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No Man is an Island at a time of pandemic

Ana Cristina Zimmermann and W. John Morgan

“No man is an island entire of itself; every man is a piece of the continent, a part of the main; if a clod be washed away by the sea, Europe is the less, as well as if a promontory were, as well as any manner of thy friends or of thine own were; any man's death diminishes me, because I am involved in mankind. And therefore never send to know for whom the bell tolls; it tolls for thee”. (Donne [1624] 1987)

The COVID-19 pandemic has focused attention on global health, ecology, economics, common welfare, and solidarity. Since March 11, 2020, when the World Health Organization (WHO) declared Covid-19 as a pandemic, the global population has faced locks-down. This has stimulated debate about public policy and the need for international co-operation. It has also stimulated personal reflections on what it means to be *human*. Drawing upon creative literature, we consider the ethical issues raised by social distancing and quarantine. A fundamental ethical question is how responsibility for the care of others is accepted and maintained, by those in retreat and outside; and how dialogue is maintained between them. We draw philosophically from the concept of *dialogue* and from the ethics of *care*.

At its best, literature considers the ethical and moral issues of human social life, the deeply personal, and those in common. Writers have developed an imaginative understanding of the pathological conditions of plague, epidemic, and pandemic; how people respond, individually, as families, and as communities, when in isolation; and through accepting or refusing responsibility for others. The Mexican novelist Carlos Fuentes says that creative literature questions reality through appealing to the imagination and encourages the reader to explore the persistent human dilemmas. In Occidental literature alone, there are classic texts, such as our epigraph from John Donne, an eighteenth-century English Metaphysical poet. Again, Albert Camus' novel *The Plague*, that drew upon Daniel Defoe's *Journal of the Plague Year*, considers ethical questions of *solidarity* and *care* for others raised by a crisis of disease and quarantine. Its epigraph from *Robinson Crusoe*, also by Daniel Defoe, considers *solitude* and *separation*. Camus' novel describes the experience of Oran, a coastal city in what was then French colonial Algeria when

afflicted by bubonic plague. In the company of a narrator, Dr. Rieux, the reader learns of personal and public confrontations with death marked by fear, desperation, feelings of the surreal, of the absurd, of imprisonment, exile, and, significantly, of self-reflection and solidarity. Published after World War Two, the novel may be read as an allegory of the German Occupation. Yet fundamentally, as Gray comments, it “... dramatizes the victory of human spirit and solidarity over that which would threaten and dismember it: a plague, an enemy occupation, existence itself”.

These themes are echoed by the ethical issues raised by the COVID-19 pandemic. The COVID-19 pandemic has brought specific problems of public health, but it has also aggravated problems that were already there and provides an opportunity to reflect on the meaning of community and of social bonds. As Camus writes: “Thus, for example, a feeling normally as individual as the ache of separation from those one loves suddenly became a feeling in which all shared alike and - together with fear - the greatest affliction of the long period of exile that lay ahead”. As time passes each person reacts differently to the situation, but, eventually, it was understood that all were together “in the same boat”.

However, the current pandemic has exposed social inequality. As Amigo comments, the indigenous peoples of South America devastated historically by infectious diseases brought by non-indigenous people is an example that continues. What makes them more vulnerable to COVID-19 are medical, social, and environmental factors, such as lack of safe drinking water, basic sanitation, good working condition, and public health care. This is like the conditions of underprivileged populations living in relatively closed communities in developed countries. The isolation felt during a pandemic reflects the alienation and sense of abandonment vulnerable groups already feel. The relationships of family, friendship, and neighbourhood remain factors in deciding degrees of responsibility and care. There is the fact that elderly people are statistically the most likely to die from COVID-19. They are also often found in care homes and may suffer from loneliness. This separates them potentially from the young, although all are possible carriers and transmitters of the virus.

Isolation may, of course, be a deliberate retreat from the world and its responsibilities, or even a path for self-improvement as with the role of *silence* in mysticism, and religion, However, in the COVID-19 pandemic, people are forced into retreat in their millions. Social distancing or physical distancing through the so-called 'lock-down' is a primary policy aiming to avoid massive contagion and the overwhelming of formal health care systems. Although challenged by the theory of 'herd immunity, it remains a core response to the pandemic.

Paradoxically, social distance has come to be a sign of caring. However, it has brought people together in different ways. As people submit to the inconveniences of a prolonged period of sheltering in place, of self-isolation, or quarantine, they have explored possibilities of communicating with others. Video calls and social media platforms were already a powerful trend and have received an enormous impetus in the isolated conditions of the pandemic. What has also drawn attention have been the use of age-old and universal human gestures such as clapping in unison to thank health care and other support workers, putting signs in windows, singing, and playing music from balconies. These are human emotional expressions that inspire and strengthen people during a common crisis.

Such means of communicating with others despite 'physical distancing' (a more accurate description than 'social distancing'), offers a fresh understanding of dialogue and its ethical value. According to Martin Buber, an authentic dialogue is not simply an exchange of words. It does not need words but is found in openness and mutuality. A dialogue takes place between individuals and among people generally and the experience is more than a sum of individuals. Buber criticizes egocentric individualism and uniform collectivism as experiences that destroy the possibilities of dialogue with their ethical outcomes. Authentic dialogue recognizes the Other's personality and that participants are together in community.

For Buber, to know the Other one must draw from the community. This is because human beings experience emotional and spiritual existence in I-Thou relations, where there is no place for an object. Buber understands the pronoun 'We' to mean a community of independent persons in a commonly responsible relationship with others, something fundamentally different from a collectivity. Both appear to move towards one goal; however, in a community, there is a dynamic relationship with the Other. A collectivity is a uniform mass without individuality

based on systematic atrophy of personal identity. This may be compared with the *Gemeinschaft* (community) and *Gesellschaft* (society) of Ferdinand Tönnies. The former is characterized by customary rules and social solidarity. The latter by rational self-interest, formal agreements, and structures. These are, of course, ideal types and not precise classifications. Nevertheless, both carry important ethical implications, and the COVID-19 pandemic has illustrated each type.

This brings us to solidarity and trust, vital concepts in crises such as the COVID-19 pandemic. They are associated with the notions of connection and cooperation at different levels, from the personal to the public. Heyd comments that solidarity “...is a form of bonding, which is partly given, partly created by a group of people, brought together by a shared past, a present interest, hopes for the future, or engagement in an enterprise directed to the realization of common values.” It depends also on trust that the obligations of such bonding will be fulfilled in a conscious effort and commitment to a common.

Charity, philanthropy, social cohesion, and social responsibility are each connected with the notion of solidarity historically. Émile Durkheim considered that, as a social fact, solidarity could be known only through social effects. The extent and intensity of social bonds determine how inclusive or exclusive solidarity will be. An individualistic contemporary perspective may threaten the notion of solidarity more than the physical isolation of quarantine. However, there is tension between individual and collective solidarity. Humans are ambiguous, and the transition between individual levels to macro-levels of action requires a comprehensive understanding that is not easy to achieve. For instance, someone may demonstrate solidarity for people they know or meet or in specific cases of need, but not support inclusive public policies or vice versa.

The need to unite against a common danger does foster relationships among people. However, how we engage in action is also important. For example, the description of the COVID-19 pandemic as a “war” against “an invisible enemy” is a powerful emblem of our contemporary global society. “This war needs a war-time plan to fight it”: said António Guterres, the United Nations Secretary-General, at the G-20 Virtual Summit on the COVID-19 Pandemic (UN 2020). Again, Emmanuel Macron, emphasized that: “We are at war”, in an address to the French nation when the lockdown strategy was first declared. This war “against a virus” or “a sanitary

war” also highlights “fighting the good fight”, when praising the efforts of people in the public services and as volunteers, is reminiscent of the language of spiritual warfare found in early Christian hymnology. There are indeed some parallels with war considering the necessity of isolating large population groups, the potentially deadly threat to health, concerns about national borders, uncertainties about the future, and economic recession.

Such combat metaphors may help people to understand the seriousness of the situation and mobilize for action. However, it can also justify obedience to a government authority, and stimulate fear, anxiety, and panic. Besides, a virus is not the same as an enemy in war. It has no consciousness, morality, or intention for deliberate attack or killing, it cannot negotiate terms, or surrender, although it may be defeated. In Camus’ novel, the citizens of Oran (with a citizen being different from an inhabitant) realize that people were living a common experience with shared feelings (and so all became citizens with rights and obligations). Facing the consequences of a pandemic, some desired something that they could not define but “...for want of a better name, they sometimes called it peace.”

Paulo Freire argued that one’s humanity can be realized only in fellowship and solidarity which requires the disposition for authentic dialogue and critical thinking. This sees reality as a process, as transformation. “Social distancing” may isolate people physically, but it does not prevent them from acting together. Indeed, as we have seen, there has been an intensification of social life during the pandemic through messages and other forms of contact. A dialogue takes place in different ways: from the essential communication of instructions about health care, and sustenance, to more profound expressions of emotion, feeling, empathy, sympathy, caring, bereavement, and mourning. We may imagine such solidarity based on trust uniting people as citizens. However, in a society marked by competition, individualism, differences, inequalities, understanding the nature and extent of authentic dialogue would enable this to be more inclusive.

Another fundamental ethical question is how we accept responsibility for the care of others. This is an important shift in perspective. Warlike or apocalyptic metaphors indicate ways of dealing with the crisis, placing emphasis on fighting a life-threatening challenge, rather than on caring, preventing, and looking for knowledge and understanding of the different dimensions of the pandemic. On the

one hand, there is an expectation of a global effort to find solutions to the pandemic situation and to mitigate its catastrophic consequences. This is a rational societal response. On the other, there is an understanding that global organizations should not regulate, dictate, or impose ethical principles but offer guidance and foster discussion. This calls for both an individual and a communal ethical response. The question is how may these be reconciled through shared responsibility, solidarity, common knowledge, and respect for life resulting in conscious action?

The ethics of care offers an interesting approach to thinking about how individuals living in a community should respond to a pandemic. Held presents the ethics of care through five characteristics: it focuses on meeting the needs of those for whom we take responsibility (and how these are identified); it values emotions such as sympathy, empathy, sensitivity, and responsiveness; it questions the limits of universal, abstract, rules derived from dominant moral theories; it problematizes traditional notions about the public and the private; it addresses moral issues arising in relations among the unequal and dependent; and the concept of persons as relational and interdependent morally and epistemologically, rather than as self-sufficient, independent, individuals. These question the notion of universality and extends conventional boundaries of ethical discussion. From a feminist perspective, the ethics of care requests structural transformation of society in its different components and relationships, moving away from patriarchy to the kind of justice that caring requires.

Such an ethics of care has a close relationship to the philosophy of dialogue that we have indicated, with its understanding of personal and community relationships. Despite how expressive statistical medical data are, they do not prepare individuals for the loss of someone personal to them. Individuals have personal histories, families, friends, neighbours, work colleagues, feelings, and dreams. An ethical danger in a pandemic is to forget human uniqueness, and to consider people only as parts of a collective system. The human should not be envisaged as a generic type but as a complex being engaged in a world living as a community. This calls on us to take responsibility for our relationships. It is a fine balance between acting for the common good and respecting individuality and the peculiarities of the community.

The idea of community brings with it the notion that we need to share knowledge and plan together to find answers to shared problems, be they local or global. The impact of the COVID-19 pandemic shows how quickly the local becomes global. In such a situation, a common response such “Each one doing his or her part” may be questioned. This is challenging because society is used to looking for quick solutions and without necessarily referring to others. This may result in piecemeal action seeking individual results: “I did my part”. Inversely, each doing his or her part without reference to community engagement may lead to a loss of social responsibility. The COVID-19 crisis shows that it is not enough to do one’s part, “stay at home” or “wear a mask” for instance. It is necessary to think about what we can do for those who are not able to stay at home and are perhaps unprotected, or those who cannot leave their homes for basic needs, those who do not have the financial means to survive during a lockdown, those who do not have basic sanitary facilities, who live in slums, or refugee camps. The pandemic has thus drawn attention to individual ethical responsibility and to the ethics of public care as a rational societal responsibility. Taking such personal responsibility is an important sign of ethics with a focus on care for other people.

Literature at its best helps us reflect upon our world and to imagine possible worlds, fresh ways to deal with the human ethical dilemmas of life and death. It takes us beyond what we can know from direct personal experience while enhancing our understanding of it and ourselves. For example, the dilemma between the individual and the community is illustrated by Camus in an exchange between Dr Rieux and Rambert. The former says that there is nothing shameful in preferring happiness: “But it may be shameful to be happy by oneself.” To which Rambert replies: “Until now I always felt a stranger in this town, and that I’d no concern with you people. But now that I’ve seen what I have seen, I know that I belong here whether I want it or not. This business is everybody’s business.” This change begins with individual responsibility and behaviour for and towards others. It is we suggest the fundamental ethical lesson to be learned from the COVID-19 pandemic. If for Camus “...the plague was bound to leave traces, anyhow, in people’s hearts” for us it would be the recognition of the links that connect us to all forms of life, as well as our responsibility to the world. This is echoed by another character, the Spaniard Tarrou, in his resolution that we must “... fight any force that brings death; and this

includes maintaining vigilance, as well, against the potential each of us carries within ourselves for infection by such a plague, whatever form such evil might take”.

As Adele King observes: ‘If the plague is a symbol of human mortality, it is an enemy that can never be defeated’. If the human condition is found, as Camus believed, in an *absurd* universe, the most that may be achieved is some humane mitigation, elaborated through personal dialogue and communal ethics of care. Yet, ironically, during the COVID-19 pandemic elderly people in care homes have been prominent casualties. Communities must accept that natural and cultural elements are interconnected and that our vulnerabilities and strengths as humans match our way of living as a society.

Finally, as we have noted, what has become evident are the problems of contemporary society: social inequalities, inadequate public health systems, and sanitary conditions, unsustainable production and consumption, ecological negligence, and insufficient public and political attention to scientific evidence. We should enhance our personal experience with the knowledge and understanding provided both by science and by imaginative literature. Dystopian perspectives disturb our hope for the future, but they are also warnings. As John Donne reminded us: “No man is an island” and the COVID-19 pandemic has exposed us to a common threat, not only in terms of individual mortality but also in the potential consequences for the conduct and cohesion of human society.

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