

ISSN: 2752-3799

Vol. 2, No. 1 (2022): 118-122

10.19164/jcche.v2i1.1204

Book Review

Briggs, D., Telford, L., Lloyd, A., Ellis, A., and Kotzè, J. (2021) Lockdown: Social Harm in the Covid-19 Era

Palgrave Macmillan. ISBN 978-3-030-88825-1

Emily Setty

University of Surrey



While there have been notable exceptions, the silence of critical social scientists on the ramifications of the global response to the pandemic has, to use a tired phrase, been deafening. *Lockdown: Social Harm in the Covid-19 Era* provides a corrective to this complacency and challenges readers to interrogate the social, structural and political contexts from which 'lockdown' – a term used in the book to refer to all so-called 'non-pharmaceutical interventions – emerged, and within which it is having what are arguably catastrophic impacts. The authors adeptly interweave first-hand testimonials from their extensive ethnographic research with a detailed analysis of the macro-level data and socio-structural contexts surrounding lockdown in order to illustrate the damage and destruction caused by the policy choices made in response to the pandemic, which are distinguished from the direct physiological impact of the virus itself.

The book demonstrates that the effects have not been evenly felt – perhaps explaining the apparent silence from the relatively 'privileged – detailing how the harms of lockdown have disproportionately impacted the already vulnerable, disadvantaged, and marginalised and have served to further entrench social and structural inequality on a global scale. The book should, therefore, be a siren call for a more balanced and informed discussion about lockdowns and what it means to say that such measures are enacted for the 'greater good'. While the arguments are sophisticated and nuanced, the book is written in a readable and accessible style and is relevant to academic and applied audiences as well as members of the public more broadly.

The authors begin, in chapter 1, by outlining the theoretical underpinnings to the book; notably, the ultra-realist approach to thinking about social harm, which is used to interrogate both the positive and negative motivations to harm, thereby nuancing any simplistic attributions of culpability or malice. The chapter contextualises the current state of politics under neoliberal capitalism within which the pandemic unfolded. While the relevance of this context becomes clearer throughout the book, some signposting here to the arguments to be made would help raise the discussion from the purely academic. Chapter 2 then notes that while the timing and nature of lockdown differed between countries, it was ultimately overwhelmingly 'global' in nature. The authors' ethnographic research spans a highly impressive range of countries (which would be a feat in ordinary times let alone in the circumstances of lockdown) and the book establishes that the harms are both global and local. The chapter provides a critical take on the slandering of an interrogation of lockdown as 'denial' or 'conspiracy' and argues for calmer and more even-handed discourse. The authors tackle the issue of 'the science' and how the wider socio-structural factors that shaped the contexts of policy making in response to Covid-19 were marginalised from public discussion. They outline the evidence for 'focused protection' given the 'collateral damage' of lockdown. The chapter foregrounds what is to be examined in the rest of the book: the disproportionate effect on the already disadvantaged and the intergenerational transfer of harm to young people.

Chapter 3 examines the public and policy narratives around illness and death during the pandemic in which there was a ramping up of consciousness and anxiety particularly in the contexts of the global North/West where illness and death were previously not immediate everyday concerns. It critiques the depiction and perception of risk from Covid as 'random' despite evidence that risk levels were stratified in terms of age and co-morbidities, as well as the ongoing 'shifting of the goal posts' to justify lockdown. Likewise, the authors question the prevailing political and media narrative about the benefits of lockdown in terms of preventing deaths and protecting the health service which, they argue, left "little space to debate or question the implementation of the lockdown measures" (p.63). They contrast this with the lack of acknowledgment of the harms of lockdown or the socio-structural and political contexts impacting the risks associated with covid. The chapter powerfully illustrates the extraordinary the change in how pandemics and viral infections are reported on and discussed and the ritualistic and symbolic forms of compliance with this new narrative that have emerged (and associated shaming of dissenters). The authors question whether we would talk about other illnesses and causes of death in the same way; they posit that the discourse around Covid-19 meant that illness, death, and other damaging consequences arising from the lockdown were not given the same airtime or factored into policy making, suggesting that not all lives held equal value.

Chapters 4 and 5 examine the 'losers' and 'winners' of lockdown. The discussion spans the implications for individuals, businesses, and industries and the entrenchment of inequalities in health, wellbeing, and prosperity around the world. It identifies how these implications unfolded within a context of existing global tensions and divisions and the growth in socioeconomic and educational inequality that has taken place. Chapter 5 calls out the vested interests of the elites (and ensuing corruption) and locates these interests within neoliberal capitalist structures characterised by underinvestment in healthcare and individualised consumerism. These chapters also foreground how one does not have to be 'elite' to have benefited from lockdown. The middle-classes have also been somewhat protected from the economic impacts lockdown and were able to comply within relatively comfortable circumstances, a point returned to later in the book when discussing how a myopic focus on avoiding infection from Covid-19 at all costs was a luxury perhaps unavailable to some.

Chapters 6, 7, 8 and 9 discuss what lockdown meant in different contexts. Starting with 'western society', the authors pinpoint the divisions that have unfolded in experiences and perceptions of the pandemic and lockdown. They distinguish between the 'working-from-home' contingent and the 'front-line' workers who continued with business as usual which, arguably, facilitated the possibility of lockdown for the former. This chapter is particularly valuable for foreshadowing what is later discussed in terms of emerging from lockdown and addressing the divisions that have developed and deepened during this period. The authors then examine the treatment of the elderly and vulnerable. They pull no punches in emphasising how, in a context of longstanding underinvestment in healthcare systems around the world, the elderly and vulnerable were thoroughly let down. The authors discuss the lethal effects of the underpreparation of care homes, both in terms of the direct impact of Covid-19 on residents and the indirect harms caused by the imposition of shielding requirements, along with the cancelling of life-saving medical treatment and operations which affected the population at large. Also discussed are the impacts on those for whom 'staying home' was certainly not 'staying safe', namely women and children experiencing domestic and intimate partner abuse. Overall, the chapters suggest that the response to Covid-19 has caused great harm without actually addressing the risk to the vulnerable, nor the socio-structural contexts that shaped the unequal terrain of risk and the unequal impacts of lockdown. In public discourse, it is sometimes characterised as callous to suggest that risk is stratified, but surely greater acknowledgment of this incontrovertible truth would have enabled policy makers to focus more fully on how to effectively protect the vulnerable and reduce collateral damage, rather than on how to maximise compliance with indiscriminate measures that had questionable impact. In short, rather than worrying about whether a group of teenagers were congregating in a park, should the focus not have been on how to protect care home residents and how to maintain the provision of life-saving healthcare for conditions other than covid?

Acknowledging those who were already 'locked up', the authors discuss the damage to prisoners caused by the appalling physical and psychological conditions created and exacerbated by lockdown in prisons. It considers the dire circumstances for asylum seekers, which the authors discuss in terms of wider long-standing anti-asylum seeker sentiments. For those 'locked out'— migrants, refugees, the stateless, and the homeless—the authors identify the socio-economic impacts on those within already precarious and transient circumstances. It is here that the *luxury* of prioritising Covid-19 becomes apparent. The authors detail how for the already precarious, the economic collapse and withdrawal of services have been nothing short of catastrophic, while in war-ravaged countries like Syria there was no infrastructure for responding to the pandemic

to begin with. The authors note that the global inequities here often fall beneath the radar because of the lack of available data, an issue they identify across the harms discussed in the book.

Chapter 10 returns to the theme of 'compliance'. The authors problematise the individualistic binary of the "responsible (complier) vs negligent (non-complier) citizens" (p267, original emphasis) and examine the social and structural contexts around compliance. Essentially, they argue that the ability to comply is shaped by one's conditions, as they evidence throughout the preceding chapters. They also note the experiential factors that impact compliance and critique the castigation of dissenters and protestors with no acknowledgment of why they were resisting the lockdown or how their living conditions under lockdown shaped such dissent. The chapter critically engages with the question of morality, as compliance with public health measures were undoubtedly framed by governments, healthcare services, the general public and even academic research in explicitly moral terms. Lockdown critically challenges such framing. If people were/are complying with lockdown due to factors such as personal concerns about health, what they see going on around them, and pressure from governments, media, and fellow citizens, then to what extent can it be concluded that compliant individuals were exerting any moral agency? This question of moral agency is all the more pertinent given the harms caused by the measures with which citizens were complying. Is it moral to disregard these harms or render them necessary for the greater good?

Chapter 11 discusses the 'residue' of lockdown. It considers the emerging evidence of non-compliance among the elites and the associated damage to trust, the divisions in perception and experience of lockdown (which are continuing to entrench regarding differences in willingness to take the vaccine), and the ensuing *trauma* of lockdown in terms of mental and physical health and wellbeing. The authors posit that for some, the so-called 'new normal' is devastating and holds no hope. Perhaps unfortunately for readers, chapter 12 concludes on a pessimistic note. The authors do not attempt to address whether lockdowns are 'effective'. Instead, as social scientists, they examine the impacts of lockdown in a world already characterised by inequality. They challenge readers to conceive of lockdown as a policy choice that had very real, if often insufficiently acknowledged, harms. While, in line with the ultrarealist perspective, they note that these harms were not necessarily intended, they suggest that the cure has been worse than the disease and question the legacy for current and future generations.

While they proffer that repairing the damage will require political leadership and a commitment to overcoming and healing divisions, there is little regarding the way this could be achieved. A question to perhaps consider is, what will the legacy be if a consensus builds that the cure has been worse than the disease? How will people feel about having experienced a lockdown that caused untold suffering and misery, for unclear gain? This is a question that the book cannot yet answer, but it certainly points to potential legacies particularly given the building evidence of hypocrisy and non-compliance among the elites responsible for devising lockdown rules. At a time when the impacts of lockdown become more apparent each day, the book should, at the

JCCHE - Reviews - Setty

very least, act as a wake-up call within the field of social sciences to start taking these harms seriously and subjecting them to the same level of critical analysis as other areas of policy, such as that seen regarding the imposition of austerity measures in response to the financial crisis. For those of us who have long been horrified by the policy choices made in response to the pandemic, the book represents an invaluable resource for developing our understanding and arguments about (and, perhaps, against) the 'new normal'.