Coping with Covid-19 in Argentina: earliest impact on everyday life and work

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Abstract: This paper reports on the ongoing impact of Covid-19 pandemic in daily life in Argentina, highlighting the initial consequences of the quarantine established on March 20th in an attempt to control the outbreak. We focus on the perception of the role of political authorities, the media and the impact on habits in everyday life, which are being re-shaped in this new context. Online interviews were conducted in different cities of the North, Center and South of Argentina, including the capital, Buenos Aires. This is an exploratory analysis of an ongoing public health event whose consequences are presently far from clear, but its current contours have forced people to modify their daily routines, if not their lives. We highlight extreme reactions, ranging from “indifference” to “panic” or “selfishness” with “solidarity” emerging as the desirable and adequate response to the situation of “mandatory social isolation” or quarantine. Amid the uncertainty regarding the present and the future, novel contours emerge that account for the specificity of a South American country marked by recurrent economic and social crises throughout almost its entire history. Argentina was already struggling with financial difficulties, rising poverty and a fragile labour market characterized by high rates of unemployment and informality. This already delicate scenario was worsened by the sudden irruption of the first cases of Covid-19.

1. Introduction

On December 31st, 2019, China reports a new coronavirus causing an outbreak of pneumonia in Wuhan City. In the course of the next weeks, cases are registered in the rest of China, in South East Asia and the first infections occur in Europe, North America and Australia. On January 30th, the World Health Organization (WHO) declares a Global Health Emergency due to Covid-19. On March 3rd, Argentina registers its first case of coronavirus. On March 11th with 118,000 positive cases and 4,291 deaths in 114 countries, WHO declares a Global Pandemic for coronavirus. On March 19th, with 128 confirmed cases and 3 deaths, the president of Argentina, Dr. Alberto Fernández, establishes by decree a full lockdown or “preventive and mandatory social isolation” throughout the country, lasting until March 31st. This measure prohibits inhabitants from leaving their homes, with the exception of buying food or medicine, and restricts movement including the suspension of public events, closure of shops, schools, universities and many others. Mobility and transportation between cities have been significantly reduced since trains, planes and buses have been almost completely cancelled. Within the cities, public transportation has also been reduced to ‘weekend frequencies’ and it is not possible to circulate without a special permission granted to ‘essential workers’ such as doctors, nurses and other health practitioners.

1 Currently multiple theories shuffle hypotheses about the ‘true origin’ of this disease.
2 This alert has been declared five times in XXI century: in 2009 with H1N1 flu, in 2014 and 2019 with the Ebola outbreaks in West Africa and in the Democratic Republic of the Congo, in 2014 by polio and in 2016 due to the Zika virus.
3 At present date, July 15th, quarantine restrictions are still in force.
professionals, security personnel, and a few others excepted from lockdown rules. By the end of March about 4,900 persons were detained and 140,000 were notified for breaking social isolation restrictions.

In Argentina this novel scenario forced people to drastically alter habits, routines and behaviors as well as to improve or develop coping skills to deal with quarantine and its implications. For instance, for middle- and upper-class people and families ‘sheltering in place’ may not be as hard as it is for low-income people, many of whom are daily wage workers; or for women who suffer domestic violence; or for people living in the streets for whom the instruction ‘stay at home’ seems quite pointless. Besides, in Argentina, at least four million people live in villas, improvised neighborhoods of the extremely poor, consisting of precariously overcrowded buildings, sometimes with no access to basic sanitation and water availability limited to a shared tap in a public space. Historically marginalized groups include indigenous communities, displaced by ‘civilization’ for centuries, and now, with a lack of medical attention and supplies, they fear coronavirus could ‘wipe them out’ (Collyns, 2020).

Either with access to adequate housing or not, changes had to be made for almost everyone living in urban centers in Argentina. These alterations are producing anxiety (Saner, 2020) since they have disrupted daily routines and the certainty that one could read the world and be more or less competent in it; that one could make plans and live one life according to one’s possibilities and in the case of being truly privileged, according to our wishes. However, in recent weeks and months, the certainties with which a part of the planet population went through their daily lives have entered a limbo, since a billion people have gone through quarantine or lockdown all around the world by March 20th. In this emerging scenario new capacities and coping strategies had to be developed in an unprecedented way. The psychological and mental consequences are still a matter of conjecture, but the adverse consequences of loneliness—and isolation—are well documented. This article focuses on the impact of Covid-19 and the lockdown that was imposed to stop its spread, in five aspects: daily routine; work; government responses; people’s reactions and media coverage. We have decided not to address the health system, which is under unprecedented pressure both for health workers and for material resources. This should probably lead to a re-examination of the entire health system, of the ‘effectiveness’ of market-based criteria when dealing with health issues; of the possibility of a community-based approach on health care, and so on.

2. Methods, techniques and data collection process

The aim of the paper is to explore the first reactions to quarantine and how it is affecting some aspects of daily life, what the representations of media and government are, as well as the reactions of ‘other people’ and the concerns regarding the present and the future scenario, which remain an open possibility. This paper uses Anthony Giddens’ theory of structuring by, highlighting the notion of ‘agency’; as well as some elements from Pierre Bourdieu’s theory of social fields, since the new scenario came to produce a change in what is defined as ‘habitus’: ‘systems of durable, transposable dispositions, principles which generate and organize practices and representations that can be objectively adapted to their outcomes’ (Bourdieu, 1990). Both individual and social reconfigurations are undergoing multiple analyses, since the United Nations considers the coronavirus to have caused the greatest crisis since World War II (UN, 2020). However this paper is much more limited in scope, since it is based on interviews with middle-class young adults in Argentina and their views on the first impacts of the pandemic. Individual online interviews were conducted with 15 persons (9 female, 6 male, between 34 and 42 years old) in three cities of Argentina with international borders: Mendoza, in the West, near Chile; Posadas in the North-East, on the border with Paraguay, and Buenos Aires, the capital city next to Uruguay.

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4 Although there is no official data for the country as a whole, various NGOs counted 7250 people living in the streets in Buenos Aires city in 2019.

5 UN experts warned that the coronavirus cannot be stopped if water is not provided to vulnerable people: ‘the global fight against the pandemic has little chance of success if personal hygiene, the main measure to prevent contagion, is not within reach of the 2.2 billion people who no dot have access to drinking water’ (UN, 2020).
3. Analysis of data

Data was grouped into categories according to whether it referred to changes in the daily life, changes in employment, the decisions taken by the government to alleviate the epidemic and its consequences, the coverage of broadcasting media, the behavior of this more or less abstract collective which is ‘the people’ and their concerns towards the present and the future of the outbreak. The technique of content analysis allowed an in-depth view of the information provided by the interviews. Data was run through MAXQDA Software in order to build word clouds and establish frequencies for each key word that arose in the interviews.

3.1. Changes in everyday life

Fig. 1. Word Cloud: Changes in everyday life

Most informants agree that changes in everyday life had to be made in some areas, namely: adapting routines to a new schedule; avoiding contact with other people; intensifying the routine of cleaning and ‘permanent disinfection’. These appreciations range from ‘we had hygiene well taken care of before’ to: ‘being obsessed all the time to disinfect everything, the door of the house, the tables, the taps, everything that one touches, then washing my hands again’.

Additionally, the actions necessary to observe the quarantine: ‘trying not to leave home; ‘going out as little as possible’. For those who are accompanied, the situation seems not as critical as for those who quarantine alone: ‘it is an emotional issue of zero contact with anyone. I haven’t said hi to anyone in a while, it’s very rare. You feel the lack of contact’. Also the idea arises that ‘it’s not a vacation’, as many people seemed to believe at first. For those with children, one of the challenges is to continue schooling at home. For those who are teachers, the challenge is to move from face-to-face to virtual education, as we will see in the next section. Doubts regarding isolation measures arise, as well: ‘I think about whether it will be necessary to buy more food and cleaning items; ‘when I’m already home: do I have to keep washing my hands every so often? Or those measures are only for when you are on the street and, once we get home, we wash our hands, and then we are safe?’ But changes in daily life seem inextricably linked to transformations at work and it is difficult to understand one without considering the other.

3.2. Changes related to work

Fig. 2. Word Cloud: Changes related to work
We refer to the ways in which paid work has changed. Only three informants affirm that ‘practically nothing’ has changed in this regard, since they are employed in research and projects design; ‘which can be done from the office or from home’ and the third one works as security personnel in a wine cellar in the mountains: ‘I had no contact with anyone before the pandemic, so nothing has changed’. One female informant indicates that household chores have doubled: ‘beyond the changes in my paid work this adds to the unpaid work that I have as a mother and as a housewife that makes me very tired and overworked’. In general, there seems to be a consensus regarding the increase in the number of hours worked from home, especially for women, with all its implications in the widening of the gender gap. Some workers were able to carry out their tasks more or less normally from home, but for those employed in tourism or ‘non-essential’ activities the situation is extremely challenging. Two of our informants who worked supplying hotels point out that ‘the situation is very serious since all reservations have been dropped and hotels are closing…our sector has been very affected’. Another informant, a doctor specialized in virology, highlights that now he works ‘more than ever’ and the great concerns surrounding the pandemic: ‘there is always the fear that a person with symptoms will come and that they can infect you and other patients. In my work there is a climate of panic more than anything’.

We highlight the case of teachers (one of the initial level; two of high school and one professor), each of whom points out the difficulties they face: for the initial level, the challenge is to carry out online activities with children 4-5 years old: ‘we are putting together virtual material, such as songs, stories, suggestions to assemble at home, but it is a problem for families who do not have an internet connection or do not have a phone’. As for High School teachers: ‘we are working from our homes sending activities to students through different platforms, email and WhatsApp, trying to do all we can. Sometimes it is late at night and I am still answering questions from my students, trying to make this situation affect us as little as possible’. Also the fact that ‘many of us do not have enough training in the management of information technologies to set up virtual classrooms, so there are many WhatsApp groups that are sometimes a bit annoying’.

As for higher education: ‘we did not have developed digital classes or virtual classrooms. Technology is not yet incorporated into the education system, neither public nor private. Therefore, we had to develop contingency plans in two or three days’. The transition from face-to-face to virtual/remote work, seems to be a crucial arising issue, which poses a challenge for countries in which technology is not widespread, with many connectivity issues, especially in rural and semi rural areas.

### 3.3. The government reaction

The responses vary, but almost all the interviewees agree that the measures taken by the government have been ‘good’, ‘necessary’ and ‘adequate’ and that it has reacted ‘correctly’, ‘quickly’ (for 86% of the interviewees). In their own words: ‘The reaction of the government seems good’; ‘They have been up to the job’; ‘the necessary measures are being taken’; ‘they are learning a little from what happened in Europe’. Concerning ‘extreme’ measures: ‘If they did not take extreme measures, many people would not take care of themselves and consequently do not take care of anyone’; ‘Although at the time it seemed exaggerated to close borders and close schools, now it seems that the measures are perfect’. On the other hand, 15% point out that the measures are ‘insufficient’ for a country with a fragile economic situation such as Argentina: ‘there are structural problems that if this virus spreads the health system will collapse even worse than it has collapsed in Europe’; ‘poverty rates are much higher in Argentina and the government is not in a position to take structural measures to stop all this’; and they even relate it to the situation in the labor market: ‘a lot of people work in the informal economy and are not able to

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**Fig. 3. Word Cloud: the government reaction**
work at the moment’. Finally, an informant raises the question of the need of taking unified measures between the national and provincial governments: ‘it is difficult to have a unified policy throughout the country and throughout the region because it is a very extensive territory with very different socioeconomic backgrounds’.

3.4. The media coverage

Informants provide diverse perspectives, but all agree on the different effects of broadcast media and how they can influence public opinion and tend to create a distorted image of reality, which can either lead to ‘calm’ or ‘psychosis’: ‘The media is always exaggerating’; ‘there is no talk of anything else’; ‘They show it in a tragic way that makes people paranoid’; ‘they are quite irresponsible’; ‘reporting poorly’; ‘they lack respect for viewers and the audience’; ‘they over-report and people get saturated and do half of the things and do them badly’; ‘media contributes to chaos and fear and misinformation. They are the most dangerous in this story. They make people go crazy’. Another perspective that arises is that each media reports ‘what is best for them’; ‘there is no reliable information, ‘there are many versions of everything’; ‘each one says a different thing and one is left with more doubts than before’.

Some informants highlight that the media groups ‘are not all the same’, and that even though it contributes to paranoia it can also be useful: ‘media coverage is a double-edged sword’; ‘I try to inform myself through official media that is not so sensationalist’; ‘the media are varied and with different informative approaches’; ‘various media have set up health committees and are being quite responsible with the information they release’. Others blame people for spreading ‘fake news’ in social networks: ‘there are irresponsible persons who send information in the WhatsApp groups or upload it to Facebook, for example, that the cure to coronavirus is a mixture of garlic and water, and so on...That causes more disinformation than what is published in the media’; also: ‘the misuse of social networks is causing misinformation’. At this point the necessity to choose and be critical emerges: ‘I don’t listen to things that make you paranoid. Concerning hand washing, I think we should have already known how to wash our hands’; ‘you have to be selective to access reliable news. The coverage is wide, which forces the recipient to take an active position in the processing of the information’.

3.5. People’s reaction

Different responses are mentioned, ranging from selfishness (26%) and paranoia (46%) to solidarity (26%) as the most desirable behavior at this juncture. In the words of the informants: ‘There are two groups of
people, those who are paranoid, buying things that they do not even need...and there is another group that just 'doesn't care' and continues going out; 'Two types of people, those who became totally paranoid and those who really don't care'; 'Some people with a lot of responsibility, others with paranoia and others a lot of unconsciousness and selfishness'; 'There is a lot of ignorance in an big part of the population'; 'People are having a hard time isolating, understanding that we need to stay at home. Some only understood it by force'; 'People react differently according to specific personal and social circumstances that affect them'; 'The purchase of toilet paper went viral and it is funny given that there is no proof that accumulation of toilet paper can prevent Covid-19 contagion'; and finally in opposition to solidarity and cooperation the notion that 'the reactions are diverse but they all show what bad persons we are'.

3.6. Current situation and present and future concerns

Finally, on how the quarantine raises concerns for the present moment but also for the future, three views emerge: first, concern for the health of family, especially the elderly (46%); concern for sick people (33%) and for those who do not have a home to quarantine in (15%). Linked to this arise concerns about the actions of other people regarding quarantine: 'that part of the population does not realize that this is a matter that concerns everyone. That if everyone puts their effort and stays at home, things will be solved sooner'; 'people do not listen to the measures that must be taken to stop the pandemic, such as isolation, they think this is a joke'; 'I am more concerned with the actions of others than the virus itself. People's selfishness can cause further damage to the daily life of the entire society as a whole'.

Secondly, the concern about 'the economic situation' which 'was already bad in Argentina' and along with it, the future of many works, 'Argentina's economy was already bad, and it is going to get worse'; 'A lot of uncertainty because the economy was already complicated and now it will be even more difficult'; 'This is going to generate a crisis very much deeper than the one we were having'; 'Regardless of what happens with the virus, the economy will be greatly affected'. Linked to economic situation arise other doubts, such as how long could the quarantine be extended: 'I am not going to die of hunger, but isolation is something that we are not really prepared for, nobody is prepared'; 'What if this gets out of control, and ends up being much worse than it is already being'; 'It will take a long time to solve'; 'I am concerned about what will happen. Everything seems uncertain'.

And finally, the 'hope' that we can 'learn something' from this pandemic is a desire shared by 86% of the informants: 'I wish with all my heart that this will help us to look a little more at each other and be a little more caring and generous'; 'I hope that we become better and we achieve a balance between nature and humans, as it should have always been'; 'Hopefully when the pandemic is over, we will be a better version of ourselves'; 'For the future I hope for nothing in particular. Only that everyone gets to be a little better people'; 'We all hope it is a change for better'.

4. The outcomes of the study

The outcomes of the study can be grouped into two levels; firstly, the perspective regarding the difficulties that the pandemic presents in countries such as Argentina. In the most fragile economies, which exhibit higher levels of inequality, poverty, unemployment and informal employment, there seems to be no room for planning the future. In this scenario, the outbreak of the coronavirus pandemic adds even greater uncertainty, knowing that we all could be – or are already – carriers of a potentially deadly virus. As for the measures implemented to fight this menace, informants agree that the government's first reactions are 'adequate', that they have taken what seems to be the best course of action in a context of uncertainty. There is also consensus around the notion that media has 'spread panic' among the population, but that we can choose how to inform ourselves, and select newscasts that do not 'sow panic' or 'seek sensationalism'. It also emerges that in the face of quarantine 'people have acted irrationally' by going out to buy unnecessary things, taking quarantine as an opportunity to 'go on vacation' and take part in other social events that isolation seeks to avoid for reducing the spread ('flattening the curve') of the disease. It also becomes apparent that the education system in Argentina was not prepared for the sudden transition to remote education that quarantine has required: the teachers and professors interviewed are in agreement about the strains of implementing online education due to the lack of tools and the scarce development of educational platforms in the country. These issues could be the
basis of future research on the challenges of implementing virtual education and the need for training teachers at all levels in the use of ‘new technologies’. However, a material obstacle persists: the lack of internet, or even electricity in many rural or semi-rural areas of Argentina.

Another outcome of the study permeates the response of the informants: the notion that ‘we’, ‘people’, each of us as individuals, are constitutive parts of society and our individual behaviors are contributing to (re)shape the social world and decide the outcome of the pandemic. Perhaps it is a feature that is revealed in the great crises of society, but usually people can only react in the best possible way such as in the consequences of 2008 crisis, for instance. In this case it is not only a reaction but also a positive action which is actually shaping the contours of social transformations. It is us, abiding by quarantine or ‘going on vacation’, receiving messages from the media critically, trying to discern what is true from what is false, educating our children and our students from home if we are lucky enough to have one who are the leading characters of this novel scenario shaped by this pandemic. Individual behaviors seem to overlap their contours with the underlying structures of social life, so what happens in one has an immediate impact on the other. Although many studies highlight the distresses (boredom, above all, something unthinkable in a society based in consumerism and entertainment) caused by the lockdown, it seems that agency has become clear since each person can contribute to shape, to a greater or lesser extent, the contours of both subjective and objective structures that make up society.

5. Conclusions

At present time, history – future history – is an open possibility, society seems to be malleable. Certainties were cast aside and everything seems equally possible; as Karl Marx stated in 1848, ‘everything that is solid melts into air’. For the first time, those occupations that do not receive greater social recognition such as vendors of food, fruit, vegetables, supermarket cashiers, garbage collectors, are acknowledged as ‘essential workers’. Health workers arise as the ‘frontline’ in struggling with this disease and are widely recognized, at least discursively and symbolically. Even the importance of the work of teachers seems to be noticed now that schools and universities are closed. But the outcomes of this crisis remain to be seen; will everything return to ‘normal’, to the way it was before the epidemic? There seems to be consensus around the notion that changes are so extreme that they prevent a return to previous scenarios. What the pandemic will involve at the social, economic, political and health level, and how families and social ties will be reconfigured, is not yet settled. In what seems to be the most desirable scenario, we take advantage of this historical opportunity, of this window of possibility that has opened at the cost of the enormous suffering of a part of the population in central countries. This suffering is recurrent in peripheral regions, but only when it knocks on the doors of Europe, the United States and the richest countries in the world does it seem to truly exist and deserve to be addressed by the international community. If not, it remains anecdotal and something that NGOs will eventually take care of. But never before in recent history has a pandemic led us to question the principles of the social and economic organization so fundamentally. The answer to this questioning may entail the continued degradation of the environmental as well as the persistence of extreme poverty for 1.3 billion people in the world; or it may settle the foundations for a more equal and inclusive society; where life is not only a constant struggle against adversity but also a source of fulfillment, dignity, freedom and joy.

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