherbridge, 21-45. Albany: SUNY Press
- Dolezal, Luna. 2020. “Intercorporeality and Social Distancing: Phenomenological Reflections.” *The Philosopher* 108: 18-24.
- Dolezal, Luna and Danielle Petherbridge (eds.). 2017. *Body/Self/Other: The Phenomenology of Social Encounters*. Albany: SUNY Press.
- Dzwiza-Ohlsen, Erik Norman. 2021, in press. “Dementia as Social Disorder – A Lifeworld Account,” *Phenomenology and Mind* special issue “Phenomenology of Social Impairments,” edited by Valeria Bizzari, Oren Bader, & Thomas Fuchs.
- Ettlinger Nancy. 2017. “A Relational Approach to an Analytics of Resistance: Towards a Humanity of Care for the Infirm Elderly – A Foucauldian Examination of Possibilities.” *Foucault Studies* 23: 108-40.

- Fowler, Susan. 2008. *Multisensory Rooms and Environments: Controlled Sensory Experiences for People with Profound and Multiple Disabilities*. London: Jessica Kingsley Publishers.
- Fuchs, Thomas. 2018. *Ecology of the Brain: the Phenomenology and Biology of the Embodied Mind*. Oxford: Oxford University Press.
- . 2020. “Embodiment and Personal Identity in Dementia.” *Medicine, Health Care and Philosophy* 23 (4): 665-76.
- Fuchs, Thomas, and Hanne De Jaeger. 2009. “Enactive Intersubjectivity: Participatory Sense-making and Mutual Incorporation.” *Phenomenology and the Cognitive Sciences* 8: 465-86.
- Fuchs, Thomas and Sabine Koch. 2014. “Embodied Affectivity: On Moving and Being Moved.” *Frontiers in Psychology* 5. <https://doi.org/10.3389/fpsyg.2014.00508>.
- Geyer, Jennifer et al. 2020. “Die Lebenssituation von Menschen mit Demenz und pflegenden Angehörigen während der Coronavirus-Pandemie Eine qualitative Studie.” *Pflege*. 33 (4): 189-97. <https://doi.org/10.1024/1012-5302/a000750>.
- Hamilton, Heidi Ehernberger. 2019. *Language, Dementia and Meaning Making. Navigating Challenges of Cognition and Face in Everyday Life*. London: Palgrave Macmillan.
- Hughes, Julian C. (ed.). 2006. *Dementia. Mind, Meaning, and the Person*. Oxford University Press.
- Husserl, Edmund. 1989. *Ideas Pertaining to a Pure Phenomenology and to a Phenomenological Philosophy. Second Book: Studies in the Phenomenology of Constitution*. Translated by Richard Rojcewicz & André Schuwer. Dordrecht: Kluwer.
- Hydén, Lars-Christer and Eleonor Antelius (eds.). 2017. *Living with Dementia. Relations, Responses and Agency in Everyday Life*. London: Palgrave Macmillan.
- Hydén, Lars-Christer, Hilde Lindemann, and Jens Brockmeier. 2014. *Beyond Loss. Dementia, Identity, Personhood*. New York: Oxford University Press.
- Jiloha, R.C. 2020. “COVID-19 and Mental Health.” *Epidemiology International* 5 (1): 7-9.
- Käll, Lisa F. 2017. “Intercorporeal Expression and the Subjectivity of Dementia.” In *Body/Self/Other: The Phenomenology of Social Encounters*, edited by Luna Dolezal, and Danielle Petherbridge, 359-386. Albany: SUNY Press.
- . 2018. “Towards a Phenomenological Conception of the Subjectivity of Dementia.” In *Living with Dementia. Relations, Responses and Agency in Everyday Life*, edited by Lars-Christer Hydén and Eleonor Antelius, 14-28. London: Palgrave Macmillan.

- Kearney, Richard. 2021. *Touch. Recovering Our Most Vital Sense*. New York: Columbia University Press.
- Kearney, Richard and Treanor, Brian. 2015. *Carnal Hermeneutics. From Head to Foot*. New York: Fordham University Press.
- Kelly, Martina et al. 2020. "Being Vulnerable: A Qualitative Inquiry of Physician Touch in Medical Education." *Academic Medicine: Journal of the Association of American Medical Colleges* 95 (12): 1893–99.
- Kidd, Ian and Matthew Ratcliffe. 2020. "Welcome to Covidworld: Trying to understand Covidworld, our new altered reality where accepted norms do not apply." *The Critic*. Accessed July 19, 2021. <https://thecritic.co.uk/issues/november-2020/welcome-to-covidworld/>
- Kitwood, Tom. 1997. *Dementia Reconsidered: The Person Comes First*. New York: Open University Press.
- Koch, Sabine. C., Thomas Fuchs, and Michela Summa. 2012. "Body Memory and Kinesthetic Body Feedback: The Impact of Light versus Strong Movement Qualities on Affect and Cognition." *Memory Studies* 7 (3): 272–84.
- Kontos, Pia C. 2011. "Alzheimer Expressions or Expressions Despite Alzheimer's? Philosophical Reflections on Selfhood and Embodiment." *Interdisciplinary Studies in the Humanities* 4.
- . 2012. "Rethinking Sociability in Long-term Care: An Embodied Dimension of Selfhood." *Dementia: The International Journal of Social Research and Practice* 11 (3): 329-46.
- Kontos, Pia, Karen-Lee Miller, and Alexis P. Kontos. 2017. "Relational Citizenship: Supporting Embodied Selfhood and Relationality in Dementia Care." *Sociology of Health & Illness* 39 (2):182-98.
- Koskinen, Camilla and Lisbet Nyström. 2017. "Hermeneutic Application Research - Finding a Common Understanding and Consensus on Care and Caring." *Scandinavian Journal of Caring Sciences* 31 (1): 175–82.
- Leibing, Annette and Lawrence Cohen. 2006. *Thinking About Dementia. Culture, Loss, and the Anthropology of Senility*. New Brunswick, NY: Rutgers University Press.
- Memory Bridge. 2009. "Gladys Wilson and Naomi Feil." *YouTube*. Accessed July 19, 2021. <https://www.youtube.com/watch?v=guRoWTYfxMs>
- Merleau-Ponty, Maurice. 1962. *Phenomenology of Perception*. Translated by Colin Smith. London: Routledge.

- Merrick, Kate. 2021. "Affective Touch." *Therapy Today* 32 (1): 42–45.
- Nocon, Marc. 2008. "Efficacy of Multi-Sensory Stimulation in Patients with Dementia—A Systematic Review." *European Journal of Integrative Medicine* 1 (23).
- Odzakovic, E., Hellström, I., Nedlund, A. C., & Kullberg, A. 2021. "Health Promotion Initiative: A Dementia-Friendly Local Community in Sweden." *Dementia* 20 (6): 1971-87.
- Paterson, Mark. 2020. *The Senses of Touch. Haptics, Affects, and Technologies*. London: Routledge.
- Petherbridge, Danielle. 2018. "How Do We Respond? Embodied Vulnerability and Forms of Responsiveness." In *New Feminist Perspectives on Embodiment*, edited by Clara Fischer, and Luna Dolezal, 57–79. London: Springer International Publishing.
- . 2019. "Beyond Empathy: Vulnerability, Relationality and Dementia." *International Journal of Philosophical Studies* 27 (2): 307–26.
- Plessner, Helmuth. 1970. *Philosophische Anthropologie*. Frankfurt a. M.: Fischer.
- Ploner-Grissmann, Heidi Maria. 2018. "Therapeutic Touch® - Compassionate Touch for Persons with Dementia: A pilot review." *Journal of Alternative Medicine Research* 10(3): 211-13.
- Ratcliffe, Matthew. 2008. *Feelings of Being. Phenomenology, Psychiatry, and the Sense of Reality*. Oxford: Oxford University Press.
- . 2018. "Perception, Exploration, and the Primacy of Touch." In *The Oxford Handbook of 4E Cognition*, edited by Albert Newen, Leon De Bruin, and Shaun Gallagher, 281-99. Oxford: Oxford University Press.
- Rushton, Carole and David Edvardsson. 2020. "Nursing, Masks, COVID-19 and Change." *Nursing Philosophy*. 00: e12340. <https://doi.org/10.1111/nup.12340>.
- Ryoo, Nayoung et al. 2020. "Coping with Dementia in the Middle of the COVID-19 Pandemic." *Journal of Korean Medical Science* 35: 42 e383. <https://10.3346/jkms.2020.35.e383>.
- Schellhammer, Barbara. 2020. "'Social Distancing'? Proximity and Distance in Crises Situations – a Phenomenological Study of Embodiment." *Zeitschrift für Praktische Philosophie* 7(2): 335–58. <https://doi.org/10.22613/zfpp/7.2.14>.
- Summa, Michela. 2014. "The Disoriented Self: Layers and Dynamics of Self-Experience in Dementia and Schizophrenia." *Phenomenology and the Cognitive Sciences* 13: 477-96.

- Taylor, Richard. 2007. *Alzheimer's from the Inside Out*. Baltimore, MD: Health Professions Press.
- Tewes, Christian. 2021. "Embodied Selfhood and Personal Identity in Dementia." In *Time and Body. Phenomenological and Psychopathological Approaches*, edited by Christian Tewes and Giovanni Stanghellini, 367-89. Cambridge: Cambridge University Press.
- Toombs, S. Kay. 1993. *The Meaning of Illness: A Phenomenological Account of the Different Perspectives of Physician and Patient*. Amsterdam: Kluwer.
- Van Weert, Julia. 2003. *Multi-Sensory Stimulation in 24-hour Dementia Care, Effects of Snoezelen on Residents and Caregivers*. Wageningen: Verlichtingsdienst.
- Waldenfels, Bernhard. 2016. *Grundmotive einer Phänomenologie des Fremden*. Frankfurt a. M.: Suhrkamp.
- . 2019. *Erfahrung, die zur Sprache drängt*. Frankfurt a. M.: Suhrkamp.
- Wang, Huali et al. 2020. "Dementia care during COVID-19." *Lancet*. 11 395 (10231): 1190-91. [https://doi.org/10.1016/S0140-6736\(20\)30755-8](https://doi.org/10.1016/S0140-6736(20)30755-8).
- WHO. 2018. *Towards a Dementia Plan: a WHO Guide*. France.
- Wray, Alison. 2020. *The Dynamics of Dementia Communication*. New York: Oxford University Press.
- Zahavi, Dan. 2017. "Thin, Thinner, Thinnest: Defining the Minimal Self." In *Embodiment, Enaction, and Culture. Investigating the Constitution of the Shared World*, edited by Christoph Durt, Thomas Fuchs, and Christian Tewes, 193-99. Cambridge, MA: Massachusetts Institute of Technology Press.
- Zeiler, Kristin. 2014. "A Philosophical Defense of the Idea that Individuals Can Be Held in Personhood by Others: Intercorporeal Personhood in Dementia Care." *Medicine, Health Care and Philosophy* 17: 131-41.

DIFFERENTIAL EXPERIENCES OF SOCIAL DISTANCING: CONSIDERING ALIENATED EMBODIED COMMUNICATION AND RACISM

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This musing was largely written in Autumn 2020 when social distancing measures were still in effect in the UK.

The COVID-19 pandemic has highlighted existing health inequalities where individuals from socially and economically disadvantaged communities are disproportionately impacted by the virus. Evidence clearly demonstrates that infection and mortality rates are higher for individuals from minority ethnic groups, for those in lower socio-economic communities, and for otherwise marginalized or socially disadvantaged groups (Chowkwanyun and Reed 2020; Weill et al. 2020; Gaynor and Wilson 2020). These groups generally have higher levels of risk factors as a result of “inequalities in exposure to the social determinants of health” where the environments and conditions within which individuals live, work, grow, and age—such as their place of employment, housing, their access to goods and services, access to healthcare, and food scarcity or security—cause inequalities in the development of chronic conditions. These chronic conditions in turn increase the severity of COVID-19 infection (Bambra et al. 2020, 2). It is clear, then, that the virus is differentially impacting various populations and differently situated bodies. However, the differential impact of COVID-19 is not merely centered around infection, illness, and mortality rates. Indeed, as we shall explore in this musing, the public health measures of social distancing—including lockdowns, social isolation, stay-at-home orders, shielding, and behaviour changes that have been introduced to curb the spread of the virus—are, in fact, having a differential impact on the lived experience of individuals in ways that are, again, co-determined by pre-existing social inequalities.

Social distancing has been the primary public health intervention used to mitigate the spread of the novel coronavirus SARS-CoV-2. The central logic behind social distancing measures is to isolate human bodies, thereby breaking the chain of transmission of the virus. Under this logic, human subjects have been rendered biological entities, i.e., physical bodies, that may or may not be carrying the virus. One's social position, gender, ethnicity, race, or health status is not figured in these practices which effectively treat all bodies as equally dangerous (as potential "disease spreaders") and equally vulnerable (as potential "victims"). However, as socially situated subjects embedded in lifeworlds, we are not homogenous, biological entities. Nor are we equally vulnerable. There is ample evidence demonstrating that social distancing public health measures put in place to curtail the spread of the virus, such as lockdowns and quarantines, are in themselves exacerbating social and health inequalities.

Drawing from critical phenomenological literature on embodied experiences of racism, in this musing we explore the striking similarities in the phenomenological experience of the embodied communication of racism, drawing on work from thinkers such as Frantz Fanon, George Yancy, and Helen Ngo, and the new embodied rituals of COVID-19-induced social distancing. In doing so, we demonstrate how conceptual resources from critical phenomenology are useful for elucidating the embodied experiences, along with the politics, of the COVID-19 pandemic. Through engaging with writing from Black and minority ethnic commentators, such as Lisa Braxton, Matthew Vernon, and Lord Simon Wooley, who have described striking similarities between COVID-19 social distancing measures and the routine experiences of racism that are on-going for minorities in white dominant societies, we highlight parallels and similarities in the experiences of social distancing and racism for Black and ethnic minority individuals, and the consequent differential experiential effects of this particular public health measure.¹ Whilst social distancing can be alienating, isolating, and painful for individuals who occupy positions of social privilege, we argue that it will not be experienced in the same manner by those who routinely experience marginalization as a result of racism. Our aim is to reflect on how on-going experiences of stigma, shame, and marginalization can shape how social distancing is registered on an embodied and existential level.

Face-to-face social distancing has dramatically transformed the fabric of embodied social relations for *all* individuals. By disrupting the ordinary flow of embodied social relations, social distancing has created a modified intercorporeal reality, wherein all individuals, regardless of their social position or status, are dislodged from the usual taken-for-granted fabric of embodied social relations. This has "interrupted" and modified the horizons of our lived experience in significant ways (Taylor 2020). We can no longer take

¹ We will use the convention of capitalizing "Black" to denote individuals of African-American and Afro-Caribbean background, where the term "Black" denotes a shared culture and racial identity, rather than just designating a skin colour. While we recognize that this terminology is not unproblematic, it is the convention largely used by the Black writers with whom we are engaging, and we follow their lead with this convention. For more on the use of "black" versus "Black," see Appiah 2020; Laws 2020; Coleman 2020.

for granted the ordinary flow of social and embodied life.² We navigate the world with a heightened self-consciousness of our body and a suspicious wariness of others, leading to reduced positive social contact and a heightened sense of our own bodily vulnerability. The sedimented bodily habits that govern face-to-face social life have morphed to accommodate the new social distancing rituals which now choreograph ordinary activities, such as passing someone in the street, browsing supermarket shelves, meeting a friend, walking through a park, or queuing at the post office.

The taken-for-granted flow that characterizes most of our intercorporeal interactions has, as a result, become an “alienated bodily communication,” constituted through an engagement with another person’s lived body in an alienated manner, regarding or treating them as though they are a potentially “contaminated” biological object or obstacle: *a body* rather than a social subject (Dolezal 2020, 22). And likewise, we experience ourselves being treated in the same manner, as, for instance, “a potential source of infection” rather than a “potential conversational partner” (Carel, Ratcliffe, and Froese 2020, 87). The biologically reductionist perspective orienting our new body idiom means that we give bodies a wide berth regardless of their status or situation. *All* bodies outside of our own household are a potential “threat” and are potentially “contaminated.” In public spaces there is no touching, little eye contact, mutual discomfort, and a hushed and serious atmosphere. A wedge of suspicion has pierced almost every embodied encounter; we are now wary of *all* bodies because of the invisible illness that may be lurking within them. In short, bodily communication is now characterized by a stultifying self-and-other-consciousness within a disconcerting atmosphere of suspicion.

While early phenomenological analyses of social distancing have explored to some extent how “‘normal’ pre-pandemic social and embodied life” contrasts with “the ‘abnormal’ or ‘new normal’ of social distancing and lockdown conditions,” it is striking how a homogeneity of “normal” social embodied interaction underpins many discussions of the disruptive effects of social distancing measures (Carel 2020, 12). In fact, the “interruptions” and “profound changes to our freedom of movement, sense of time, and the sense of trust and certainty in the world,” while no doubt novel for many of us, have long been embodied realities in various forms for others (Sanchez-Taylor 2020; Carel 2020, 12). Indeed, COVID-19-induced face-to-face social distancing is not the first example of an interaction ritual that is dominated by avoidance, fear, and distrust.

The “new” COVID-19-induced socially-distanced intercorporeal reality is a very familiar bodily existence for many people whose bodies are perceived to be suspicious or dangerous as a result of, for example, their race, class, or disability. Indeed, numerous Black writers have argued that the inequalities in how COVID-19 is experienced is “more of the

² Of course, individuals who are immunocompromised may have already been concerned with risks of infection from other bodies and may have been accustomed to practicing social distancing before the COVID-19 pandemic. Hence the “ordinary flow of embodied and social life” for these individuals, along with others who are differently abled for reasons of illness or disability, may be significantly modified or idiosyncratic.

same” and the alienated bodily communication of COVID-19 induced social distancing is “nothing new” (Yancy 2020b; Braxton 2020). In short, being seen as “contaminated” and experiencing the wary avoidance of others may be familiar to people whose bodies are marginalized, stigmatized, or marked out as suspicious or dangerous and whose life experiences, as a result, were already marked by on-going experiences of stigma, shame, and marginalization.

Fanon’s phenomenologically inflected account of anti-Black racism in 1950s France describes precisely this experience. In his classic work, *Black Skin, White Masks*, Fanon writes eloquently of his experience of being a Black body in a “white world” under the legacy of colonial power relations (1970, 78). Rather than experiencing his body as a social subject in the unthinking to-and-fro of embodied relations, Fanon experiences his body primarily through a highly objectified inferiority characterized by alienated intercorporeal communication. He writes:

And then the occasion arose when I had to meet the white man’s eyes. An unfamiliar weight burdened me . . . In the white world the man of colour encounters difficulties in the development of his bodily schema. Consciousness of the body is solely a negating activity. It is a third person consciousness. The body is surrounded by an atmosphere of certain uncertainty . . . A slow composition of my *self* as a body in the middle of the spatial and temporal world . . . I discovered my blackness, my ethnic characteristics; and I was battered down by tom-toms, cannibalism, intellectual deficiency, fetishism, racial defects, slave-ships . . . completely dislocated, unable to be abroad with the other, the white man, who unmercifully imprisoned me, I took myself far off from my own presence . . . and made myself an object . . . My body was given back to me sprawled out, distorted . . . The Negro is an animal, the Negro is bad, the Negro is mean, the Negro is ugly . . . I move slowly in the world . . . I am being dissected under white eyes, the only real eyes. I am *fixed*. . . . Shame. Shame and self-contempt. (78-82)

Fanon’s prose reveals how the Black man’s body is objectified, stereotyped, and judged negatively under the “white man’s eyes,” leading to a persistent negative evaluation of the self characterized by “shame and self-contempt” (78; 82). Instead of being a full social subject, Fanon is “imprisoned” and “fixed” within white social relations, reduced to an “object”; he is not seen as himself, but instead reduced to a series of negative racial stereotypes. Rendered both hypervisible *and* invisible, the racist gaze of “the white man’s eyes” “creates overdetermined perceptions” which are ultimately “de-subjectifying” (Petherbridge 2017, 104-05). Under the racist social order dominated by a belief in white superiority, Fanon’s Black body is marked as contaminated and disgraced; an object to be shunned and avoided.

Fanon’s evocative prose reveals that experiences of racism, marginalization, and stigmatization are communicated and experienced on a bodily level. Not only does the

marginalized subject experience racism through his or her own body, as Fanon's account highlights, racism itself is communicated intercorporeally through bodily communication. Indeed, Fanon (1970) notes that it is through "the movements, the attitudes, the glances of the [white] others" that he is "fixed" (77). Hence, it is, in part, on the level of intercorporeality that racism is communicated in face-to-face interactions. As George Yancy (2008) writes, "[d]eep-seated racist emotive responses may form part of the white bodily repertoire, which has become calcified through quotidian modes of bodily transaction in a racial and racist world" (47). Helen Ngo (2016) extends Yancy's insights arguing that racism "is undergirded by a habitual bodily orientation . . . it is more deeply embedded in our bodily habits of movement, gesture, perception, and orientation" (848).

Ngo highlights the "broad class of gestures" associated with embodied communications of racism, many of which enact a type of social distancing (853). In this she includes: "the flinches, the tensing, the moving away, the panic" (854) and actions like "locking car doors, suspicious surveilling in shops . . . pointedly crossing the street" (853-54). These gestures "reflect the comportment or mode of responding that has 'sedimented' in and been taken up by the body, supported by deeply embedded discourses and histories of racist praxis" (855). In other words, these bodily gestures and movements are both formed and informed by the white person's racist preconceptions, shaped in turn by the dominant racist norms which infuse the dominant logics of social interaction.

Yancy (2008) offers an evocative account of the bodily communication involved in racism in his article "Elevators, Social Spaces and Racism," an experience which he terms "the Elevator Effect":

Well-dressed, I enter an elevator where a white woman waits to reach her floor. She "sees" my Black body . . . I walk into the elevator and she feels apprehension. Her body shifts nervously and her heart beats more quickly as she clutches her purse more closely to her. She feels anxiety in the pit of her stomach . . . Her palms become clammy. She feels herself on the precipice of taking flight, the desperation to flee. There is panic, there is difficulty swallowing, and there is the slight trembling of her white torso, dry mouth, nausea. (846-47)

With striking parallels to Fanon's account, Yancy's intercorporeal encounter with this white woman is dominated by an overdetermination of what his body signifies. It is, as Yancy indicates, already "supersaturated" (846) with negative meanings that are circulating liberally in their shared socio-cultural milieu: "I feel that in [her] eyes I am this indistinguishable, amorphous, black seething mass, a token of danger, a threat, a rapist, a criminal, a burden, a rapacious animal incapable of delayed gratification" (844). As such, Yancy concludes, "the woman in the elevator does not really 'see' me" (847), instead she sees a body which is first and foremost "a threat" to her own body, which is positioned as "vulnerable" (847; 846). What Yancy describes here is alienated bodily communication, where instead of experiencing himself as being regarded as a subject in the to-and-fro of embodied communication, he experiences himself as objectified and dehumanized, much like Fanon, not properly "seen" as a subject. As a result, he experiences his Black body as

reduced to a series of negative stereotypes (a criminal, a racist, a threat) and perceives white people's reactions accordingly.

The “white world” that both Fanon and Yancy describe is one where “whiteness functions as . . . *the transcendental norm*”; it is a socio-cultural-political milieu dominated by the logic that categorizes “black bodies or bodies of color . . . [as] ‘deviant,’ ‘different,’ ‘ersatz,’ ‘raced,’ and ‘marked,’” while simultaneously positioning the white body as the “somatic norm” (Yancy 2020a, 69; Petherbridge 2017, 105). As a result, against an implicit understanding of white superiority in a “white world” dominated by the legacies of slavery and colonialism, racialized bodies are positioned within social relations as inherently stigmatized, contaminated, threatening, different, and vulnerable to negative stereotypes and discrimination.

While COVID-19-induced social distancing has been disruptive for all bodies, the disruptive effects on lived experience are differential. For those who are habituated to the lived realities of anti-Black racism, as described by Fanon, Yancy and others, social distancing is, to reiterate Lisa Braxton (2020), “nothing new.” Reflecting on the new realities of social distancing in the early days of the pandemic, Braxton highlights how the lived experience of racist gestures renders COVID-19-induced social distancing a familiar experience for Black Americans:

We've long practiced social distancing to keep ourselves safe and lessen our chances of a shortened life span: not because of a contagious disease, but because of racism . . . I have experienced white women suddenly clutch tightly onto their purse straps as I've walked past them on the sidewalk. Some have begun to visibly shake, their eyes growing wide, as if terrified, if I happened to make eye contact with them in an elevator . . . I enjoy taking long walks in a park not far from where we live. As a precautionary measure, I keep my distance from white individuals on these walks, slowing down or lingering a little longer on a footbridge overlooking the pond, if necessary. In the supermarket, I steer clear of shopping carts in which women have left their purses unattended as they peruse the shelves. (Braxton 2020)

In another striking account, Woolley (2020) recalls an anecdote from the actor Jamie Foxx, illustrating Yancy's “Elevator Effect”:

There's a lot of talk at the moment about social distancing and the body language that people are adopting since the coronavirus struck. A friend lamented to me it was completely unnerving, and a little disturbing, to see the lengths to which people will now go to keep their distance . . . But many Black people have experienced this unnerving and at times dehumanising feeling way before Covid-19 . . . I distinctly remember the powerful anecdote the actor Jamie Foxx related . . . He said when he was in lift wearing casual clothes, a group of white people entered and

instantly shuffled to the corner of lift to lengthen the distance between them, until one of them recognised it was the Hollywood icon. Then they all relaxed and even began laughing. Foxx told his audience, “They all thought it was a bit amusing. But in truth it wasn’t, it was appalling. It’s what Black people face all the time.” (Woolley 2020)

Exaggerated physical distancing is, Woolley (2020) argues, nothing new for Black individuals for whom the “dehumanising” and “crushing hurt” of being made to “feel you are less than, even in social spaces which we are all supposed to share” was familiar long before the pandemic. Hence, a different kind of social distancing has long been part of the experience of Black and other minority ethnic individuals in societies where whiteness functions as a “transcendental norm” (Yancy 2020a, 69; Guenther 2020). For those who experience ongoing instances of stigma, shame, and marginalization, social distancing may be registered on an embodied and existential level not as merely a disruption to social relations, nor as an act of social care, but a further intensification of something that, as Matthew Vernon (2020) argues, “is a familiar feeling to most black people.” Vernon (2020) writes:

You walk down the street and see someone white approaching. They peek over their shoulders, seemingly to check for back up and, seeing none, flee across the street to the bubble of safety. Seeing the fear in their eyes and the hasty crab-step to the side leaves indelible marks in the black psyche. For me, it means a fear of public spaces that is at times difficult to explain to people who have never lived this hyper-visibility . . . Although the motive of social distancing is altruistic, the lived experience is like every other moment in which fear exacerbates the troubles of neglected groups.

For Vernon, COVID-19 induced social distancing reveals “not just how socially distant we have become, but how much we have been for a long time.” Indeed, social distancing as a result of racism takes multiple forms, causing multiple harms. It occurs not only through the embodied communication of racism in face-to-face encounters, as Yancy and Ngo highlight so clearly, but also through experiences such as “segregation, discrimination and devaluation” within society (Perry 2020). The social distancing that occurs because of racism, in all its forms, has had negative effects on lives, livelihoods, socio-economic status, health, and well-being.

The intensification of these experiences during COVID-19 has illustrated that racism and health are deeply co-implicated. It is no coincidence that anti-racism protests, sparked by the murder of George Floyd and led by the Black Lives Matter movement, were taking place worldwide at the height of the COVID-19 pandemic. The inequalities and health disparities for minority ethnic groups that COVID-19 has exposed, are part of a systemic and structural racism that has a long history of taking lives. While the COVID-19 pandemic has created enormous challenges that have, in unprecedented ways, impacted populations across the globe, it is crucial that we recognize the ways in which the *degree* of this impact is unequal because of pre-existing systems of structural inequality. This

means not only that infection and mortality rates will be higher for marginalized groups because of poverty, precarity, and other exposures to the social determinants of health, but, as we have demonstrated in this musing, people with lived experiences of racism may be disproportionately negatively impacted by the embodied gestures of social distancing. When evaluating the long-term impacts of public health measures such as social distancing, it is essential that the lived experiences of racism and marginalization are considered as part of a bigger picture within which the horizons of possibility for health, well-being, feelings of security, and belonging play themselves out.

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REFERENCES

- Appiah, Kwame Anthony. 2020. “The Case for Capitalizing the B in Black.” *The Atlantic*, June 18. Accessed 9 June 2021. <https://www.theatlantic.com/ideas/archive/2020/06/time-to-capitalize-blackand-white/613159/>.
- Bambra, Clare, Ryan Riordan, John Ford, and Fiona Matthews. 2020. “The COVID-19 Pandemic and Health Inequalities.” *Journal of Epidemiology and Community Health* 74 (11): 964-68. <https://doi.org/10.1136/jech-2020-21440>.
- Braxton, Lisa. 2020. “For Black Americans, ‘Social Distancing’ Is Nothing New.” *WBUR*, Accessed 10 June 2021. <https://www.wbur.org/cognoscenti/2020/06/01/george-floyd-protests-social-distancing-lisa-braxton>.
- Carel, Havi. 2020. “The Locked-down Body: Embodiment in the Age of the Pandemic.” *The Philosopher* 108 (3): 12-17.
- Carel, Havi, Matthew Ratcliffe, and Tom Froese. 2020. “Reflecting on Experiences of Social Distancing.” *The Lancet* 396 (10244): 87-88.
- Chowkwanyun, Merlin, and Adolph L. Reed. 2020. “Racial Health Disparities and Covid-19.” *The New England Journal of Medicine* 383 (3): 201-03.
- Coleman, Nancy. 2020. “Why We’re Capitalizing Black.” *The New York Times*, July 5. Accessed June 9, 2021. <https://www.nytimes.com/2020/07/05/insider/capitalized-black.html>.

- Dolezal, Luna. 2020. "Intercorporeality and Social Distancing." *The Philosopher* 108 (3): 18-24.
- Fanon, Frantz. 1970. *Black Skin, White Masks*. Translated by Charles Lam Markman. London: Paladin.
- Gaynor, Tia Sherèe, and Meghan E. Wilson. 2020. "Social Vulnerability and Equity: The Disproportionate Impact of COVID-19." *Public Administration Review* 80 (5): 832-38.
- Guenther, Lisa. 2020. "Critical Phenomenology." In *50 Concepts for a Critical* Phenomenology*, edited by Gail Weiss, Ann V. Murphy, and Gayle Salamon, 11-16. Evanston, IL: Northwestern University Press.
- Laws, Mike. 2020. "Why We Capitalize 'Black' (and Not 'White')." *Columbia Journalism Review*. Accessed June 9, 2021. <https://www.cjr.org/analysis/capital-b-black-styleguide.php>.
- Ngo, Helen. 2016. "Racist Habits: A Phenomenological Analysis of Racism and the Habitual Body." *Philosophy and Social Criticism* 42 (9): 847-72.
- Perry, Andre. 2020. "Black Americans Were Forced into 'Social Distancing' Long Before the Coronavirus." *Brookings*. Accessed June 10, 2021. <https://www.brookings.edu/blog/the-avenue/2020/03/20/black-americans-were-forced-into-social-distancing-long-before-the-coronavirus>.
- Petherbridge, Danielle. 2017. "Racialising Perception and the Phenomenology of Invisibility." In *Body/Self/Other: The Phenomenology of Social Encounters*, edited by Luna Dolezal and Danielle Petherbridge, 103-29. Albany, NY: SUNY Press.
- Taylor, Jacqueline Sanchez. 2020. "Life Interrupted: COVID-19 and Black Lives Matter." *Cost of Living*. Accessed June 9, 2021. <https://www.cost-of-living.net/life-interrupted-covid-19-and-black-lives-matter/>.
- Vernon, Matthew. 2020. "Social Distancing While Black." *KQED*. Accessed June 10, 2021. <https://www.kqed.org/perspectives/201601139785/matthew-vernon-social-distancing-while-black>.
- Weill, Joakim A., Matthieu Stigler, Olivier Deschenes, and Michael R. Springborn. 2020. "Social Distancing Responses to COVID-19 Emergency Declarations Strongly Differentiated by Income." *Proceedings of the National Academy of Sciences* 117(33): 19658-60.
- Yancy, George. 2008. "Elevators, Social Spaces and Racism: A Philosophical Analysis." *Philosophy and Social Criticism* 34 (8): 843-76.

COVID-19 AND THE ANXIOUS BODY

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Since March 2020, many if not all of us have had to contend with new ways of comporting ourselves in the world. From the way we shop to the way we socialise—in a comparatively short amount of time, COVID-19 has exposed many of us to the fragility of everyday life. These changes to everyday experience are not isolated to specific localised actions, such as using more hand-sanitizer or even staying at home; rather, these changes have transformed experiences of the world—including ourselves and other people—more generally. The world that we have known, with its coat of familiarity and constancy, its atmosphere of security and protection, has come to an end. In its place, we have had to contend with a world stricken by disease and uncertainty, in which fundamentals of everyday life can no longer be taken for granted.

This fragile world has been given expression through the experience of our own bodies, as well as other people's bodies. In “typical” (or at least, pre-pandemic) circumstances, the body appears for us as a source of familiarity and intimacy. We are situated in the world, not as abstract and atomic entities in a grid of spatial references, but as living and embodied beings that are affectively attuned to the world and to the other bodies in that world. We move through the world with a tacit confidence shaped and framed by the liaison between the body and the environment. We reach out to things, maneuver out of the way, adjust ourselves, and communicate with others—all without having to think about it in the abstract. Our senses are not merely computational systems processing data, but affective regions, each tied together, which enable us to be situated in the world in a meaningful sense.

Of course, this is not always the case and in certain affective, neurological, and medical situations, the idea of a “typical” body that is a source of familiarity and intimacy is far from a given. Anxiety disorders would be one such example where the body is experienced from the outset as being radically contingent and in some cases alien to a sense of self (Guilmette 2020; Trigg 2016, 2018). The same is also true of pregnant embodiment (Trigg 2021). Other cases would include people living with chronic medical conditions, especially people

who are immunocompromised (El Dannan, Al Hasasni, and Ramsi 2020) or suffer from chronic pain. As Joshua St. Pierre writes: “If feeling requires a subject of experience—one who feels—pain reveals the limits of starting analysis from lived experience. Pain disassembles the habituated performance of social codes and even the human itself” (St. Pierre 2020, 30). Thus, a phenomenon such as chronic pain generates a baseline for the foundations of perceptual and affective experience, carrying with it a formulation of identity and intersubjectivity that is irreducible and singular. In such cases, what COVID-19 brings to the foreground in a radical sense, as seen from a critical phenomenological perspective, is that “the body” is not a singular or uniform entity, but is instead structured and shaped by a multiplicity of factors, each of which determine not only the pre-pandemic modes of embodiment, but also how the pandemic itself is experienced (Guenther 2019). With the advent of COVID-19, the idea of the body has been reconfigured on a number of levels. Most evidently, COVID-19 has issued a threat to the body on a medical front—both as a specific kind of contagious virus, but also in terms of long-haul COVID and, more specifically, how it impacts well-being more generally. More immediately, COVID-19 has changed how we experience our bodies in the imminence of the present. No longer a tacit foundation upon which our movement, actions, and expressions emerge, the body has now become foregrounded as an object of scrutiny, at once provoking suspicion but above all anxiety; and it is this element of objectification that I would like to reflect upon in this musing.

THE EVERYDAY WORLD OF ANXIETY

On the surface, the world that has emerged since the beginning of the pandemic does not appear to be radically different from the world prior to the pandemic. From the context of Vienna, from where I am writing, the first lockdown was a strange mixture of familiarity and unfamiliarity. Buildings remained intact, people could be seen milling about, and some shops remained open. At a glance, it appeared as though little had changed, other than the world being quieter. Yet in the midst of this apparent normality, a pandemic had taken hold, which disturbed the familiarity of everyday life in a radical sense.

At the heart of this disturbance is the role our senses play in engaging with the world. To take one example, consider here how surfaces that were once invisible and innocuous have now become charged with a sense of being sites of disease. Everyday objects—phones, door knobs, elevator buttons, etc.—are also altered from familiar tokens of everydayness residing in the background to things charged with an aura of danger.

In no uncertain terms, COVID-19 has issued a stark challenge to the idea that vision is the primary sense. Beyond vision, it is *touch* that has been foregrounded as the primary sense, especially from the perspective of the media. The injunction to avoid touching one’s face, touching other people, and touching surfaces more generally, reinstates—albeit in a negative mode—the porous interplay between ourselves and the world. We are not discrete subjects gazing upon an otherwise neutral world; rather, to put it in Merleau-Pontean

terms, just as we touch the world with our sensing organs, so the world touches us back (Merleau-Ponty 1968). Only now, the world that is reversing our touch is a world marked by disease and harm. As such, our relationship to the world is one that has to be kept at arm's length; instead of greeting people with our entire bodies, we have had to contrive novel ways to interact with people without potentially spreading the disease. And instead of freely touching the world around us, we have to exercise caution about which surfaces it is necessary to engage with in order to perform basic functions.¹ As fundamentally altered, the world and its arrangement of material things protrude into our perceptual experience, thus becoming thematized in their strangeness.

The accumulative result of these new dynamics is that dwelling in the world has been put out-of-joint, such that, for many (though not all) of us, a sense of being “at-home” is now experienced in terms of being *ill-at-home*. Yet again, it is important to note here that what COVID-19 brings to the foreground is not necessarily something novel; rather, it discloses a precarity, which for many people, was there all along, and especially in terms of a vulnerability shaped by existing health conditions, gender, race, and divergent forms of disability (Kruks 2016; Martiny 2015). Being ill-at-home in the world, whether it be through mood disorders or through modes of disability or through being singled out as *other* in some capacity, means being confronted with a world in which the meaning underpinning actions, intentions, and thoughts has fragmented (Abrams 2020). Into this fragmented scene, things no longer assume the value they once did; the everyday itself as a nexus of relational meanings loses referential value and, as a result, a sense of anxiety permeates much of life (Heidegger 2008). Central to this permeation of anxiety is the role the body plays in given expressive form to an atmosphere of anxiety.

THE BODY AS THING

In “normal” life, we generally take our bodies in a pre-given and taken-for-granted way, even if this taken-for-granted attitude rests on uncertain foundations or is the product of a privileged mode of embodiment. From the perspective of classical phenomenology, we move through the world with a tacit sense of our bodies as generating a feeling of directional, affective, and intersubjective awareness. Meeting other people, we have an implicit sense of how to conduct ourselves in proximity to other bodies. Distance and proximity are not spaces measured in abstraction, but rather degrees of intentional awareness we grasp from an experiential perspective.

Phenomenology has provided an abundance of attention to this modality of embodied life; the body engages in the world in a fundamentally affirmative way; the body relates to

¹Critically, while this may be a new facet of lived experience for many people, for people with immunocompromised conditions, such practices are constitutive of everyday experience. Thus, their own experience of COVID-19 is mediated by a set of determining factors that are largely overlooked for non-immunocompromised people.

the world in the form of an *I can* rather than an *I cannot*; the body is intertwined with other bodies in a fluid and dynamic way; and the body is, above all, a body that is “one’s own” (Merleau-Ponty 2012). More than this, from a phenomenological perspective, the body’s being-in-the-world is fundamentally and irreducibly affective in structure. As such, the body is not an atomic entity, but an opening that is co-constituted by the spaces in which we inhabit and dwell.

For all its attention on the body, phenomenology, at least as it has been traditionally conceived, has tended to privilege certain modalities of embodiment while also instrumentalizing “atypical” bodily experiences as generating evidence of the normative structure of the body as an “I can.” This tendency to privilege the body as a tacitly stable foundation for subjective experience has been evident in the method’s treatment of memory (Trigg 2012) and bodily agency (Trigg 2014), together with an overarching commitment to the sense of the body as “one’s own” (Trigg 2019). In each case, largely until the advent of critical phenomenology, phenomenology had tended to overlook the heterogeneity of specific articulations of bodily life, whether they be affective moods, physical disorders, or specific events of suffering such as solitary confinement (Guenther 2013; Reynolds 2017). The inclusion of the variations of bodily existence is especially a necessity in the case of “global” events such as COVID-19. Far from a great leveller, what the pandemic brings to light is the immense diversity in the experience and understanding of COVID-19.

Nevertheless, while it is a disease that is experienced in a multiplicity of ways, each way contingent on the specificity of the body in question, one dimension that tends to populate many of the narratives dealing with the pandemic is *anxiety*. The anxiety surrounding COVID-19 is not an amorphous affective force lacking direction; rather, it assumes a specific and amplified expression in certain situations and environments, which is given affective weight in and through the body. Moreover, the embodied experience of COVID-19 does not simply concern a body that has been infected by a disease; more complex than this, the disease transforms the lived experience of one’s own body more generally into an agent of anxiety whether a person is infected or not. This articulation of anxiety through the body has at least two aspects to it; first, in terms of one’s own relation to their body, and, second in terms of one’s relation to other bodies.

To begin with the first expression, one of the striking aspects of the COVID-19 pandemic is the modification of the body from the centre of intimacy and familiarity to a site of suspicion and otherness; it is a body that is not only at risk of becoming diseased but also of being a source of alienation. One way this manifests itself is in terms of the body becoming objectified as a potential carrier of disease. Many of the media narratives concerning COVID-19 focus on the elevation of anxiety in the population, with a specific focus on a heightened attention to changes in the felt experience of the body. Whereas the body is ordinarily a tacit presence in everyday life, in the age of COVID-19, signs and symptoms emanating from the body acquire a halo of meaning usually reserved for periods of illness and injury. A first-person report from the *Washington Post* captures this amplification of meaning vividly:

A thermometer sits on the window sill of my bathroom, right next to the toilet, so every time I go to the bathroom, I can take my temperature. I've been feeling like I have a low grade fever for weeks, and these days, a fever isn't just a fever. It's a signal you may have the coronavirus. And so I take my temperature about eight times a day to see if my fever has risen. (Chesler 2020)

What is notable about this passage, and many other passages in the media that echo this sentiment, is that instead of being a nexus of lived meanings, the lived body is now reduced to a *körper*—a thing-like body that has become foregrounded in its biological and anonymous materiality. As it is understood in classical terms, the thing-like nature of the body is the dimension of bodily life that materializes when the body as a physical thing is foregrounded through pain, illness, fatigue, psychopathologies, ageing, and so forth. Thus, in moments of sickness, the body ceases to be an implicit structure and is instead presented to us as a focal point of perception which can disturb our sense of selfhood. Likewise, catching sight of our bodies as having aged, we tend to experience a gap between who we think we are and our bodies which, as it were, have trailed off on their own. In each case, the body is rendered a thing that we observe and monitor for further changes, and which have little or no power over.

The same structure is no less true in the case of COVID-19. The COVID-19 body is not only an “ill” body in the sense of being infected by a disease, it is also “ill” insofar as it becomes a site of suspicion: generating a hypochondriac if not paranoid relationship to the body's materiality. As Kevin Aho (2020) writes in his incisive essay on the uncanniness of coronavirus:

My hands have become eerily conspicuous, like strange objects that I am only contingently connected to. Worried about contracting the virus, I no longer reach effortlessly for the doorknob or the cell phone; nor do I extend my hand in a warm greeting when a friend comes by. (8)

Aho draws our attention here to the manner in which the body has become largely mediated through a mood of anxiety. It is not that the hand as a discrete organ has become an object of anxiety in and of itself; rather, the hand gives expression to an anxiety that has already been instituted by the onset of COVID-19. In correspondence, sensations which previously had a contextual meaning within relationship to the everyday—headaches, tiredness, etc.—all now point toward a singular horizon: COVID-19. At the heart of this paranoid logic is the uncertainty of what is at stake in each of the body's processes, responses, and symptoms. The body that is presented to us in the face of COVID-19 is thus in large and unknown and unknowable body; it is a body that is ambiguous not only in terms of being both a thing and a centre of perception, but also in terms of being both mine and not-mine concurrently.

OTHER BODIES

It is not only our own bodies that undergo a shift in their perceptual and affective structure, but also our relation to *other bodies*. In normal circumstances, our communication with others is orchestrated on a pre-reflective level by the kinship of one body with another. Bodies grasp each other thanks to the fact that there is a primordial liaison between oneself and another (Merleau-Ponty 2012). Without having to think about it in abstraction, on an experiential level we grasp moods, modes of conduct, and affective and emotional states in an intuitive sense. As a sensing organ, my body puts me in contact with other bodies not as a recipient of static data, but as a network of constantly unfolding dynamic and expressive meanings. What this means is that, notwithstanding the specificity of cultural and affective differences, for the most part social life is regulated by a pre-reflective fluidity that operates on a latent rather than reflective level; such a dynamic is predicated on the idea of the body as an expressive system.

One of the salient aspects of COVID-19 is that it issues a challenge to the phenomenological idea of intercorporeality (Dolezal 2020). This is evident in at least two key respects. First, as expressive and bodily beings, we are always already in touch with other bodies. This is especially true from a Merleau-Pontean perspective. As he sees it, one's own body is not an autonomous mass of materiality solipsistically surveying the world; rather, it is part of a system which is interwoven in the fabric of other bodies irrespective of our own idiosyncrasies and preferences. Already having a body means being in touch with other bodies, each of whom belong to the same ontological order of life, and which thus form a "single fabric" of being (Merleau-Ponty 2012, 27). This is true as much on a structural level as it is on a sensual level. Just as touch involves a reversible movement between ourselves and the world, so the same is true of other aspects of intercorporeal life—not least the phenomenon of *breathing*.

As bodily beings, breathing is not a private practice sealed off from a neutral world; it is a porous exchange that reinstates that we are as much in the world as the world is in us. Breathing brings to light in a quite literal way our inheritance with others and our indissoluble liaison in a shared space. True, the manner in which this space is shared (and shareable) is mediated by any number of socio-cultural norms, which either amplify or underplay a sense of space as *ours* rather than *one's own*. Yet from the outset, breathing connects us to a common world, in which our inhalation and exhalation is both biological and affective; as Merleau-Ponty (1964) has it, "the body is already a respiratory body. Not only the mouth, but the whole respiratory apparatus gives the child a kind of experience of space" (122). It is only later on, when we acquire a sense of breathing as belonging to one's own body that a more rigid boundary line is cultivated between inside and out.

For this reason, breathing is also interwoven with anxiety inasmuch as it indexes a site of vulnerability in our being-in-the-world, as one report attests: "Being around others—especially strangers and crowds—has become an anxiety-ridden proposition. As much as we're yearning to be with people again, we can't help but think of the risks. Is this stranger's cough the one that will infect me?" (Peleg 2020). Thus, just as breathing dissolves

the separation of self and other, so it introduces an aspect of anxiety, the manifestation of which is nothing less than breathing itself. Indeed, it is notable that within the history of anxiety, as told from a phenomenological perspective, it is breathing that comes up time and again as the principal expression. Here, we can think of Heidegger's (2008) account of anxiety as being "so close that it is oppressive and stifles one's breath" (231) or Sartre's (1964) account of nausea as a "vision" that leaves one "breathless" (127). In each case, breathing takes shape in the midst of an affective atmosphere, mirroring the surrounding space in terms of being constricted and taut. As the surrounding world becomes oppressive, so our own breathing is felt as a force of oppression, a point that is especially pertinent to COVID-19 insofar as one of the disease's principal symptoms is a shortness of breath.

One of the striking aspects affecting our breathing during COVID-19 is the introduction of face masks. The ubiquity of the face mask is both a marker of a new modality of breathing—now more inward and self-reflexive—but also a marker of our relations with others. What this discloses is that the face is not insulated by the skin as a protective membrane, nor is the face simply an assemblage of parts; rather, it is a dynamic network which conveys meaning. Likewise, a mouth is not just a sector of the body employed for consumption and breathing; it is also a space in and through which intersubjective life is given affective expression, and, accordingly, denied expression when concealed. When this openness to the other is concealed, the trust that comes with it is also eroded, leaving in its wake an atmosphere of suspicion. And indeed, it is the atmosphere of suspicion that is another key feature of our current relations with others. Stripped of a primary mode of expression, the other has been deprived of their singularity and rendered an anonymous mass of biological (and potentially infected) flesh (Dolezal 2020). Against this, the other's presence is now measured in strictly quantitative terms, underpinned at all times by an anxiety over being too close to strangers, lest they be carriers of the disease even—or especially—unknown to themselves.

CLOSING REMARKS

As we see, then, the body that appears in the age of COVID-19 is not only vulnerable to disease, but it is also vulnerable to alienation and to anxiety. In all its variations, it is a body that is foregrounded in its thing-like status, becoming both an object and expression of anxiety. In the same measure, it is a body that is objectified in the gaze of an other, scrutinized as a potential bearer of a largely invisible disease. Against these aspects, the structure of intercorporeal existence, as it has been instituted in our present era, centres on a series of new practices, each of which demand that we re-habitualize our bodies—often in a counter-intuitive way—to conform to a language of distance and disease. The result is a decisive sense of alienation from both others and to ourselves, the extent of which remains to be seen. While critical phenomenology brings to light these dynamics in a rich and nuanced way, it also offers a preliminary challenge; namely, to problematize in no uncertain terms the multiple normative structures of the body as a homogenous and

interchangeable unit of matter structured by invariant characteristics. Such a challenge renders phenomenology accountable for its analysis of lived experience through attending to the social structures underpinning experience, and thus ultimately renders the method more vital and relevant than ever.

REFERENCES

- Abrams, Thomas. 2020. "Disability at the Limits of Phenomenology." *Puncta: Journal of Critical Phenomenology* 3 (2). <https://doi.org/10.5399/PJCP.v3i2.2>.
- Aho, Kevin. 2020. "The Uncanny in the Time of Pandemics: Heideggerian Reflections on the Coronavirus." *The Heidegger Circle Annual* 10: 1-19.
- Chesler, Caren. 2020. "Oh, no! Do I have a fever? When coronavirus fears rev up my hypochondria, my 9-year-old keeps me grounded." *Washington Post*. Accessed June 30, 2021. https://www.washingtonpost.com/health/oh-no-do-i-have-a-fever-when-coronavirus-fears-rev-up-my-hypochondria-my-9-year-old-keeps-me-grounded/2020/05/15/47285304-8a1d-11ea-ac8a-fe9b8088e101_story.html.
- Dolezal, Luna. 2020. "Intercorporeality and Social Distancing." *The Philosopher* 108 (3): 18-24.
- El Dannan, Huda, Moza Al Hassani, and Musaab Ramsi. 2020. "Clinical course of COVID-19 among immunocompromised children: a clinical case series." *BMJ Case Reports* 13 (10). : e237804. <https://doi.org/10.1136/bcr-2020-237804>.
- Guilmette, Lauren. 2020. "Critically Anxious." *Puncta: Journal of Critical Phenomenology*, 3: 20. <https://doi.org/10.5399/PJCP.v3i2.4>.
- Guenther, Lisa. 2013. *Solitary Confinement: Social Death and Its Afterlives*. Minneapolis: University of Minnesota Press.
- Guenther, Lisa. 2019. "Critical Phenomenology." In *50 Concepts for a Critical* Phenomenology*. Edited by Gail Weiss, Ann V. Murphy, and Gayle Salamon, 11–16. Evanston: Northwestern University Press.
- Heidegger, Martin. 2008. *Being and Time*. Translated by John Macquarrie & Edward Robinson. New York: Harper Collins.
- Kruks, Sonia. 2016. "Living Alterities: Phenomenology, Embodiment, and Race." *Contemporary Political Theory* 15: e11–e14, <https://doi.org/10.1057/cpt.2015.11>.
- Martiny, Kristian Moltke. 2015. "How to Develop a Phenomenological Model of Disability." *Medicine, Health Care, and Philosophy* 18 (4): 553–65.

- Merleau-Ponty, Maurice. 1964. *The Primacy of Perception*. Translated by William Cobb. Evanston: Northwestern University Press.
- . 1968. *The Visible and the Invisible*. Translated by Alphonso Lingis. Evanston: Northwestern University Press.
- . 2012. *Phenomenology of Perception*. Translated by Donald Landes. London: Routledge.
- Peleg, Oren. 2020. “Feeling Anxious About Returning to Life in Public? You’re Not Alone.” *Los Angeles Magazine*. Accessed June 30, 2021. <https://www.lamag.com/citythinkblog/stay-at-home-lifted-anxiety-germaphobia/>.
- Reynolds, Joel Michael. 2017. “Merleau-Ponty, World-Creating Blindness, and the Phenomenology of Non-Normate Bodies.” *Chiasmi International* 19: 419–36.
- St. Pierre, Joshua. 2020. “Living with Chronic Pain.” *Puncta: Journal of Critical Phenomenology*, 3:20. <https://doi.org/10.5399/PJCP.v3i2.6>.
- Sartre, Jean-Paul. 1964. *Nausea*. Translated by Lloyd Alexander. New York: New Directions.
- Trigg, Dylan. 2012. *The Memory of Place: a Phenomenology of the Uncanny*. Athens: Ohio University Press.
- . 2014. *The Thing: a Phenomenology of Horror*. Winchester: Zero Books.
- . 2016. *Topophobia: a Phenomenology of Anxiety*. London: Bloomsbury.
- . 2018. “Situating Anxiety: a Phenomenology of Agoraphobia.” In *Situatedness and Place*. Edited by Thomas Huenefeldt and Annika Schlitte. Heidelberg: Springer.
- . 2019. “At The Limit Of One’s Own Body.” *Metodo: International Studies in Phenomenology and Philosophy* 7: 1. <https://doi.org/10.19079/metodo.7.1.75>
- . 2021. “‘It happens, but I’m not there’: On the Phenomenology of Childbirth,” *Human Studies*. <https://doi.org/10.1007/s10746-021-09585-4>.

EMBRACING MISFIT BODIES: A REFLECTION ON MY BROTHER'S DEMENTIA IN THE TIME OF COVID-19

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For Moy

When we fit harmoniously and properly into the world, we forget the truth of contingency because the world sustains us. When we experience misfitting and recognize that disjuncture for its political potential, we expose the relational component and the fragility of fitting. Any of us can fit here today and misfit there tomorrow.

– Rosemarie Garland-Thomson, “Misfitting”

2020 was a year of global crisis. During this time, like many others, I experienced crisis on a very personal level. For me this coincided with the beginning of the pandemic, when my older brother developed a kind of dementia. He is only 56 years old now and his disease came as a complete surprise. Thus, when almost the whole world became “uncanny” (Aho 2020), saturated with profound uncertainty, anxiety, and continuous loss, we too—all who love and care for my brother—were drowning in despair.

Havi Carel, Matthew Ratcliffe, and Tom Froese (2020) lucidly describe how the personal and the political have become interwoven during the pandemic. They argue that it is precisely the fact that COVID-19 has affected us globally that allows us to reflect on those aspects of experience that are common to most of us, while at the same time discerning those that are modified by and dependent on various social injustices—and, I would add, on personal and/or circumstantial afflictions. In their short reflection on the phenomenon of social distancing within the pandemic, Carel, Ratcliffe, and Froese emphasize the central role of phenomenology in attempting to understand and give sense to these diverse aspects of experience:

Phenomenology is concerned with aspects of experience that are so deeply rooted in our lives that we typically overlook them, seldom reflecting on

their nature . . . The fact that lives have been altered on a global scale further presents us with an opportunity to learn more about which aspects of human experience are invariant across backgrounds and cultures, and where differences lie. Health, racial, and social inequities, as well as different health-care systems, have been shown to give rise to profoundly different pandemic experiences, thus emphasising the importance of situational contexts. (87)

In this text, I briefly explore a few philosophical issues relating both to the spread of COVID-19 and to my brother's disease. I attempt to make sense of the experience of personal crisis in times of global crisis. I believe most of us went through different personal crises, in varying degrees of severity, while experiencing the global pandemic. This has forced us to constantly negotiate our "personal," "social," and "political" selves in myriad ways, making us understand that our pain was both private and shared.

UNCERTAINTY AND ANXIETY

Uncertainty, or a sense of chaos and resulting anxiety, was there from the beginning. During the first days of the pandemic, uncertainty was rampant; nobody knew what exactly was happening, what the dimensions of the phenomenon (COVID-19) were, how contagious the disease was, how it was transmitted, how severe or deadly its effects were, and how we might protect ourselves.¹ All the while, my brother exhibited increasingly unusual behavior, personality changes, and memory lapses. He was not himself—but in what sense, exactly? What was this strange condition? Where was this leading? Doctors were puzzled, and every other day a new diagnosis was suggested.

Existentialists are known for discussing the effects of chaos and uncertainty on the human condition, arguing that certainty and predictability provide an artificial structure to which we cling in order to avoid experiencing the emptiness and severe anxiety caused by (true) knowledge of the world's unpredictability, chaos, and lack of inherent meaning. Kevin Aho (2020) reflects on this Heideggerian understanding of the world as inherently "uncanny" and its relation to COVID times. In describing what was revealed to many of us during the pandemic, he draws on Martin Heidegger's idea of existence as always already estranged and uncomfortable—irremediably linked to anxiety. Thus, it is not that the pandemic *turned* our world into an unfamiliar one, but rather that the essential uncertainty

¹ Carel, Ratcliffe, and Froese (2020) refer to this as an experience of "global uncertainty," which they define as "the loss of a once prereflective trust or confidence relating to most things in our lives." They add: "This does not concern specific situations or places. Rather, it envelops one's experience of, and engagement with, the world as a whole. Various elements of pandemic experience are characterised by suspicion, uncertainty, and doubt. We may distrust the air we breathe and the surfaces we touch, while strangers suddenly seem unpredictable sources of potential danger" (88). In other words, during the pandemic we ceased to feel "at home" in the world, as Kevin Aho (2020) explains, wrapped up as we were in disconcerting, unfamiliar experiences of time and space.

and uncanniness of human existence was made crystal clear through the unsettledness of the pandemic times. In Aho's words:

[T]he more fundamental analysis, for Heidegger, involves exposing how the uncanny is not simply something we feel in times of existential breakdown or crisis; it is *who we are*; “[the uncanny] is the basic determination of [human existence] itself” . . . This means, in the most primordial sense, the comforting and familiar experience of *das Heimliche* was an illusion all along that we are not and never have been at-home in the world. (3; emphasis in the original)

Anxiety is thus a reasonable response to recognizing life as “open,” lacking a settled program, and intrinsically involving human freedom (Crowell 2020)—not an absolute freedom, but the possibility to choose given the circumstances, which are beyond our control. We are doomed to be free within a world that is hardly predictable. We cannot “opt out” of the pandemic (or my brother's rare condition)—we can only choose what role to play within it and how to give it meaning. Thus, recalling Heidegger, Mark Ralkowski (2020) explains:

Heidegger says famously that “real anxiety” is not about anything in particular . . . it is about our “being-in-the-world as such.” We are anxious over the fact that we must make something out of our finite lives, and that we must do so without any guidance from nature or the structure of the self . . . We can never *fully* justify our choices, and so our projects, commitments, and roles—in short, our identities and sense of meaning and purpose in life—are constantly vulnerable and undermined by anxiety, which “is always latent in being-in-the-world.” (41; emphasis in the original)

The pandemic exposed these elements of choice and freedom at both personal and national levels. Libertarian narratives (“mask requirements rob us of our freedom”) conflicted with narratives of social solidarity (“mask wearing in the service of the vulnerable”). Each of us was also forced to decide how to act and give meaning to our own day-to-day life under the pandemic.

Chaos also left its mark on the life of my brother and those around him; every day, his behavior and thinking became more erratic, and we never knew what tomorrow would bring. The violently rapid-onset cognitive decay he experienced—and his apparent unawareness of what was happening—made us feel we were losing him a little more every day. And yet, he was somehow still there. We had to choose how to approach him and the disease; mainly, we struggled to ascertain exactly how much agency to afford him, and to make decisions accordingly. Should we force him to do more, be more active, speak more (given that he could barely find words)? Should we just let him sleep, like he wanted? Should we let him go out walking alone? What about pandemic restrictions, doctors' opinions, and advice from others? Should we keep searching? Should we keep trying to treat him even

though it was unclear what was wrong? In short, we were constantly confronted, on both a global and a personal level, with the burden of freedom and forced to make decisions in the context of painful uncertainty.

“Existential anxiety”—even when caused by a global disaster—is always experienced as a personal affliction. I believe that each of us experienced the anxiety of the pandemic (and of other contemporaneous crises, as in my family’s case) very personally. This is why anxiety is connected to authenticity. For existentialists, anxiety is not necessarily destructive. In fact, it is usually the opposite; the crisis of our recognition of life’s absurdity—and the resulting anxiety—move us to find our own life path and to face the freedom we have within apparent chaos. Crisis and anxiety are also motors for creativity and change.² This is the meaning of the authentic Heideggerian “being-toward-death”—facing the absurdity of existence and yet choosing to make it our own, despite (or rather, because of) our anxiety:

What authentic being-toward-death does is *maintain* this anxiety, and so it is *anxiety about death* that brings us back from our falling and individualizes us. In doing so, it also shows us that while we can never give a full justification of our life or choices, because there is no human telos to follow, we can ensure that our lives are *our own*. (Ralkowski 2020, 41; emphasis in the original)

Thus, crisis frequently forces creativity and a change of perspective. The COVID-19 crisis has brought about technological and scientific innovations that were unimaginable a year ago. Those who could, joined forces to create new ways to live with the pandemic and overcome its havoc. For my part, I became a specialist in my brother’s (supposed) disease. The doctors hypothesized, tentatively, that it could be a very rare brain disease (autoimmune encephalitis). All year, I read every piece of scientific research I could find, seeking out interlocutors to discuss the findings. I discovered how it is possible for a layperson like myself to understand research from another field, to put the pieces together, and to imagine solutions. The story of the discovery (barely more than a decade ago) and treatment of this rare disease resembles the meteoric findings and research developments regarding COVID-19 (the vaccine being the ultimate example)—with the difference that COVID-19 is a massive threat to all humanity, not a rare condition afflicting just a few.

PRIVILEGE AND GRIEF

The discussion of anxiety, freedom, and choice must be contextualized within an understanding of privilege. The COVID-19 pandemic has affected the poor and marginalized in abysmally different ways than it has the wealthy (Carel, Ratcliffe, and

² On this—specifically in relation to the pandemic, Aho (2020) writes: “The pandemic, on this [Heideggerian] reading, has certainly unsettled our sense of being at-home, but this unsettling is at the

Froese 2020). So-called “choices” over how to experience the pandemic, how to live our daily lives, and what meanings to ascribe to relationships during this pandemic have all been dependent on our degree of privilege and/or vulnerability. Millions did not have the option to stay home or practice “social distancing”—and for too many, the odds were stacked fatally against them. Judith Butler (2009) explains why so many lives are never grieved in the context of war; certain lives are never mourned because they were never considered lives to begin with. They are ontologically superfluous:

In targeting populations, war seeks to manage and form populations, distinguishing those lives to be preserved from those whose lives are dispensable . . . Ungrievable lives are those that cannot be lost, and cannot be destroyed, because they already inhabit a lost and destroyed zone; they are, ontologically, and from the start, already lost and destroyed, which means that when they are destroyed in war, nothing is destroyed. To destroy them actively might even seem like a kind of redundancy, or a way of simply ratifying a prior truth . . . Thus, there are “subjects” who are not quite recognizable as subjects, and there are “lives” that are not quite—or, indeed, are never—recognized as lives. (190–91; 198–200; 418–19)

Many lives lost to COVID-19 were (and will be) ungrievable lives. They fall into the void of the abstract numbers that even now keep rising and accumulating daily—the interminable count of pandemic victims. Most of these people were marginalized even before the pandemic, and they continue to be nameless, mourned only as a group. If a life is only mourned as part of a collective, what does that imply about the recognition it is afforded by the living as the loss of a particular, concrete subjectivity? My brother’s disease and the possibility of his death (literal or metaphorical, i.e., the death of his self-consciousness, the person we knew) were in no way part of the ungrievable mass. Surrounded by a loving family with the material and emotional resources to care for him, he had the privilege of being attended by different doctors in several hospitals, and to have specialists attempt to decipher his rare disease. Like some of the “privileged” victims of COVID-19, he was not an anonymous number, becoming part of a statistic. He had a name, he was somebody: even if he was not too aware of it.

VULNERABILITY AND EMBODIMENT

Recognizing certain lives as ungrievable results, at least partially, from failing to recognize our common vulnerability, Butler argues. It means some of us have been blinded by our privilege (we are the “real” subjects, with meaningful lives, while others constitute a

same time freeing; it loosens our rigid hold on things, opening up a ‘room for free play’ (*Spielraum*) where we can let go of our fallen routines and envision new meanings and possibilities for living” (17).

“disposable crowd”), forgetting that we, too, are embodied subjects, vulnerable to sickness, loss, disability, and death. We have forgotten that we, too, are dependent on others (and on what they create for us and provide us with) for survival and flourishing:

We cannot talk about a body without knowing what supports that body and what its relation to that support—or lack of support—might be. In this way, *the body is less an entity than a relation*, and it cannot be fully dissociated from the infrastructural and environmental conditions of its living. Thus, the dependency of human and other creatures on infrastructural support exposes a *specific vulnerability* that we have when we are unsupported, when those infrastructural conditions characterizing our social, political, and economic lives start to decompose, or when we find ourselves radically unsupported under conditions of precarity or under explicit conditions of threat. (Butler 2016, 19; emphasis mine)

Much of recent feminist theory is devoted to vulnerability as an existential condition and the central role embodiment plays in this conception (Butler 2016; Murphy 2009; Mackenzie, Rogers, and Dodds 2014). The idea of the autonomous, neoliberal subject is strongly criticized as fraudulent, giving way instead to a notion of subjectivity as emerging from relations, interdependence, and vulnerability. These new elaborations often use a robust conception of the subject as profoundly embodied, linked to others through leaky boundaries that make it both vulnerable and strong—open to both violence and protection, precisely because of its connection to other embodied subjects (Butler 2016; Murphy 2009). But what happens when the possibility of connection through embodiment is obstructed? The pandemic isolated many of us—again, those of us who had the privilege of being able to stay home and to keep a “safe distance” from the bodies of others. Bodies became dangerous, and phenomenological conceptions of intertwined subjects, existing through their shared embodiment—touching and being enmeshed with each other—gave way to a pandemic-specific dystopian reality in which we all faced the loss of that very shared embodiment; we shared the realization of how isolated, discrete, and independent from other bodies we can be and, at times like these, are in fact required to be.³

And yet, paradoxically, the pandemic and the distance it forced between bodies provides a strong argument for the inevitability of connection: the ontological necessity for embodied subjects to exist interdependently, intertwined, touching each other, and materially supporting each other’s lives. After more than a year of “social distancing,” the embodied interdependence at the basis of our existence—the urgent, critical need we have

³ As presented, for instance, in my own writing on grotesque bodies as allegorical of Merleau-Ponty’s understanding of the intertwining that is characteristic of embodied existence (Cohen Shabot 2006). See also Carel, Ratcliffe, and Froese (2020) and Aho (2020) for a broader discussion of the phenomenological meaning of the experience of social distance during the pandemic—an experience that filled us with anxiety and uncertainty mainly by challenging our previous sense of “being-in-the-world” and “being-with-others,” as our known, secure patterns for moving through space and interacting with others through our bodies.

to be with, touch, and encounter others—is no longer remote and invisible, or obscured by the illusion of atomic subjectivity; it is palpable and manifest. Likewise, my brother, who until his disease was considered a productive, independent, working man, suddenly became a disabled person in need of constant assistance. As happened to many COVID-19 victims to varying degrees, my brother’s vulnerability, his dependence on others for survival, became an irrevocable fact. Thus, if vulnerability is essential to our existential condition, the pandemic—and sickness and disability in general—only serve to reveal the always-already present, undeniable existence of our common embodied vulnerability and our essential interdependence.

HOPE (BUT ONLY THROUGH “MISFITTING”)

I am writing these lines sitting in a café, in a country where, thanks to widespread vaccination, life has almost returned to the “old normal.” I know this is far from the case in the rest of the world, but it does seem that science is effecting change and that, sooner or later, the pandemic will come to an end in more and more places. And during the last month, a bold young neuroimmunologist finally discovered which autoantibody had been attacking my brother’s brain. Now we have a firm diagnosis (autoimmune encephalitis, after all), and his dementia may be treatable and at least partly reversible. In the face of these developments, both general and personal, I feel hopeful. Nevertheless, it is clear that, even in the best scenario, the future will be broken; the reality in which we live, though a much better one than last year, will have multiple cracks in it. In light of this, I want to end this text with Rosemarie Garland-Thomson’s concept of “misfitting,” as a hopeful option for thinking about embodied existence always-already in terms of disability and thereby challenging the idea of “healthy,” “normal,” “abled” subjects.

“Misfitting” is a way of understanding our embodied existence as permanently prone to disability, and disability always as relationally dependent on material and environmental conditions that either support or fail to support certain bodies: “disability emerges from a discrepant fit between the distinctive individuality of a particular body and the totality of a given environment that the body encounters” (Garland-Thomson 2020, 227). Thus, being “fit” means being privileged, and being afforded harmony with the environment. Garland-Thomson recognizes the obvious disadvantage of being a “misfit body,” and the oppression and marginalization such bodies face. However, like Heideggerian “anxiety,” Garland-Thomson’s “misfit” leaves the stagnation of “harmony” behind, offering instead the potential for creativity and change, for a “cracked” reality from which consciousness-raising, solidarity, and freedom may emerge:

While misfitting can lead to segregation, exclusion from the rights of citizenship, and alienation from a majority community, it can also foster intense awareness of social injustice and the formation of a community of misfits that can collaborate to achieve a more liberatory politics and

praxis. . . . Even the canonical protest practices of disability rights, such as wheelchair users throwing themselves out of chairs and crawling up the stairs of public buildings, act out a misfitting. . . . Misfitting . . . ignites a vivid recognition of our fleshliness and the contingencies of human embodiment. . . . Although *misfit* is associated with disability and arises from disability theory, its critical application extends beyond disability as a cultural category and social identity toward a universalizing of misfitting as a contingent and fundamental fact of human embodiment. (228–29; emphasis in the original)

In the face of this crisis, global and personal, I refuse to make my hope one for harmony, order, and control. I no longer expect life to “return to normal” or bodies to be (only, always) healthy and abled. I embrace “misfitting” in a sincere attempt to recognize the pervasiveness of sickness, disability, and absurdity, in hopes that others will accompany and support me, in mutual solidarity and empathy, in the effort not to fall, or fall apart, while holding each other’s broken pieces.

REFERENCES

- Aho, Kevin. 2020. “The Uncanny in the Time of Pandemics: Heideggerian Reflections on the Coronavirus.” *Gatherings: The Heidegger Circle Annual* 10: 1–19.
- Butler, Judith. 2009. *Frames of War: When Is Life Grievable?* London: Verso, Radical Thinkers. Kindle Edition.
- . 2016. “Rethinking Vulnerability in Resistance.” In *Vulnerability in Resistance*, edited by Judith Butler, Zeynep Gambetti, and Leticia Sabsay, 12–27. Durham, NC and London: Duke University Press.
- Carel, Havi, Matthew Ratcliffe, and Tom Froese. 2020. “Reflecting on Experiences of Social Distancing.” *The Lancet* 396 (10244): 87–88.
- Cohen Shabot, Sara. 2006. “The Grotesque and the Philosophy of Merleau-Ponty.” *Philosophy Today* 50 (3): 284–95.
- Crowell, Steven. 2020. “Existentialism.” *The Stanford Encyclopedia of Philosophy (Summer Edition)*, Edited by Edward N. Zalta. Accessed June 25, 2021. <https://plato.stanford.edu/archives/sum2020/entries/existentialism/>.
- Garland-Thomson, Rosemarie. 2020. “Misfitting.” In *50 Concepts for a Critical* Phenomenology*, edited by Gail Weiss, Anne V. Murphy, and Gayle Salamon, 225–30. Evanston, IL: Northwestern University Press.

- Mackenzie, Catriona, Wendy Rogers, and Susan Dodds. 2014. "Introduction: What is Vulnerability and Why Does it Matter for Moral Theory?" In *Vulnerability: New Essays in Ethics and Feminist Philosophy*, edited by Catriona Mackenzie, Wendy Rogers, and Susan Dodds, 1–32. Oxford: Oxford University Press.
- Murphy, Ann V. 2009. "‘Reality Check’: Rethinking the Ethics of Vulnerability." In *Theorizing Sexual Violence*, edited by Renée J. Heberle and Victoria Grace, 55–71. New York and Oxon: Routledge.
- Ralkowski Mark. 2020. "Being-toward-Death." In *50 Concepts for a Critical* Phenomenology*, edited by Gail Weiss, Anne V. Murphy, and Gayle Salamon, 39-46. Evanston, IL: Northwestern University Press.