Care during exceptional times: results of the CUIDAR study on the COVID-19 pandemic in Chile

Sebastián Rojas-Navarro a, Francisco Moller-Domínguez b, Samanta Alarcón-Arcos c, María-Alejandra Energici d and Nicolás Schöngut-Grollmus d

aFacultad de Educación y Ciencias Sociales, Universidad Andrés Bello, Santiago, Chile; bInstitute of Local Governments (INLOGOV), University of Birmingham, Birmingham, UK; cIndependent Researcher; dFacultad de Psicología, Universidad Alberto Hurtado, Santiago, Chile

ABSTRACT
This article presents some results of “CUIDAR: study on times, forms, and spaces of care at home during the pandemic,” a research project that explored how the pandemic and the subsequent policies implemented by the Chilean government transformed and disrupted the spatialities, temporalities, and practices of care within the households. To do so, we designed a web survey that draws inspiration from care theories emerging from the field of Science and Technology Studies or STS. Such an approach allowed thinking about care as a more-than-human affair that goes beyond a particular moral stance and corresponds more with a doing anchored in the entanglements of human and non-human actors. Data gathered revealed the appearance of new actors while stressing that care is much too relevant and complex to only rest upon specific household members – namely women – who are left to their own devices since policies implemented seem to be unable to support them in the tasks of caring for themselves and others.

CUIDADOS EM TEMPOS EXCEPCIONAIS: RESULTADOS DO ESTUDO CUIDAR SOBRE A PANDEMIA DE COVID-19 NO CHILE

RESUMO
Este artigo apresenta alguns resultados de “Cuidar; estudo sobre tempos, formas e espaços de cuidado no lar durante a pandemia,” uma investigação que explorou como a pandemia e as políticas subseqüentes implementadas pelo governo chileno transformaram e interromperam as espacialidades, temporalidades e práticas de cuidado dentro dos lares. Para isso, elaboramos um web survey que se inspira nas teorias do cuidado que surgem do campo dos Estudos de Ciência, Tecnologia e Sociedade ou CTS. Tal abordagem permitiu pensar o cuidado como uma questão mais-que-humana que vai além de uma

CONTACT Sebastián Rojas-Navarro sebastian.rojas.n@unab.cl

© 2022 The Author(s). Published by Informa UK Limited, trading as Taylor & Francis Group

This is an Open Access article distributed under the terms of the Creative Commons Attribution License (http://creativecommons.org/licenses/by/4.0/), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

KEYWORDS
Care; COVID-19; pandemics; informal caregiving; Science and Technology Studies (STS)

PALAVRAS-CHAVE
Cuidado; COVID-19; pandemias; cuidado informal; Estudos em Ciência, Tecnologia e Sociedade (CTS)

PALABRAS CLAVE
Cuidados; COVID-19; pandemia; cuidados informales; Estudios de Ciencia, Tecnología y Sociedad (CTS)
determinada posição moral, correspondendo principalmente a uma tarefa que depende das redes que se constituem entre atores humanos e não humanos. Os dados coletados revelaram o surgimento de novos atores, ao mesmo tempo que enfatizaram que o cuidado é muito relevante e complexo para recair apenas em determinados membros da família – em sua maioria mulheres – que são deixados à própria sorte, uma vez que as políticas implementadas parecem não suportar elas nas tarefas de cuidar de si e dos outros.

Cuidar en tiempos excepcionales: resultados del estudio CUIDAR sobre la pandemia de COVID-19 en Chile

RESUMEN
Este artículo presenta algunos resultados de “CUIDAR; estudio sobre tiempos, formas y espacios de cuidado en el hogar durante la pandemia,” una investigación que exploró cómo la pandemia y las políticas posteriores implementadas por el gobierno chileno transformaron y trastocaron las espacialidades, temporalidades y prácticas de cuidado dentro de los hogares. Para ello, diseñamos una encuesta web que se inspira en las teorías del cuidado que surgen del campo de los Estudios de Ciencia, Tecnología y Sociedad o CTS. Tal enfoque permitió pensar en el cuidado como un asunto más-que-humano que va más allá de una postura moral particular, correspondiendo mayormente a un quehacer que es dependiente de los entramados que se constituyen entre actores humanos y no humanos. Los datos recopilados revelaron la aparición de nuevos actores, al tiempo que enfatizaron que el cuidado es demasiado relevante y complejo para descansar solo en miembros particulares del hogar – mayormente las mujeres – que son dejadas a su suerte, ya que las políticas implementadas parecen ser incapaces de apoyarlas en las tareas de cuidar de sí mismas y de los otros.

1. Introduction

A generalized crisis narrative has taken hold of the public imaginary since the emergence and rapid spread of the COVID-19 virus. The pandemic has detonated significant changes at a global level and prompted various reflections regarding the social, economic, cultural, and technological elements associated with the emergence, transmission, and containment of the virus. The most pertinent ways to think about our relationship with the world have been reflected upon by many actors and institutions, based precisely on this crisis. Thus, controversies, disputes, and debates regarding the very nature of the problem that the COVID-19 pandemic has made us face have been brought up: What is the best way to face it? Are we dealing with a public health issue, or is this pandemic better described as a consequence of our production models? Or is it the human role in the Anthropocene? How should we approach present times to elaborate a different future that avoids repeating the same mistakes and shortcomings (Savransky 2021)?

This article addresses the transformations and problems emerging from the COVID-19 pandemic from the perspective of care. More specifically, we present and interpret some
of the main results obtained from research carried out in Chile during the first semester of 2020, in which we empirically explored the transformations and reconfigurations of practices, temporalities, and materialities of care that took place within homes after the government’s COVID-19 response policies shut down social spaces. In the context of the overload taken up by homes, considering the social space discontinuation produced by the aforementioned government’s policies, we investigate what this has meant for self-care and the care of others, and how care has been rebuilt and re-signified through a series of operations that include new actors, materialities, temporalities, and spatialities.

We embrace a conceptualization of care the scope of which extends beyond the way in which care practices have been absorbed by household members during these extraordinary times, using a theoretical framework inspired by Science, Technology, and Society Studies (STS). Following the STS theoretical proposal on care, we explored how various non-human agents appeared as actants that made possible new and creative forms of care that would allow the continuity of productive and reproductive life within the respondents’ households. This provides an interesting complementary lens to discussions happening since the pandemic’s beginning, as these discussions have focused mainly on the consequences that the pandemic has had on the economic sphere but have only obliquely referred to the pandemic’s impact on how everyday life has reassembled. With this study, we strive to deepen the understanding of carers’ experiences and practicalities and shed some light on the emergent material arrangements upon which care is built and sustained. Additionally, our research emphasizes the interconnected and more-than-human aspects of care by describing the practicalities of how care occurs in daily relations among human and non-human actors, such as technologies and pets.

1.1. Context of the research

The transformations and reconfigurations within homes began on March 15, 2020, when the government first implemented various strategies to contain the spread of the COVID-19 virus, focused on the idea of “dynamic quarantines,” which soon proved inefficient to handle the crisis (Canals et al. 2020). These measures were later replaced by stay-at-home orders for entire regions, harsher movement restrictions, a national curfew, and strict hygiene protocols for public spaces. In addition to the confinement, which exceeded 200 continuous days in some areas, educational establishments switched to online-only classes, hygiene measures were strengthened, and teleworking was implemented for all possible cases (Ministry of Health 2020). The challenge of simultaneously coping with work and daily educational activities, coupled with prolonged confinement conditions, prompted the rearrangement of a series of practices and logics normally satisfied outside the home. Faced with this social space disruption and discontinuation, households had to multiply their functions, operating as care spaces, schools, offices, and as recreational and productive environments, amongst other tasks and roles (Errázuriz and Greene 2020).

Decisively, not everyone had been equally affected by these new conditions (Rojas-Navarro et al. 2021). As many have mentioned, the COVID-19 pandemic and its consequences have exacerbated and shown a spotlight on the so-called crisis of care (CEPAL 2020), which feminist research has long related to the artificial division of life, instigated by capitalist societies, into two domains: an economic production sphere, highly valued and mainly assigned to men, and a second sphere, linked to social reproduction,
associated primarily with women and the feminine, whose importance has been trivialized or silenced (Fraser 2016). Both this bifurcation and its unequal valuation have been criticized by feminist research. As Ezquerra (2011) points out, the productive world depends absolutely on the reproductive world in a parasitic relationship. Hence, the traditionally “visible” and “valued” economy depends on the invisible, unpaid, and undervalued work that mostly women quietly perform at home. These conditions have been documented in Chile by Undurraga and López-Hornickel (2020), who consider that the crisis of care was aggravated and crystallized when the military dictatorship implemented a neoliberal market model. As the Chilean government embraced neoliberal market policies, profit-making became a central goal around which everyday life is organized, while the state remains small and weak in terms of care and the aid it can provide. Consequently, the family became the central and nearly sole institution to take on the burden of care, along with paid care services, as governmental efforts have mainly sought to prioritize financial interests and flow of capital. Austerity policies implemented meant the state had less power to adequately contain and respond to the pandemic crisis (The Care Collective 2020).

These shortcomings were mirrored by the Chilean government’s initial policies to contain the COVID-19 epidemic. COVID-19 policy responses aimed to keep economic productivity as pristine as possible but gave little consideration to the nature and magnitude of the impact that teleworking, school lockdowns, and movement restrictions would have on the daily lives of carers. Moreover, little regard was given to the multiple complexities that arose when individuals were forced to balance their work routines with caring for others and themselves simultaneously, in the abrupt absence of any aid previously lent by other family members, neighbors, acquaintances, or paid domestic service. The COVID-19 policy responses implemented in Chile brusquely collapsed the whole of the social world down into the household. Carers had to comply concurrently with additional roles to make up for demands previously met by others, and homes had to endure transformations and modifications to adapt to such requests.

Our research sought to empirically explore how the various logics, spaces, materialities, and times within the home have been transformed by incorporating a series of actions that used to be carried out in other times and places by different actors of the social world. Prolonged confinement has pushed individuals to perform care roles and activities that go beyond what might be considered a reasonable workload. Who cares for the carer? Who supports daily life’s fragile framework? And how were care practices adapted or transformed by the effect of quarantines in light of the discontinuity of care networks?

2. The study of care: the theoretical approach of CUIDAR

Even though care is part of the framework of everyday life for all individuals, the concept of care has been mostly understood and developed in relation to health issues, social work, or about specific groups that require greater effort in care (Barnes 2012; Mol, Moser, and Pols 2010; Phillips 2007). Feminist epistemologies have dealt with the topic of care, working towards different conceptualizations of the values and ethics that organize, guide, and conduct our actions and affections (Gilligan 1993; Tronto 2013). Care has been the subject of extensive debate in the social sciences (Barnes 2012; Phillips, 2007; The Care Collective 2020).
Although it is possible to distinguish fields where the theory of care has achieved greater traction, care has been a complex subject to define for the social sciences. As Caduff (2019) points out, care risks becoming a “borderless concept” that is “everywhere and nowhere; that it is everything and it is nothing” (Caduff 2019, 790). The ambivalence of the concept, and its blurry edges, seem to be an essential part of it. After all, care relationships require – as Caduff himself suggests (2019) – a constant calibration between closeness and distance. Caring requires improvisation, meeting impossible demands, and constantly dealing with ambivalent feelings. Thus, care seems to comprise ambiguity and the production of precarious and evanescent worlds, which are strongly marked by the contingency of situations, rather than a solid structure anchored on foundations originated in affective predisposition. These encounters provide “imprecise” solutions which operate in an “adequate, but never perfectly accurate” way (Caduff 2019, 790).

Considering the contingent and open feature that care provides, CUIDAR study sought to reflect on the modifications that these practices and logics of care may have experienced during the pandemic. Is care provided in the same way as it was before March 2020? Are new actors entering the scene? Do we still think about care as we did before? The study poses these questions using a conceptualization of care inspired by Science, Technology and Society Studies – or STS (Buse, Martin, and Nettleton 2018; Puig de la Bellacasa 2011; Puig de la Bellacasa 2012; Latimer 2018). This means that the exploration of topics about care was not reduced to an internal predisposition that would be deposited in the individual’s moral position regarding others and that would guide a series of behaviors and actions from that point. An STS reconceptualization of care forces us to capture the way in which care is guided and encompasses different affects, ethics, and agencies that have material and practical consequences (Puig de la Bellacasa 2017). Distributed agencies are constituted by human and non-human agents in networks. Care may not be reciprocal but is necessary to build and preserve a sense of interconnection and interdependence that is crucial to sustain daily life. This definition takes a distance from more traditional theories of care, which propose – always human – actors conceptualized as essentially autonomous and deciding to act freely and voluntarily.

To make the above operational, we embrace Buse, Martin, and Nettleton’s notion of “materialities of care” (2018), a proposal and schematization of care that encompasses the everyday aspects of material culture in the contexts of care. The authors propose three analytical dimensions inherent to care and its material elements: spatialities, temporalities, and care practices. We agree that such an approach can work as a “heuristic device” that helps open the mundane up to examination by placing focus on how everyday care practices rest upon particular material cultures. Care practices are enacted thanks to entanglements of human and non-human actors that enable specific ways of caring for oneself and others. In this process, things and objects actively constitute the interweaving upon which the relationships of care rest, taking part in their tinkering and remaking.

3. Methods

A non-probabilistic convenience sampling design was used, and a remote survey was applied to ponder the inherent difficulties of conducting data production in households.
under social distancing and stay-at-home orders. Although this strategy ensures satisfactory response rates (Robson 2011), it also makes it challenging to identify and characterize a population of respondents (Bethlehem 2010). Still, recent studies have reported its effectiveness in measuring viewpoints in the context of the ongoing pandemic (Geldsetzer 2020).

A cross-sectional survey was designed as a self-administered questionnaire. The questionnaire was articulated around the dimensions of spatiality, temporality, and care practices, in reference to Buse, Martin & Nettleton’s theoretical proposal (2018). Care was operationalized with consideration of the challenging uncertainty and constant modifications that households are facing during the pandemic. The questionnaire included items regarding the respondents’ employment situation before and during the pandemic, a home characterization module, and questions about the role of non-human actors (such as technological devices and pets, among others) in care. The respondents’ email address was requested as a means of validation and to avoid receiving multiple responses from the same participant. After presenting the study’s objectives and data privacy policy, the respondents were asked to sign an informed consent confirmation, as per standard protocol. Participation in the survey was voluntary and ensured data confidentiality.

In cases where respondents stated they live with children under the age of 12, 14 questions were presented to delve into the new care practices that emerged after the switch to online-only classes, officially decreed on March 15 in Chile. Those who reported living with at least one pet were asked five questions to express their agreement with statements about their relationship with their companions during the voluntary or forced confinement periods. In addition, the survey included for all respondents an open question about a potential change in the understanding of care based on the experiences of the pandemic.

The questionnaire was first administered in a pilot phase to corroborate its duration and completion rate (N: 30). The result was a high completion rate and a 10-minute average online duration, which aligns with the recommendations of specialized literature (Revilla and Ochoa 2017). Once the questionnaire was programmed, we created a link to access and respond the survey, which was shared via social media accounts specially designed for this project. Additionally, because of the topic’s relevance, universities and non-academic organizations also agreed to publish the link and share information about the project, incentivizing people to participate. The survey also found its way organically to radio stations and other communication channels outside of Santiago, the capital city. The link was active between Saturday, 2nd, and Friday, May 15, 2020. A total of 2023 surveys were validly answered, and 2005 were considered complete.

3.1. Sample description

Seventy-four percent of the 2005 validly counted cases correspond to people residing in the Metropolitan Region. The second majority of participants was concentrated in the Valparaiso Region (Region V), and the third in the Biobío Region (Region VIII). While the Metropolitan Region accounts for 41% of the total territory at the population level, followed by Region V and Region VIII, respectively, the distribution of the sample does not directly compare to that of the population.

Regarding the gender distribution of the sample, 75% identified as female, 24% as male, and 1% as non-binary. Five age groups were identified: 13% of the participants
were aged 18–25; 24% were aged 26–35; 33% were 36–45 years old; 20% were aged between 46 and 60, and 10% were over 60 years old. The average age of the respondents was 40; the youngest participant was 18, and the oldest was 87.

Concerning their level of education, 43% of the sample declared complete technical or university studies, 36% declared postgraduate studies, 14% declared incomplete technical or university studies, and 8% declared to have only completed primary or secondary education levels. This distribution differs from national census data, where only 20% reported professional studies and 2% masters or doctorate studies. This coincides with typical population validity bias for online surveys (Geldsetzer 2020; Utzet and Martin 2020).

This overrepresentation does not prove an obstacle for our research’s aims: to explore the effects of confinement on spatial, material, and temporal modifications related to care. According to Bennett (2021), economically better-off households present a higher compliance rate to stay-at-home orders. Meanwhile, vulnerable families struggle to comply with self-confinement because they do not have the savings to afford it, nor can their work be done remotely. Considering this, an oversample of highly educated people allows us to safely assume that most of our sample effectively stayed home during lockdowns, fulfilling one of our essential research requirements. In fact, 75% of the working respondents stated they were working remotely.

Finally, 40% of the sample declared they lived at home with at least one child under the age of 12; 61% claimed they lived with at least one pet, and 60% of those who reported living with at least one child under 12 also declared they lived with at least one pet.

### 4. Results and discussion

Our results shed light on some of the transformations that occurred within homes at the beginning of the pandemic in Chile. These transformations relate to at least two government measures that lead households to assume new functions and roles (Spinelli et al. 2020), pushing home members to overstrain in their usual care roles while struggling to adapt to a complex and uncertain new scenario.

The implementation of zone-specific stay-at-home orders was the first measure that caused social and economic upheaval nationwide. Lockdowns and calls for social distancing led to a breakdown in household support networks. Individuals living outside the household – other family members, paid domestic help, close ones, and acquaintances – could no longer collaborate in these essential functions. When state-mandated confinement began, a greater number of tasks had to be fulfilled by fewer actors within each home, and, in many cases, these actors were not used to performing them.

The second measure was the shutdown of the physical premises of educational establishments and the switch to online-only classes. This transformed homes with children into educational spaces and forced adults to devote part of their time to accompany and/or teach their children, filling in for a large chunk of the teachers’ role. It should be noted that educational institutions not only educate and provide care but also supply children with alternative spaces other than their homes, which they inhabit during most of their day, allowing adults to perform other activities such as work, maintenance, cleaning, shopping, and resting. 62% of the people who answered the survey declared
that they were working for a salary by May 2020, when CUIDAR was applied. 63% of those who reported living with at least one child under the age of 12 at home were working, and 77% of those who worked were teleworking. Hence, subjects had to perform many functions simultaneously and fulfill multiple daily demands delegated to someone or something else before the pandemic.

We will now present the main findings for the three axes of analysis previously mentioned: temporalities, spatialities, and care practices. These axes are discussed from the point of view of specialized literature to generate intelligibility regarding the obtained results.

4.1. Transformations in the distribution of time during the pandemic: the burden on women

Care can be understood as daily and ordinary actions and interactions, where concrete and creative practices are deployed to account for and solve the needs of others (Murray et al. 2017). Significant differences were detected in the daily settings of families with children under 12, comparing the moment before and after the pandemic began. Before the pandemic outbreak, educational establishments played a central role during the morning as a space for pedagogical practices but also for care purposes. On the other hand, mainly mothers or stepmothers assumed the care functions during the afternoon, a role they shared to a significant degree with domestic service personnel or other family members, such as grandmothers. This is shown in Figure 1.

This is not surprising. It is mainly among these two actors – families and paid care institutions – that the practices necessary to sustain daily life usually are distributed, as Barnes (2012) states. Furthermore, both seem to complement each other to avoid the collapse or exhaustion of their ability to provide care for those who require it in a more direct, constant, or focused way.

Figure 1. Care before the pandemic. Elaborated by the author/s (n = 586).
This balance, which was already often precarious and has historically been sustained at the cost of unpaid female labor exploitation (Moreira da Silva 2019), was profoundly modified by stay-at-home orders. Educational institutions could no longer offer children their daily spatiality use and were reduced to providing diminished pedagogical functions whose correct implementation required the participation of other actors at the children’s homes.

The nuisance of online-only classes was exacerbated by the impossibility for families to resort to other external entities that usually help with daily care functions. The external world slowly shut down whilst care demands inside the home grew. Thus, it was up to household members to restructure care logistics that, due to confinement, could not be solved outside the home as usual. This is shown in Figure 2.

CUIDAR shows that it is primarily women who replaced the role of educational institutions by sacrificing time they would have otherwise used for other activities, often at the expense of their own well-being.

The study detected that during the pandemic, mothers and/or stepmothers represent 74% of those who take care of children during the mornings – hours during which children would have been off at educational institutions prior to the pandemic. During afternoons this number lowers slightly to 69%. The survey also found that 71% of those performing care tasks during the evening were women.

These are worrisome figures since care tasks are highly demanding in affective and emotional terms. Care relationships require constant calibration, improvisation, and ambivalent work, as Caduff (2019) describes. This is also now compounded by the uncertainty and fear generated by the circulation of the virus: usual care tasks have become much heavier (Singh et al. 2020), or at least more uncertain and unpredictable. Women who must weave and sustain those daily care practices, with little or no contribution from men and/or institutions, have been overloaded with these responsibilities. This highlights that care is still a highly gender-discriminatory practice (Fraser 2016; Poole and Isaacs 1997).

![Figure 2. Confinement care during the closure of educational institutions. Elaborated by the author/s (n = 586).](image-url)
4.2. Transformations in the use of space for caring purposes during the pandemic: daily care spatialities and materialities

Preventive confinement orders have led to diverse restriction regimes regarding socio-spatial relationships at the global level, as Devine-Wright and colleagues have noted (2020). We observed that the survey participants seek to reconvert, transform, and re-signify spaces so that they may meet new demands, which are currently disturbing the internal-external balance of the home:

The outside has invaded the inside of our homes, which used to be, for many, places of refuge and privacy. Now they have become proxies for schools, offices, pubs, and fitness clubs. Interactions with the outside have been blocked on the behavioral (stay at home), psychological (fear of the dangerous and uncontrollable virus), and community (social distancing) levels. (Devine-Wright et al. 2020, 2)

CUIDAR detected that 75% of respondents who were receiving a salary for their work had switched to teleworking because of the pandemic. More than half of them (59%) reported taking on care tasks in their homes which were new to them and had to be made compatible with work demands. This is relevant regarding the articulation between spatialities and temporalities of care. Most homes are not designed to supply these new functions. A house is not an office, a classroom, or a gym, and it does not necessarily have the conditions or implements to become one of them. As an informal care space, the household must now fulfill needs previously satisfied in formal spaces specially designed for such purposes. Thus, households had to undergo a series of repairs and transformations to sustain care under these new conditions. Care needs constant tinkering (Mol, Moser, and Pols 2010).

It is not an easy task to convert the spatiality of homes. For this, inventiveness must be used to reorganize and give new value to old objects, transforming them into things that can fulfill a new purpose (Errázuriz and Greene 2020), or otherwise bring in ones that can. However, not only objects but also spaces of the home had to be redefined in order to enable hitherto out-of-home activities. This was seemingly challenging for most homes, as illustrated by the 66% of participants who declared a decrease in frequency of physical activity. At the same time, rather sedentary natural activities sharply increased in frequency, as shown in Figure 3.

The difficulty of reconverting spaces and redistributing time must also be appreciated in the area of school activity accomplishment. 73% of respondents with at least one child younger than 12 under their care declared they were attending online lessons at the time of response, and 75% of those who were teleworking and caring for at least one child under the age of 12 declared that at least one of these children was having online lessons. For children under the age of 12 entering online schooling in any of its variations (synchronous lessons, weekly tasks, or any other modalities implemented by schools during lockdowns), the fulfillment of school duties remains as a responsibility that is, essentially, shared with adults. Young children need constant help or accompaniment to successfully carry out their tasks, and they also need a relatively quiet physical space where they can comfortably settle in with minimal schoolwork materials: internet access, a device to get online and watch videos, to name a few. These temporal and material conditions are not necessarily readily accessible to the population, nor do they easily harmonize with a family’s composition (taking into consideration, for example,
the number of adults in a home who are able to participate in this process, as well as their own time availability) (Pensiero, Kelly, and Bokhove 2020). Caring and working – as well as teaching, we might add – seem to be incompatible activities (Perelman 2020), as international media noted.

As seen in Figure 4, 42% of the respondents with children below the age of 12 under their care stated it seemed very relevant that they continue to carry out their school duties. However, this wish seems to encounter obstacles: 71% of this same group agrees that at the time of responding – May 2020 – conditions made it very difficult to comply with schoolwork, while 67% of them strongly disagreed that children should have to comply with more school activities under the same conditions.

While the breakdown of care networks has translated into a significant increase in time spent with family, it has also forced caregivers of children to quit or neglect routines and

![Figure 3. Self-care time and redistribution of activities. Elaborated by the author/s (n = 2005).](image)

![Figure 4. Online educational activities for children under 12. Elaborated by the author/s (n = 406).](image)
actions aimed at their own self-care (see Figure 5): 68% expressed a decrease in the time they can dedicate to themselves and their well-being, and 51% mentioned a decrease in time spent with their partner. However, there has been a significant increase in time spent with the family (66%). Two phenomena occurred simultaneously: On the one hand, international evidence allowed us to depict how those who have spent this time by themselves, separated from their daily care networks, seemed to suffer the effects of loneliness and isolation (Banerjee and Rai 2020). On the other hand, those adults who experienced the lockdowns while taking care of children under 12 must resign the time that they spent by themselves -and in self-caring practices- and with their partners in order to prioritize time spent with their families. In that sense, we must not forget that caring is a highly demanding practice, and the absence of time for ourselves can entail an eroding effect upon people’s well-being. In the presence of children under 12, spaces seem to have been reoriented in order to satisfy, at least in part, the children’s needs. These activities have involved a process of space transformation or readaptation, the reorganization of domestic elements, and the willingness of adults to make this deployment possible (Moore 2020).

Statistically, significant differences are observed between respondents who declared they care for children under 12 years of age at home and those who stated they do not. The former presents a higher perception of stress (adults caring for children $M = 2.19$, $SD = 0.51$, adults not caring for children $M = 2.10$, $SD = 0.53$) than the latter. Although adults living with children under 12 years old present lower levels of stress...
for caring for others than individuals not living with this stress, the gap increases when we look at those simultaneously working and caring (adults caring for children M = 2.17, SD = 0.51, adults not caring for children M = 2.07, SD = 0.51). Those caring for children also report spending significantly less time on themselves (adults caring for children M = 1.48, SD = 0.75, adults not caring for children M = 2.09, SD = 0.85) and less time with their partners than those who do not (adults caring for children M = 2.07, SD = 1.11, adults not caring for children M = 2.56, SD = 1.14). Adults caring for children consequently declare they spend more time with their families (M = 2.50, SD = 0.76) than adults not caring for children (M = 2.21, SD = 0.93), when we only consider adults not living alone. Statistically significant differences between these groups are also observed in time spent watching television or streaming services (adults caring for children M = 2.12, SD = 0.78, adults not caring for children M = 2.39, SD = 0.76), and in time spent on social networks (adults caring for children M = 2.43, SD = 0.72, adults not caring for children M = 2.55, SD = 0.65), regarding which those who do not care for children report a greater increase.

In summary, we observed a significant link between a considerable increase in stress levels, caregiving, and working for a salary. When carried out simultaneously, working and taking care of children are presented as activities that are difficult to carry out. This seems particularly relevant since, as previously described, the vast majority of care practices before and during the pandemic were carried out by just one actor – women – who must increasingly fill more roles, carry out more activities and perform on more fronts, which overlap and clash in the home.

4.3. Transformations in care practices: the appearance of unexpected materialities and allies

As mentioned above, temporalities and spatialities are articulated in dynamic ways, allowing for new, emergent ways of caring. For this reason, their separation into discrete elements responds to a schematization effort more than to the way in which they are experienced daily. What we find on a day-to-day basis is that spaces, times, and various elements of material culture produce entanglements that enable the appearance of particular modes of care. Objects and artifacts are interrelated with environments to produce specific actions that mobilize specific atmospheres of care, as Buse, Martin, and Nettleton (2018) state. As a consequence of the stay-at-home orders, carescapes emerged as the place where informal care takes place and new connections between individuals, spaces, times, and objects are produced (Bowlby 2012) to create configurations where care spaces can be sustained.

The consideration that technologies play a significant role in how care practices are sustained in such carescapes is not new. As Pols (2017) and other scholars working in the intersections between care and STS (Mol, Moser, and Pols 2010) note, care is not something happening exclusively in relations between human beings, but a more-than-human affair. As such, technologies are more than just a functional tool but an integral part of enacting care. Their role is significant in the constant tinkering needed to keep care going. As Pols (2010) concludes, people and technological devices “jointly invent possible forms of living with and caring for disease” (189). In the wake of such arguments, our data shows how technological devices have gained traction in caring and keeping
everyday life going as best as possible in the household. Data shows that new technological allies appeared in the care process during the pandemic. Seventy-two percent of those who were in charge of one or more children under 12 years old declared that a series of artifacts have been gaining value in this endeavor. Television, computers, tablets, and smartphones have become mediators in the care process, as expressed in Figure 6.

Noteworthy, technological devices have gained currency as part of the household’s care entanglements. During the pre-quarantine period, there was intense cultural pressure in the middle and upper socioeconomic strata to keep children away from screens and similar devices, considered an easy way out linked to parenting. As a result, technological devices such as television or tablets were deemed “electronic babysitters,” filling up the void left by over-demanded or neglectful parents who could not provide their children with attention or more prosperous activities (Pasquale 2019). However, such an approach seems to have lost traction during the pandemic since it oversimplifies a complex matter that became even more problematic once the lockdowns and quarantines started. Currently, thinking that using technological devices matches an easy way out of parenting activities rather than a valid alternate form of entanglement to provide care risks idealizing and dangerously heroizing the actual cost of caring for others every day under pandemic conditions. After all, caring is not a simple exercise, and carers cannot control everything happening while they simultaneously care for themselves and others, neither can they quickly regain control. Caring seems to be best described as: “…a relation where it is perfectly fine to lose confidence and composure, at least for a while” (Caduff 2019, 791). It is far from being purely heroic and seems to come into contact with specific vulnerabilities exhibited and supported, such as in this case where mothers and stepmothers are overwhelmed by the multiple demands they encounter.

In that sense, and according to our data, we can observe how a novel understanding of the relationship between children and technology emerges as part of the critical conditions experienced in households. Due to the quarantine conditions, a novel narrative that is more oriented to understanding and knowing how to manage these interactions between children and technological devices emerges, with no feeling of guilt for facilitating them (Wheatman Hill 2020), as they allow the connection to a social world that seems to be moving away since the pandemic. After all, computers, tablets, and televisions are not only used for playing and entertainment but also for creating a sense of closeness to those who are now far away. They allow us to keep in touch with the world, to feel connected while also remaining safe from the risks attached to the virus.

80% of respondents, as seen on Figure 7, state that children under their care have increased the time they spend on electronic media in order to support and/or continue their schooling process. Additionally, recreational use of electronic media has also increased. In fact, 61% of caregivers mention that children are under their care or supervision when this occurs. Participants report that this increase in consumption is not something that occurs against the adult carers’ will, nor even that it is an oversight in the process of supervision. Rather, it is an effect of the circumstances: the impossibility of simultaneously articulating care roles and the performance of other functions, such as work. This increase in electronic media consumption seems to be part of a strategy to allow daily life to continue within the home while adults try to meet various demands.
Undoubtedly, since the enforcement of confinement policies, the introduction of non-human actors – such as electronic devices – has allowed new articulations and relationships which have modified how care can be sustained and delivered. The transformations experienced by a series of actors who were previously present in the home space but who were normally only conceptualized as recipients of care must be added. Children and pets are now rediscovering their place in the family network. They are now taking part – in a more evident way – in this network of informal actions within the home, in the acts of “(...) interdependence and reciprocity that are characteristic of care relationships” (Bowlby 2012, 2102).

As seen in figure 8, 67% of participants who care for one or more children under the age of 12 declare that boys and girls have increased their participation in daily household activities, such as cooking, cleaning, setting the table, or other household chores. This

![Figure 6. Electronic devices used as care network elements during the pandemic. Elaborated by the author/s (n = 545).](image)

![Figure 7. Increase in the use of electronic devices by children under 12. Elaborated by the author/s (n = 545).](image)
percentage becomes higher when more children are living at home. In addition, 50% of respondents reveal the direct participation of children in other care activities, such as looking after their siblings or another family member. These results suggest that their acquisition of new roles and functions comes hand in hand with the disruption of activities and routines installed previously to the outbreak of the pandemic, because of time, spatial and material constraints given in the households. Daily routine compliance decreased during the month prior to the start of the survey, as 44% of participants attest.

Pets also took an important place in care networks during confinement. 27% of respondents who live with pets state that they have helped them to better cope with their emotions during this period. 70% of those who declared this situation do not live with children at home. 29% of those surveyed mentioned that their pet plays a vital role as company, and only 5% stated that having a pet has become a harder task as a result of stay-at-home orders and lockdowns.

These figures can be appreciated by considering two important factors: firstly, at the beginning of the pandemic, citizens were granted special daily permits for 30-minute dog walks within a radius of two blocks around their residence. This provided families with pets a small respite from their houses or apartments. Thus, pets empowered their humans by giving them a way to re-inhabit the public space, a license that was not even granted to people who cared for small children, as implemented in some European countries, such as Spain (Blanchard 2020).

However, the very important role pets have played during the pandemic can hardly be reduced to enabling momentary breaks from our confinement. Their importance in our
lives is deeper and has been described prior to the arrival of COVID-19. Haraway (2007) has theorized that our encounters with other species – those we have called companion species, for example – involve more than just keeping company. Thanks to the encounter with that otherness, a “becoming with” process unfolds, a joint production of worlds. Thus, we build each other and take care of each other. In the midst of the multiple complexities that people have had to face as a result of the previously described policies, the particular place of pets in our daily lives seems to reveal itself more clearly, which accounts for an increase in pet adoption by up to 50% since the pandemic began, according to news agencies (CNN Chile 2020).

5. Conclusions

In this article, we have sought to make visible the impact that the various COVID-19 response policies implemented by the Chilean government have had on homes. These policies have constituted a substantial event on subjects’ social and individual lives and affected how they relate to their work, affections, and others. We need to understand this impact considering that the first and most important policies enforced by the Chilean government were mainly planned around the revival of the formal economy. Not a thought was spared for the effects that these response measures could have on homes or how they could increase inequalities for those groups that were already in disadvantaged positions. Furthermore, the crisis revealed a series of shortcomings – from the precariousness of the health system to the lack of real support from the state – that have been denounced as inherent to the expansion of neoliberalism in many parts of the world (The Care Collective 2020) and, particularly, in Chile.

Therefore, early in the pandemic, this research set out to make the centrality of care – particularly in these extraordinary moments – visible and revalue it in public discussion. We wanted to explore and highlight the potential transformations or alterations that the pandemic seemed to be causing in the normal functioning of homes and to problematize these findings, considering that the unequal burden of care work on women is not natural, but rather something problematic that deserves to be analyzed and questioned.

Focusing on care and the ways in which it circulates allows us to produce new knowledge regarding subjects, things, and the relationships among them, as stated by Tironi and Rodríguez-Giralt (2017). This knowledge seems to have eluded public policy designers in Chile so far and will be central to start responding to a series of problems occurring at homes.

Our results show a lack of support from the state for what Nancy Fraser calls social reproduction work (2016). We see that both care work and caregivers seem to be excluded from the public policies implemented by the government during the first months of the pandemic. Care is forcedly relegated then to what the members of the household are capable of doing on their own and based on the conditions at hand. Care becomes increasingly complex and mostly improvised in spaces and times not designed for it by people who must make it compatible with other demands and jobs, which often have a higher formal recognition. Hence, they are posed as demands that threaten these new – and precarious – care networks that are being improvised.
Although the COVID-19 crisis seems to have given care and its importance a greater visibility, home care work during the pandemic has seen little in the way of a revolution. CUIDAR results show that it is still women who perform these tasks in an overwhelming majority. In a significant fraction of households, women must juggle between care work and their formal jobs. New roles have been thrust on them as a consequence of online-only classes and the restrictions that kept them from usual care networks at the expense of their own well-being and projection. It is women, then, who must weave, sustain, and repair daily care during the pandemic.

If there has been no revolution, there have at least been some positive transformations arising from the need to keep care operating, circulating, and active during confinement. This research uncovers two interesting findings in this regard.

First, those who had typically been considered solely as recipients of care – such as children – are also now active actors in its production. Children showing an agency for care is not new in the literature, but the caregivers’ explicit recognition that children also play a significant role in care work did appear as a novelty here. Children take care of other children, but they can also take care of their parents and, therefore, they are an active part in the production of these landscapes of care that have been configurated at home.

A second interesting finding has to do with the role that non-human actors play in the production of care networks. It is not only a matter of verifying that the material culture of care finds its foundations in spatialities and temporalities that allow and are built from particular practices, as has been noted in various disciplines such as design, architecture, health, and education (González and del Castillo 2018; Rojas-Navarro 2022). The results of CUIDAR also show that times, spaces, artifacts, and objects play a role in care tasks that seems evident to the study’s participants. Household pets also gain a renewed importance in the current crisis.

We hope that new configurations in care may arise from this point. From a public policy standpoint, these findings can inform how the Chilean government could expand and re-conceptualize the idea of care. Care dynamics are fluid and fragile, so the imposition of standardized policies, vertically delivered in top-bottom dynamics, struggle to capture the true nature and magnitude of the issues here discussed. It would be advisable to include grassroots movements and local stakeholders in the process of tailoring care policies to the needs that arise under specific conditions. In doing this, policies might be more responsive and validated, enhancing their success. Care relations could also be broadened to include those commonly relegated to mere receivers of care, such as kids, pets, and objects, all of whom might also act as carers. They enter webs of reciprocity where the roles of care and carer are in constant accommodation. Incorporating these findings could inform the process of policy design and delivery, making it sensible to different life trajectories and issues experienced during the lockdowns and life in general. There will not be a real revolution in care until we experience a change in how we socially relate to work, economy, and life.

Undoubtedly, the study’s limitations have to do with the sampling biases characteristic of web surveys (respondents belong mainly to the middle class and well-off sectors of Chilean society). For this reason, research on how care and interdependence networks are rearticulated in other sectors of Chilean society is still a pending issue. For these actors, teleworking is not always an option, and their materialities and spatialities are different and combined in different ways. Other preconceptions and ideals regarding
motherhood and childhood may exist, and other ways of understanding and linking to care needs and practices culturally operate.

Now, and despite this sampling bias, the results presented are relevant because they reveal that other approaches to care are possible, ones that allow for a different theoretical sensitivity and that illuminate other dynamics and actors. These findings illustrate care as something more-than-human, deeply determined by spaces, times, and non-human actors, and they highlight the interrelation and interdependence substrate that these practices sustain. Hopefully, research like ours encourages change in the context of the current crisis. Especially considering that, as it has been pointed out (Energici et al. 2021), so far evidence shows that making the problem visible has not been enough to promote a different way of assembling care in the household. We are optimistic that making these matters noticeable can make them matter otherwise and produce new entanglements of care that can be more beneficial for all.

**Disclosure statement**

No potential conflict of interest was reported by the author(s).

**Funding**

This work was supported by the Chilean Agencia Nacional de Investigación y Desarrollo (ANID), by funding granted to Fondecyt 11190285 and Fondecyt 11170317; and by Universidad Alberto Hurtado, Chile, via funding granted to project DIP202010.

**Notes on contributors**

Sebastián Rojas-Navarro is an assistant professor at the Faculty of Education & Social Sciences, Universidad Andrés Bello. His research focuses on topics of care, subjectivities, mental health and childhood, by using a conceptual framework inspired by posthumanist approaches and STS.

Francisco Moller-Dominguez is a researcher for the Institute of Local Governments (INGOLOV), University of Birmingham. His areas of expertise are research methodologies, local governments and public policies.

Samanta Alarcón-Arcos is a sociologist, and holds a Master’s degree on Public Policy from Pontificia Universidad Católica of Chile. Her research focuses on topics of care, childhood, public policies, and women studies combining quantitative and qualitative research methods.

María-Alejandra Energici is an assistant professor at the Faculty of Psychology, Universidad Alberto Hurtado. Her research focuses on topics of care, subjectivities, body and fat studies, by using a conceptual framework inspired by posthumanist approaches and new materialisms.

Nicolas Schöngut-Grollmus is an assistant professor at the Faculty of Psychology, Universidad Alberto Hurtado. His research focuses on topics of care, rare deseases, medical decisions and disability studies, by using a conceptual framework inspired by posthumanist approaches and new materialisms.

**ORCID**

Sebastián Rojas-Navarro [http://orcid.org/0000-0003-1963-1569](http://orcid.org/0000-0003-1963-1569)

Francisco Moller-Dominguez [http://orcid.org/0000-0002-1929-9140](http://orcid.org/0000-0002-1929-9140)

Samanta Alarcón-Arcos [http://orcid.org/0000-0002-2597-1378](http://orcid.org/0000-0002-2597-1378)
References

Banerjee, Debanjan, and Mayank Rai. 2020. “Social Isolation in Covid-19: The Impact of Loneliness.” International Journal of Social Psychiatry 66 (6): 525–527. doi:10.1177/0020764020922269.

Barnes, Marian. 2012. Care in Everyday Life: An Ethic of Care in Practice. Bristol: Policy Press.

Bennett, Magdalena. 2021. “All Things Equal? Heterogeneity in Policy Effectiveness against COVID-19 Spread in Chile.” World Development 137: 105208. doi:10.1016/j.worlddev.2020.105208.

Bethlehem, Jelke. 2010. “Selection Bias in Web Surveys.” International Statistical Review 78 (2): 161–188. doi:10.1111/j.1751-5823.2010.00112.x.

Blanchar, Clara. 2020. “Los niños salen por fin de casa: ‘No me acuerdo de pedalear.’” EL PAÍS, April 26. https://elpais.com/sociedad/2020-04-26/los-ninos-salen-por-fin-a-la-calle-todo-le-parece-mas-grande.html

Bowlby, Sophie. 2012. “Recognising the Time – Space Dimensions of Care: Caringscapes and Carescapes.” Environment and Planning A: Economy and Space 44 (9): 2101–2118. doi:10.1068/a44492.

Buse, Christina, Daryl Martin, and Sarah Nettleton. 2018. “Conceptualising ‘Materialities of Care’: Making Visible Mundane Material Culture in Health and Social Care Contexts.” Sociology of Health & Illness 40 (2): 243–255. doi:10.1111/1467-9566.12663.

Canals, Mauricio, Cristóbal Cuadrado, Andrea Canals, Karla Yohannessen, Luis Leñio, María Paz Bertoglia, Pamela Eguiguren, Izkia Siches, Verónica Iglesias, and Oscar Arteaga. 2020. “Epidemic Trends, Public Health Response and Health System Capacity: The Chilean Experience in Four Months of the COVID-19 Pandemic.” Revista Panamericana de Salud Pública 44: e99. doi:10.26633/RPSP.2020.99.

CEPAL, UN. 2020. “La pandemia del COVID-19 profundiza la crisis de los cuidados en América Latina y el Caribe.” Repositorio CEPAL, April 3. https://repositorio.cepal.org//handle/11362/45335

CNN Chile. 2020. “Efecto positivo de la pandemia: Adopción de mascotas aumentó en un 50%.” CNN Chile, October 11. https://www.cnnchile.com/pais/adopcion-mascotas-aumenta-50-por-ciento_20201011/

Devine-Wright, Patrick, Lais Pinto de Carvalho, Andréis Di Masso, Maria Lewicka, Lynne Manzo, and Daniel R. Williams. 2020. “Re-Placed – Reconsidering Relationships with Place and Lessons from a Pandemic.” Journal of Environmental Psychology 72: 101514. doi:10.1016/j.jenvp.2020.101514.

Energici, María Alejandra, Nicolás Schongut-Grollmus, Sebastián Rojas, and Samanta Alarcón Arcos. 2021. “Cuidar en tiempos de crisis.” Castalia – Revista De Psicología De La Academia (35): 145–155. doi:10.25074/07198051.35.1897.

Errázuriz, Tomás, and Ricardo Greene. 2020. “The Bright Side of Coronavirus. Reinventing Home During Quarantine.” Entanglements 3 (2): 49–59. https://entanglementsjournal.org/the-bright-side-of-coronavirus-reinventing-home-during-quarantine/

Ezquerra, Sandra. 2011. “Crisis de los cuidados y crisis sistémica: la reproducción como pilar de la economía llamada real.” Investigaciones Feministas 2: 175–187. doi:10.5209/rev_INFE.2011.v2.38610.

Fraser, Nancy. 2016 July-Aug. “Contradictions of Capital and Care.” New Left Review 100: 99–117.

Geldsetzer, Pascal. 2020. “Use of Rapid Online Surveys to Assess People’s Perceptions During Infectious Disease Outbreaks: A Cross-Sectional Survey on COVID-19.” Journal of Medical Internet Research 22 (4): e18790. doi:10.2196/18790.

Gilligan, Carol. 1993. In a Different Voice: Psychological Theory and Women’s Development. Cambridge, MA: Harvard University Press.

González, Nerea, and Miguel Mesa del Castillo. 2018. “Tender Infrastructures: Designing with Care, or Contributions to ‘Matters of Care’ in Architecture.” Diseña 12: 172–195. doi:10.7764/disen.12.172-195.
Haraway, Donna. 2007. *When Species Meet*. London: University Of Minnesota Press.

Latimer, Joanna. 2018. “Afterword: Materialities, Care, ‘Ordinary Affects’, Power and Politics.” *Sociology of Health & Illness* 40 (2): 379–391. doi:10.1111/1467-9566.12678.

Ministerio de Salud. 2020. “Presidente anuncia suspensión de clases y reduce actos públicos.” *Web oficial del Ministerio de Salud* – Gobiero de Chile, March 15. https://www.minsal.cl/presidente-anuncia-suspension-de-clases-y-reduce-actos-publicos/

Mol, Annemarie, Ingunn Moser, and Jeannette Pols, eds. 2010. *Care in Practice: On Tinkering in Clinics, Homes and Farms*. London: Transcript Publishing.

Moore, Danielle. 2020. “This is How Often Parents Hear ‘I’m Bored’ from Their Kids During Quarantine.” *New York Post*, September 20. https://nypost.com/2020/09/29/parents-hear-im-bored-from-their-kids-at-least-this-many-times-a-day-during-the-pandemic/

Moreira da Silva, Jorge. 2019. “Why You Should Care About Unpaid Care Work.” *Development Matters*, March 18. https://oecd-development-matters.org/2019/03/18/why-you-should-care-about-unpaid-care-work/.

Murray, Marjorie, Sofia Bowen, Marisol Holtmannspötter. 2017. “Care and Relatedness among Rural Mapuche Women: Issues of Cariño and Empathy.” *Ethos (Berkeley, Calif )* 45 (3): 367–385. doi:10.1111/etho.12171.

Pasquale, Frank. 2019. “Counterfeit Care and Forced Feeling. Performative Contradictions at the Heart of Affective Computing.” In *To Mind is to Care*, edited by Joke Brouwer and Sjoerd Van Tuinen, 62–87. Rotterdam: V2_Publishing.

Pensaiero, Nicola, Anthony Kelly, and Christian Bokhove. 2020. “Learning Inequalities During the Covid-19 Pandemic: How Families Cope with Home-Schooling” [Monograph]. University of Southampton. doi:10.5258/SOTON/P0025.

Perelman, Deb. 2020. “In the Covid-19 Economy, You Can Have a Kid or a Job. You Can’t Have Both.” *The New York Times*, July 2. https://www.nytimes.com/2020/07/02/business/covid-economy-parents-kids-career-homeschooling.html

Phillips, Judith. 2007. *Care*. 1st ed. Cambridge: Polity Press.

Pols, Jeannete. 2010. “Telecare: What Patients Care About.” In *Care on Practice: On Tinkering in Clinics, Homes and Farms*, edited by Mol Annemarie, Ingunn Moser, and Jeannette Pols, 171–194. London: Transcript Publishing.

Pols, Jeannete. 2017. “Good Relations with Technology: Empirical Ethics and Aesthetics in Care.” *Nursing Philosophy* 18: e12154.

Poole, Marilyn, and Dallas Isaacs. 1997. “Caring: A Gendered Concept.” *Women’s Studies International Forum* 20 (4): 529–536. doi:10.1016/S0277-5395(97)00041-1.

Puig de la Bellacasa, María. 2011. “Matters of Care in Technoscience: Assembling Neglected Things.” *Social Studies of Science* 41 (1): 85–106. doi:10.1177/0306312710380301.

Puig de la Bellacasa, María. 2012. “‘Nothing Comes Without its World’: Thinking with Care.” *The Sociological Review* 60 (2): 197–216. doi:10.1111/j.1467-954X.2012.02070.x.

Puig de la Bellacasa, María. 2017. *Matters of Care: Speculative Ethics in More Than Human Worlds*. Minneapolis, MN: University Of Minnesota Press.

Revilla, Melanie, and Carlos Ochoa. 2017. “Ideal and Maximum Length for a Web Survey.” *International Journal of Market Research* 59 (5): 557–565. doi:10.2501/IJMR-2017-039.

Robson, Colin. 2011. *Real World Research*. 3era edición. Chichester: John Wiley.

Rojas-Navarro, Sebastián. 2022. “Cuidar la alteridad: encuentros y experiencias para el estudio de las subjetividades de niños y niñas en el siglo XXI desde una perspectiva biosociocultural.” In *Sujetos y Subjetividades: Aproximaciones Empíricas en Tiempos Actuales*, edited by Oriana Bernasconi, Carla Fardella and Sebastian Rojas-Navarro, 77–99. Santiago: Ediciones Universidad Alberto Hurtado.

Rojas-Navarro, Sebastián, María Alejandra Energici, Nicolás Schöngut-Grollmus y, and Samanta Alarcón-Arcos. 2021. “Im-posibilidades del cuidado: reconstrucciones del cuidar en la pandemia de la covid-19 a partir de la experiencia de mujeres en Chile.” *Antípoda. Revista de Antropología y Arqueología* 45: 101–123.

Roers, Verónica. 2022. “Problems All the Way Down.” *Theory, Culture & Society* 38 (2): 3–23. doi:10.1177/0263276420966389.
Singh, Shweta, Deblina Roy, Krittika Sinha, Sheeba Parveen, Ginni Sharma, and Gunjan Joshi. 2020. “Impact of COVID-19 and Lockdown on Mental Health of Children and Adolescents: A Narrative Review with Recommendations.” Psychiatry Research 293: 113429. doi:10.1016/j.psychres.2020.113429.

Spinelli, María, Francesca Lionetti, Massimiliano Pastore, and Mirco Fasolo. 2020. “Parents’ Stress and Children’s Psychological Problems in Families Facing the COVID-19 Outbreak in Italy.” Frontiers in Psychology 11. doi:10.3389/fpsyg.2020.01713.

Tironi, Manuel, and Israel Rodríguez-Giralt. 2017. “Healing, Knowing, Enduring: Care and Politics in Damaged Worlds.” The Sociological Review 65 (2). doi:10.1177/0081176917712874.

The Care Collective. 2020. The Care Manifesto: The Politics of Interdependence. London: Verso Pamphlets Series.

Tronto, Joan. 2013. Caring Democracy: Markets, Equality, and Justice. New York, NY: NYU Press.

Undurraga, Rosario, and Natalia López-Hornickel. 2020 July. “(Des)articuladas por el cuidado: Trayectorias laborales de mujeres chilenas.” Revista de Estudios Sociales. doi:10.7440/res75.2021.06.

Utzet, Mireira, and Unai Martin. 2020. “Las encuestas online y la falsa ilusión de la n grande. A propósito de una encuesta sobre la eutanasia en profesionales médicos.” Gaceta Sanitaria 34 (5): 518–520. doi:10.1016/j.gaceta.2019.07.009.

Wheatman Hill, Laura. 2020. “Screen Time Guilt During the Pandemic?” JSTOR Daily, August 12. https://daily.jstor.org/screen-time-guilt-during-the-pandemic/