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It has touched us all: Commentary on the social implications of touch during the COVID-19 pandemic

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ABSTRACT
This paper considers the political implications of the COVID-19 pandemic through a focus on the sense of touch. It begins by briefly outlining current sociological and philosophical theories of touch as an empathetic, pervasive, and social sense. Taking lead from news media, it then suggests how touch and virus-enforced touchlessness intersects with issues of race, class, gender, ableism, and technology. Action taken by governing bodies in the face of the pandemic, such as the introduction of lockdowns and the emphasis on working from home, signals and protects privilege while exacerbating oppression for the marginalised and Othered. The ability to both deny touch and simultaneously flaunt advice surrounding distancing clarifies a point of departure that separates the lower classes and the racialised, the non-male and the less abled, from the male and able-bodied, the white and wealthy.

The health advice to combat the COVID-19 virus predominantly revolves around contact, as we police our bodies in view of protecting ourselves and the wider public from the highly-infectious virus, by staying 2m away from others, taking careful note of the surfaces we touch, armouring ourselves with face coverings, and washing our hands religiously. With the haptic at the forefront of public thought, contact has quickly emerged as a contested, yet revealing, foundation upon which the values and inequalities of Western society are harshly reflected. At a time when each individual’s sense of touch poses a threat, the ability to heed medical advice – to stay apart, to touch less – seems both to privilege, and reconsolidate the privilege, of the white, the able-bodied, the upper classes, and the male. Taking brief (and thus necessarily inhaustive) accounts of how technology, race, class, gender, and ableism have featured, and continue to feature, in societal and governmental responses to the virus, the aim of this article is to demonstrate the prevalence of touch, especially in constituting community and a sense of self. As I consider the ways in which the pandemic challenges touch, and in so doing, also challenges our sense of community and of self, the sensorium becomes a useful vessel for exposing, and perhaps one day mending, the disproportionate and hierarchial impacts of institutional action amidst the coronavirus.

I will begin by characterising the sense of touch, with emphasis on its pervasiveness, in conspicousness, and emotionality, drawing on work from haptics scholars Mark Paterson, Constance Classen, and Matthew Ratcliffe. This intersects with contemporary affect theories of Sara Ahmed and Lauren Berlant. In her article, ‘Collective Feelings, Or, the Impressions Left by Others’ (2004), Ahmed discusses the relation between sensation and feeling particularly in the face of bodily pain; if we consider the threat that the virus poses to the body as a form or anticipation of such pain, Ahmed’s theory usefully characterises the affective responses to the pandemic. Likewise, Lauren Berlant’s work ‘Thinking about feeling historical’ (2008) helps us to understand the pandemic as a “historic present”. Berlant writes, “A sensed perturbation of world-shaping dimensions impels recasting the projected impact of small and large gestures, noticings, impulses, moments” (Berlant, 2008). My study takes the small and large (tactile) impulses of hate crimes, protests, and the now-familiar online social event and traces their social impact during the “world-shaping” pandemic. Berlant’s theory, conceptualising variously an “emergent historical environment that can now be sensed atmospherically, collectively”, “crisis lived within ordinariness”, or even, simply, the “question-marked now”, maps closely onto the upended realities of COVID-19 (Berlant, 2008). To borrow Berlant’s words, “the stretched out ‘how’ of the historical present is “at once intimate and estranged” (Berlant, 2008). This is uncannily pertinent during the coronavirus pandemic, as the “crisis of ordinariness” manifests in controlled contact, in restricting intimacy and enforcing estrangement. By examining media articles which gesture towards the developing discourses of the pandemic, I take account of how enforced touchlessness implicates us in varied ways throughout the “question-marked now” of the global pandemic. I will then go on to address the way these discourses reinforce existing inequalities around race, gender, class, and ability.

While all the primary senses are difficult to fully comprehend, touch is
particularly elusive. This is due, in part, to its base nature; Aristotle devised a widely accepted and enduring hierarchy of the senses that denoted touch as the basest sense, while promoting sight as the most highly developed. As the base, however, touch is foundational. Indeed, touch itself forms the base of the other senses. This is fairly obvious in terms of taste, a sense aroused through contact with taste buds, but, once we consider that the eye is made up of cutaneous surfaces, that smell predicates proximity, and that hearing is the sensed movement of sound waves, it becomes apparent that haptics facilitate most sensory experience. Unlike its counterparts, moreover, touch corresponds to the entire body, closely associated with the skin, the largest organ of the human body, across which contact has vastly differing meanings and produces equally varied sensations. The scope and pervasiveness of touch makes it a uniquely difficult sense to pinpoint. Mark Paterson captures the complexity of touch in relation to the wider sensorium in his book *The Senses of Touch: Haptics, Affects and Technology* (Paterson, 2007):

So touch, like vision, articulates an equally rich, complex world, a world of movement and exploration, of non-verbal social communication. It is a carnal world, with its pleasures of feeling and being felt, of tasting and touching the textures of flesh and of food. And equally it is a profound world of philosophical verification, of the communication of presence and empathy with others, of the co-implication of body, flesh and world.

Touch is a sense so embedded in our action that it has become unconscious. It is the sense least thought about, not only in academia, but in our quotidian routines – we strain to hear, we focus our eyes, refine our taste buds, and deeply inhale a pleasant smell, and yet, when we touch, it is more often a means to an end. As Constance Classen says, touch “has been taken for granted as [...] a medium for the production of meaningful acts, rather than meaningful in itself” (Classen, 2005).

This inconspicuousness is nevertheless an important part of touch, which, for Ratcliffe, signals ‘situatedness’ (Ratcliffe, 2008): What characterises rootedness in a familiar situation, belonging to a context, is the extension and diffusion of boundaries, a blurring of the self-world distinction. Perception of the body as a discrete object with clear boundaries is, at the same time, a failure to perceive and engage with the world, a loss of connectedness.

To be conscious of touch, then, is to jar with one’s environment. Hence, consciousness of touch has become a social symptom of the pandemic, with the typically inconspicuous sense now thrust into the spotlight. It is unavoidable – people are characterising their personalities as ‘tactile’, as thigmophobics forced to retreat. The prospect of a hug or a kiss is tainted with frightening consequences. To touch has transformed from an unconscious and meaningless act to one of risk and danger, mediated by handwashing, social distancing, and Personal Protective Equipment (PPE). More palpably as lockdowns slowly ease, and more visible acts, rather than meaningful in itself

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European press coverage reflects this material awareness as it frequently takes a morbid turn. *BBC Newsday* reported that on the 19th March the Italian army were called to Bergamo to carry 70 coffins to cremated, as morgues and cemeteries struggled to cope with the coronavirus death toll (*BBC Newsday*, 2020). In Spain, too, people have been forced to confront the fact of materiality, having turned an ice rink into a makeshift mortuary in order to cope with fatalities (*Osbourne*, 2020). This newsworthy concern with the material remains of COVID-19 victims testifies to enduring anxieties about humanity and the afterlife, collapsing millennia-old philosophical and theological questions into the pressing fact of accumulating corpses.

Henceforth, this global pandemic will alter – is altering – perceptions of touch and haptic habits. By forcing us to immobilise our tactility, COVID-19 vilifies touch. In doing so, it threatens the structural integrity of the subject. Paterson asserts that touch enables “communication of presence and empathy with others”, and thus, as the virus forces us to suppress our senses, we become less able to communicate our presence, cutting us off from our environment and leaving us disconnected, no longer tethered to the structures and people around us. Ratcliffe’s theory that “perception of the body as a discrete object with clear boundaries” leads to a “loss of connectedness” is likewise apparent; awareness of the body as objective material breaks the seamless body–world diffusion. Sara Ahmed argues that “the impression of a surface is an effect of such intensifications of feeling”; that is, awareness of bodily boundaries, or of the body as “discrete object”, originates from intensified emotion (*Ahmed*, 2004). The disconnect between self and world experienced at the hands of the virus works only to heighten feelings of isolation and stress, creating a cyclical effect as ordinary routines continue to fracture. As we have less contact and fewer interactions with the world, our already-unsustainable emotional state worsens, and the fabrication of the social self deteriorates; since we can no longer impress upon the world, we are left alienated and less defined.

As the pandemic is an intensely and uniquely emotional time, to have the emotional and empathetic outlet of touch immobilised by the risk of contagion exacerbates our alienation. We must hold back a hug even when it’s most needed, save a Mother’s Day kiss for safer times, or sit 2m apart from a partner who we’ve not seen in months. This intensely emotional time is overwhelming, and without the ability to express or extend our comfort to our loved ones through the familiar and natural channel of touch, the insular disconnect amplifies, causing the primacy of our own anxieties to overshadow the anxieties of others. Without tactile expression, empathy falters, making it harder to recognise the mutuality of the trying circumstances.

This compels us to impress our presence and open empathetic channels in new, predominantly digital (hence disembodied) ways. Technology is providing virtual environments to stimulate us and simulate contact. Social media, as contentious as it may be, is proving to be an inexhaustible means of “staying in touch”, a source of support, light-hearted relief, and comfort. The value of this, especially with regard to safeguarding mental health, cannot be overstated. The success of the social media campaign #ClapForOurCarers in the UK attests to this. Nevertheless, this is not a new sensation; technology has long been bringing together disparate communities. Ahmed praises the Global Nomad Virtual Village, a non-profit organisation designed to foster a sense of community for those raised overseas, for achieving a similar estranged intimacy; she writes, “such proximity does not require physical co-presence: the body of the global nomadic community ‘surfaces’ through giving up local attachments (where the screen becomes a substitute for the skin)” (*Ahmed*, 2004). COVID-19 has forced us to give up local attachments, but as Zoom meetings and online pub-quizzes ease the transition to remote living, the screen does, to some extent, provide a substitute for the skin. Indeed, the digital often appropriates embodied existence in order to animate expression, most commonly through emojis or GIFs, which often insinuate emotive contact, as seen through virtual ‘hugs’, ‘high fives’, and kisses.

Nonetheless, in seeking to replace like for like, technological appeals to ordinariness sometimes fail flat, in turn exposing, to echo Berlant, the crisis in the ordinary. This is partly due to the production of an online-self, or, in other words, the process of selection that goes into each Tweet, Instagram post, or any Zoom background. This often erases much of ‘s life’s authentic messiness (while introducing a new digital messiness, characterised by typos and bad WiFi signals, for example), and reduces us to two-dimensional avatars. Creating an online presence is a process of disembodiment which is incapable of filling the tactile void satisfactorily, and instead can leave us with a renewed sense of distance. This reinforced estrangement is rendered especially troubling by the pandemic, as the abundant calls to “stay in touch” show. There is an inherent irony in this appeal to the haptic sense, which, amidst the soundscape of advice to
distance our bodies, signals exactly what we are sacrificing, and what is “taken for granted”, as Classen says, in ordinariness. A Metro article from March 11th epitomises this; titled “Police enforce no-touching rule in Italy as people are forced to stay apart”, the article ends with the juxta- posing and jarring call for readers to “get in touch with our news team” (Roberts, 2020). The well-meaning metaphor serves as a reminder of our sudden touchlessness and our disconnect, of the shortcomings of the screen as a substitute for the skin. As such, in its attempts to alleviate feelings of isolation, technology risks streamlining too much of embodied existence, and subliminally emphasises our newly touch-starved condition.

Of course, the pandemic’s developing discourse around touch intersects differently across the board, most palpably in the amplification of anti-Asian racism. If COVID-19 has vilified touch, it has vilified the touch of Asian bodies most emphatically. With the US President Donald Trump labelling the virus the “Chinese virus”, what is by no means a new form of discrimination has reigned with renewed and more explicit ferocity, inciting increased violence and hate crime. A cursory Google search pulls up a plethora of incidents from the UK alone: a Chinese takeaway owner was spat on, an East Asian student in London suffered facial injuries after an attack on Oxford Street, and international students have reported increased verbal abuse. Reports from the 1st February described how Asian residents in Southampton were told to leave a public bus by a driver for wearing masks, protective equipment which has since been deemed mandatory on public transport in England (Murphy, 2020). Contact with Asian minorities is being policed in an increasingly open manner, and yet, these attackers subject ethnic minorities to the violent touch of white bodies. Indeed, the white body actively seeks proximity with the Asian community through physical violence, despite such violence being motivated by the threat of their allegedly infectious bodies. This irony exposes the deeply-rooted racism thinly veiled by the pandemic. Ahmed’s discussion of racism as perceived pain delineates the racist’s affective responsive to the virus (Ahmed, 2004):

We can consider racism as a particular form of intercorporeal encounter; a white racist subject who encounters a racial other may experience an intensity of emotions (fear, hate, disgust, pain). That intensification involves moving away from the body of the other, or moving towards that body in an act of violence, and then moving away.

Earlier in her article, ‘Collective Feeling’, Ahmed posits that “the transformation effected by recognizing a sensation as painful (from ‘It hurts’ to ‘It is bad’ to ‘Move away’) involves the reconstitution of bodily space” (Ahmed, 2004). In recognizing the virus as a painful sensation (‘It hurts’), the racial subject rejects its perceived cause (‘Asian bodies are bad’) and seeks to reconstitute white, bodily space as safe (‘Move away’). In such cases, violence contributes towards the reconstitution of bodily space, in that it seeks to clarify for whom that space is safe and for whom that space is dangerous; it is a process of protecting, marking, and maintaining white space as clean and safe against the perceived threat of invasive Otherness. As such, labelling the bodies of the racial other as infectious and threatening serves to absolve individual and white Western responsibility for the spread of the virus. This victimisation of white space aligns with an aggressive and conservative nationalism, which exposes the intolerance of white Western society. This intolerance manifests again in the disproportionate representation of BAME victims in COVID-19 fatalities in the UK (Rashid, 2020). As we try to reconcile this racism with the rising nationalism surrounding the National Health Service, more hypocrisy materialises; while we come together in celebration of our health service, we are simultaneously creating a hostile environment for many of its vital migrant employees.

This valorisation of health workers exposes further hypocrisy concerning class. The ability to self-isolate is a sign of privilege, which large and non-nuclear families, key workers, and poorer communities lack, and which endangers those whose home environments engender more danger, health risks, and/or domestic abuse. Social distancing is not always feasible for many people, implicating the lower classes more and leaving them disproportionately impacted by the virus. Densely populated, aged, and impoverished areas around the globe overwhelm their (potentially poorly funded and ill-prepared) health care systems more rapidly, with insufficient measures to protect the vulnerable and the workers, where postal, healthcare, and essential retail staff are predominately of the working classes themselves. Las Vegas’ treatment of their homeless community, for example, shows a callous side of humanity exposed by the pandemic, having turned a parking lot into a “shelter” with social distancing markers (Koran, 2020). Hence, the ability to deny touch is indicative of a class-based hierarchical divide. This is apparent in the UK, as the degraded, allegedly “low-skilled” workers (those who would fail to qualify for visas post-Brexit) have become the nation’s heroes, while many, though not all, who qualify as “high-skilled” are isolated safely, working from home and not on the frontline. We are relying on the vital and lifesaving touch of the allegedly “low-skilled” workers, those deemed unworthy of a UK residency, to fight against the coronavirus. Their elevated status as “essential” workers fails to compensate for their low wages, for the shortage of vital PPE in hospitals, and for the degradation of their labour.

The importance of health care workers also intersects with the gendering of touch. A report published on International Women’s Day in 2019 showed that over three quarters of NHS employees were female (Morris, 2019). With the general public relying on feminine labour (and touch) more than ever, the COVID-19 pandemic has reemphasised a gendered hierarchy. The vilification of touch adds to this, as Classen contextualises (Classen, 1997):

The fact that the ‘male’ senses of sight and hearing were classified as ‘distance’ senses and the ‘female’ senses of smell, taste and touch were characterized as ‘proximity’ senses, was interpreted to mean that men were suited for ‘distance activities’, such as travelling and governing, while women were made to stay at home.

The senses map onto a long-standing patriarchal ideology of the sexes, reinforcing the subordination of women and privileging the male as rational and refined. As a categorically feminine sense, touch is tied to feminised characteristics such as sensitivity, emotionality, and care. By immobilising tactility, COVID-19 has placed restrictions on such gendered attributes, helping to cast emotional and sensitive acts, built into and out of touch so innately, as unsafe and as aiding the spread of the virus. The virus, then, incentivises the binary which privileges distanced rationality over intimate sensitivity, and masculinity over femininity.

Despite this feminisation, the form of touch which has drawn most attention during the pandemic is the handshake. A distinctly professional, polite, and public mode of greeting, the handshake is arguably the least intimate form of cutaneous contact, owing to which, it is coded as rationality over intimate sensitivity, and masculinity over femininity.

Despite this feminisation, the form of touch which has drawn most attention during the pandemic is the handshake. A distinctly professional, polite, and public mode of greeting, the handshake is arguably the least intimate form of cutaneous contact, owing to which, it is coded as masculine. That is to say, when The Guardian declared it “The end of the handshake” in an article published March 3rd, they downplayed female experience, as the loss of this greeting is unlikely to shake the foundations of feminine interaction (The Guardian, 2020). This pervasive concern with the handshake, featuring globally, from reports in Canadian news to historical re-evaluations of the ancient gesture in the Greek Reporter, and even in the new rules accompanying the reintroduction of German football league Bundesliga, which bans handshakes with match officials, gestures towards a bias in favour of the protection of men and the safeguarding of male-to-male interaction (Collie, 2020; Al Jazeera, 2020; Chrysopolous and Reporter, 2020). This bias is incentivised by statistics which show that men are more likely to die of the virus than women. Although no conclusive study has yet been carried out, discussions report that both sex (defined as biological differences between male and female) and gender (defined as behaviours and attributes deemed appropriate for men or women by society) may play a part. Some suggestive theories include: the XX chromosomes in female bodies are more responsive to infection than the male XY chromosomes; men are more likely to smoke
than women and smokers suffer more from respiratory illness such as COVID-19; and, from the Global Health 50/50 organisation, an organisation which works towards global health equality, that men are more likely to suffer from underlying chronic conditions such as cardiovascular disease on account of “risky behaviours, which are consistently found to be more common among men than women worldwide” (Global Health 50/50, 2020). The suggestion that a male-coded lifestyle contributes to the gender disparity in coronavirus deaths demonstrates that traditional masculinity is toxic and harmful.

The toxicity of traditional masculinity, privileged over a feminine touch, is evident in the political sphere. The strategy first introduced by the British Government, in which the virus is controlled so that, at its peak, it does not overwhelm the health system, but is otherwise permitted to run its course in the quest for “herd immunity”, shows a wanting feminine touch. While it was described as a “rational” approach that was “underpinned by some sophisticated modelling of how viruses spread” by ITV’s political personality Robert Peston, the strategy was, as he says, not necessarily “optimal, workable, practical, or sensible” (Peston, 2020). In repeatedly prioritising the most effective or “rational” course of action, Boris Johnson signalled his laissez-faire, distanced, and ultimately masculine politics as coming at the cost of ethical care, and ultimately leading to many avoidable deaths. Pastoral qualities such as empathy and understanding, degraded as feminine and confined to the now-detrimental mode of touch, are proving to be of paramount importance in coping with the outbreak and the upheaval of the virus, particularly for the vulnerable, the overworked, and the unwell. We are thus in need of a greater feminisation of political discourse to account for the demands of the virus, alongside an effective and rational strategy to combat it. In other words, we need politics to represent both genders, the feminine mixed with the masculine.

This is palpably clear, too, when comparing the UK’s response to the pandemic with female-led governments elsewhere. An article by Louise Champoux-Paill and Anne-Marie Croteau of Concordia University, published in The Conversation on May 13th 2020, cites the actions of female leaders in Denmark, Finland, Germany, Iceland, New Zealand, Norway, and Taiwan as “supporting evidence that women are managing the crisis better than their male counterparts” (Champoux-Paill and Croteau, 2020). Common factors in their comparative success include, according to Champoux-Paill and Croteau, “resilience, pragmatism, benevolence, trust in collective common sense, mutual aid and humility” (Champoux-Paill and Croteau, 2020). They go on to suggest that this success is not solely because female-led governments are guiding their nations in a more successful fight against the virus, but also that “the election of women is a reflection of societies where there is greater presence of women in many positions of power, in all sectors” and that “in those countries, power is enhanced by the complementary nature of two genders contributing” (Champoux-Paill and Croteau, 2020). They conclude that “the challenges of the 21st century call for a new type of leadership, different from that based on command and control.” Instead, leadership ought to “primarily involve resilience, courage, flexibility, empathy, collaboration, caring and recognition of collective contribution. [...] These are all characteristics of traditionally feminine management” (Champoux-Paill and Croteau, 2020). This new style of leadership, which refashions gendered stereotypes into universally applicable and desirable qualities, downgrades distanced rationality below the more haptic qualities of care and empathy.

The British Government’s initial strategy, in lacking such a vital feminine touch, magnified the impact of the virus on the elderly and those with underlying health conditions. The virus, in turn, exposed the ableism which devalues and neglects the lives of many people. A BBC article by Nick Triggle reported that “many will die whether or not they get the virus” and quoted Professor Sir David Spiegelhalter from University of Cambridge, who said that many victims of COVID-19 “would have died anyway” of other illnesses (Triggle, 2020). This attitude towards British people with underlying health conditions – which includes common conditions such as asthma or diabetes – attests to an ableist prejudice which views the lives of vulnerable people as dispensable and less important. By contrast, the privilege of the able-bodied is abundantly clear in the reluctance of many to submit their quotidian routines to the demands of the pandemic, particularly evident before the lockdown was enforced by the government, but also in the masses who have repeatedly disregarded lockdown rules since. The instruction to stay at home has been deemed by some as an invasion of rights, particularly in America, where protests demanding freedom and the end of the lockdown prioritise economics and the right to work above public health. As protesters reject face coverings, business closures, and touchlessness in general, and hijack the feminist rhetoric around abortion rights through commandeering the hashtag #MyBodyMyChoice, they disregard the legitimate health fears of others, especially those exacerbated by the virus, and delegitimise scientific advice. By caring only about the restrictions placed on their body, and not the most at-risk bodies that these restrictions serve to protect, those who refuse to heed medical advice are irresponsibly jeopardising the lives of the vulnerable while exercising able-bodied privilege.

While the coronavirus pandemic has ‘touched’ all of our lives, it has had a disproportionate impact on the underprivileged and Othered. The taboo against the sense of touch, vital to reduce risk of contagion, has been easily weaponised to reinforce inequalities and to suit the relative comfort of the privileged. However, the very qualities of touch which endanger us in the present circumstances – its pervasiveness, accessibility, and emotionality – are those qualities which will help us to reconnect and to address injustice. Indeed, as Ahmed writes of the skin surface, “what separates us from others also connects us to others” (Ahmed, 2004). We must acknowledge the important, meaningful, and powerful foundations of touch, as that which enables our will, constitutes the self, and generates community, as well as that which enacts or challenges ideologies. To echo Berlant, when the present pandemic becomes historised, it will be either as “estranged” or “intimate”, and how we act towards each other shapes the legacy of the “stretched-out”, “question-marked” now. If we come through this with a greater appreciation of tactility, we can continue to build upon the positive values that are being born of these dark times. Alternatively, if we grow more and more wary of touch, hesitant in the face of our fragile materiality, and cling to division, we will perpetuate the distance that is now necessarily between us.

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Isobel Sigley: Conceptualization, Methodology, Formal analysis, Investigation, Writing - original draft, Writing - review & editing, Funding acquisition.

Declaration of competing interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

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