Alerting to mutualities, airborne and otherwise, spray holds potential to those striving for planetary wellbeing and justice. It warrants critical attention, and not oblivion once this moment of face masks passes.

Arne Harms
Institute of Anthropology
University of Leipzig
Leipzig 04109
Germany
arne.harms@uni-leipzig.de

KIM HENDRICKX

Contagion and memory

Observing voices claim that times are troubling, when they really mean that times are interesting. Interesting to analyse society when it supposedly lays bare its hidden structures.

When our so-called routines sit sadly, beaten and broken, in the pale dawn of the biggest breaching experiment since ‘breaching’ was termed. Seeing it that way, social science and capitalism have seldom sat closer. But COVID-19 is not an experiment, even though it sounds like one. Do people with lost income offer an ‘opportunity’ to observe ‘the weak points of the economy’? Is the triage of patients a ‘test case’ for the ‘resilience of the health care system’? Talk of resilience and opportunities turn inequalities and tragedies into solvable problems: next time we’ll do better. And we probably will, in the richer parts of the world, with more masks and tests, decent medical equipment and homes to comfortably quarantine in. Like sheltering for a storm and waiting still for it to pass.

Meanwhile, the virus brings many stories. One is about bats and deforestation; about the nonhuman in political negotiation. Yet my own taste for more-than-human ecologies didn’t prepare me for humanness lost. When I hear that people lose their loved ones and they cannot start remembering. So let’s think about memory. Our policies are forever fleeing into the future until the present catches up with us. The system’s weaknesses are hastily scrutinised in order to run faster with a new plan. But the plan leaves little place for practising memory. When the news came of a virus in China, we were merely reminded of infectious disease touching worlds where our memory doesn’t reach. We know about SARS and avian flu, Ebola and Zika, and we know that honourable experts and billionaire philanthropists have been warning for worse. But just ‘knowing’ doesn’t enlarge our memory; it doesn’t constitute collectives for sharing memory; it doesn’t cultivate responsibility. We didn’t take any sign seriously because our memory halts at national borders, even though our economic goods know better.
So the present is a silent spring of sorts. Especially for the elderly, keepers of collective memory, sacrificed for those who are clearing the forest to make way for the future. Sacrificed along with refugees, the homeless and those in faraway places whose memories we wish not to share. Events in remote places are too easily imputed to the local situation. So we must look for ways to become responsible without the burden of guilt (Rose 2004). And not try to save the world when ‘saving’ and ‘the world’ are miserable metaphors (Solnit 2016). I take from anthropology that it is sensitive to memory and wants its writing to be contagious. Not all contagion is bad. Curiosity is contagion. Enlarging the scope of what our memories may hold as moral beings.

Kim Hendrickx
Centre for Sociological Research
KU Leuven 3000
Leuven
Belgium
kim.hendrickx@kuleuven.be

References
Rose, D. B. 2004. Reports from a wild country. Sydney: University of New South Wales Press.
Solnit, R. 2016. Hope in the dark. Chicago, IL: Haymarket Books.

MAYARI HENGSTERMANN

‘What is anthropology good for?’
Anthropologists working in public health interstices

The public health measures implemented to avoid exposure to or contagion from COVID-19 are not only alien but also unsuitable to many rural settings in low-income countries. Social distancing, isolation and increased cleaning are measures that can be applied when people have a home that provides the opportunity to continue to work remotely, where toilet paper, tissues, hand sanitiser, soap and water are common items in the household. In many rural places, however, people are not only at risk of COVID-19 but also preventable diseases such as diarrhoea and other respiratory infections. To prioritise needs to mitigate the impact of the virus therefore becomes more difficult when resources and alternatives are lacking.