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Valuing mobility in a post COVID-19 world

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ABSTRACT

How do we, might we, value mobility post COVID-19? This is the central question addressed in this paper. The mobilities turn, or 'new mobilities paradigm' had many starting points, but one of them was a general revaluing of mobility. Examples ranged from the opening up of the supposed 'dead time' of the journey to work to the general critique of a sedentarist metaphysics across social, cultural and political thought. With this in mind, the onset of COVID-19 along with the closing down of national borders, virtual elimination of air passenger travel, and variety of lockdowns and quarantine policies at more local scales, raises several questions about the valuing of mobility in the 21st Century. While conservative and nationalist commentators seek to hunker down in various forms of national localism more critical commentators are identifying the landscape of connected capitalism as a root cause of the current crisis. The paper explores the changed landscape of local, national and global mobilities in order to ask how we might continue to value mobilities into the future.

Introduction

How do we, might we, value mobility in a post COVID-19 world? Mobility is key to the survival and spread of viruses and the illnesses associated with them. Mobility is central to 'what it is to be viral' (Lavau 2014, 298). This is despite the fact that viruses themselves have no power to move. They are passengers that have to become part of mobile assemblages. This is true across scales. Viruses cannot replicate outside of living cells – they need bodies such as ours to do so. At the micro-scale viruses are transported in the blood. They also exist in droplets in the air we exhale and in aerosol form. They can be deposited on surfaces through touch and then picked up by someone else. A virus that simply killed its host and was not able to move beyond it would, itself, cease to exist. If the virus was spread in an isolated community with no connections to the outside world, it would also die.[1] Beyond the kinds of mobilities needed to move from body to body, viruses thrive in highly mobile worlds where individual bodies move between populations. So, in addition to local scale mobilities between bodies, regional and global mobilities are also key to the success of a virus. Densely populated and highly mobile populations are the best kinds of hosts for a virus. Today's highly mobile and interconnected world is the best kind of assemblage for viral mobilities.

In order to become a pandemic, a virus relies on infected human bodies moving over much larger distances from one place to another, both within cities and across national borders. We can see this visualized in any number of exercises in data visualization that have appeared in recent months – perhaps most notably in a moving map produced by the New York Times and based on tracked cell phones. The map shows clusters of red dots (infected human bodies) around the wet market in Wuhan suddenly expanding and mingling with streams of non-infected people (blue dots) as

175,000 people moved across China to celebrate Chinese New Year. These streams become international as human bodies board airplanes and travel across the world – including the first known case outside of China in Bangkok.[2] Another, now well known, visualization shows the cell phones of people attending a beach party in Florida and then spreading across the United States.[3]

It is not surprising then, that mobility has come under attack. Whether it is walks in a crowded park, journeys to work, or international flights, governments around the world including neo-reactionary governments (USA) and liberal progressive ones (Aotearoa/New Zealand) have pursued a variety of strategies to prevent or reorganize movements, revalue mobility or transform mobility practices in order to stop the virus from spreading and, eventually, to eradicate it. Local, national and global efforts to undo the viral assemblage of COVID-19 have involved imposing relative stillness on a mobile world. These actions have inspired more general questioning of the meaning and practice of mobilities across the political spectrum and it is this process of devaluing and revaluing mobility that is the focus of this paper.

The remainder of this paper is structured as follows. First, I return to the origins of the mobilities turn, or 'new mobilities paradigm' in the humanities and social sciences, to sketch how it was, in part, a reaction to the devaluation of mobility as variously 'dead time', 'derived demand' or 'dysfunction' and how these, were, in turn an outcome of a sedentarist metaphysics that started from the assumption of clearly bounded and rooted spaces, places and territories as the normal starting point for understanding mobility. The second section focusses on one, particular, way of devaluing mobility as 'pathological' linking the figurative use of pathology to its literal meaning as 'caused by disease'. This is followed by an account of selected reactions to COVID-19 from both the right and left of the political spectrum noting the role of mobility as a problem in both leading to the fourth section which reflects on the rise of versions of localism. The conclusion speculates on the possibility of revalued extra-local mobilities.

The revaluation of mobilities in the humanities and social sciences

The origins of the mobilities turn, or new mobilities paradigm, were marked by, amongst other things, a revaluing of geographical mobility. This is not the place to review the emergence of mobilities research from the late 1990s onwards as that has been done many times elsewhere (Sheller and Urry 2006; Urry 2007; Adey 2009; Cresswell 2011; Sheller and Urry 2016). My focus here is more specific – on the ways in which mobility was *revalued*. This revaluing took many forms that responded to various modes of devaluing. At the highest level much of the early work responded to a theoretical devaluing of mobility where mobility itself was either ignored, taken-for-granted, or negatively valued. When John Urry suggested a 'sociology beyond societies' (Urry 2000) for instance, he was arguing for a need to stop thinking of 'societies' as spatially bounded entities, a way of thinking that necessarily led to mobilities being considered as, at best, logically secondary and, at worst, simply ignored. Instead, he argued, we should put 'networks, mobility and horizontal fluidities' (Urry 2000, 3) front and center in our thinking about social interactions. Sociology, Urry argued, had been structured around the idea of discrete societies regardless of theoretical commitments. Economies, political structures, and class formations had all been formulated as characteristics of these discrete societies. Likewise, 'cultures' were still seen as the properties of groups of people with clear territories who shared common identities. In its place he constructs a sociology based on mobilities. Urry enrolls Henri Lefebvre to make his point:

> Either a house can be viewed as stable and immovable with stark, cold and rigid outlines. Or we can see any such house as 'permeated from every direction by streams of energy which run in and out of it by every imaginable route'. As a consequence the image of immovability is 'replaced by an image of a complex of mobilities, a nexus of in and out conduits' (Lefebvre 1991, 93) (Urry 2000, 20).

It was not just in sociology that mobility was being revalued. Urry's critique of cultures as shared properties of people inhabiting common territories mirrored similar developments in anthropology.

Liisa Malkki, for instance, had reflected on what she called a 'sedentarist metaphysics' evident both in her own discipline and in wider views of the ways the world works as a set of discrete cultures rooted in the soil (Malkki 1992). James Clifford, meanwhile, had asked us to move from cultures imagined as homogenous bounded entities symbolized by 'roots' and towards cultures as the ongoing work of encounter between people on the move (routes) and at rest – between 'travelers' and 'natives' (Clifford 1997). Malkki and Clifford were not writing under the heading of a 'new mobilities paradigm' but their work signified a general sense across the social sciences and humanities that mobility, as a theoretical and methodological approach, and as an empirical fact, was undergoing a radical reimagining that involved taking something discarded, ignored, or devalued, and giving it a leading role in the ways we approach big questions about things such as 'society' and 'culture'. In the work of Urry, Malkki, Clifford and others, it was not just that mobility had been made secondary to stasis in their respective disciplines (itself a powerful form of devaluing) but that mobility was often seen as the enemy. In Malkki's work she makes it clear how the valorization of stasis, boundedness, and roots, has led to the negative valuation of the mobilities (real and imagined) of the homeless, the migrant, the refugee and the nomad (Malkki 1995). Mobility was thus often seen as a symptom that needed diagnosis and treatment – a pathology revealing an imperfect system.

The interventions noted so far have pointed to the need for high level disciplinary and inter-disciplinary revaluations of mobility in the realm of theorization and conceptualization. The work of revaluation, however, could be seen at different levels that followed from the theoretical centering of mobilities across disciplines. Consider something as seemingly mundane as commuting and journey to work. Under the auspices of conceptualization that marginalized mobility, such journeys had been conceived of as dysfunction in spatial systems. One way of talking about time spent commuting (or, indeed, travel time in general) was 'dead time'. Time spent moving from one place to another was somehow wasted, empty and unproductive. Travel time was separated from activity time as though travel itself was not an activity but a way of getting from one activity time-space to another. The notion of travel time as 'dead time' is logically linked to other ways of thinking about travel time through the lens of a broadly conceived sedentarist metaphysics. One such way is to think of travel as a 'derived demand' – the notion that travel happens because one important element of life (say residence) happens in one place while another (work, consumption, leisure etc.) happens in another. Thus, you have to move to get from one important thing to another important thing. The need to travel is 'derived' from other things that come logically first (Vilhelmson and Thulin 2001). While the details of such conceptualizations are interesting in themselves, and have been challenged by work on mobilities, my point here is that they rest on a higher order implicit moral geography that makes forms of apparent stasis antecedent to mobilities. Similar logic to the concept of derived demand in transport studies and elsewhere could be seen in migration theory that classically described the act of migration as the result of attributes ascribed to places being left (push factors) and places of arrival (pull factors). In spatial interaction theory and elsewhere mobility is conceptualized as a dysfunction in a system in which people would not move unless they had to (Cresswell 2006).

Scholars informed by the new mobilities paradigm, who centered mobility in the ways suggested by Urry and others, went to work filling this 'dead time' with life – showing all the enriching and meaningful ways in which such mobilities are inhabited and enacted on foot, on cycles, in trains, cars and planes (Urry 2006; Bissell 2010, 2014; Watts 2008; Laurier et al. 2008; Lin 2012, 2015). In this work, mobility is no-longer taken for granted or marginalized. It is not seen as 'derived' or 'dysfunctional' but, rather, as meaningful, emotionally felt, and entangled in issues of power, politics, and social justice (Cresswell 2010; Sheller 2018).

The work of revaluing mobility within the mobilities turn can be further understood as part of a much deeper and pervasive sense of the value of mobility that has always existed as part of human life. Similarly, the devaluing of mobility that sees it as derived or as a dysfunction can be contextua-lized within deep-seated and long-standing sedentarist suspicion of mobility and mobile people. While the details are always contextually specific in their contours, mobile people and things have long been met with hostility and fear. Homeless people, nomads, immigrants and other travelers are

frequently marked by unknown elsewheres – they are outsiders, strangers and wanderers (Simmel 1950). Both mobile bodies and mobility itself have been labelled as disruptive to established and largely territorial forms of order. This has been true for instance, of immigrants (Kraut 1995), gypsies (Sibley 1981), tramps and hobos (Cresswell 2001), nomads (Atkinson 2000), and runaway slaves (Browne 2015). It is not just the mobility of people that has been treated with suspicion. The same is true of animals and plants labelled as alien invasive species (Dobson, Barker, and Taylor 2013; Gibbs, Atchison, and Macfarlane 2015). Behind each of these is the assumption that proper order is spatially defined and that many forms of mobility are inherently transgressive (Cresswell 1996; Halfacree 1996). One of the ways in which mobile disruptions of spatial order has been defined is through the medically derived language of pathology (Wrigley and Revill 2000).

Mobility as pathology

It is not surprising that the term 'pathological' is, itself, a metaphorical way of understanding mobilities, that like the aligned metaphors of war, allows certain kinds of drastic action to be taken against mobile people and things deemed as the opposite of 'normal'. Durkheim famously transposed ideas of health and pathology from the individual to society: 'For societies, as for individuals, health is good and desirable; sickness, on the other hand, is bad and must be avoided' (Durkheim and Lukes 1982, 86[1895]). Pathological means 'caused by disease' and metaphors of disease have long been at the heart of violent reactions to mobility and displacement – particularly in relation of marginalized and impoverished groups in society – a point forcefully made by Susan Craddock in her book *City of Plagues*:

> Used as accusation toward the already deviant (…), disease intensifies the rhetoric of hatred, fear, and blame utilized against undesirable populations. It shifts the quality of this rhetoric from the social constructed to the medically legitimated, from a vaguely if forcefully defined rationale of difference to a rational basis for surveillance, control, and exclusion. In short, it pathologizes, and with pathologization comes a more ominous set of meanings and a consequent imperative to intervene (Craddock 2000, 4).

I refer to Craddock's historical work on San Francisco because it illuminates aspects of the current crisis – particularly the links between pathology as a medical term and its application to marginalized groups through control of mobility – linking the world of meaning to the world of practice. It also has particular relevance for the history of Sinophobia in the North American context. Craddock's work on San Francisco focusses on groups associated with mobility including the homeless and the Chinese immigrant population. In addition to being a general signifier of otherness, disease has specifically mobile connotations derived from that fact that diseases spread. Contagion, epidemic and pandemic are all terms with mobility at their heart. So, it not just that homeless people or Chinese immigrants in San Francisco were different – it was that their difference was connected to moral geographies of stasis and mobility. Disease is one of the main ways in which mobility has been literally and metaphorically understood (Cresswell 1997; Wrigley and Revill 2000). Mobile people have been described as diseases and associated with specific diseases in ways which make clear the supposed pathology of their mobility.

In Alan M. Kraut's *Silent Travelers: Germs, Genes and the Immigrant Menace* he traces these links through the various responses of public health officials to disease and immigration. He charts how 'medicalization of preexisting nativist prejudices' leads to calls for the exclusion of whole groups of 'other' people (Kraut 1995, 2). His book includes the association of Irish and cholera (1830s), Chinese and bubonic plague (1900), and Italians with polio (1916). Another disease forever intertwined with racism is AIDS. In 1982 AIDS began to be associated with Haitians in addition of gay men, heroin users and people who had blood transfusions. The disease had been identified among Haitians fleeing the dictatorship of Jean-Claude 'Baby Doc' Duvalier as well as in people identified as Haitian in several cities across the United States. One immediate supposition was that this disease may have been imported by an immigrant group – a notion that was later dispelled as it was shown that

Haitians caught the disease in the same ways as everyone else. The doctor who proved this, the Haitian doctor Jean William Pape, suggested that 'he believes the doctors were seeing cases in other nationalities at the same time, but reported only on the Haitians because they did not see them as having the same privacy rights – because they were poor, black refugees' (Katz 2018, npn). The link drawn between AIDS and Haiti, including by the US Centers for Disease Control and Prevention (CDC), had immediate impacts including the collapse of the Haitian tourist industry. The association between AIDS and Haiti effectively stigmatized all Haitians. In his book *AIDS and Accusation: Haiti and the Geography of Blame*, Paul Farmer writes 'in the United States and other wealthy post-slavery societies of the Americas, the stigma of AIDS combined with inveterate racism to ensure the victims of the disease would bear the blame for their own misfortune. Moveover, not only sufferers from HIV but all Haitians were branded as AIDS carriers' (Farmer 2006, xii) and further 'Racism was central to the early international responses to AIDS, too, and remains a problem today, as AIDS takes its greatest toll on the continent of Africa, where the heritage of colonialism and racism weighs heavily' (Farmer 2006, xiii). It should come as no surprise that the same President who deliberately started referring to COVID-19 as the 'Chinese virus' is reported by the New York Times to have previously declared that Haitians 'all have AIDS' in an Oval Office meeting.[4]

The infrastructure associated with mobility has been painted with the same brush, with railway trains, carriages and stations being particularly associated with the spread of disease (Harrington 2000). Ports have traditionally been associated with STDs such as syphilis (Brandt 1985). More recently, and particularly in relation to COVID-19, airports and airplanes have been seen as prime nodes for disease vectors (Gilbert et al. 2020; Ikonen et al. 2018).

My argument here is not that mobile people and infastructures of mobility are not entangled with the spread of diseases. Clearly, infectious diseases, and particularly a pandemic, have to move to be 'successful'. But as with any process of metaphorical labelling, the literal truth gathers significance as it becomes figurative. The figurative nexus of disease and mobility is tied into wider ways of devaluing mobility as 'wasted time', 'derived demand', or 'dysfunction'. There are, however, other ways of thinking about the pathological that might be of use here.

In *The Normal and the Pathological*, Georges Canguilhem interrogated the idea of 'normal' in physiology as both a statistical statement of fact and a normative judgement – connecting 'a purely descriptive sense of norm derived from physiology into a biological ideal and thus (as the straightforward positivist picture requires) grafts on this normative element by making restoration of normal function its goal' (Tiles 1993, 734; see also Philo 2007). Key to Canguilhem's exploration of the pathological is that it is 'a simple quantitative variation of the physiological phenomena which define the normal state of the corresponding function' (Canguilhem 1989, 227) and, as such, '[P]athological phenomena are identical to corresponding normal phenomena save for quantitative variations' (Canguilhem 1989, 35). This idea that pathology is a variation of normality can itself be extended, as Durkheim suggests, beyond the specifics of medicine. We can think of COVID-19 mobilities as a version of the normal rather than a mirror image of it. So, when we talk of the 'new normal', as so many people do in the current crisis, it helps to think through the ways COVID-19 is part of what has long been normal – a highly connected and often unstable networked world.

COVID-19 and its mobilities are not an aberration but, instead, evidence of the way 'normality' has been spatially rendered. The spread of the virus is a kind of proxy for the shape of already existing mobilities – the reach of roads into previously unexploited forests, the global web of logistical and supply chain networks, the lattice of flight corridors traced by planes carrying over six million people a day. The aberration of COVID also piggy backs on the 'normal' mobility inequities: outbreaks in refugee camps around the Mediterranean, higher rates of infection among poorly paid 'unskilled' workers (recently rebranded as 'key workers') who have no choice but to travel daily as transport workers or zero hour contract delivery drivers, increased burdens borne by people with brown and black skin who are less likely to be able to safely work from home. Indeed, another insight of Canguilhem's is helpful here. He ruminated on the kinds of insights the pathological can provide, quoting the French surgeon René Leriche, '"At every moment there lie within us many more

physiological possibilities than physiology would tell us about. But it takes disease to reveal them to us'" (Canguilhem 1989, 100). Central to Canguilhem's argument is the insight that pathology is not derived from the normal, but, in some ways, precedes it – that the normal needs constant labour to define and defend it.

Mobility as threat in responses to COVID-19

Given that viruses are so dependent on mobility it is no surprise that various forms of mobility are being questioned, and often pathologized, in responses to the virus. Almost universally, it has been the halting of various mobilities that has been at the heart of plans to conquer COVID-19. In this section I consider some of these responses, linking responses on the right to responses among left and liberal commentators through their different, but connected, diagnoses of mobilities at the heart of the pandemic.

In the United States, members of the Trump administration, led by Trump himself and supported by elements of the media, have repeatedly referred to COVID-19 as the 'Chinese virus'. This rhetorical racism supported Trumps' first clear action against the virus, a ban on international travel from China to the United States. Consider each in turn.

President Trump, on the 17th March made the deliberate decision to refer to the virus as the 'Chinese virus'. Since then, both Trump, his Secretary of State, Mike Pompeo and trade advisor, Peter Navarro have alternately used the terms 'Chinese virus', 'Wuhan virus' and even, in at least two cases, 'Kung-Flu' – a practice that is both racist and unhelpful for a coordinated global response to the pandemic (Lee 2020, npn). Navarro went so far as to suggest that the Chinese had 'sent' 'hundreds of thousands of Chinese on aircraft to Milan, New York, and around the world to seed [the virus].'[5] When the G7 group of the world's wealthiest nations met in March, 2020 to develop a combined response to the virus the severity of the situation was already clear. Despite the obvious need for action the meeting came to a stalemate as Mike Pompeo, who holds the presidency of the group, included the term 'Wuhan virus' in the text he circulated for approval. To the other members of the group this was a 'red line' they were not willing to cross. The use of these racist terms has been one important part of a strategy to pin the blame for the virus on China. While the use of these terms has clearly been intentional it was not a unique linguistic invention. Rather, it stands in a long tradition of associating diseases with (other) places and people.

The history of pandemics in the 20th century was a history of place-name based diseases. Most famously, perhaps, the influenza pandemic of 1918–1920, that killed from 17–50 million people and infected a quarter of the world's population, was called the 'Spanish Flu', mainly due to the fact that it was only Spanish journalists who were reporting on it. Later pandemics were called the Asian Flu (1957) and Hong Kong Flu (1968). Other outbreaks have been named after particular animals (Swine Flu, Bird Flu). Other diseases, that did not reach the status of pandemic, have also been given 'other' place names. This was notably the case with syphilis in the late 15th and early 16th Centuries (Brandt 1985). The army of King Charles VIII of France collapsed from a mystery illness during an invasion of Naples. The disease spread quickly through Europe and North Africa and was given different names depending on where you lived. In Italy, it was the French disease and in France it was the Italian disease. Russians called it the Polish disease, Poles called it the German disease, Arabs called in the Christian disease. In Japan, they called it the Tang sore – a reference to China. It is certainly the case that human mobilities, of one kind or another, form part of the historical geography of syphilis. It was the marches of King Charles' army on Naples that brought the disease to light in Europe. The disease became particularly notable in port cities – the Chinese called it the 'ulcer of Canton' after the port city that formed their major contact point with the west. It was in the English port of Bristol that syphilis was named the Bordeaux sickness (after another noted port with ties through the wine trade to Bristol). Syphilis was not just connected to 'other places' but to mobility in general. Early attempts to account for its sudden appearance in Europe looked to nomadic groups such as the Moors and the Beggards. More recently scientists have explored the long-held notion that the disease came back

from the Americas with the Columbus expedition as a kind of reversal of the well-known movements of small pox.

It is with this history in mind that the World Health Organization had announced a name for the virus on February 11th, 2020. They called in SARS-CoV-2 (severe acute respiratory syndrome coronavirus 2). At the same time, they named the disease caused by the virus COVID-19 – a name nobody knew and now almost everyone knows. The Director-General of the W.H.O., Dr. Tedros Adhanom Ghebreyesus, made some remarks to contextualize the naming. 'We had to find a name that did not refer to a geographical location, an animal, an individual or group of people, and which is also pronounceable and related to the disease. Having a name matters to prevent the use of other names that can be inaccurate or stigmatizing. It also gives us a standard format to use for any future coronavirus outbreaks.'[6] The statement by the Director-General recognized the power of naming and the potential for stigma that a name can impose. The Trump administration were, of course, well aware of this careful process when they began to use other names.

As Susan Sontag made clear in both *Illness and Metaphor*, and *AIDS and its Metaphors* accounts of illness are rarely innocent scientific accounts (Sontag 1990). Some of the most pervasive narratives we have involve the movement of meaning between disease and society. Diseases are punishments. Carriers of disease are morally dubious as well as medically infected. The production of meanings attached to illness matter. On February 24th, 2020, a Singaporean student, Jonathan Mok, was walking on Oxford Street in central London when he was viciously attacked by four young boys, one of whom said 'I don't want your coronavirus in my country'. Mok was so badly beaten he needed facial surgery.[7] This seemingly extreme event is but one example of racist actions that are ill-informed by supposed associations between Chineseness and COVID-19. Instances range from people eating less Chinese food, to further instances of bodily violence, to national and local newspapers using racist headlines – such as Sydney's Daily Telegraph headline of 'China kids stay home'.[8]

Beyond associations between disease and foreign 'others' on the one hand, and disease and general anxieties about mobility on the other there is a very specific connection in the West between disease and ideas about Chineseness. This includes various diseases such as Cholera around 1900 in the United States but also regulatory constructs that linked race to hygiene, sanitation and public health. Kay Anderson charts how the idea of the Chinese as a race was constructed in the Canadian case through the identification of a specific place in Vancouver as 'Chinatown' (Anderson 1991). Part of this process was to place Chinatown affairs under the authority of the municipal sanitary officer alongside disease, water, and sewage. Similar connections were made in efforts to define and defend racially coded borders at Angel Island in San Francisco Bay during the period of the Chinese Exclusion Acts 1910–1940. Part of the justification for the immigration detention center was the fear of small pox. Chinese detainees were often subjected to invasive and arduous medical exams. Renisa Mawani has shown how similar connections between race, disease, and sanitation were made at D'Arcy Island off the coast of Vancouver Island between 1891 and 1924 where Chinese people suffering from leprosy were detained. Indeed, leprosy was known on the west coast of Canada as the 'Chinese disease' (Mawani 2006).

The association between foreigners and disease is a common one. It rests on a wider set of narratives of foreign others as dirty and polluting. As the anthropologist, Mary Douglas, reminded us in her book *Purity and Danger*, when we see references to dirt we are seeing references to matter out of place (Douglas 1966). Dirt, pollution, is defined by moral geographies – ideas about what and who belongs where and when (Cohen and Johnson 2005). Similarly, references to immigrants or foreigners as dirty, polluted, or diseased is a symptom of moral geographies. This is why it matters whether we talk about SARS-CoV-2 as a virus that originated in China or as a Chinese (or Wuhan) virus. The first is simply a statement of the facts as we know them, the second is an attempt to give a virus implied national characteristics that draws on a racist history.

In addition to the Trump administration's linguistic strategies, they have also pointed to Trump's advocacy of closing the U.S. borders to people from China in early March – a strategy he claimed in

a Whitehouse press briefing on April 7th, 2020 had saved 'hundreds of thousands' of lives.[9] The travel ban, along with most international travel bans around the world, is unlikely to have been very effective. Through tracing genetic mutations of the virus we now know that most of the spread of coronavirus in the United States came via Europe and not directly from China (Gonzalez-Reiche et al. 2020).

In any case, while travel bans have a pleasing and simple logic to them, they are generally seen as ineffective by those who study them (Mateus et al. 2014). They are rarely introduced ahead of local community transmission rates already having a reproduction or 'r' value of over 1.0 and by then transmission from elsewhere is not a major factor in the spread of a virus. This was clearly the case in the United States with the travel ban. To be effective, international travel bans would have to stop over 90% of travelers – not simply people travelling from select countries. A massive travel ban, such as this, would then only delay the infection curve by a few days or weeks. One paper surveying research on travel restrictions in response to influenza outbreaks concluded that:

> Only extensive travel restrictions – i.e. over 90% – had any meaningful effect on reducing the magnitude of epidemics. In isolation, travel restrictions might delay the spread and peak of pandemics by a few weeks or months but we found no evidence that they would contain influenza within a defined geographical area (Mateus et al. 2014, 873).

And then there are the side-effects of international travel bans summarized in an article in the conservative magazine *The National Interest*:

> Not only are travel bans likely to be ineffective with a disease like the novel coronavirus, but there are also likely to be widespread economic, social, and public health impacts from the ban. Travel bans disrupt economic activity, potentially stigmatize populations and ethnic groups, and can impact the delivery of essential medicines and supplies needed to treat those with the coronavirus and those with other diseases (James and Owmer 2020, npn).

Trump's travel ban underlined a response to a mobile and networked virus that rested on a logic that divided the world into clearly demarked and ultimately defensible spaces – the kinds of 'societies' that Urry had set out to move away from in 2000 (Urry 2000). Indeed, Urry predicted the kind of response that was likely to arise in his book when he wrote 'The concept of society will in the future be one particularly deployed by especially powerful "national" forces seeking to moderate, control and regulate these variously powerful networks and flows criss-crossing their porous borders' (Urry 2000, 1). The closing down of international borders as a response to COVID-19 does not seem to have much basis in science, especially when it is not accompanied by an effective public health response and effective track-and-trace processes. What it does appear to be based on, is a view of the world that is suspicious of mobility and rooted in a sedentarist view of the world. It is an example of falling into a 'territorial trap' as a response to something that is not territorial (Wang, Zou, and Liu 2020; Agnew 1994).

It is not just those on the right of the political spectrum who have deployed broadly 'anti-mobility' narratives in response to COVID-19. On the left, commentary has taken a different form where the enemy is not China but global capitalism. Left/liberal commentators have asked why a disease that originated (as far as we know) in a wet market in a second-tier Chinese city became a global pandemic. Rather than looking for specifically Chinese factors, they have generally looked to the encroachment of agribusiness into landscapes that were formally richer and more diverse ecosystems. This is then connected to global mobility patterns. Rob Wallace and colleagues, for instance, provide a multi-dimensional account of the role of circuits of capital in the coronavirus pandemic. In their account, a key role is played by the connections between 'the expanding peri-urban commodity circuits shipping these newly spilled-over pathogens in livestock and labor from the deepest hinterland to regional cities' and 'the growing global travel (and livestock trade) networks that deliver the pathogens from said cities to the rest of the world in record time' (Wallace et al. 2020, npn). Logistical chains linking cities to the 'natural' world are thus connected to global systems of

connectivity consisting largely of air routes. Similar logic is used by Kim Moody in another *Monthly Review* article linking 21st Century logistics to the long history of epidemics

> Capitalism has accelerated the transmission of diseases. Historically, most epidemics have spread geographically through two common forms of human long-distance movement: trade and war. The timing, however, changed dramatically with the rise of capitalism.
>
> ...
>
> In the era of just-in-time logistics, it took the coronavirus mere days to spread from Wuhan to other Chinese cities hundreds of miles away. It took only two weeks to move beyond China, simultaneously along major supply chains, trade and air travel routes to the industrial and entrepôt enclaves of East Asia, the war-torn, oil-producing Middle East, and industrial Europe, North America, and Brazil. (Moody 2020, npn)

Similar kinds of analysis have appeared in liberal media such as the *Guardian* where historian, Andrew Liu pointed towards the supply chains that connect Wuhan, a city that few in the west were aware of before COVID-19, to other parts of 'global assemblages of commerce, tourism, and supply chains erected by powerful interests in the 21st century':

> Wuhan, where the virus originated, originally served as a hub between coastal metropolises, such as Guangzhou and Shanghai, and inland China. Although considered a "second-tier" city, even Wuhan has been caught up in the latest phase of globalisation, as capital pursues cheaper land and labour markets inland. During February and March cases of the novel coronavirus illuminated economic linkages long hidden from view, such as Chinese investments into infrastructure in Qom, Iran or the ties between Wuhan's car parts industry and factories in Serbia, South Korea and Germany. (Liu 2020, npn)

Rather than blaming China for coronavirus, left commentators generally point towards various aspects of capitalism ranging from the spread of agribusiness into new spaces to the development of global commodity chains and logistics networks. Despite the complexity and sophistication of the left diagnosis of the COVID-19 pandemic, it retains the threat of mobility at its heart. We are, we are told, at peak connectivity between a second-tier Chinese city such as Wuhan and the rest of the world and this connectivity is one of the key factors in the increasing likelihood of pandemics such as COVID-19 being a recurring part of global life.

Whether it is the neo -reactionary diagnosis of the Trump administration and supporters (which is racist and reprehensible) or the left/liberal diagnosis (which I generally believe) it remains the case that forms of mobility are seen as problematic and pathological (literally and figuratively).

The rise of localisms

One response to the negative valuation of mobility in times of COVID-19 is an invigorated *localism*. While border closures and quarantine orders are enacted to prevent the spread of COVID-19 there are other ways in which international mobilities are being devalued. Just as the devaluing of mobilities transcends politics so too does the turn to the local. This is a (re)turn that predates COVID-19. In December 2016, at one of his large rallies, Donald Trump proclaimed 'People talk about how we're living in a globalized world, but the relationships people value most are local – family, city, state, and country. Local, folks, local.'[10] In more measured tones, the late philosopher and darling of the UK's Conservative Party, Roger Scruton, wrote 'There is no political cause more amenable to the conservative vision than that of the environment. For it touches on the three foundational ideas of our movement: trans-generational loyalty, the priority of the local and the search for home.'[11] It is not easy to equate Trump's neo-reactionary politics or even old-fashioned conservatism with the generally liberal orientations of, say, the local food movement or farmers markets scattered across affluent cities in the West. These seem, ironically, like part of the 'global liberal elite' that Trump or Scruton would have little time for. Going further back in time we encounter the anarchist prince, geographer, and father of mutual aid, Peter Kropotkin stating 'Either the State for ever, crushing individual and local life .... Or the destruction of States, and new life starting again in thousands of

centers on the principle of the lively initiative of the individual and groups and that of free agreement' (Kropotkin 1987). The enemies in these diverse cases of localphilia are big things, the State and large, particularly multinational, corporations.

Localism has been forecast by the research firm Kantar as a major 'post-pandemic trend.'[12] Some of this trend seems innocuous – a move towards local food as well as other goods and services. Some of it is less innocent. The Kantar survey found that 60% of consumers across 50 markets were now less likely to buy goods from China. Consumers not wanting to buy goods from China is more likely to be generated by increasing sinophobia than a desire to support local business. Another form of localism is the move towards more powers for local government in relation to national governments that are perceived to have performed badly. Britain's *Local Government Chronicle* saw fit to declare under the headline 'The strength of the local Covid response bodes well for localism' that 'As the centre's performance has waned during the pandemic, the expertise of local leaders has made a powerful case for far-reaching devolution.'[13] In Wales, a Plaid Cymru (Welsh nationalist) councillor wrote:

> Business as usual is not an option if we want to build shock-resistant communities post-Covid. The virus has exposed the extent of our reliance on complex global supply chains and we have increasingly relied on local businesses, local inventiveness and local people to support us in our hour of need.

> This idea of 'localism', also offers us a path to recovery based on building strong, sustainable and durable communities going forward, and it's one that should sound familiar to people in Wales.[14]

In *The Guardian* Simon Jenkins writes about the volunteer efforts of private citizens, local farmers and high street businesses in tackling COVID-19 before declaring:

> But they are handicapped by the disappearance over recent decades of all that is vital in British neighbourhoods: high streets, police stations, banks, libraries, youth clubs, day centres and cottage hospitals. People have been forced back on neighbours, on geography. When systems fail, geography matters. They can't stop you walking down the street. Not yet.[15]

Meanwhile, in the face of perceived failures of the state, there has been a resurgence in anarchist and anarchist inspired forms of mutual aid (Springer 2020). In the UK, Covid-19 Mutual Aid UK set up a website to help and coordinate local groups. It offers the advice 'The best way to set up a local group is to think about the support needed in your immediate local environment, rather than trying to organise on a larger scale. We recommend that you act really locally, for example just on your street or apartment block and surrounding area.'[16] On *Open Democracy*, Anastasia Kavada referred to this strategy as 'hyperlocal' with whatsapp groups emerging at the scale of individual streets in London and elsewhere.

> Mutual aid groups have created a hyperlocal infrastructure of care that includes diverse digital platforms and applications, as well as physical media such as leaflets and posters. Members of these groups have also developed common organising practices and social norms. The interpersonal relationships fostered between neighbours who need and receive help can go across generational, racial, gender and political divides, depending of course on the diversity of each locality.[17]

A rise in calls for localism sits well with moves to close borders. It is a spatial ideology well suited to a world that is hostile to mobilities and anything beyond the local scale. It is also one answer to the question of how to respond to a globalized, connected world of capitalist supply chains.

Conclusion: (Re)valuing mobilities?

In his recent attempt to disentangle the idea of value both from a quantitative neoliberal measure and from moralistic versions of the normative Massumi suggests the possibilities of the embrace of *beauty* as a necessary part of 'an aesthetics of value – embodying creative adventure' (Massumi 2018, 99). Massumi's version of beauty is deliberately dissonant – set against a harmonious version of beauty he links to Alfred North Whitehead. This embrace of beauty is zesty, dynamic, and

adventurous. Massumi's revaluation of value take it away from value as a product of exchange (exchange value) or utility (use value) and also from the idea of values as universal, obvious, and eternal (as in moralistic senses such as 'family values'). This kind of beauty needs dissonance and tension. It needs the possibility of the new and unexpected – the kind of possibility that is dramatically increased by mobility beyond the confines of the local. If one response to the hyper-connected world created by capitalism and its agents is to retreat to the local, or 'militant particular-ism' as David Harvey called it (Harvey 1995), then another is to reconfigure the relationship between extra-local mobilities and value. Massumi's call for 'an aesthetics of value embodying creative adventure' may be a path forward.

'Creative adventure' has always been one of the defining tropes of mobility and travel. Such positive valuations of long-distance mobilities have always sat alongside the trope of mobility as transgression and pathology. Travel and the journey, after all, are right at the center of the stories we tell ourselves. Journeys are there in the origins of poetry, in the *Odyssey* and Norse *Sagas*. Journeys also provide the narrative structures in the origins of the western picaresque novel – in *Don Quixote* and *Robinson Crusoe*. It would clearly be wrong to suggest that all mobility has been negatively valued. Despite this, it is often hard to hold on to affirmative narratives on mobility in times of COVID-19. There is a similarity between this response and some responses to global heating that demand an intense kind of localism defined by the possibilities of active transport, walking and cycling and pitted against the automobile and flying. The desire to shame people out of their cars and planes is understandable as a response to both greenhouse gas emissions and COVID-19 but it is unfortunate that there is a perceived need to resort to shame – a package of emotions based on fear, guilt and embarrassment. As Alberto Vanolo has recently pointed out: 'By extension, guilt and shame may overlap with other dynamics, contributing, for example, to the shaping of spaces of fear, violence, exclusion or pleasure' (Vanolo 2020, npn). Shame is often linked to already marginalized groups such as poor people, LGBTQ+ people, differently sized people and single mothers (Longhurst, Hodgetts, and Stolte 2012; Longhurst 2001). More affirmatively, perhaps, shame may also act as a spur to reimagine living ethically and to create new kinds of social solidarity (Probyn 2005). There have certainly been cases of 'travel shaming' recently. One notable occasion occurred when police used drones to film people rambling (in an appropriately distanced way) in Derbyshire's Peak District. Runners and cyclists have been shamed for passing people while breathing heavily.

There is a danger that COVID-19 and reactions to it will pathologize mobility in general and ignore the various kinds of joy and opportunity that arise from the ways we move. There has certainly been a welcome recognition of the positive value of certain kinds of local travel such as walking and cycling during the COVID-19 pandemic – forms of mobility that have become safer and easier on roads with little automobile traffic and the sudden appearance of previously unattainable cycle lanes. In hard hit Milan, the city government announced 22 miles of experimental cycle routes in space formally given over to cars.[18] In India there has been a dramatic resurgence in cycling in a society that had valorized automobile ownership as a sign of prestige and success.[19] Even the general idea of a commute has been missed by those who can no longer commute.[20] In a re-enactment of work on commuting by mobilities scholars, journalists are discovering that a commute was more 'me time' than 'dead time'. While a reinvigorated interest in local forms of mobility is welcome there is still the danger of a retreat into a sedentarist mode of thinking and acting.

COVID has allowed us to reimagine many things in the hope that what happens after COVID – or more precisely when COVID is successfully managed – might form a 'new normal'. While there is every reason to be sceptical about what this might mean – including the suspicion that it might look a lot like the old normal – there is space for reimagining mobilities in ways that are not all negative. Some of this has arisen at a local scale, as mentioned above, but what about long-distance mobilities? Massumi's revaluation of value involves uncoupling the idea of value from quantification and insisting on its qualitative nature. This also means disentangling the idea of value from the economy as 'Value is too valuable to be left to capital' (Massumi 2018, 5) and making 'qualitative excess' rather than quantitative excess a 'postcapitalist virtue' (Massumi 2018, 8). Massumi's thinking

can point us towards prefigurative mobilities emerging that prioritise both forms of qualitative excess (pleasure and joy) as well as mobility justice (Sheller 2018) rather than the quantitative excess of (racial) capitalist exchange value and capital accumulation. Perhaps we can begin to conceptualise a mobile version of the temporary autonomous zone (Bey 2003) – a process of commoning mobility (Nikolaeva et al. 2019) where the idea of mobility as an individual (rather than collective) right, tied to the imperative of economic growth, is replaced by a new constellation of movements meanings and practices where the collective good, and lived equity are the new priorities.

Notes

1. It is not clear that viruses are ever, in fact, alive. So, death here, is at least partially metaphorical.
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10. Quoted in Watson, Patrick W. 2017. 'The World is Entering a "Localism" Era' *Forbes* January 4.https://www.forbes.com/sites/patrickwwatson/2017/01/04/the-world-is-entering-a-localism-era/#45ce570b2d75
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