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Pandemic cities: Between mimicry and trickery

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Just around the time when the British Prime Minister Boris Johnson announced in a bleary-eyed video conference that he had tested positive for COVID-19, Indian news and social media platforms were broadcasting images of their able-bodied Prime Minister Narendra Modi promoting Yoga *Nidra* to remain stress-free during the unfolding epidemic as containment and lockdown became, literally, an universal order of the day. The rhetorical power of the emergence of ‘emerging infectious diseases’ notwithstanding (Lynteris 2016), with localized outbreaks of COVID-19 being recast as a global pandemic, a form of vigilante governance beyond the existing system of syndromic surveillance and sentinel watching has been necessitated, triggering notorious regimes of intervention including ‘quarantining’ large sections of the population. As lockdowns came to be mimicked and reproduced by sovereign states all over, there seems to be a common script outlining these responses that would thrill to no end global health proponents and their penchant for norms and standards. However, as a possible object of mimesis, we need to look beyond its inevitability as well as a temptation to signify it with neo-imperial markings, knowing that there is a difference that is almost the same but not

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quite (Bhabha 1984). Lockdowns, to put it simply, will look different in all of its locales, its actuality being blurrier, messier and uncertain.

Thus, while in most cases it has been projected as the inscrutable science of social distancing, in the Indian context, the possibility of a virus spillover gets embedded in a complex array of localized metaphors and meanings where its contemporary risks are historicized through particular metonyms, requiring different modes of making the unfolding panic intelligible. The uncharacteristic ‘appeal’ from Prime Minister Narendra Modi for a 14-hour Janata Curfew or People’s Curfew on Sunday 22nd March is therefore not surprising. There was, however, too much left unexplained in terms of the need for social distance as everyone was instructed to stay inside and not venture outside. An unreliable spate of oral information circulated as a result painting a nefarious picture of the outside where the killer virus lurks in the public, transmitting more rapidly through the interstices of rumour which threatened to become the new idiom of control. More importantly, it reinforces the persistent analytic dichotomy of the inside and the outside that continues to dominate our analysis of Indian cities (Chakrabarty 1991). Often seen as a pre-modern way of organising Indian society, the strange admixture of the inside/outside binary with modernist categories of the private and the public challenges the way we perceive that ‘disturbing’ social entity – the crowd (Freitag 1991).



A billboard near a police station in Chennai

<https://www.thehindu.com/news/national/india-coronavirus-lockdown-april-3-2020-live-updates/article31243605.ece>

The contingent crowd

While scholars have reminded us about the need for a more nuanced reading (Gandhi 2016), conveying significant meanings through its very density, the crowd continues to be stigmatised through its association with dirt and danger (pathological and social). There is little acknowledgement of the economic rationale of the crowd in Indian cities, essential to the 10 million street hawkers who ply their goods to a unique ‘market of Indian shoppers’. If we bother to unravel its constituents, we will find that the spatiality of the crowd is a mutually savvy terrain for exchange of valuable information, where deals are

negotiated, and all kinds of sales/exchanges made. The crowd also presents the most democratic potential in Indian cities whose ‘promise of plenitude’ displays a remarkable ability to absorb diversity of sentiments and opinions (Amin 2008). Equally, contrary to western distinctions between the crowd and the public, in Indian cities, the crowd is a critical characteristic of the public, demonstrating a remarkable sensitivity to not so easily discernible forms of social organisation. And more importantly, for the 1.3 million slum dwellers in a city like Chennai living in a different kind of ‘crowded’ setting marked by a distinct lack of privacy (and other facilities), the (crowded) public is essential to their urban lifeworld. Rao (2007) valorizes the crowd through a phenomenological reading of density and its experience of proximate distance that makes incessant interactions in the public possible and manageable. But in a period of lockdown with terms such as public, citizen, civil society, community and even population compromised in their (multiple) meanings, we struggle to redeem the crowd, as it is nothing less than a threat to socio-biological wellbeing.

Initial press reports drawing on Google satellite imagery and on-street photography show that authorities have been successful to a large extent in achieving an impressive feat, i.e. emptying out prominent public landmarks of their ‘crowd’. Chennai’s famed beaches are stripped bare and it is uncanny to see T Nagar’s usually congested Ranganathan Street without its characteristic mass of bodies. But, you need to only turn the corner to see that the crowd is not so easily deleted but only displaced. Thus, quotidian life in Chennai under lockdown while remaining largely confined to the ‘inside’ does diffuse to the outside, (re)assembling as a crowd, once again, in markets, bazaars and streets, and in

many cases, boldly under the gaze of the surveillance state. The re-emergence of the crowd in a locked-down city or its persistent presence is not a sign of a violation but a reflex that is precognitive rather than rational or conscious, guided by a compulsive routine of certain social practices that cannot be done away with. As an absolute lockdown encounters the ambivalence of everyday life in the city, it becomes equivocal, open to interpretation and negotiation. Here, the defiant presence of the crowd despite the lockdown is not due to their inevitability but because it is contingent, limited to impossible choices with few alternatives. There is an ethos of adjustment and recalibration that characterises the Indian crowd (Rao 2007) and now comes in handy. It might not be entirely altruistic and even in a sense violent but in its ability to “adjust”, to “make do”, it finds an ingenious way to get by (Dyson 2017).

Through its unrelenting reappearance, this crowd eventually recasts lockdown as, not a necessity but, like itself, a contingency, placing it in tandem and commensurate with what is seen as an abnormalized narrative of confinement/containment. Lockdown, under these circumstances, looks like a cheap imitation of what is happening elsewhere. Providing a perfect foil to this crowd is another code of ‘public’ comportment that equally cunningly upholds while simultaneously undermining the lockdown, and that is the act of *queuing* (Gandhi 2013). Since the lockdown, as exceptions are made by the state allowing diffusions into the highly regulated outside, you see people conforming their presence in the now forbidden public by diligent queuing at places, a surprising act for many, but tolerated as one that is less volatile than the crowd. In Indian cities, the queue and the crowd are concomitant manifestations of (dis)ordering the public, where there is a

constant battle to order a crowd into a queue while the latter can quickly dissolve into the former. As a constant fixture of Indian everyday life, the queue, alongside the crowd, takes on a special significance during lockdown as it becomes a symbol of additional hardships people are facing. By forming a queue, one is not only joining an inescapable quotidian ritual, but there is a suggestion that this is now the permitted norm of public sociality as previously inculcated rules of competence and interaction are implicitly rewritten. Slow and patient, this new queue demonstrates a “passive seriality” where any flagrant attempt to break the queue is little tolerated (Sartre 2004 cited in Gandhi 2013).

Dispensing tricks: Masks and sprays

In Chennai, queues could be seen outside institutions as lines were formed for obtaining ‘curfew passes’ or at pharmacies, especially ‘siddha’ medical shops where hearsay treatments are being promised through ayurvedic alternatives such as *nilavembu kudineer* or *kabasura kudineer*. Despite being known as a city that is ‘thick with health care’ where some variety of hospital or clinic sits at every street corner (Hodges 2019: 473), over the past decade, the rise in mosquito-borne viral tropical infectious diseases, such as dengue fever or chikungunya, have popularized non-efficacious folk medicine. These have been absorbed into the category of modern bio-medicine (*cf.* Hornberger 2019). In the absence of a viable immunization, they become a key point of scientific articulation rooting global health responses to these epidemics in specificity and contingency (Nading 2015). Thus, what you see in Chennai is a visible intermingling of colloquial customs with scientific institutional practices resulting in a complex landscape of ‘pseudoscience’, where pseudo emphasizes not the binary of the fake versus real or the authentic from the inauthentic but

an in-between condition of scientific uncertainty where treatments are indeterminate and practices of dispensation rather than prescription have made self-medication rampant (Kingori and Gerretts 2019; Das and Das 2006).

As both the virus and the human body become at once a pliable object of the state and a recalcitrant subject of disruption, that is, “quasi-object” and a “quasi-subject” (Peckham and Pomfrey 2013), legitimacy is claimed for one’s embodied presence in a forbidden contagious environment through the wearing of masks. Those who are part of the crowd or the queue attest their right to be there through their personalization of this prophylactic apparatus, creating literally a spectacle of masked collectivity (Lynteris 2018). For many, it has the same kind of talismanic property as the promised ayurvedic remedies they desperately seek. Irrespective of its actual protective potential, wearing a mask becomes a matter of civic duty as state authorities mandate it as compulsory to go outside and the masked citizen becomes the visible representation of the new ‘pandemic public’ (Prince 2019). In the absence of systematic testing and the still elusive vaccine, the mask turns into an icon of agonistic medical rationalism where it does not simply protect its wearers from infection but immerses them and their immediate social environment into a performance of medical reason and hygienic modernity (Lynteris 2018).

It is this performative praxis that characterizes a blatant display of actions taken by the Corporation of Chennai officials as they erect material signs of a city in quarantine. Declaring the entire city as a containment zone, the Corporation is conducting a 90-day

door-to-door health survey of its 1,800,000 households. In addition, 90 ‘containment zones’ have so far been demarcated around an 8km radius (with a buffer of 2-3km) of localities where known Covid-19 patients live. This is eerily similar to Foucault’s (1995) description of disciplinary schemes of a seventeenth century order in a plague-ridden town and is disconcerting when you consider Kong’s (2018) presentiment that the quarantined plague city will no longer be potent in a porous pandemic planet. There is a swirl of activities involving frontline measures where volumetric modes of action drones, mist canons and disinfectant tunnels are prominently employed. Such efforts at creating a protective aura are however poorly imitative, replicating the familiar annual tactics to tackle the spread of mosquito-borne viral infections such as malaria, dengue fever and chikungunya. And yet, much (blind) faith is placed in these atmospheric effects considered inimical to the new virus. While at one end we could appreciate these *metis* interventions as a practical and perhaps innocuous knack of vernacular tricks, what it amounts to is a sense of ‘bricolage quarantine’, in a not so complimentary manner (<http://chuangcn.org/2020/02/social-contagion/>; Lee 2006). If mimicry and trickery are the extent of a medi(c)ated statecraft under lockdown, then should we be allowing such practices to be refashioned as global health tools? Are we shying away from underlying structural concerns by calling into question a valid distinction between what is genuine and what is not, suggesting instead, for the sake of hybridity, that this a fantastical mixing of the fake-in-the-real (Kingori and Gerrets 2019)?



Man spraying a disinfectant in Chennai

<https://www.thehindu.com/news/national/india-coronavirus-lockdown-april-15-2020-live-updates/article31343872.ece>

Coda: Post-pandemic cities

In his prescient exploration of fear and fascination with the “next pandemic”, Lynteris (2020) reflects on the post-pandemic condition and how it operates in the pandemic imaginary. For him, it is not post-apocalyptic or a variant of the many “after the end” scenarios but an end of mastery, where we will be forced to inhabit a masterless world. His pessimism about post-pandemic humans as he prophesies an inability to develop a meaningful way of being human is offset somewhat by some hope in identifying a key

trope of the new condition – a rather mythic-cosmological re-naturalised city. This is perhaps the challenge of any critical reflection on pandemic futures. While no longer speculative, in the next few years, we will all be busy thinking, teaching and writing about this pandemic to various audiences (mostly ourselves). One clear gauntlet is how we write about a ‘global pandemic’ from here to elsewhere. Even as scientists will be occupied with harnessing elusive trends and patterns and reworking models as well as algorithms, could we build a narrative of some significance out of the smaller-scale, one-off trends without invoking that much-harassed excuse of cultural distinctiveness? Do we need to provincialize it? If so, how? Would it be enough if we signpost the particular and the singular to expose its global fault lines? While investing it with an ethnographic ethos seems to be one obvious way, could we attempt to construct a pandemic palimpsest of particular places? It will involve building an ‘historiography of the present’ beyond a linear temporal framing, one that will, no doubt, disrupt the narratives we tend to come up with.

Delivering the Royal Historical Society lecture in 2018 on the centennial anniversary of the 1918-19 influenza epidemic in India, David Arnold (2019) asked what exactly are we seeking to investigate through such a scrutiny and what do we wish to recuperate as he displayed caution in exploring India’s own (colonial) specificity against temptations of casting it as the first global pandemic. And, this is what he was wary about – our interest in the past might be simply about reconstructing a more accurate forecasting of the future instead of making sense of the fine-grained materiality of a past pandemic to understand the present. Can a grounded analytic of the pandemic “now” help here, and how do we

craft one? By critically weaving it into our ongoing investigations of the urban “now” that seems to rally current discourses within global urbanism, what kind of novelty does this bring to our tendency to be preoccupied with all sorts of socio-political crisis? And what will happen when this novelty wears off? Would we simply move to the next big thing in our continued speculation of the post phenomena in cities? In the meantime, there will be no prizes for guessing Oxford Dictionary’s Word of the Year for 2020.

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