COVID-19 CRISIS, CARE AND RESPONSIBILITY IN LATVIA

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This report was written by
Māra Aniņa, Adrija Zena Celmiņa, Kate Dudure, Elizabete Grinblate, Daniella Kupka-Harrison, Anda Juceviča, Zane Kanderāne, Kristiāna Kupfere, Kārlis Lakševics, Holly Jo McCombe, Artūrs Pokšāns, Alise Švandere, Tanja Thaller.

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Introduction

On March 12, the day after the World Health Organisation assessed the outbreak of Covid-19 as a pandemic, the Republic of Latvia declared a state of emergency. The risks, strict prevention measures, and vulnerabilities of support systems brought the question of care to the forefront of public discourse. If prior to Covid-19, care was mostly affiliated to the elderly, children, and the ill, the situation called to re-evaluate the needs, capacities, and responsibilities to care.

The global outbreak of Covid-19 has been a great challenge for both the 'caring industry' (Dworkin, 2010) and people informally responsible for caring activities. While health care and social service capacity is crucial in times of crisis, much of everyday negotiations have focused on creating more bearable ways of living (Mol, 2008). What we understand in this paper as care, occurs in informal settings. Such intimate caring is not monitored by outside parties or characterized by relations of exchange, but emerges from deep, diverse, and particular terms, ties, and motivations between people (Metz, 2010).

From the start of the crisis it was clear that the responsibility of caring would be shifted towards individuals rather than systems. As outlined by Rose (2001), while the state is seen as responsible for the general health of the population, the individuals themselves are more and more expected to participate in this process (e.g. expected to wear masks which they need to buy themselves). However, individuals have highly unequal standing, both in access to resources and in historical moral economies of how the burden of care is distributed along lines of gender, age, class, and ethnicity.

If the 'responsibilization' (Trnka and Trundle, 2014) is directed towards the individual, the question of who is left out then is also a question of care among one's closest companions. Therefore, the initial question we started this research with was:

- **How do the informal systems of care maintain and support unequal distribution of responsibility during times of crisis?**

Our research, thus, focuses on the 'competing responsibilities' (ibid) at family and household level. With the shifting contexts of vulnerability exposed by the crisis, many have had to reconcile emergent and habitual care activities in and across households, including expectations from public space and the workplace. The following experiences show, the crisis has both exacerbated inequalities while also emphasising the solidarities that have arisen in response to them. In this light, we sought to explore the understanding, changing practices, and relations of care by following these research questions:

A) What is **understood** as 'proper (informal) care' during the pandemic?
B) How informal **practices of care** change during times of crises?
C) At what point do research participants **experience** responses to the crisis as improper and/or abusive?
D) How do **power relations** affect expectations and imaginaries of care during the pandemic?

To this end, we carried out a qualitative research study to learn about the care practices and experiences of people in Latvia. The aim of the research was threefold:

First, to move past the often-dehumanising approach of statistics and graphs by focusing on the stories of our research participants and grasping how people are moved to care during challenging times.

Second, to identify the gaps and inequalities in current informal support systems in allocation of care responsibilities and point towards focus areas for future crises.

Third, to develop new methodological capacities of research-based learning projects as the research – project management, workshops, interviews, analysis, and writing, was almost entirely realized online by using current communication and analysis technologies.

The methodology was centred around the remote interviewing of participants during the period of the state emergency. The interviews took place from the end of March 2020 to the end of April 2020 and reflect experiences and data from that period. It is important to keep this time frame in mind to avoid making judgements about the situation prior or post the state of emergency, as the situation surrounding the crisis of Covid-19 is continuing to rapidly change. The report was written in English because the research was carried out by an international team of anthropology students at University of Latvia.

The analytical components of this paper consists of two chapters, constructed around the dichotomy of separations and connections. We use it to explore how the process of distancing promotes the establishment of creative attempts to maintain relationships during difficult conditions. The resulting relationships are not always equal, furthermore not all people have access to these relationships. This illustrates how care is both a practice and a resource and how both are unequally divided. We argue that the ways how care is contested, used, and demanded relies upon divisions among people already present in Latvia and exacerbated by the crisis.

Responsibility is individualized and ethnical citizenship constructed through regulations and the informal distribution of their implementation. This contributes to a view of a moral community where individual deeds of solidarity are praised, but collective engagements beyond divisions of household, gender, age, class, and ethnicity are rare. At the same time, people in Latvia creatively use their knowledge, networks, and technologies to support each other in their circles and connect beyond separations and distances.

Chapter 1: Methodology

Initially, we developed the research methodology for studying everyday care practices within the family. Our fieldwork was planned to start the week before the restrictions on meeting and gathering were implemented. Originally, we planned to visit families at their homes and do participatory methods with children. These plans had become an exceptionally high-risk activity for the potential spreading of the virus, as a result we called off all the interviews. Simultaneously, we also observed that the concept of care had gained a new importance and questions that were being asked in public spaces echoed similarities to our research questions. The concerned calls to cancel the interviews we had with participants indeed were acts of care towards their families. This urgency of care provided a way to adapt to the circumstances and shift our focus towards care during the crisis and working to find ways to engage with people remotely.

1.1. Research participants

The data analysis in this paper is based on qualitative fieldwork. The data was collected through semi-structured interviews, conducted by using digital communication software and telephone calls in combination with recording software. As we strived for the most convenient options for our participants and each of us had various devices with different operating systems, the process was unique for almost every researcher-participant interaction. Given these limitations of technology, human contact as well as research experience, the interview length ranged from around 20 to 90 minutes. On average, one interview took 33 minutes. The total interview length reached 11 hours.

In total, we interviewed 23 people. 7 of them were male, 16 female. The youngest of the participants was 19, while the oldest 87. The average age of a participant was approximately 41. The participants occupation ranged from medical and restaurant workers highly affected by the crisis to office and studio workers. The participants did not include high income or below poverty line households, mostly including people whose income was not drastically affected at the time of research.

Most of the recruitment for interviews was accomplished before the state of emergency was announced and prior to the first case being reported in Latvia. We realized that our focus needed to be shifted towards the inclusion of people from a varied age spectrum.

Importantly, the state of emergency in Latvia was declared on 12.03.20. We conducted our first interview on 27.03.20. and the last interview on 19.04.2020. During this time research participants had already adapted to some of the changes, were continuing to search for new modes of caring and still remembered their initial reactions vividly.

1.2. Research ethics

Our research approach was based on three ethical sensibilities which are based on the Ethical Guidelines for good research practice provided by the Association of Social Anthropologists of the UK and the Commonwealth (ASA).

A) Responsibility towards our research participants

Given the intimate nature of the research focus, all of our participants were assigned pseudonyms and the more sensitive or recognizable quotations were not included in this report. The participants were informed and consented to interview data being analysed as a whole. Researchers who conducted the interviews redacted sensitive fragments prior to sharing interview transcripts with other researchers involved in this project. We developed our interview guidelines with consideration to both researcher's and participant's emotional vulnerabilities and discussed the possible situations that can arise and how to react to them.

B) Secure management of data

Project data and management files were kept on a secure cloud service and could only be accessed by the involved researchers. Research participants were informed about their right to withdraw their participation from the project in which case the data would be securely deleted and not used in the research process. The data is going to be retained on a secure server until the end of the broader research 'Strengthening families, communities and relationships: anthropological perspectives on violence', after which all of the acquired data is going to be securely deleted.

C) Responsibility towards the wider society

In order to achieve the balance between widest possible dissemination and protection of our research participants we have chosen to present research data in several ways while staying mindful of the private and personal nature of acquired data. The final research paper is written in English to allow its availability to all research participants, however a summary has been created Latvian to promote its accessibility. The information is also disseminated in an easy to understand infographic and is going to be presented in a public festival in Latvia, through a discussion with relevant stakeholders in order to try and promote positive change on the basis of our research results.

In order to avoid possible misinterpretation of data or methods used, we have strived to choose methods that are less likely to produce misleading results and we have described the data gathering process in detail to make it as transparent as possible. Furthermore, we have carefully considered the ways in which our data could be misrepresented and therefore have tried to avoid presenting the data in ways that might lead to this result. The methodology section also includes a description and an assigned number of the research participants in order to make the limitations of our research visible. While our research should not be perceived as being representative of a collective whole of experiences of people in Latvia, it however does present a picture of how at least a portion of people living in Latvia experienced the state of emergency. Without making bold claims about the universal nature of our data we still would invite the

reader to consider the implications of the experiences described here and the analysis these experiences allows us to carry out.

1.3. Data analysis

The data analysis was carried out by using qualitative coding. All interview recordings were transcribed, and the text files produced were then coded. Coding was carried out using MAXQDA coding software, generously provided by the company under the student course license. The coding was carried out as a group effort, with a shared code system validated by intercoder agreement analysis. Establishing a shared system of codes allowed us to ensure that all of the researchers develop compatible analytical perspectives. This was also ensured by frequent communication and support among researchers. Writing and coding was completed remotely, due to restrictions in place and in order to prioritize the researchers' own health.

1.4. Research team

This report is the collective work of 14 researchers. The majority of the research work was carried out within a research-based learning course by third- and second-year bachelor students of the Cultural and social anthropology program, facilitated through the University of Latvia. Thus, the paper is not only a public research project, but a learning process. The majority of researcher's were female under the age of 25, 3 of non-Latvian background. The paper is written in English as a portion of the research team were international students. At the same time, a majority of the interviews were conducted in Latvian. The training and workshop facilitation was coordinated by two lecturers and members of the aforementioned project on violence prevention, Lakševics and Pokšāns, who also conducted the final editing.

The crisis affected us as a team. Our meetings were moved online and would not be possible without the various forms of interpersonal support. Some of those who contributed to the development of the research design and fieldwork withdrew from the project prior to writing this report due to an overload of work responsibilities and personal health issues. While we did not use our own experience as data, it has affected the analytical process as we experienced similar observations and practices as our participants.

Chapter 2: Separations

According to our research participants, the individual and collective response towards limiting the transmission of Covid-19's has directly problematized conventional ways of proximate care, sociality, and work. To expose this tension, we have structured our analysis around the concepts of separations and connections. The purpose of this pairing is to show how practices of social (or physical) distancing were experienced unequally among research participants. Through discussing separations, we explore how these differences emerge from long-established informal care ties and responsibilities in Latvia. We talk of separations in plural to describe both, (1) our participants varied experiences of distancing measures and (2) the mechanisms that increase gaps between those who care, those who are cared for, and those who are not seen as deserving care.

The experiences of distancing for many participants were contradictory and confusing. However, in these fractured and changing perspectives, we can recognize conventional ways how the (in)voluntary separations were supported and resisted. How come some managed to escape much change altogether? What issues did our participants see as problematic? Who were expected to be more responsible than others? A key strategy for disentangling these fractures is to look at the social, emotional, and material resources people could access to maintain relationships and nurture their lives. Thus, we start with demonstrating the separations induced by established axes of understanding and practicing care: gender, age, class, and nationality.

2.1. The self

The first separation we noticed was how the pandemic shifted the understanding of care towards a more individualized perspective. As a result of the centrality of individual responsibility in mitigating the spread of the virus, some actions perceived as centred on oneself became possible to imagine as related to collective needs. If one can take measures to make the possibility to contract or spread the virus to the minimum, self-care also becomes care for others. In Una's terms, this is part of being a responsible citizen:

| LV // Protams, ka man izdodas par sevi parūpēties. Zinot, ka es cenšos būt atbildīgs Latvijas pilsonis un sekot valsts norādītajiem noteikumiem. Neiet ārā no mājas un nekomunicēt ar cilvēkiem ārpusē, vai lieki neaiztikt, nu, piemēram tos pašus produktus plauktos, ja es tos nepirkšu. Es cenšos arī ievērot pašaizsardzības pasākumus, izmantojot masku un pa virsu vēl šalli, kas nav viegli, jo grūti elpot, bet ir labāk tā nekā nekā. (Una, 31.03.) | ENG // Of course, I can manage to take care of myself. Knowing that I'm striving to be a responsible citizen of Latvia and follow the state set regulations. Not to go out of the house and not to communicate with people outside or not to touch the same products at the store shelves if I won't buy them. I also try to obey the self-protection activities – use the mask and over it a scarf, which makes it hard to breathe, but better than nothing. (translated) |

This form of responsible citizenship also takes form in the ways how people who can afford it, try to improve their health. Although gyms and swimming pools were occasionally mentioned as closed, our participants reported going for walks, runs, and bike rides. Due to the fact, these activities are done alone or with people from one's household, they are generally connected to a positive health connotation and they are not seen as necessarily dangerous to the general public. Further, caring for oneself through physical activities are also thought to improve one's immunity and thus constitute another preventative measure embedded into public care context.

While some report taking more time for self-care, others reported the limitations having a negative effect. Having daily activities or hobbies removed from one's life can be a difficult adjustment. It is unsurprising that being separated from a specific part of one's life can affect the person negatively as through hobbies and leisure activities people create new and strengthen existing social relationships, form identities, develop new skills and acquire information and knowledge, thus improving their overall quality of life (Brajša-Žganec, Merkaš and Šverko, 2011).

LV // Man ir nācies atteikties no saviem hobijiem. No daļas saviem hobijiem. Tostarp sporta kluba apmeklējumiem. Tas, manuprāt, ļoti negatīvi ietekmē manu ikdienu. Tas liek man justies fiziski slikti. Traucē miegu un arī, jā, veicina kopumā svara pieaugumu. Liek justies ne visai labi. (Paula, 09.04.)	ENG // I have had to give up my hobbies. From part of my hobbies. Including going to the gym. This, I think, very negatively affects my daily life. It makes me feel physically bad. It disturbs my sleep and also, yes, makes me gain weight. It makes me feel not very well. (translated)

Generally research participants understood following state recommendations for protecting oneself from contracting the virus as self-care practices. These practices included washing hands, physical distancing from people outside of one's household as well as wearing masks in public spaces. At the same time, in private or in their homes, some did not continue these practices or trusted someone from their household to take care of disinfection. Being in public, however, caused a lot of stress and anxiety as many were constantly profiling others for their potential level of responsibility.

LV // Nu, izejot ārā, vairāk padomāju. Negrābstīties pa malām (smejas). Un dezinficēt, un cimdus, un muti turēt ciet pēc iespējas vairāk. Nu tā, lai, lai, mazāk kaut ko (apklust). Bet ne jau mājās. Tas ir tā, ja man ir bijusi saskarsme ar (pauze). Mājās es jūtos droši, jo tapēc, ka mums tomēr ir ļoti, nu, tā privāti vairāk. (Astrīda, 27.03.)	ENG // Well, when going outside, I think more. Not touching surfaces. And disinfecting, and gloves, and keeping my mouth closed as much as possible. So, to lessen. But not at thome. It is only if I have been in contact. I feel safe at home, because it is a lot more private. (translated)

In this sense, despite the general individualization of the issue, one's self was inevitably connected with one's household. The idea of the household was ingrained in many of distancing recommendations, and became a key locus in imagining one's position among others. One's mental, physical, and social health often depended on the quality of everyday relationships within a particular household. As noted by Raimonds, self-care activities were often expanded to include members of household.

LV // Es esmu iesācis vairāk sportot mājās, protams, jo trenažieru zāle ir slēgta. Un es esmu arī sācis, laikam to varētu nosaukts par meditāciju, bet zini, tikai no rīta, jo, kad mans dēls pamostas, dzīvei ir jāturpinās un es nevaru vienkārši meditēt stundām vai kaut kā tā. Mēs arī esam sākuši iet pastaigās kā ģimene un mums ir paveicies, ka mums ir mežs blakus, tāpēc es neesmu pārlicināts, vai šis ir pret noteikumiem, bet man šķiet, ka šādi ir pieņemami par cik neviens cits, izņemot mūs, nestaigā ārā mežā. Un šās pastaigas ir bijušas laikam diezgan noderīgas ne tikai priekš ģimenes stiprināšanas, bet arī, lai izkliedētu galvu. (translated)	ENG // I have started to work out at home of course because the gym is closed And I have actually started to I guess you could call it meditate but you know only in the morning because when my son wakes up life has to go on and I can't just meditate for hours or something like that . We have also started to go for walks as a family and we are very lucky that we have a forest nearby so I'm not sure if this is against the rules but I think it's fine saying that there is no one else except for us walking outside in the forest and those walks have been very I guess helpful not only for bonding time with my family and me but also to clear your head. (Edgars, 13.04.)

Evidently, while the self was a key separation in how the crisis response was formed, we found the household to be deeply ingrained in one's personhood. Thus, the collective measures taken by the household to accomplish distancing and disinfection measures impact personal measures. This became evident when looking at families where someone was in the high-risk group for Covid-19 contraction. These families had already formed practices of care and affective support among themselves before the pandemic. Their sense of individual responsibility in daily practices was primarily focused on protecting their household.

It is important to note that a household is often embedded in a network of relationships within a house that reaches beyond the family level. In a rather extreme case, Liene experienced efforts of her neighbours to lock her in and force her out of the building as they knew she had to quarantine herself.

LV // Tā bija sarunāta vieta, kur es pavadīšu karantīnu. Un tur tā kā cilvēkiem bija ļoti liela panika par manu klātbūtni un viņi	ENG // It was the agreed place where I was about to quarantine myself. And the people had a huge panic about my presence. And

izplatīja ziņas, ka vīruss izplatās kā radiācija un līdz ar to, dzīvokļi ap mani noteikti saslims. Ka tā kā neatkarīgi no tā, vai es eju ārā vai nē. Un tur bija mazi bērni un sieviete stāvoklī, un sieviete pēc operācijas. Ne grūtnieces, ne mazi bērni tobrīd nebija. Es nezinu, kā šobrīd, bet tobrīd netika uzskatīta par riska grupu. Bet tik un tā viņi visi bija briesmīgi satraukušies. Mani centās ieslēgt dzīvoklī nakts laikā. Nu, tā kā, lai es netiktu ārā ne uz kurieni. Un, nu, jā. Visādi šitā. Bet viņiem neizdevās, jo tur bija salauzta slēdzene un es biju vienkārši ieslēgusies ar to ķēdīti. Jā, toreiz bija tā, ka man naktī vienkārši lauza vaļā tās. Nē. Tā kā cenšas aizslēgt tās durvis un es pamostos. Un es tā kā jautāju, kas tur ir un kas tur notiek. Un man vienkārši atbildēja-tā vajag, tā vajag. Tādā dīvainā. Nu, man likās, ka dzēruša balsī. (Liene, 29.03.)

they started rumours that the virus spreads like radiation, therefore, the apartments around are also going to get sick whether I go out or not. And there were small children and a pregnant woman, and a woman after surgery. Neither the pregnant woman or the children were there at the moment. I don't know if at the moment, but then they weren't considered a risk group. But they were very scared. They tried to lock me in during the night. So that I couldn't get out anywhere. And, yeah. Like this. But they couldn't because the lock was broken and I had locked myself in with the chain. But during the night they tried to lock it and I got up. And then I asked who's there and what's happening. And I was answered that this is how it has to be. In a strange, well, I thought drunken voice.   (translated)

While the episode did not result in infection or a more serious confrontation, it made her feel unsafe to quarantine in the building. She decided to quarantine at a friends' house, which significantly increased the risks of spreading the virus. Thus, isolation opportunities widely depend on one's network and forms of support available in the web of relationships around one's household.

On reflection, affordances to care for one's self affect how one is inclined towards the situation. If one finds it troubling to fulfil their social, physical, and mental needs that had formed before the pandemic, the individualization of responsibility, in conjunction with little support in one's household, feels like a toll. The contrasting experiences between those who can now afford time for themselves, those who have lost it, and those who lack resources for it altogether reveal the dangers of individualization of responsibility.

Overall, the data indicates that while our participants experienced the distancing measures differently, similarities could be observed in the way one's caring roles and duties were assigned and expected. The pandemic did not create a radical shift in how caring is done, but rather re-established and reinforced the already existing ideas about who has to take care for whom. In this context, the effects of the crisis on one's self were highly individualized. If some expressed finally having time to focus care on oneself, for some the social care duties intensified. Thus, one's 'social personhood' and 'ethical citizenship' (Brkovič, 2017) were at the centre of distribution of informal care duties, but in a form centred on one's household. Here we come to the axes along which this distribution of responsibility unfolds.

2.2. Gender

Although our research data indicate that the state of emergency introduced a certain amount of redistribution of care duties as explored below, for the most part care duties fell towards women. While some forms of care are institutionalized and commercialized, historically many forms of care have been understood as a counterpart to productive public work, thus, seen as not requiring renumeration or not as labour at all. These duties include housekeeping, informal childcare, or care for the disabled and the elderly (Drotbohn and Alber, 2015). This care and domestic work, is often naturalised as female, and disregarded as "labour of love" which leads to obfuscation of the structural exploitation that forms the basis of the domestic work, and makes it socially and economically invisible (Liebelt, 2015; Thelen, 2015). Our research data indicates that this was often the case in relation to care practices during social distancing. When speaking about his children, Einārs states:

LV // Viņiem jāpasūta lietas [bērniem]. Bet izdevīgi ir tas, ka mēs kopā gatavojam vairāk ēdienus. Mēs mājās gatavojam konfektes. Kūkas mājās, maize mājās. Tā es un viņi vairāk piedalās ikdienas dzīvē, nekā parasti. (translated)	ENG // They need to order things [the children]. But the beneficial thing is that we are making more food together. We are making candies at home. Cakes at home, bread at home. So I am and they are participating more in daily life then they usually would. (Einārs, 31.03.)

The key aspect here is that for men, care work is seen as something that is made possible by the advent of the virus while the capacity of women to care for children stays constant if not augmented. Women's central role towards care work was not problematised and was often naturalised. Furthermore, our data indicated that even in the cases where men and women were all staying at home, the direct care duties were often delegated to the mother while the father's role was to provide the family with information and knowledge about the current situation.

LV // **Kā jūs rūpējaties par citiem šajā pandēmijā?** Kopā ar darbu, informācijas saņemšanu no mūsu darba ārsta. Viņš sazinās ar daudziem dažādiem avotiem tepat Latvijā, tāpēc no viņa es iegūstu visticamāko informāciju. (translated)	ENG // **How do you care for others in this pandemic?** Along with working, receiving information from our work doctor. He is in communication with many different sources here in Latvia, so from him I get the most reliable information. (Ričards, 28.03.)
LV // Es tiešām domāju, ka manam vīram lieliski izdodas būt optimistiskam. Viņš man sniedz daudz drošības. Es dažreiz vēlos, lai es paliktu tikpat optimistiska kā	ENG // I actually think my husband is doing a great job of staying optimistic, He gives me a lot of security. I sometimes wish I could stay as optimistic as he does [...] My husband is

viņš [...] Mans vīrs ļoti iedziļinās sazvērestības teorijās, bet es domāju, ka valsts rīkojas diezgan labi [...] Mans vīrs man ir parādījis citu valstu video un to, kā cilvēki ir rīkojušies, un tas ir diezgan šokējoši, es priecājos, ka šeit tas nenotiek (translated)	very into conspiracy theories but I think that the state is acting quite well [...] My husband has shown me videos of other countries and how people have been acting and it's quite shocking I'm glad that that is not happening here. (Diāna, 15.04.)

As can be seen from these quotations the traditional and unequal distribution of labour in private sphere is maintained even during time when public space has become mostly inaccessible.

The main way how women's labour (both emotional and otherwise) was conceptualised was through the idea of 'worry'.

LV // **Vai ir cilvēki, kas prot rūpēties labāk šajā situācijā?** "Sievietes gan jau (smejas). Viņas par visu satraucās, aizdomājās, izdomā trīs soļus uz priekšu. Kā viņas tīrīs, kā apzvanīs radiniekus, ko viņas drīkst un ko nedrīkst darīt. Domā ļoti uz priekšu, ko darīs. Kā rīkosies. Ja es būtu viņu vietā, vai! Tas ir stress. Satraukšanās. Es laikam nevarētu ar to tikt galā." (Ojārs, 01.04.)	ENG // **Are there people who know how to take better care of this situation?** "Women probably (laughs). They worry about everything, ponder, think three steps forward. How they will clean, how they will call relatives, what they can and cannot do. They think very ahead about what they will do. How to proceed. If I were in their place, oh! It's stress. Anxiety. I probably wouldn't be able to deal with it" (translated)
LV // Viņa [viņa sieva] ir sākusi atstāt ēteriskās eļļas visur mājā. Konkrētāk, eikalipts, kā viņa lasīja, ir labs plaušu infekciju ārstēšanai, kā arī gaisa dezinficēšanai. […] Es neesmu pārliecināts, cik tam ticu, bet dzīvoklis labi smaržo un mana sieva ir laimīga. (translated)	ENG // She [his wife] has begun leaving essential oils everywhere in the house. Specifically, eucalyptus as she read it is good for treating lung infections along with disinfecting the air […] I am not sure how much I believe in it, but the apartment smells good and my wife is happy. (Ričards, 28.03.)

'The worry' here is seen not only as an essential duty of women but also a capacity. This allows us to see how the emotional labour that is invested in care activities comes to be seen as naturalised and as a part of women's identity through the idea of women as those who "worry about everything, ponder, think three steps forward". While the man in this interview does jokingly admit that he does not think he would be capable of all the activities his wife carries

out on daily basis, this would not be seen as an example of unequal distribution of labour or signal a need to renegotiate the power relations within family. Instead the women's capacity is denigrated and naturalised therefore avoiding discussing the broader implications of the roles in the family.

It is important to note, that this also shows a certain way of how men contribute caring duties in the family. As there are few ways in Latvian culture for a man to show worry and care without compromising their masculine position, the men are falling back to their position as 'protectors of family'. The protection is exhibited as gathering and distribution of information, and by maintaining a stoic attitude towards the current events. This represents a particular form of care work which although highly unequal, represents the male attempts to participate.

Finally, the worry as a conceptual device can also be analysed in evaluating the ways how care is directed from adults to their children. As worrying was mostly seen as a task for the women it was also women who expressed concern about the health of their offspring.

LV // **Vai ir kādi ģimenes locekļi par kuriem tu īpaši uztraucies?** Par (meitu) ļoti uztraucos, bet es ticu, ka viņa ļoti ievēro visu. Bet par (otru meitu) es ļoti uztraucos arī. (Meita; strādā slimnīcā) tulīt aizies uz darbu (pauze). Tur varbūt tas tā. (Astrīda, 27.03)	ENG // **Are there any family members you are particularly worried about?** I am very worried about (my daughter), but I believe that she is very respectful of everything. But I am also very worried about (my second Daughter; works in the hospital) will immediately go to work (break). There maybe, it's so-so. (translated)
LV // **Vai ir kādi ģimenes locekļi par kuriem tu īpaši uztraucies?** Īpaši uztraucos par meitām, kurām jābūt darbā, jo tas mani patiešām satrauc, ka nevar attālināti strādāt, vīram arī ir jāiet uz dežūrām darbā. Man ir daudz par ko uztraukties, jo visi ģimenes locekļi, izņemot mani, iet uz darbu" (Nora, 19.04.)	ENG // **Are there any family members you are particularly concerned about?** "I am especially worried about my daughters having to be at work, because it really worries me that I can't work remotely, my husband also has to go to work on duty. I have a lot to worry about because all the family members except me go to work. (translated)

Here again we can observe how the care work involved in the familial relationships is reconceptualised as worry. But it is important to note that behind the notion of 'worry' there are actual care practices and systems that are mobilised in times of crisis such as more frequent communication, support in form of food etc.

In the context of appearing in the public space, another separation was experienced among our non-heterosexual participants. While the couple we interviewed did not experience occasions of tension because of appearing together in public space, they sensed that people are increasingly profiling who is out and with whom. This made them uneasy going out together as they worried about people being suspicious that they are not from the same household and are, thus, breaking the restrictions on meeting.

As can be seen from the unequal distribution of how worry is distributed among the research participants, their experience can vary greatly on the basis of gender. The returning to the more stereotypical and unequal gender relations, in the face of crisis might be experienced by men as an empowering experience. In these circumstances men can 'reconnect to their families' while performing the stereotypical masculine role. However, for women this time might be more challenging as their duties towards family members can potentially increase both in relation to emotional and physical labour. In this situation, it can be seen that the care duties are unequally distributed and the separations created by the pandemic may differ even among members of the same household. This can further contribute to the stress that is experienced because of unusual circumstances, which potentially can again increase the care burden experienced by the household.

2.3. Age

Due to the increased risk towards the elderly population we expected age to show up as a significant category for analysis. However, it is important to note that when research participants discuss their relationships and distancing experiences, they also spend considerable time talking about the younger part of the population. When asked which family members they are the most worried about, research participants tended to mention age in connection to vulnerability and risk groups. Parents and grandparents were talked about often, especially if they have or have had previous health problems which would increase the severity of the disease if contracted. The participants talked about responsibility towards them, which was again framed through feelings of worry. There was an awareness that their worry was not useful in a practical sense, as their options to help were often limited. This again illustrates the importance of worry as a care practice, where voicing concern is seen as emotional labour and investment in relationships during isolation.

LV // **Vai ir kādi ģimenes locekļi par kuriem tu īpaši uztraucies?** Nu jā, tā ir mana mamma un mans tētis, jo viņi abi divi ir cilvēki gados, mamma ir tuvu pie 60, arī ir onkoloģiskas problēmas, tēvam jau vispār ir 70, viņam papildus ir hroniskas slimības. Viņi ir ne tikai riska grupā, bet arī augstā riska grupā. (Anna, 13.04.)	ENG // **Are there any family members you are particularly worried about?** Yes, there is my mother and my father, because they are both elderly, my mother is close to 60, has oncological problems, my father is 70 already, they have other chronical illnesses. They are not only in the risk group, but a high risk group. (translated)

An important aspect that emerged from interviews was that several of the elderly participants were not worried about their being in the risk group, nor did they expect help from younger relatives, in avoidance of burdening them by asking for favours. The societal expectations and assumptions of what certain ages mean cause the older participants to feel like a care burden to others and portray them as passive members of the society. As the elderly perceived themselves as a burden, they were less willing to accept help from younger family members or society in general which contributed to their isolation and vulnerability.

LV // **Un kā tu parūpējies par sevi? Vai tev sanāk parūpēties par sevi tā, kā tu vēlētos?** Nē, man ir sākumā tad, kad viss tas iesākās, man pieteicās, ka mazdēls man vedīs pārtiku. Un jau bija sarunāts, bet tad es pārdomāju tomēr, ka, nu, tas ir liels apgrūtinājums tomēr. Viņš dzīvo prom tur, tālu Pārdaugavā. Bez tam viņš strādā. Tātad viņš arī pēc darba kaut kur septiņos, sešos viņam beidzas darbs un tad viņam vēl jābrauc. Es to negribēju, viņu te apgrūtināt. Un tad es atteicu. Atradu to risinājumu ka es varu arī iet uz to Top veikaliņu, kur tās briesmas nav tik lielas un tur jau arī tos divus metrus var ievērot to attālumu. Un tā es līdz šim arī iztieku. (Ivars, 30.03.)	ENG // **And how do you care for yourself? Can you care for yourself the way you would like to?** No, at the start, when it all started, my grandson said he will bring me groceries. And we had a deal, but then I thought, well, it is a big burden after all. He lives far away, there in Pardaugava, besides, he's working. So after work at seven, six, he ends work and then he should come. I didn't want that, to bother him. So I refused. I found the solution that I can also go to this Top shop, where the danger isn't so big and one can keep this 2 meter distance. That's how I've been coping. (translated)

Ivars' accounts show that he is responsible by noting the validity and usefulness of the safety measures, while also expressing care for his grandson. According to our research participants, this self-reliance, is seen by the majority of the society as passivity, and it is assumed that by attempting to be self-reliant the elderly can only endanger themselves and others. One of the examples of this a research participant noted was unnecessary shopping. This leaves the elderly in a no-win situation where accepting help would mean accepting their role as a burden on society, while not accepting help means receiving judgment and criticism from wider society in the public setting. When asked if research participants have seen any irresponsible behaviour, they reply that most of it has come from elderly people and young teenagers. These quotations show that society assumes that by not being an active part of labour and economy, a person is seen as ignorant and/or senile. Such generalisations represent a similar

naturalisation discourse as towards women's worry and serve to shift the blame towards the elderly themselves and away from the societal issues that may be contributing to their situation.

LV // **Vai publiskajās vietās ir redzētas kādas lietas, kur var redzēt, ka cilvēkam nerūp apkārtējiem, un uzvedas neadekvāti?** Ir! Ir redzams cilvēkos kam pāri, nu kādi 65 vai 70, vai nu viņi nesaprot, vai aizmirst, viņi nepadomā, un arī pavisam jaunos pusaudžos. [..] Nu, jauniešiem, man liekas, citi īpaši neinteresē. Viņi tik un tā, kā saka, viņiem pie kājas. (Linda, 31.03.)	ENG // **Have you seen that people don't care about others and act inadequately in public places?** I have! Especially for elderly people 65-70 years old, either they do not understand or tend to forget, they don't think about it, also the same applies for really young teenagers. "Well, adolescents, I think, don't care about others. They still, how to say, they don't care. (translated)
LV // **Vai ir kādi ģimenes locekļi par kuriem tu uztraucies vairāk? Un kādēļ?** […] Bet vīra māte tur, viņa dzīvo pilsētā, viņa ir stipri gados un sociāli aktīva un iet apkārt un iet pa veikaliem, tāda nedaudz vieglprātīga. Par viņu sanāk paraizēties vairāk. (Amanda, 13.04.)	ENG // **Are there any family members you are particularly worried about? And why?** […] But my mother in law, she lives in the city, she is elderly and socially active and walks around and goes to the shops, a little bit light-minded. About her we worry the most. (translated)

Both teenagers and 'pensioners' are seen as dependent on someone who takes care of them, both financially, morally and physically (whether by the family or the government). Yet, they are in an age where they are free to leave the house and make independent decisions. Both of these groups, in most cases are perceived as someone who needs to be cared for even if in their daily lives, they are often caring for themselves and others. With the virus influencing these assertions of greater vulnerability among distinct age groups, it creates the opportunity for negative generalisations and assumptions coming from the remaining members of society. This increases the separation between age groups and supports stereotypes which may inadvertently contribute to the isolation experienced by these distinct age groups.

The elderly are not the only people the participants have expressed worry for. Parents with school age children express that this is an especially stressful time for them (though not equally for all parents as outlined below). It is observed that spending all of their time together, working from home, doing daily household chores and also keeping an eye on the quality of education, socialization and physical activity levels of their children is a hard task. Parents assume that children might not necessarily understand the situation well enough to behave in a manner that they are not harming themselves or others, creating a responsibility for the parents or guardians to moderate childrens' behaviour closely. This illuminates how the idea of parenting (Faircloth et al., 2015) has taken hold in Latvian society and reflects a particular form of responsibilization

where the care responsibilities adults have towards their children are never-ending and continuously growing.

LV // Mēs dzīvojam tādā sādžā, un tur ir arī bērni visādi, mēs esam ierobežojuši tikšanos ar bērniem. Bērni var tusēt tikai ar konkrētiem bērniem, par kuriem mēs zinām, ka viņu vecāki arī uztver šo nopietni. (Maija, 03.04.)	ENG // We live in a village, and there are other kids, we have limited meeting other children. Our kids can only hang out with particular children, the ones we know about, that their parents are taking this seriously. (translated)
Mēs bērnus nelaižam vispār uz veikalu. Ir tāds pagalms, kurā var spēlēties, tad viņi iziet ārā paspēlēties. Nevieni viņu draugi nedrīkst nākt, viņi nevar iet ciemos. Mums tur bija tāda situācija pirms divām nedēļām, kad kaut kādi draugi bija atnākuši, tad mēs visu dezinficējām. (Laura, 03.04.)	We don't let our kids go to the shop at all. There is a backyard where you can play, then they go outside. Their friends can't come over, they can't go to others. We had a situation two weeks ago, some friends had come, then we disinfected everything. (translated)

The state of emergency brought light to the notion that parenting as an activity is greatly dependent on societal systems that are present and are often taken as a given. As the services of a teacher or a sports coach are no longer available, the parents become themselves responsible (or at least feel responsible) for making sure that the children are using their time productively. The quote from Maija brings up an interesting point where other children are seen as a reflection of how responsible their parents are. Through this, the agency of the child is ignored, and assumptions are made about the parents and their capacity to follow the rules and guidelines, while avoiding to take into account the different circumstances that might lead to children being present in the public space.

The ideas described show how the separations are not only structured around gender but also age. Whether it is the elderly who are perceived to be vulnerable yet irresponsible or children who are perceived to be a reflection of their parents, it can be noted from the research participants that, the agency in regards to managing the crisis similarly to what is described in the chapter on gender, is assigned along the lines of already acquired beliefs and assumptions. This approach denigrates capacities of certain groups which leads to them experiencing not only isolation but also a heightened sense of loss of control. This creates an environment that again is potentially filled with conflict, as the assumed notions of the capacity and role of different age groups does not always correspond to lived experience. Based on the gathered data our research does not paint a hopeful picture in relation to e.g. people becoming more aware of the agency of the elderly through becoming aware of their presence in the public space, as this is not seen as a testament to their capacity but rather to their irresponsibility.

2.4. Class

The inequalities behind distancing experience are particularly visible across class difference. While our participants did not identify with a particular class, but rather spoke of 'wealthy families', 'managers', and 'levels of education', we use this category to explain how they addressed their own and their companions' unequal access to resources for caring. Significantly, one's access to various types of resources doesn't just provide better opportunities to practice social distancing and care but shows how status, labour security, and consumption are at the core of practicing sociality and well-being during and beyond the pandemic.

The costs of strict measures of distancing cannot be afforded by all. In a broader picture, the current economic system does not provide for an easy shift as most of the provision of needs is based on the highly unequal wage labour market. Our participants expressed numerous worries about their own and their relatives work, with a certain hopelessness of the market to provide valuable things to do if one is furloughed or let go.

The data shows that affordability of distancing measures comes from one's labour sector, the size of the organisation, and position at work. Anna, for example, expressed dissatisfaction with her upper management as they moved to remote work while she was not allowed to do so as a secretary. There was a hesitation to allow her and most of her colleagues to work from home. This illuminated the inequality as Anna mentioned that most of her colleagues used public transport to get to and from work, while some of those who moved to working remotely were driving a personal vehicle all along, thus already facing smaller risks.

If one cannot afford and is not allowed to shift towards remote work, the potential to get exposed to the virus is increased and, thus, the ability to take care of oneself and one's family decreases. This made the state of emergency both a financial and moral burden to many. Fundamentally, while many sectors indeed faced a situation where no income was generated, the problem for many was the ingrained inequalities present in their field of work.

Regarding sectors of labour, separations created two issues. First, some households were not equipped with the capacity to take care of children when kindergartens and schools are closed or of limited access. Most solutions we observed parents came up with increased the possible risk of the household being exposed to Covid-19. Second, management and owners of businesses that lost majority of income during this period were often blamed for not caring about or providing for their workers in times of crisis. Amanda expresses both of these concerns:

| LV // Tas, man tā liekas, ir nesaraujami saistīts ar to, kas tu esi un ko tu dari. [..] Ļoti žēl ir tie, kuriem ir jāturpina iet uz darbu, kuriem nav izvēles, bērni ir jālaiž dārziņā, kuriem, nu, viņiem jau nav variantu. Un arī tie, kas tagad pazaudē darbu. Man brālēns arī, | ENG // This, I think, is inextricably linked to who you are and what you do. [..] It is very unfortunate for those who must continue going to work, who have no choice, children need to be sent to kindergarten, who, well, they really have no choice. And also, those |

viņš 15 gadus nostrādāja fabrikā, tagad vienkārši notiek masu atlaišana, tiek cilvēki atlaisti no darba bez žēlastības. (Amanda, 13.04.)	who are now losing their jobs. My cousin also, he worked in a factory for 15 years, now there is just a mass dismissal, people are fired without mercy. (translated)

Despite the grim situation she portrays, we can also notice a sense of solidarity in her answer. The reflection of how one's sense of self becomes ingrained with doing particular work and the vast differences of how people in one's closest circle can afford distancing, makes people problematize the everyday inequalities between sectors of labour and all kinds of labour precarity. However, this is a rare occurrence as, the critique of some having more privileges than others is prevalent, while blaming the market inequalities or even the workplace was less common.

Individual or household responsibility is easier for people to imagine than responsibility of actors in the fluctuating market. One of the families reported the sorting of friends and neighbours that are safe to meet and which most likely present a risk. Such measures show the profiling calculations people took during the containment period. If one is seen as less educated, works at a more exposed workplace or expresses Covid-19 related anti-establishment views, it seems a better idea to separate your paths during this time.

In regard to accumulated wealth, key differences emerge from having a backyard, second home, car, and ability to travel. If a backyard and second home makes isolation more pleasant, a car allows one to avoid public transport and access testing with more ease, travel thus is in a different guise. Among the key groups blamed for bringing the virus to Latvia were people coming from vacations abroad. Especially, those who travelled when it was already known that the intended country of travel had an outbreak. One of the situations discussed in interview was a group of people travelling to Bergamo, Italy to ski. These people felt they had a choice between losing the money they had invested in their vacation or potentially getting infected. In this sense, these were people somewhere in the middle of the wealth spectrum – those who could afford to travel but couldn't afford to cancel the trip as many saw it as the long-awaited reward for working.

If the responsibility in cancelling one's vacation is individualized to protect one's surrounding people, state response in some cases was portrayed as a sacrificial choice between protecting the citizens and protecting the economy. This tension is exacerbated by the inability of the market to serve people's needs during a crisis. While some companies intensified their operations, others had to close or furlough a part of their workers.

While we observed that many knew someone who had lost their job, we also observed the acceptation of responsibility to protect their employees by the companies our participants worked at. One case was a restaurant, whose manager closed the operations but guaranteed that the employees do not have to search for a new job and will be supported by idle time allowances. Thus, the differences between individual, state, and company economic sacrifice show that each uses a different logic. The individual is expected to care by cancelling social

and mobility-based consumption, the state is expected to care by ensuring a safety net when posing restrictions, while companies are expected to take care of their employees through guarantees. Each of the choices depend on a surplus of wealth, not always easy to access.

This brings us to consumption. Our research participants often lamented the loss of different practices they were involved in before the pandemic:

LV // Mēs gājām ārā daudz, tāpēc tas pietrūkst, un man arī pietrūkst ceļošana… Laikam jau sociālās interakcijas un būšana ārā, kafejnīcā, un dzirdēt cilvēkus runājam un vienkārši normālā dzīve. (translated)	ENG // We used to go out a lot so I miss that, and I also miss travelling... I guess just social interactions and being outside in a café and hearing people talk and just normal life. (Diāna, 15.04.)

By expressing nostalgia for the previous freedom of movement and activities that were available the research participants also voiced the need for shared experiences with another person and how the impossibility to have them are tightly connected both the idea of shared sociality in the public space and practices of consumption. The consumption, however, is rarely discussed as something that is valuable in itself and mostly described as a communal activity.

LV // Iepirkties, pat ne pirkt lietas, bet vienkārši, kā ģimene, aizbraukt uz lielveikalu vai veikalu, paēst pusdienas, pastaigāt pa Vecrīgu. (translated)	ENG // Shopping, not even buying things but just going out as a family to a mall or shop, grabbing lunch, walking around Old Riga. (Samanta, 09.04.)

It should be noted that consumption holds many negative connotations which makes it morally complicated and therefore it is impossible for research participants to clearly state that they miss going to the shop simply for the joy of shopping, rather than as a communal activity. In Samanta's case, it is clear that the role of consumption occupying family activities are accepted as important and necessary care practices that allow people to display care to each other and to others. This could be seen as either a result of lack of options or as a high status assigned to the ability to partake in consumption practices such as weekly visits to the mall or eating in a café or restaurant. This emphasises that the ways how isolation is experienced are going to be different depending on the consumption practices one was able to partake before the pandemic.

While for some it was seen as normal and expected to visit a shopping mall every week and go on a foreign trip occasionally, this was not available to all members of society. This creates a divide where those who used to consume on a greater scale are now experiencing a greater lack of things and experiences while those who due to various reasons were not able to participate in consumption to such a scale previously, are not experiencing a significant change. That being

said, the stress caused by labour precarity and increased risk of infection is different from lack of being together through shared consumption.

We also found education to be significant in how people experienced the new circumstances differently. While our participants' practices of gathering information varied, there were differences in the forms of engaging with information and the types of information reflected upon. A key difference could be observed for those who had medical education as they spoke of the situation and transmission of the virus by using terms like 'skin's protective barrier'. Others emphasised that they avoid conspiracy theories and mentioned non-professional medical advice they found humorous. Working with knowledge and distinguishing proper medical background, thus, also becomes a way of class distinction.

The tying of better education with increased responsibility and ability to care, however, is not unproblematic. While indeed the pandemic asks people to familiarise themselves on the basics of epidemiology, this view can also reinforce the responsibilization of the individual in the form of blaming people for their lack of education when the cause of it has often been systemic. Here, again it is a question of what one can afford, which some reflected upon. Laura, for example, expressed a concern on how individualized education at schools reinforces existing disparities:

| LV // Tas ir īstenībā milzīgs risks, ka tagad tā nevienlīdzība palielināsies vēl vairāk. Turīgās ģimenēs, tur vispār nav jāčakarējas tiem vecākiem pašiem, viņi vienkārši paņem privātskolotāju, un tad tie tur arī sēž un ņemās ar tiem bērniem. Un viņam būs labākas sekmes, uzsākot gadu, nekā iepriekš, jo viņš būs dabūjis riktīgi viens uz vienu izglītības procesu. (Laura, 03.04.) | ENG // It is, in fact, a huge risk that this inequality will now increase even further. In wealthy families, the parents don't have to hustle at all, they just pay a private tutor, and they are then sitting there and working with the children. And they will be better off at the start of the year than before, because they will have got a real one-on-one educational process. (translated) |

This translates to the investment needed to understand how to respond to the situation. Many went to great lengths to engage with materials, for example, about the usefulness of masks. It is worth noting, research participants' conclusions about masks differed. Importantly, one's epidemiological knowledge did not affect whether they agreed with particular restrictions and state policies as this was more often made on moral grounds beyond medical knowledge.

At the same time, education itself was often marked as necessary for people to become responsible in the situation:

LV // [..] mēs tādi diezgan vieglprātīgi tomēr esam. Man liekas, ka viss strādā tā, ka ir reāla sodu sistēma. Tā, es neesmu tādās labās domās par mūsu sabiedrību. Tas ir bišķi saistīts arī ar mūsu izglītības līmeni un. Nu, tu nopietnāk to uztver, ja tev ir tāds plašāks skatījums, tu patērē arī ārvalstu medijus, zini, kas notiek pasaulē, seko notikumiem. (Maija, 03.04.)	ENG // [..] we are quite frivolous, however. It seems to me that everything works only if there is a real system of penalties. Yes, I don't have good faith about our society. It is also inextricably linked to our level of education and. Well, you take it more seriously, if you have such a broader view, you also consume foreign media, you know what's going on in the world, you follow events. (translated)

In some cases, consumption of foreign media, especially from the West indicated a lack of trust in the local media. An increasingly global view was seen as necessary to be properly informed. While this indeed offers an additional viewpoint and forms a key strategy, it falls short as a measure of responsibility. This can create a situation where 'reactionary responses' are dismissed because the person expressing the critique could not formulate it well (by taking more information sources into account). Thus, one's critique of 'the system' can be dismissed as conspiracy on the grounds that one cannot formulate the exact flaws of it.

Despite overall valuing others' engagement with foreign media, this was not applied to people with experience of living abroad. Here education also served as a way to distinguish the lower-class status of Latvians who migrate as manual labourers.

LV // [..] Pastāv risks, ka daudzi cilvēki, kuri strādāja Vācijā, Apvienotajā Karalistē, zaudēja darbu. Un viņi atgriežas. Un tie nav īsti tā kā augsti izglītoti. Tāpēc viņi sagādā nepatikšanas. Viņi rada nepatikšanas, kuras mums nekad vairs nebija. (translated)	ENG // [..] The risk is that a lot of people who have been working in Germany, in the UK, they lost their jobs. And they are coming back. And those ones are not really like highly educated ones. So, they are making trouble. They are making troubles that we never had any more. (Einārs, 31.03.)

While the general view is that everyone has a lot of learning and unlearning to do during the pandemic, some of the transgressions are explained by 'stupidity', 'mentality', and 'lack of education'. We can also observe that the reasons for protesting the general narrative are usually not because one lacks interest in familiarising oneself with 'the truth', but because they dispute those who proclaim to know it better.

Subsequently, one's position at work, disposable income, socialising as part of consumption, and educational trajectories impact both how one can afford social distancing and caring during a state of emergency, and how one is disposed towards such injustices and protests certain restrictions. Lower position at work, lack of savings, and lack of education exposes individuals

and those closest to them to risks. Blaming these individuals and connecting these factors with lack of responsibility would miss the underlying structural causes between these separations. If care for the self and others is about opportunities to work remotely and securely, then it largely depends on one's resources to do so. If care is left as an individual responsibility, it becomes correlated with one's position in the market.

2.5. Nationality

As some of the earlier analysis already pointed towards, Covid-19 crisis has been (1) a massively distributed media event circulating graphics of cases counted along international borders and updating on highest outbreaks, (2) a catalyst for national discussions on the supposed 'national character' of spreading outcomes, (3) and related to national regulations, system capacities, and border policies. Our research participants often invoked comparisons between Covid-19 situation in Latvia and other countries and vigorously debated the measures taken to stop moving the virus over the 'borders of Latvia'. At the same time, for the people who returned to Latvia and the citizens of other countries considering to leave or stay, the state of emergency posed other barriers of care.

Covid-19 has been a fruitful ground to discuss affection, proximity, and individualization. Interestingly, many participants expressed it in terms of an idea of ethnic character. In terms of narrative, both physical distancing and self-isolation were thought to be easier for Latvians if compared to Italians, Russians, and Americans. At the same time, many lamented the lack of contact, on one side, and lack of private space in one's household on the other. This is expressed by Ojārs:

LV // Mēs, latvieši, esam kaut kādā ziņā attālināti viens no otra. Mēs esam pieraduši pie tā, ka (pauze). Nu, ka mums nav tik cieši vienmēr, kā tas varbūt ir tagad starp četrām sienām. (Ojārs, 01.04.)	ENG // Us, Latvians, we are somehow distant from one another. We are used to, (pause). Well, that we aren't always as close, as we maybe are now between four walls. (translated)

This contrast between proximity at one's household and distancing outside one's household posed another problem. If some found it a good moment to focus on oneself, some lacked the opportunity due to sharing of space with others. At the same time, explaining individualism as a typical national characteristic in such situations becomes a form of resisting the proximate sociality expected on the household level. This type of narrative was also used as an explanation for how Latvia succeeded to avoid a large amount of infections and maintain a low level of

mortality during the height of the pandemic[1]. This narrative was also taken by non-ethnic Latvian participants.

LV // **Kā ir ar cilvēkiem Latvijā vispār? Vai tev liekas, ka viņi pareizi risina šo situāciju?** […] Varbūt es kļūdos, bet man latvieši liekas daudz mierīgāki un savāktāki. Es domāju, ka latviešiem tā jau labi padodas sociālā distancēšanās, šis ir viņu brīdis mirdzēt, un viņi to noteikti dara! (translated)	ENG // **How about people in Latvia in general? Do you think they are handling this situation correctly?** […] Maybe I am wrong, but to me Latvians seem a lot calmer and more collected. I suppose Latvians are already good at social distancing, this is their time to shine and they definitely are! (Ričards, 28.03.)

At the same time, this was contradicted by research participants who expressed the need for interacting with their family members and friends not only through the use of phones and other devices but by meeting up and being in close contact. Most research participants expressed a desire to return to previous times when there was no restrictions or forbiddance of communal gatherings in both the private and public settings.

LV // Ģimenes dzīvē man pietrūkst fiziskie kontakti. Vairāk nekas man fiziski nepietrūkst. Pārējais notiek garīgi, ar sarunām. Un saskari pa skaipu. (Ivars, 30.03.)	ENG // In family life I miss physical contact. Nothing else is physically missing. Everything else happens spiritually, with talks. And with contact via Skype. (translated)
LV // Es noteikti apciemotu savus vecākus, apciemotu savu meitu vairāk. Uzturētos fiziski tuvumā. Noteikti, tas ir mainījis. Daudz izolētāka tā kopā-būšana (Paula, 09.04.)	ENG // I would definitely visit my parents, visit my daughter more. I would be physically near. Definitely this has changed. The togetherness is a lot more isolated. (translated)

While a prevalent narrative explains social distancing as being Latvian and thus to some extent "natural'', common or convenient, research participants simultaneously express an acute lack of physical contact and tell stories of togetherness. In this way, cultivating the narrative of Latvians as being closed off and natural at distancing has two effects. First, despite being an exaggeration if compared to actual feelings and practices, it makes people more at ease with the measures needed to take. Second, it limits transformative action that can be made towards

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[1] https://www.tvnet.lv/6957954/levits-aicina-ar-mierigu-sirdi-un-realu-optimismu-skatities-nakotne

increased solidarity on household level and beyond. Thus, individual responsibility and individualized responses to the pandemic are supported in a similar way as it was during the 2008 crisis (Ozoliņa, 2019).

If analysed in perspective of expectations from the state, the most controversial issue for our participants was the protection of the borders and regulations on self-isolation for people returning or visiting Latvia. First, as seen in the chapter on class, returning migrants were greeted with suspicion and mistrust. This is common for people during return trips as frictions develop from feelings of increased emotional distance and family members co-evaluation of one's migration project come to the experience (Lulle, 2014). The pandemic, however, exacerbates this making some returns more painful, not necessarily because of the reaction among one's family as they constitute the support resources lacking abroad, but by the reaction from the community. Some altogether were wary of 'letting those who have left in'.

While not letting people return was a rather extreme measure among participants views, suggestions for forced isolation were also taken to the extreme. In this case, we consider it not as exemplary of a common narrative, but as a tool for exploring the imaginary of stricter separations. In one case, a participant suggested abandoned prisons and hospitals as a place for accommodating the returnees.

LV // **Ko tu domā par atbildes reakciju no valdības?** Es uzskatu, ka nebija pareizi, ka tad, kad sākās visi repatriācijas reisi, ka tie cilvēki netika izolēti uzreiz. Mums ir daudz pamestu slimnīcu, mums ir Brasas cietums un dažādas iestādes, kur viņus būtu varējuši izmitināt kaut vai uz divām nedēļām, bet, principā es uzskatu, nu, mūsu valdība rīkojās bezatbildīgi kā parasti, tur, kur vajadzēja ieviest stingrākus mērus, viņi to neizdarīja, bet tur, kur nevajadzēja, tur atkal ir otrādāk, visi tie ar policijas mašīnām, tas rupors, kas braukāja garām, man liekas, tas vispār bija nevajadzīgi un lieki, tas tikai uztrauc cilvēkus. (Andra, 08.04.)	ENG // **What do you think of the response from the government?** I believe that it was not right that when all the repatriation flights started, those people were not isolated immediately. We have a lot of abandoned hospitals, we have Brasa Prison and various institutions where they could have been accommodated for at least two weeks, but, actually, I believe, well, our government acted irresponsibly as usual, where stricter measures were needed, there weren't any, but, where there was no need for them, it was the other way around, all those police cars, the loudspeaker that drove around, I think it was unnecessary, it just worries people more. (translated)

The mention of abandonment does not just provoke to reflect that leaving the country has resulted in emptying of buildings. It also suggests thinking of people who have been in countries affected as in need of something akin to punishment. This stands in sharp contrast to protesting against local policing measures. Overall, despite there being many campaigns supporting repatriation before the pandemic, it was rather received negatively during the state

of emergency. The tension created by combined resentment towards people who leave and imaginary of endangering one's own support network by returning, also shows the limits of feelings of solidarity. A different separation was experienced by our non-Latvian participants, mainly in the form of constant struggle with language barrier. For example, when his daughter developed symptoms, Ričards' family decided not to use any help from Latvian friends to avoid endangering them. Then followed a long struggle to get tested and receive the results as the emergency number service provider struggled with English. In addition, the paper he needed to sign at the testing facility was only in Latvian, and the response came a day later than mentioned. In combination with little information in English provided online by SPKC and other forms of mistrust, like the complaints about dubbing messages in Latvian, Russian, and English without specific request, a picture of limited collectivity emerges.

Our data indicates that invocations of nationality, ethnic belonging, language, border security, and migration history show who is included in broader imaginaries of collective care and reveal how people think about caring in their community as apart from other collectivities. Those who are privy to societies construction of 'others', are more likely to be portrayed as troublemakers, where people who repatriated received an especially ambiguous status. The privileging of Latvians in the meantime reveal other fractures in contradictions of post-Soviet integration that result in increased risks and individualization of the problem for minority groups.

As a result, according to the fractured standards of ethical citizenship and social personhood within households, the only truly responsible individual during the state of emergency was a Latvian middle-class adult woman. The separations created by ideologies of the self, gender, sexuality, age, class, and nationality were also resulting in how care got distributed when taking distancing measures. This, however, does not mean that the pandemic did not bring any connections.

Chapter 3: Connections

As the previous chapter shows, the separations occur on two levels. The first being that individuals, families, and households are asked to distance from the wider society. The second being that members of a household may end up isolated from each other as well due to the divisions and inequalities already present in their everyday lives.

Nevertheless, it's important to note that our research participants also described various ways how during the state of emergency they also experienced new forms of solidarity and togetherness. In this chapter, we therefore concentrate on the ways how isolations were contested and managed often in new and creative ways. We end the chapter by a short discussion of how successful these strategies are, what is their long-term viability as well as their potential obstacles.

3.1. Community and public care

Caring can be considered through acts which exemplify caring for and caring about another person (Himmelweit, 1999). We can consider caring for as referring to various activities that cater to the needs or well-being of another person and caring about as entailing actual thought and feeling, concern and responsibility for meeting another person's needs (Glenn, 2000). We have used this approach and tried to analyse how the different practices in place during the isolation could be perceived as forms of care. Activities such as intensified cleaning, disinfecting, social distancing and contributing to relationships using digital tools, and more, can be seen as care practices present in the lives of people during isolation.

Most participants were trying to follow state recommendations regarding safety and health practices and employing them in their homes, extending these practices to family members as well as other people around them. By being aware of the current situation, taking serious recommendations provided by trustworthy sources and looking at the current events critically, the multi-faceted act of caring about one's self and others is showcased. However, the ways how one can express care for themselves or others can differ due to social, economic and, individual circumstances as well as external factors, thus adding to the broad spectrum of care activities and not allowing the concept to be of constricted value. In the section below, we offer an overview of informal care practices performed during a state of pandemic, how people have adjusted to these events and how their daily lives have been transformed.

One of the ways in which new and different connections were established was through a set of practices we have grouped under the banner of 'community care'. This form of care is mostly visible in the ways how research participants described others participating in caring for others than their immediate kin or friend group. Such practices can include collecting groceries, taking out dogs, and other things that would improve the quality of life of other people.

LV // Patīk tās programmas, kur cilvēki laikam piedāvā tur aiziet iepirkties vai izvest kādam sunīti ārā. Tas liekas tā forši, ka ir kāds, kas var palīdzēt citam, kurš ir vairāk apdraudēts vai kādu citu iemeslu dēļ nevar pats izdarīt tās lietas. (Santa, 17.04.)	ENG // I like those programs, where people, I guess, offer to go to the store for shopping or take out someone's dog for a walk. That seems rather nice that there is someone who can help another who may be more in danger or for some other reasons cannot do those things themselves. (translated)
LV // Viņi noziedo maisus ar ēdieniem un šiem edart.tv puišiem ir iespēja aizvest šos produktus cilvēkiem, kuriem tie ir ļoti nepieciešami, piemēram veciem cilvēkiem vai tiem pašiem invalīdiem, kuriem nav vispār viegli šajā laikā. (Una, 31.03.)	ENG // They donate bags of food and then the edart.lv guys have the possibility to take these products to people, who really need it, for example, older people or disabled, for which it is not easy at all during this time. (translated)

Here it is important to note that although research participants expressed admiration for these practices, none of our research participants were themselves participating in them. None of the interviews described how research participants or even anyone they personally know would carry our practices of community care. This was despite many of our research participants were both expressing concern for others, and admitting that they themselves were not feeling as particularly endangered or overwhelmed. This illustrates the way how support systems and care practices established during the state of emergency, although seemingly receiving large amounts of support and respect from the society, were often staffed and supported by a small number of individuals and organisations that were often involved in care and social welfare work prior to the isolation period. This also is one of the reasons why we argue is important to stay critical in regard to the long-term survival of the newfound solidarities and support systems.

The bystander support for community initiatives that alleviate the issues related to the isolation was also expressed mostly through formulaic commendations of the brave healthcare workers and courageous volunteers. When speaking of voluntary community services, participants praise these initiatives, while avoiding discussing the lack of institutional support that led to the need for these systems of assistance in the first place. The lack of institutional involvement is not brought up when discussing people helping people, therefore maintaining a positive outlook that although can work as a coping mechanism during a stressful period, also prevents a development of critique of the state response or lack thereof.

On the other side stood solutions relying on the market which are more likely to survive the pandemic as they are more in line with the dominant model of satisfying human needs.

LV // Man vispār iedvesmo visi tie stāsti, kad cilvēkiem ir ļoti lielas spējas solidarizēties, kaut kā apvienot. Teiksim, ir tie, kas kliedz, ka nav to masku un ka mēs visi nomirsim, un ka valdība ir pie visa vainīga, un visādas sazvērestības, viskaut kas klīst pa internetu. Man liekas, daudz foršāk ir tie, kas izveido uzņēmumu, kurā uzšūt šīs maskas. (Maija, 03.04.)	ENG // In general, I am inspired by all those stories when people have a very great ability to show solidarity, to unite in some way. Let us say that there are those who shout, that there are no masks and that we will all die, and that the government is to blame for everything and all kinds of conspiracies, all that roams the Internet. I think it's much cooler to set up a company to sew these masks. (translated)

Here we find a sense of taking the responsibility away from the state. While the pandemic through state initiatives like allowances for idle time has brought the state back in for wider provision of welfare, this welfare is also pointed towards supporting market actors and market solutions.

The other part of care practices related to wider society are grouped under the banner of 'public care'. This was mostly expressed through following the recommendations from the state. All the participants mentioned at least some form of this type of care practice (distancing, disinfecting, cleaning, etc.) that is simultaneously a care for oneself and others. Some participants were taking distancing recommendations quite seriously and planning their day to avoid being in direct contact with other people, calling these acts of care and respect.

LV // Ārpus mājas es mēģinu ievērot distanci no cilvēkiem. Mēģinu apiet viņus ar līkumu un veikalā mēģinu dezinficēt rokas. Ievērot visus tos noteiktos ierobežojumus. Tādējādi es domāju, ka es izturos ar cieņu pret pārējiem un rūpējos par viņiem. (Paula, 09.04.)	ENG // Outside the home I try to keep distance from people. I try to go around them and at the store I try to disinfect my hands. [Trying to] follow all the restrictions imposed. Thereby, I think, I act with respect toward others and care about them. (translated)

The state regulations were seen as mostly reasonable and were not disputed. This allowed the research participants to shift the blame and responsibility for the spread of the virus towards themselves through mostly describing the spread of the virus as dependant on the actions of individuals. Safety measures in place were seen as tools for protecting the society while also serving as a disciplinary tool that could be used to evaluate the morality of others' actions.

LV // Cenšos distanci ieturēt no cilvēkiem. Ar meitām veikalos velkam cimdus, lai pie reizes arī mēs neizplatam citiem, kā arī pašas	ENG // I try to keep distance from people. At the stores, our daughters and I put on gloves, to not spread it further, as well as so that we

mazāk uzņemam ko tādu, kas ir nevajadzīgs un lieks. (Nora, 19.04.)	would get less of something that is not needed and unnecessary. (translated)

Therefore, we can see how the actions that research participants themselves call 'acts of care and respect' should be analysed as disciplinary practices geared towards maintenance of moral community. In contrast to the process described by Zigon (2010), where the disciplining process is carried out in order to create a new moral and ethical person, here the work is necessary in order to reaffirm being moral and ethical. The strict distancing period is seen as threatening not only regarding one's physical health but also one's moral stance. The act of handwashing therefore becomes not only a physical act with an essentially immunological aim, but rather is seen as a reflection of individual's capacity to be a responsible and ethical citizen. This also extends not only to research participants, but also to their families and household members. The care that is showed towards the elderly members of family/household, the attention that is turned towards physical acts of disinfection all serve to establishment of moral community (Zigon, 2010) and are seen as evidence of ones non/participation in this community.

LV // Jā, vairāk pievēršam uzmanību ne tikai tīrībai, bet arī papildus dezinfikcējam rokas, vecāki neiet no mājas cik vien var, vai nu tikai uz darbu kā mans tēvs, vai arī pie ārsta. Bet principā uz veikalu eju es vai māsa, nu tie kuri nav riska grupā. (Anna, 13.04.)	ENG // Yes, we pay more attention not only to cleanliness, but we're also disinfecting hands, parents are not leaving the house as much as possible, if only for work as my father, or if going to the doctor's. But, basically, only my sister or I are going to the store, those who are not part of the risk group. (translated)
LV // [..] tā prātā es uzreiz domāju atnākot nekur, nekur nepieskarties. Uzreiz skriet uz vannas istabu nomazgāt rokas. To es arī atgādinu saviem mājiniekiem, par to roku mazgāšanu… (Emīlija, 29.03.)	ENG // [..] in my mind I immediately think of not touching anything, anything. Immediately run to the bathroom to wash the hands. I also remind this to my household, about the hand washing… (translated)

This public care therefore can be seen as a form of responsibilization that is carried out by research participants themselves instead of state agents. The community and public care practices are seen as responsibility of individuals and allows for the establishment of new connections on the grounds of establishing a moral community that is centred around the notion of care. It is important to note that these connections are established not outside the previously described unequal power relations but very much in relation to them. This means that if one wishes to participate in the new moral community of the responsible caring people, they should not only carry out the necessary duties (handwashing, cleaning, distancing) but also accept that their position is dependent on attributes they may not be able to control (gender, age, class nationality). This means that the communities established should not be seen as a radical shift but rather a continuation of different relationships in the society.

3.2. Communication as care

The next question in addressing connections is how the moral community is enacted. Due to the limitations of interacting in the physical environment, participants were relying more on technological tools to keep in touch with their families, friends, and colleagues. The main device utilized by the respondents during isolations was their mobile phone, which allowed various types of interactions to take place, such as (video)calling, texting, using interactive applications and browsing social media and networking platforms. Through the virtual space, people were able to maintain their relationships and show care for one another virtually while being in isolation and practicing physical distancing. While virtual interaction was not seen as completely replacing in-person communication, it appears that having these technological alternatives became an important tool for communicating with and showing one's care for others.

LV // Protams, ar draugiem un kolēģiem sazvanamies un sarakstamies, kā iet un tā. Vienīgais klātienes kontakts izpaliek. Bet citādi jā, kontaktējamies. Tagad patiešam jāpateicas tehnoloģijai, ka caur, piemēram, Skype var sazvanīties, un sarunāties ar darba kolēģiem, tāpēc, jā, kontakts nav zudis. (Nora, 19.04.)	ENG // Of course, with friends and colleagues we call and chat about how we are doing. Only the face-to-face contact is missed. But overall, yes, we keep in touch. Now we can really thank technology that, for example, through Skype, we can call and talk with colleagues and because of that, yes, the contact has not disappeared. (translated)
LV // Nu, tieši tā Rīgas omīte, ka viņa teica-Nu, tev obligāti vismaz reizi dienā jāsazinās un jāzin, kā tev ietās. Man jau likās, ka nu, vot. Būs traki un ka es negribēšu celt to telefonu. Nav īstenībā. Ir kaut kā tā. Nu, tu pacel, tu parunājies. Un zini kā, ir tas kontakts ar cilvēkiem ir tik limitēts dienā, tad tos dažus laikam tad jau labprāt. Un tu zini, ka. Nu, es zinu, ka viņas priecāsies un. Nu, jā. Tās jau tādas gādīgās sarunas tādas. Tādas jaukās. Ko tad? Neko jau daudz diži nerunā parasti. Vienkārši, kā ietās, kā jutās. (Liene, 29.03.)	ENG // Well, the Riga grandmother, she said that you have to obligatory at least once a day contact and have to know how you are doing. I thought, oh no. It is going to be crazy and I won't want to pick up the phone. It isn't actually. It is, like, you pick up, you talk. And, you know, the contact with people is so limited during the day, then some [calls] are welcome. And I know, I know that they will be happy. Well, yes. Those are more caring conversations. Nice ones. What else? Nothing more is talked about usually. Basically, how you are doing, feeling. (translated)
LV // Un vienkārši sazināties ar cilvēkiem. Es domāju, ka rūpēm nav vienmēr jābūt fiziskām. (translated)	ENG // And then just checking up on your people. I mean care doesn't always have to be physical. (Edgars, 13.04.)

With the distancing and isolation recommendations in order, some are finding that they are contacting others more than before and that the quality of communication has changed in some way. Due to the intense situation of a pandemic, participants can feel that their emotions have heightened, and they have become overwhelmed with the current events. Research data shows that communication even if only virtual served as a useful tool for coping with these feelings. With fewer opportunities for meeting in-person, communication via a technological device sometimes replaced the time that would usually be spent together. In absence of usual tools of showing affection like the buying of sweets, people felt inclined to check in more with others about their well-being as well as life in general due to heightened sense of concern for the wellbeing of their friends and family members.

LV // Kas tad mums ir svarīgākais dzīvē? Man liekas, ka visiem pluss, mīnuss attiecības. Kaut vai tas, ka es jūtu, piemēram, ar tēti. Es nekad neesmu tā sazvanījusies. Nekad baigi nav bijis par ko runāt. Bet tagad jau mēs 4 minūtes varējām parunāt pa tālruni. Nu, jā, tad liekās tādi trakie laiki un ka tu, protams, vairāk padomā par tiem, kas tad ir tie tavējie. Un tad tu jūti, kuram tad tev gribās pajautāt, kā ietās? Vai viss ir kārtībā? (Liene, 29.03.)	ENG // What is the most important in life to us? I think, more or less, relationships. Even if, for example, what I feel with my dad. I have never called like that before. There hasn't been anything to talk about like that ever. But now we could talk for 4 minutes on the phone. Well, yes, then it seems like crazy times and you, of course, think more about others, who are yours. And then you feel, who you want to ask how they are doing? Is everything alright? (translated)

Although many participants are satisfied with the use of technology for contacting their close ones, some note that digital tools cannot provide the human contact that they were looking for. Virtual tools are limited in replicating the actual social and physical interactions and the research participants lamented the limitations of the interaction these tools can provide. The following quotation also makes an interesting point about how the exact form of available tools may be contributing to the experience of isolation.

LV // Noteikti, viss ir vairāk virtuāls un attālināts. Mēs rūpējamies caur telefonu, ko, man liekas, mēs jau labi mākam darīt. Bet vismaz pirms šī visa mēs varējām apskaut draugu vai turēt otrās pusītes roku. Ir tikai tik daudz bilžu, cik tu vari "laikot" un tikai tik daudz komentāru, ko tu vari uzrakstīt, līdz tev ir nepieciešams fizisks cilvēku kontakts. (translated)	ENG // Definitely, everything is much more virtual and distanced. We care through the phone, something I think we are already good at. But at least before all this we could hug a friend or hold a significant other's hand. There are only so many pictures you can like and so many comments you can write before we need physical human contact. (Samanta, 09.04.)

The ability to 'like' photos and to add comments to other people's posts, is geared towards a particular form of online communication. This form is closely dependant on the interactions

and experiences in the physical world which serve as a material for interactions online. The balance between the two is tenuous and spending too much on either can leave a definite impact on the other. As people were having less and less experiences that could be successfully shared online and simultaneously started to spend more time interacting with the remaining posts, the balance was disrupted and made bare the need for physical world interactions.

Furthermore, the extended time spent online although serving as a form of distraction and coping mechanism was also not experienced independently from previous notions of what counts as a 'time well spent' or 'quality time'. As the notions of the inferiority of the virtual interactions are prevalent in Latvian society, the extended use of virtual communication tools ends up becoming a point of contention and yet another arena for forming the moral communities and exercising a discipline over oneself and others.

By the reaffirmation of the limited role that the virtual communication plays in maintaining relationships, research participants also reaffirm their connection to embodied proximate 'reality' and also reaffirm the exceptionality of the current situation. Similarly, to the way in which male involvement in the household duties can be justified through the notion of crisis, the increased communication through phones and other devices is also justifiable because of the same conditions. In both cases, the research participants can simultaneously justify engaging in practices that are seen as problematic while not contributing towards permanent change of practices in their daily lives.

The care focus in communication practices is expressed as a reflection and understanding of the important relationships in one's life and expressing emotional support, in case it is not possible to offer other types of support. The content of the communication during this time includes general checking-in and being interested about the others' current feelings and position. The care in this case is expressed similarly to the community care practices described above, where care is expressed mostly through disciplinary practices. Indeed, one could argue that the way how research participants describe their communication with their community members is often disciplinary, by making sure that the rules are followed, and health maintained. By maintaining the unequal relationships even at the basis of new forms of care, these categories and assumptions are not contested and deconstructed through the use of the newfound solidarity.

Conclusions

The data from our report shows that the isolation period has contributed to the emergence of new informal care practices in Latvia. The practice of self-care as care for others and the increased awareness of vulnerabilities of age and labour has created a space for potential change. However, as also illustrated by our research participants' experiences, these practices do not reflect significant change in views and assumptions about who is deserving of care and who is responsible for it. This leads to several conclusions.

First, as a response to various problems encountered by the research participants, people mobilized their support networks of family and friends and many spent their time to speak with each other on an emotional level. For some, this was a contrast to the usual forms of care that is more based on gifts and less on a verbal acknowledgement of each other. On the other hand, the ambivalence of proper choices created tensions in situations where our participants as family members, neighbours and consumers tried to change one another's understanding of what is responsible behaviour.

Second, the new care practices did not arise in a vacuum but rather as a response towards lack of support and care. This lack was often not mitigated by state practices which led to initiative from the citizens themselves. Although this type of approach can be seen as empowering and financially efficient, it also creates resentment towards the role of state in caring for its citizens. As the state was mostly perceived as regulatory and controlling, research participants experienced care as taking place almost exclusively in the popular sector. Furthermore, the incapacity of state institutions to better demonstrate their care and worry for the lives of the individuals reinforces the assumption that the state should not be perceived as trust-worthy and the view that state is mostly a regulatory/repressive institution rather than a caring and supportive actor.

Third, the lack of care and support in specific areas did not arise only due to state inaction but due to persistent inequalities and difficulties engrained in gender, age, class, and ethnic relations in Latvia. This means that the care work that was necessary in order to overcome the isolation period was unequally divided. Among our research participants, the chance to receive support and the resources necessary was highly dependent on one's existing wealth, networks, and strategies. By individualisation and naturalisation of social issues, research participants justified the ways in which women are supposed to be more caring, older people more vulnerable and young people more irresponsible instead of engaging with the social conditions that are producing these effects.

Fourth, the lack of state care was almost never seen as problematic, which reflects the low expectations research participants have towards institutions. This reflects the way how the responsibilization of the individual happens in the Latvian context, where the help from the state is neither hoped for nor expected. However, this approach puts most of the responsibility and work on the shoulders on the individuals themselves who are expected to be able to care for themselves and others, without considering the different resources available to variously

situated people. This leads to creation of an imaginary caring and entrepreneurial citizen which is then used to further justify the lack of support to those who do not live up to the ideal.

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