

## Caring in the times of Corona

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*How does one write about social isolation, mental health issues, and care work-induced fatigue in a local context already scarred with abandonment, loneliness and chronic caregiving? In what ways has the pandemic entered these contexts and what can we gain by attending to the pandemic's mode of entry into already fragile lives?*

In her astute reading of the novel coronavirus' entry into an already severed Indian socio-political landscape, Arundhati Roy argues in her piece, titled "*The Pandemic is a Portal*"<sup>1</sup> that:

"Our minds are still racing back and forth, longing for a return to "*normality*", trying to stitch our future to our past and refusing to acknowledge the rupture. But the rupture exists. And in the midst of this terrible despair, it offers us a chance to rethink the doomsday machine we have built for ourselves. *Nothing could be worse than a return to normality.*"

When I came across Roy's piece in April this year, I was trying to transcribe the narratives of mothers of autistic individuals who I had engaged with during a 3-month long ethnographic fieldwork for my MA thesis on disability, gender, and care work in Delhi, India. To take a break from listening to the riveting sound recordings of *chai* being sipped and heavy words being exchanged, I turned to Roy's piece. Reading her words while listening to one of my interlocutors' words, I too wondered-*Indeed, what normality? Normality for whom?*

Most of the mothers that I had interviewed were *anyway* leading lives marked with loneliness, lack of mobility, and (literally) back-breaking caretaking responsibilities. Indeed, what could be worse than this state of being? Constant worries about what would happen to their children after they were not around had even made some of these women dwell on and with the prospect of seeing their children die before their own eyes so that they could themselves die peacefully. How could the virus cause a rupture in such lives for whom the "*normal*" was already constituted as living with an "*everyday crisis*"? The mother whose words resonated most with this realization of mine (and Roy's) was Leila's.

Leila is a 65-year-old woman based in West-Delhi. I came across her through her son, Tanmay, who is 45-years-old. Tanmay has autism and attends the same 'school' (or a day-care centre) as my brother. Before I got to sit down with Leila in July 2019, her neighbours had cautioned me that Leila was filled with "too much pain" and she wouldn't stop speaking once she started. Acutely aware of this characterization, Leila did mention in her first interview with me that she wouldn't have sought the company of other ladies living in her colony so desperately if her husband hadn't have committed suicide eight years ago.

Anxious about who to pass on his property to, Leila's husband left Leila and Tanmay with another disability to live with. As a middle-aged woman alone with her "dependent" son, surrounded by indifferent conjugal relatives who severed their ties with Leila post the demise of the mutual link between them (that is, Leila's husband), Leila was left vulnerable. Responding to this vulnerability, Leila's brothers entered the scene and helped her rebuild a life from scratch in a new neighbourhood of Delhi surrounded by "*those who really cared*" (her affines).

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<sup>1</sup> Arundhati Roy. "The Pandemic Is a Portal": *The Financial Times*. 03 Apr. 2020.  
<https://www.ft.com/content/10d8f5e8-74eb-11ea-95fe-fcd274e920ca>

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Despite their love, Leila always remained cautious of the possibility that her brothers and their families might “*turn their faces away*” when Tanmay and Leila might really need them in future<sup>2</sup>. Partly, Leila felt that way because her brothers-in-law too turned their back towards Tanmay and her despite Leila maintaining cordial relations with them. But, mostly, this is how relations (or circles of support) are imagined, embodied, and lived with in this part of the world. So, vis-à-vis her brothers and their families, Leila observed small *actual* acts in the present to distance the *eventual* corrosion of Tanmay and her relations vis-à-vis her brothers and their families in the future. Leila honed and perfected, what some have called, “*ordinary ethics*”<sup>3</sup> of living and caring.

From not asking for help unless absolutely needed to speaking very little<sup>4</sup> in social gatherings out of the fear of offending her brothers’ wives, Leila particularly reflected on the use of her voice in the new neighbourhood leading to a feeling of “*having no one to call one’s own*”. Moreover, when some neighbours offered to help with some chores, Leila simply refused because she was worried about the gossip and rumours that might gestate in this new neighbourhood about a single woman asking for help from young men. Similarly, Leila couldn’t have accepted any welfare measures (if they ever existed in India) because her “*brothers were still alive*”. Accepting help from anyone other than her brothers, either from the neighbours or the state, would mean Leila was severing her *domestic citizenship* or claim to belong in, what I call, a “*local ecology of care*” (the triumvirate of family, kinship, & neighbourhood). And asking for too much help from her brothers could also lead to the same severing of ties that she had already faced at the hands of her *other brothers*.

Yet things changed with the arrival of coronavirus. Her latent fears about the eventual souring of relations between Tanmay, herself and her brothers came to the surface much faster than she had anticipated.

In her recent calls to my mother, Leila confessed that her brothers gradually stopped replying to her calls. Even if they picked up her call, they told her that they had “*too many problems of their own*”. Tanmay who enjoyed the company of his female cousins couldn’t understand what suddenly made them so distant. Leila found herself squeezed between her son’s often violent demands to call his cousins over and the cousins’ refusal to pick up the calls. The “*purity*” of Tanmay’s emotions as “*a child who can never grow up*” which used to melt everyone’s hearts initially wasn’t as effective anymore.

The same kinship, which was a site of support, now became a plot of betrayal. Leila’s elaborate ethical projects of maintaining a delicate balance between the actual and the eventual of everyday lived relations, which took eight whole years to perfect, crumbled with the onset of the virus. It revealed to her, her (and her dependent

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<sup>2</sup> Through her sensitive ethnography amongst the Punjabi community in Delhi (to which Leila’s belongs) ranging over several years, Veena Das has showcased that relations in Punjabi sociality are always treated as almost already broken (2007). Given the overwhelming belief in the eventual corrosion of familial bonds with the passing of time, members of a family or kin have to be particularly attentive to their actual actions in the present. In my work, I build upon Das’ work to argue that in the case of the mothers of autistic individuals, the worry is almost doubly existent given that the mothers do not merely have to worry about their own relations turning sour. But they must also fear on behalf of their children too as their proxy-selves. What must be pointed out here is that this fear of souring relations, for Das, is inherent in the very nature of everyday life. Everyday life, according to her, is inherently susceptible to the problem of what Stanley Cavell calls “*scepticism*”. The threat to everyday life comes from within it, then. That is, it is not the autism diagnosis itself or a coronavirus positive test itself that will traumatize the ethnographic subject. Rather, it is the (familial) betrayals witnessed by the subject as a result of the diagnoses that inflict a deeper wound. See Veena Das. (2007). *Life and Words: Violence and the Descent into the Ordinary*. Berkeley: University of California Press.

<sup>3</sup>See Veena Das. (2012). “*Ordinary ethics.*” In *A Companion to Moral Anthropology*. Edited by Didier Fassin, 133-149. Malden, MA: Wiley-Blackwell

<sup>4</sup> In this local context, the ability to speak more than required about one’s relatives and other intimate ones often becomes the basis of determining membership to feminine social circles (like kitty parties, local networks of rumours and gossips etcetera) which Leila couldn’t obviously become a part of.

son's) marginal status as merely a gendered object of exchange and disposal in a kinship system. Yet as Veena Das reminds us, in another context<sup>5</sup>, women are the only objects of exchange in kinship systems who possess a voice. And it is this voice that those of us working on care work in a post-COVID world should lend our ears to.

When the quarantine is over and when we return to our fields (if we aren't already *in* them), let us not look for the ruins of the virus only in the big, bold, and catastrophic. For a brief moment, let us shift our critical gaze away from the supine state and myopic media. Let us be attentive to how the virus has innocuously seeped into the everyday life of our interlocutors, how the virus has precisely attacked the weakest cells of not only the body politic but body familia. My argument is not positioned simply against the innumerable political economy-based articles that overpopulate our newspapers these days. But my case is simply a plea to relocate the political economy in the rough and tumble of the domestic and the everyday. While feminist analysis has brought our attention to the heightened cases of domestic violence during this quarantine, much still needs to be said about the way the coronavirus has impacted the ordinary ethical projects that the careworkers had elaborately constructed and sustained when the tumultuous waves of the virus hadn't hit out shores. An attention paid to the ethical projects of careworkers can, moreover, help us ask-How has the virus infected our ethical relationships not only with our intimate loved ones but also our relationship to ourselves? That is, this viral shift in relations for Leila has also made her doubt her own existence in a gendered ecology of relations where despite whatever she does for herself and her child, both of them would always be treated like a burden ("*boj*").

So, yes. A return to normality for Leila would still be a return to the same lack of mobility, pre-ponderance of care work, and loneliness. Yet, in that crisis-like-normality, while Leila dwelled with the constant fear of abandonment, she perfected an ethic of caring and living that at least momentarily pushed the souring of relations to a distant future. Now, all she is left with is a torn social world of relations demanding a restitching of life from afresh once again. This might become an opportunity for Leila to reimagine Tanmay and her life anew, as Roy argues. Perhaps, it might take less than eight years this time. But what is crucial to remember while recounting what was lost during the quarantine is the extraordinary amounts of ethical labour that Leila put in to reconstruct her life after her husband passed away eight years ago.

*The names of the interlocutors have been for anonymity.*

#### ABOUT THE AUTHOR

Paras Arora is a second-year Master's candidate and Hans Wilsdorf scholar at the Department of Anthropology & Sociology, The Graduate Institute, Geneva. He is currently trying to write his MA thesis on disability, gender, and local ecologies of care in Delhi, India, titled- 'Caring for a Child Who Never Grows Up? Towards an Ethnography of Care work for Autistic Adults in Delhi, India'. Originally from Delhi himself, he has presented his ethnographic research on gender and politics at the Universities of Cambridge, Amsterdam, Istanbul, Singapore, and Delhi. As the UNESCO-Aladdin Youth Ambassador for Peace and Intercultural Dialogue, Paras has also worked closely with queer Muslim migrants' experience of cultural integration in the west through an intersectional framework.

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<sup>5</sup> Veena Das. (1989). "Voices of Children." *Daedalus* 118, no. 4: 262-94. [www.jstor.org/stable/20025273](http://www.jstor.org/stable/20025273)