

Everyday Urbanisms in the Pandemic City: A Feminist Comparative Study of the Gendered Experiences of Covid-19 in Southern Cities

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Drawing on GenUrb's comparative research undertaken in mid-2020 with communities in five cities—Cochabamba, Bolivia, Delhi, India, Georgetown, Guyana, Ibadan, Nigeria, and Shanghai, China—we engage in an intersectional analysis of the gendered impacts of the Covid-19 pandemic in women's everyday lives. Our research employs a variety of context-specific methods, including virtual methods, phone interviews, and socially-distanced interviews to engage women living in neighbourhoods characterized by underdevelopment and economic insecurity. While existing conditions of precarity trouble the before-and-after terminology of Covid-19, across the five cities the narratives of women's everyday lives reveal shifts in spatial-temporal orders that have deepened gendered and racial exclusions. We find that limited mobilities and the different and changing dimensions of production and social reproduction have led to increased care work, violence, and strained mental health. Finally, we also find that social reproduction solidarities, constituting old and new circuits of care, have been reinforced during the pandemic.

Keywords: Bolivia; China; Covid-19; comparative analysis; everyday urbanism; feminism; gender; global South; Guyana; India; Nigeria; social reproduction.

Introduction: Crisis of social reproduction in the pandemic city

Covid-19 has propelled a wave of scholarship that examines how the pandemic intersects with other global crises—of capitalism, climate and energy, healthcare and care—to compound inequalities and injustices (Bahn et al., 2020; Brosemer et al., 2020; Casale & Posel, 2020; Ho & Maddrell, 2021; Sultana, 2021). The pandemic has been framed as amplifying the crisis of social reproduction (Adeniyi-Ogunyankin & Peake, 2021a; Allen et al., 2020; Brickell et al., 2020; Manzo & Minello, 2020; Rao, 2021; Stevano et al., 2021), as the crises it has engendered reveal the essentiality of this life-making work, which remains undervalued and underpaid, if not unpaid, work (Bhattacharya in Jaffe, 2020). It is within this context that we analyse women's everyday lives as they navigate the pandemic in five cities across the global South, seeking to flesh out how processes of production and social reproduction are being reconstituted.

Feminist urban scholarship makes visible the varying and interconnected processes of social reproduction and production often overlooked in urban theorization (see, for example, Bhattacharya & Vogel, 2017; Fernandez, 2018; Katz, 2001; Lofland, 1975; Meehan & Strauss, 2015; Mitchell et al., 2004; Peake et al., 2021; Peake et al., 2018). Social reproduction encompasses not only the gendered reproductive (waged and unwaged) labour—daily and generational work in households, communities, schools, and hospitals—that creates and sustains labour power in capitalist societies, but also the reproduction of the social relations that enable capitalism to continue (Ferguson, 2008;

Norton & Katz, 2017). Beyond biological reproduction, it includes what Aruzza, Bhattacharya, and Fraser (2019) refer to as the “life making” work among families, communities, and institutions that underpins the cultural and emotional practices tied to identities and place that maintain differentiated labour forces. Feminist urban scholars have observed that social reproduction labour is not only gendered but also racialized and rendered invisible through normalized patriarchal and (neo)colonial relations (Federici, 2014). Fraser (2017, 22) posits that the “crisis of care” can be understood as the “social-reproductive contradictions of contemporary capitalism,” that is, the unrelenting drive for accumulation under capitalism that causes destabilizations in the processes of social reproduction, or care deficits, resulting in new iterations of social reproduction to resolve these crises. This is exemplified in the urban global South, where state provision of goods and services has been normalized as incomplete, and where the implementation of neoliberal structural adjustment policies in the 1980s saw the privatization of existing services, leaving social reproduction in marginalized communities to be undertaken by women (Miraftab, 2005).

The resulting precarious conditions of everyday life for marginalized women in Southern urban contexts, which include structural inequalities related to access to infrastructure, labour, and wages, gender-based violence, and underrepresentation in governance, are well documented in gender and urbanization research (Chant & McIlwaine, 2016; Razavi, 2020; Tacoli & Satterthwaite, 2013). Moreover, these conditions trouble the notion of understanding everyday urbanism in terms of before-and-after the pandemic, prompting scholars to question what is “unprecedented” about the crisis (Bahn et al., 2020; Tanyildiz et al., 2021). As a transnational network of feminists in the GenUrb project (formally titled, Urbanization and Gender in the Global South: A Transformative Knowledge Network), we conduct research and public education on the gendered dimensions of urbanization in cities in the global South, focusing on the everyday lives of women living in low-income neighbourhoods. At the outset of the pandemic, we needed to open up our on-going research to address the impact of Covid-19 on the lives of GenUrb research participants; we had to consider how Covid-19 affects the ways our participants navigate the temporal and spatial orders of the “pandemic city,” showing how social reproduction and production are intertwined, negotiated and remade.

Five research teams participated in this research across the following city sites: two small sized cities (Cochabamba, Bolivia and Georgetown, Guyana), one medium sized city (Ibadan, Nigeria), and two megacities (Delhi, India, and Shanghai, China), each with their own distinct histories and geographies. These cities are not obvious nodes of comparison, however, the exercise of “thinking across unexpected geographies of comparison” as per Jacobs (2012: 910), may not only lead to unexpected findings related to the processes of urbanization unfolding in the global South (Robinson, 2011), but also to making discoveries through different ways of seeing things. As Yengoyan (2006) notes, there is a vitality to comparison which can lead to us reflecting on our different ways of knowing things. Through an ontological comparison (Dowler & Ranjbar, 2018) of geographies of everyday life, this analysis provides insights into the impact of the Covid-19 pandemic on gendered experiences of everyday urbanisms. We understand everyday urbanisms as the “daily experiences and agency of the urban majority—the working poor—through their cultural practices of living and modes of

relating to each other” (Adeniyi-Ogunyankin & Peake, 2021b, p. 119). This feminist perspective on urbanisms posits the everyday as an analytic centering the multiple narratives of the urban majority facing structural inequalities and exclusions.

The five cities in this study continue to be in different phases of the pandemic, with varying state responses to contain the virus. Shanghai, given its relative proximity to the city of Wuhan where the virus first appeared, enacted a border-control policy, restricting movement in and out of the city, in late January until early April 2020. In Cochabamba, Delhi, Georgetown, and Ibadan, awareness around, and responses to, Covid-19 came later in March 2020. The nature of the regulatory frameworks implemented varied in intensity from strict lockdown(s) and stay-at-home orders, to imposed curfews and social distancing. In some cases, the Covid-19 crisis was seen as secondary to political or economic crises, overshadowing the much less visceral sense of Covid-19. Considering the uneven approaches to manage Covid-19, we nevertheless identify several themes within the women’s stories that link their experiences of space and time during the pandemic. In what follows, we provide an overview of our methodology, followed by an analysis of everyday life in the pandemic city through an examination of the impacts of Covid-19 on social reproduction and production, and the mobilities that enable them. We conclude with an exploration of social reproduction solidarities, consolidating existing and constituting new circuits of care.

Methodology: Transnational feminist care in practice

This section provides not only an overview of our methodological approach to conducting research on the impacts of Covid-19 during the pandemic, but also our reflections on transnational knowledge production within GenUrb. The city research teams themselves consist of transnational or national collaborations between scholars, activists, grassroots organizations, and field assistants based in the global North and South. The teams undertaking research in Shanghai and Delhi comprise partnerships between university professors and field assistants. Local women’s organizations that have longstanding ties to the communities also work in tandem as part of the research teams: *Centro de Estudios y Trabajo de la Mujer* (CETM) in Cochabamba, and Red Thread in Georgetown. The team in Ibadan is partnered with the research-oriented NGO, Centre for Human Development (CHD). While working across multiple differences, we are united in our commitment to a feminist transnational praxis in our research, that involves engaging in reflexivity, accountability, collaboration, knowledge co-creation, and respect.

Prior to Covid-19, each city research team gathered in person, together and separately, to design and undertake research with participants. The onset of Covid-19 forced a pivot in GenUrb’s research as our study could not avoid an examination of how the pandemic was disrupting daily life. Thinking through our own situatedness, we deliberated on how to move forward in conducting research during a pandemic while maintaining a feminist ethics of care (Swarr & Nagar, 2010). This meant engaging with the ethical belief that research should consider the welfare and concerns of research participants and researchers, including accounting for the affective, or emotional, impacts of research on those involved. It also meant considering how power is distributed in the

research process, taking responsibility for research impacts, protecting vulnerable groups, and the exercise of a politics of compassion (Bell, 2014). Conducting research in the context of Covid-19 required us to understand how the women partaking in GenUrb research, already leading precarious lives, were, and still are, dealing with Covid-19. As Davis and Craven (2016) point out, while it is impossible to control research outcomes, it is crucial for feminist research to consider possibilities and challenges that may surface during research. For our study, we were concerned about participants' well-being, and we did not want our requests on their time to place additional burdens of emotional labour upon them. We decided that our priority was to provide financial support to the women and communities for the remainder of the project (including to those who declined participation in the Covid-19 research). GenUrb set aside emergency funds that were distributed in a variety of ways, including the distribution of foodstuffs, items such as masks and sanitizers, and cash. These gestures of care were possible given the relations of trust that had been built up over the duration of the GenUrb research.

Conducting research ethically requires a sensibility to the role of place, to understand the specific and complex circumstances in the research contexts, and how ethical principles can play out differently in each city. Covid-19 posed logistical constraints on our research planning process due to international travel bans and local restrictions on movement. Instead, planning happened over Zoom, phone calls, emails, texts, and WhatsApp messages. GenUrb members collectively drew up a set of questions for the participants to serve as a basis for the Covid-19 comparative analysis. The questions were intended to serve as prompts for weekly diary entries to form first person accounts of everyday life during the pandemic. Yet as we experimented with virtual methods, each city research team had to adapt their approaches. Table 1 provides an overview of the activities we finally employed in each city, a mix of virtual and in-person engagement with research participants. The teams made efforts to minimize in-person contact and socially distance, in compliance with local governmental regulations.

Table 1. Methods employed by each city research team and no. of participants

City	Methods	No. of participants (Total=56)
Cochabamba, Bolivia	Collection of “digital diaries” via WhatsApp including voice memos, texts, and photos; follow-up in-depth interviews via WhatsApp calls.	7
Delhi, India	Multi-sited in-person in-depth interviews with three participants outside the neighbourhood in open spaces. These three participants conducted three further interviews within the neighbourhood.	6
Georgetown, Guyana	In-depth interviews via in-person interviews within and outside of the participants' neighbourhood; follow-up interviews via WhatsApp and direct phone calls.	14
Ibadan, Nigeria	In-depth interviews via WhatsApp, text messages, and phone calls.	22
Shanghai, China	Weekly online diary-writing workshops via WeChat; home visits to collect hand-written diaries.	6

We also scrutinized our use of virtual methods as we faced challenges and often impossibilities in conducting research. The advantage of using virtual methods was the ability to connect with participants despite physical distance and travel bans. The participants did not need to take time out of their day to travel to a meeting point to participate, which can pose difficulties even under “normal” circumstances. Participants had opportunities to develop new skills, for example, the weekly online diary-writing workshops in Shanghai. In Cochabamba, the myriad of response types available to participants, such as voice memos, messages, photographs, and videos, allowed for different types of creative expression. These audiovisual components provided insights into additional dimensions of the women’s everyday lives, such as the sounds of other tasks being completed simultaneously, adding to our understanding of how participants manage the multiple exigencies of time and care.

However, our attempts to employ virtual methods also had downsides. Most of the participants do not have consistent phone or internet connections, and many share their phones with other family members. The research timeline extended due to irregular access to technology and the participants’ increased pressures and care work during the pandemic. One of the participants in Cochabamba withdrew from the project as she moved her family back to her home village where they would have access to subsistence food but would not have cell phone reception. In Shanghai, the number of participants was limited by the WeChat application’s maximum number of allowed users per call. There were also participants without internet access in Shanghai, meaning the team also made home visits to the participants. In Delhi, the team had to forgo the use of virtual methods altogether because participants did not have access to phones or internet. Our experiences are indicative of the reality that any presupposed transition to virtual methods in research ignores the uneven access to technologies among participants in the global South.

For all teams, the use of digital media limited the rapprochement between participant and research, hampering the intimate and affective relationship-building that typically takes place in person. The Ibadan team found it difficult to decode participants’ emotional states from written lines of messages; the use of language, tone, gesticulation, and eye movement was missing. For Red Thread, the Georgetown diaries proved to be inadequate for research purposes, failing to capture a full picture of the nitty-gritty of women’s everyday lives. As Karen de Souza, Red Thread Coordinator observed, “poor people cannot afford to dwell on [writing about] emotions, especially women with children and families, they just have to get on with it” (p.c., October 12, 2021). It was only through in-person interactions with other women—through conversations, laughter, tears—that the participants in Georgetown were able to express their emotions and experiences. Across the different cities, women spoke openly of their struggles under the pandemic measures, but certain topics in some cities, such as gender-based violence, remained off-limits. As our varied encounters show, the use of digital media limited our ability to fully engage participants.

Conducting Covid-19 research is an emotionally charged undertaking, amidst the uncertainty caused by the pandemic, some participants had to withdraw from the project. Still, many participants related their participation as a positive experience, an

opportunity to connect and share, and to speak freely about their situations. The collaborations we have developed and built upon over several years involve time and trust-building. It was these previously established relationships that enabled us to transfer to digitally mediated research and document the underrepresented gendered urban experiences of Covid-19. This research resulted in rich accounts of life under the pandemic measures for women living day-to-day, to which we now turn.

Covid-19, everyday urbanisms, and spatial-temporal shifts at the intersection of production and social reproduction

The regulatory frameworks implemented to address the risks of Covid-19 across the five cities of this study have had significant repercussions in the everyday lives of the research participants. Access to urban space can be characterized by gendered, classed, and racialized distances and proximities (Beebeejaun, 2017; Chant & Datu, 2015; Teeple Hopkins, 2015). Time and space expand and contract in the city in differentiated ways with regards to the processes, relations, and networks that sustain the city—both are mediated by “multiple power formations” (Mollett & Faria, 2018, p. 571). As Abourahme (2011, p. 455) notes:

Cities are retainers of multiple temporalities. They are places where people—even as they meet, connect, exchange, collide with and exploit each other in unprecedented proximities and intensities—can inhabit radically different temporal orders... Urban complexification is marked by the capacity of space to support and constitute paradoxical temporal trajectories.

By tracing the narratives in women’s recounting of their quotidian lives during the Covid-19 pandemic in mid-2020, we find that the pandemic responses have caused spatial-temporal contractions and expansions that have deepened existing gendered and racialized exclusions across cities. Below we focus on this analysis bringing to light the repercussions of Covid-19 pandemic on mobilities, paid work and how women organized and enacted social reproduction solidarities.

Urban mobilities: ‘We used to go anywhere with freedom’

Stay-at-home orders, curfews, lockdown, hand washing, masking, and social distancing rules: the various responses to containing the transmission of Covid-19 have largely focused on the restriction of movement. People were restricted to local areas, city zones, neighbourhoods, and their households. A once hectic day that involved traversing the city, making several stops, whether picking up and dropping off children at school, doing groceries, and working, now consisted of staying at “home-home-home,” as Babita from Delhi explains:

We used to go anywhere with freedom... Whether it’s a market or it’s my friend’s place or my relative’s place. Now we are confined in a closed room. So, it feels like it’s only inside home-home-home. Then there is tension in the mind as well.

Babita equates confinement to the loss of freedom which takes a mental toll. The time spent at home has expanded exponentially. Women’s spatiality has contracted and been reduced to the household, which at once has stretched to serve all purposes normally

enacted through city spaces. At the same time, for our research participants, circulation within the city remained a necessity for production and social reproduction work. It is well documented that women move through urban space in distinct ways, as infrastructure design and transport form spaces of discrimination and gender-based violence (Chant & McIlwaine 2016; Moser 2016). The onset of Covid-19 and imposed regulations led to further spatial-temporal contractions and expansions that decreased mobility while increasing social reproduction responsibilities, mental health concerns, and threats of racial and gender-based violence. The first reported case of Covid-19 in Georgetown was early March 2020, but an official curfew of 6pm to 6am was only instated in April 2020, by which time the impetus to stay home had elapsed. Curfews would vary across different neighbourhoods, and although schools closed, shops remained open, and there was no mask enforcement. The reduction of passengers on public transportation needed to maintain social distance depended on the conviction of each driver:

I does go out, but not everyday. I does go out to buy baby stuffs. Prices en increase where I does shop. I travel in bus to go and I pay the same [0.50 USD] but they don't practice this social distancing and I tell one of them I gon mek a report fuh he at Brickdam [police station]. I's tell them I got a one year old and duh is me fuss one. Me en enjoy it yet, and if they want dead that is them. Don't put nobody next to me. One time I went in front—I don't go at the back because the back is where they does pack up. I go in front. He want put one next to me, in front, and she en wearing a mask, neither he. So when the bus reach Camp Street I jump out. (Alicia, Georgetown)

Alicia is forced to weigh the risk of infection against the longer time she will need to do her shopping, tied to her new motherhood responsibilities. The time women can spend outside of the house has been severely curtailed, yet simultaneously, requires more of their time: waiting for infrequent public transportation, increased walking distances, longer queues to access banks other services, as well as thinking about and taking precautions to protect oneself against the virus. In her diary, H Ayi, a grandmother from a *Gongren Xincun* (工人新村), a Workers' New Village in the centre of Shanghai, illustrates how the pandemic has changed her daily life:

The sudden epidemic outbreak has disrupted the normal pace of life and now we must stay at home, wear a mask when going out, and wash our hands frequently. But you [also] have to eat every day. . . During the epidemic, we went out shopping for enough food for 2-3 days. . . What vegetable to buy? You really need to use your brain! The routine when going back home is: change your shoes; wash your hands repeatedly with hand sanitizer; change your coat and pants (on the balcony); wash your hands with hand sanitizer.

H Ayi has an entirely new routine of changing in and out of clothing and sanitizing on the balcony to protect those in her house from the virus—a new routine that is shaping habits, concerns, and notably, her “normal” pace of life.

Temporal and spatial exclusions were compounded with threats of violence in cities where restrictions on movement were heavily enforced by police. In Ibadan, being outside beyond curfew resulted in extortion and heightened police brutality that added to the participants' ability to move freely in the city. In Delhi, the pandemic was

politicized since the city had been deeply polarized in the wake of the contested Citizenship Amendment Act¹ and a series of events of horrific communal violence following the state elections. The violence preceding the pandemic escalated the coronavirus response. Research participants recounted how Muslim households in the community became targets of violence in these riots. The country-wide shutdown also prompted an urban migrant crisis as an estimated 10 million migrant workers attempted to return to their villages amidst suspended transportation (Sabha et al., n.d.). The mass movement of urban workers returning to their villages represents one of the many lasting urban-rural linkages.

In Bolivia, the coronavirus was also politicized, arriving on the heels of a highly controversial and contested election, followed by an alleged coup, and installation of a right-wing interim government.² Characterized by a highly policed curfew, arrests, and fines, the pandemic was used by the interim government as a convenient excuse to postpone urgent re-elections. The response by *Movimiento al socialismo* (Movement toward socialism—MAS) supporters involved blockading routes transporting medical equipment. Carmela, a vendor in Cochabamba of Quechua origins, feared reproach and discrimination, and did not leave her house wearing her blue *pollera*. She believed wearing her traditional dress, in the colour of the MAS political party, would doubly make her a target for state violence. Carmela's fear of racialized violence, under the guise of the enforcement of Covid-19 regulations, altered how she accessed and embodied urban spaces. The “genderscapes of hate” (Datta, 2016) that women learn to navigate in their everyday lives became spaces of heightened prejudice and violence, particularly for racialized bodies that form the backbone of invisibilized labour in cities (Esguerra Muelle et al., 2021). The implications of these altered spatialities and temporalities of mobility have been the additional burden of care and time, the toll on mental health, and the heightened risk of violence for women.

Work: ‘Everybody is managing’

The immediate impact of the regulations on mobility of initial Covid-19 measures was the retraction of employment, pushing women living on daily wages further into precarity and complicating their care duties. Women have also been disproportionately hit by Covid-19 work losses as they make up the highest percentage of informal workers in these Southern cities, at higher risk of job insecurity with few to no state or institutional support or benefits. They are more likely than men to be employed in the informal sector, or in occupations that place them at the forefront of the pandemic, and at great risk of exposure to the virus. Simultaneously, they are also spending more time caring for the physical and mental health of family members affected by Covid-19.

With little to no governmental aid, and insufficient personal savings, the sudden halt in income had the largest bearing on women's daily sustenance. In her simple statement “everybody is managing,” Salewa in Ibadan captures the feeling that everyone is doing their best simply to survive in the pandemic city:

Everybody is managing . . . for instance maybe one used to eat meat before . . . there is no meat again . . . maybe one used to eat three times daily . . . that person too have known that there is none again . . . there is a difference in the way we eat.

In every city of this study, food prices inflated during the first months of the pandemic, impacting women with the responsibility for coordinating families meals (Woodman & Cook, 2019). Domestic workers in Delhi not only lost their income source, but also the portions of leftover food they would typically take home from work to supplement their families' diets. As a result of these changes in work and food influx, participants in the study, like Salewa in Ibadan mentions, would sacrifice their own food intake. The prices for necessities, such as masks, disinfectants, and medicine also skyrocketed, reaffirming for women in Georgetown and Cochabamba the importance of bush remedies or traditional treatments that involved blends of medicinal herbs and roots known to strengthen immune systems.

Many women in our study whose movements were restricted during the lockdown period turned their homes into sites of production to earn income. Feminist literature points to a history of the use of domestic spaces as both the sites of social reproduction and of production (Esguerra Muelle, 2021; Mullings 2005). During the pandemic this time-tested strategy presented additional challenges for women. For women already engaged in these economic activities at home prior to the pandemic, the intensity of this labour increased. In Cochabamba, some women used their yards to grow vegetables for sustenance and to sell the surplus to their neighbours. This saved women money in purchasing vegetables yet preparing a home-cooked meal with home-grown vegetables also requires considerable time and effort. Other women in Cochabamba turned their homes into de-facto tailor shops, receiving clothes to mend or make. This blurring of the site of production and social reproduction occurred while women also faced an increased burden of care duties. To note, some women were unable to earn income by working from home as demands in local and international markets stalled under Covid-19 (Alemezzadri, 2020). For example, the women in Delhi who worked as seamstresses from their homes did not receive any orders during the lockdown. Experiencing the ebbing of the zone of production and expansion of care work led to distress and anxiety among such informal, home-based workers.

A few women in our study in Georgetown were able to continue to work from home. For instance, Melissa was able to retain her job as a customer service representative from home, which entailed answering phone calls from 8:30am-5:00pm. Citing people's proximity to their kitchens, her company reduced lunch breaks from one hour to a half hour. Melissa described the struggle of working and keeping the household noise to a minimum, cognizant of possible repercussions from her employer and the imposition on other household members:

The calls come in and you have to answer the call the background must not be like spot silent, but limited amount of noise meaning, you can't have persons, you can't have noise, you can't talk too hard you got to just be on your p's and q's, everything so. Everybody in the house now they walking on egg shells because of me.

Melissa could only manage working from home as her sister, who lives with her, was able to care for her infant child while she was on calls. Social distance constraints have meant that other typical forms of childcare, either by neighbours, friends, or family members living in separate houses, ceased. The movement and displacement of workers

is a key process to resolve capitalist crisis (Miraftab, 2016), and for many women in Cochabamba, husbands or partners moved far from home for employment opportunities. This shifted all heightened care responsibilities onto the women, and placed additional constraints on their time. During lockdown and curfew, women across the five cities have had to take on more care work with caring for live-in relatives, especially older family members, and minding children while taking charge of their education. Taking care of children and keeping them indoors was difficult as people were confined to small living spaces. Many women in this study had the near-impossible task of simultaneous work and childcare from small physical spaces that now contained most all life-making activities.

However, women's experiences of spatialities vary, and not all women were housebound during quarantine; those employed as essential workers faced different kinds of difficulties. Keisha continued commuting to her job as a security guard in Georgetown. She arrived at work via the company bus, where social distancing was not practiced, nor were staff provided with adequate PPE. She commented that even the bus driver hung his mask from the rear-view mirror. When restrictions lightened or lifted in cities, women had to weigh their options between earning and the risk of contracting Covid-19. Rosa, a vendor who lives on the outskirts of Cochabamba, recounts her week during the so-called dynamic quarantine, when normal activities resumed, to an extent:

On Monday, I went to the river to wash clothes because this next week we are going into strict quarantine, so, for that reason, I was getting prepared. On Tuesday, I went to Punata [neighbouring town] to sell as usual, always using [PPE], taking good care of myself. On Wednesday, I went to Cochabamba, again, so as not to lose my stall. No matter what, you have to go out. On Thursday, I was knitting all day. On Friday, I went to Cochabamba to sell, and in the afternoon, I went to the hospital to sell as well. And that's how it was...and on Friday, I bought everything for this week, so that nothing would be missing, especially food, because next week there will be quarantine.

Despite the risk of infection, and potential police brutality, Rosa describes how she diligently returned to her stall in the marketplace weekly or else she would lose her trading spot. Given the nature of the regulations that alternated between a week of complete lockdown and a week of limited circulation, Rosa's two-week earning period was compressed into one as she had to spend more time selling to compensate for the week of lockdown.

Together, the loss of income or increased working hours, and the pressures of social reproduction work have impacted upon the mental well-being of many participants. Women worried about their families' health, their children's futures, and about their elderly relatives they could not tend to under quarantine circumstances. The opportunities to release stress were curtailed because of reduced access to space. In the Delhi neighbourhood, the communal place—the outdoor stairs—where women would gather to share and laugh became prohibited spaces. The typical networks of support and friendship that take form outside of the home were hindered during quarantine.

Participants also worried about the increase in gender-based violence in the city. Yetunde in Ibadan explains:

It is too much... that it is this Covid-19 period that made thing to be....it wasn't as

much as this before...but it is now much...there was one [sexual assault] that happened maybe three days or so ago...it was within this week ...like two people within this week...may God have mercy on us...

The contraction of space and the extension of time spent within the household has made women more vulnerable to domestic violence. Despite the dearth of statistical data on intimate partner violence (Kabeer et al., 2021), several reports have recorded higher rates of unwanted pregnancies and increases in the number of women experiencing domestic violence or more intensified violence during quarantine (UN Women, 2020). There were fewer ways to report violence, as many sexual assault and domestic violence centres were forced to close, and not all women had the means to call organizations' hotlines. W Ayi who lives in Shanghai with her daughter and husband has been in a situation of domestic violence for years. During lockdown, the spousal abuse intensified to such a point that her daughter bought her a train ticket and convinced her to return to her hometown. W Ayi was able to escape, thanks to her daughter and to enduring ties to her hometown. However, this is not a possibility for all abuse victims and many women stay in dangerous domestic situations due to their economic dependence on their partners.

Economic dependence is complicated by the fact that economic recovery following lockdown has been uneven for women. Following the “unlock” in Delhi, many domestic workers have not been rehired. For some women in the Ibadan study, reduced wages have not returned to pre-pandemic levels as companies use the losses accrued during the pandemic to justify maintaining lower wages. In Georgetown, several factories that shut down during the pandemic have not reopened, eliminating key selling points for women street vendors. These accounts signal the shifting temporalities and spatialities for women during the pandemic, placing women facing structural inequalities into further economic uncertainty.

Social reproduction solidarities

When I help our community, then their sad and helpless faces become happy and charged. Then I automatically get charged and full of strength by thinking that we have done something good for others. (Lata, Delhi)

In the face of the compounded hardships detailed above, women have been organizing to alleviate the worst impacts of the pandemic. In times of crisis, women may have no other resources to draw upon except familial care, friendship, and community networks (Meliou, 2020). Feminist engagements with care demonstrate how social reproduction work is intertwined with inequalities, but also how care is mobilized by individuals and groups as survival strategies (Hobart & Kneese, 2020). In the absence of state sponsored programs and subsidies, existing bonds and old traditions of reciprocity demonstrate long histories of solidarity that persist. During the pandemic, for some women participants, these networks solidified but we also observed the emergence of new circuits of care, or social reproduction solidarities. These relate to the ways that care circulates and is exchanged across different scales, through physical care work, financial and affective support in reciprocal flows that “re-configur[e] relations of social reproduction across multiple distances and temporal rhythms” (Dorow & Mandizadza, 2018, p. 1242). Despite the restrictions on gathering and limited forms of association during the pandemic, women across the five cities nevertheless engaged in exchanges of

care by drawing upon networks of family, friendship, and community. Through international flows of care were important, proximity proved an essential factor in forging new relationships of solidarity in women's everyday lives, demonstrating that despite the isolating nature of Covid-19 restrictions, the pandemic has reinforced social bonds.

Local and international remittances provided important relief in the first months of the pandemic when borrowing money and buying basic needs on credit became commonplace. Lola in Ibadan explains the significance of remittances and the act of giving:

Where my shop is we have two FM [radio] stations and see the way they are helping people out. Some people from abroad and things like that, giving them money to make a living... Thank God that we are able to bring something in my local church to help the people out. I have widows around me. Even in my church area the little that comes I have to share it out. No matter what because when you see them you'll pity them and you will long even that the little you have, you will be able to.

There are complicated emotions tied to these acts of giving and receiving, as participants conveyed that they felt badly could not assist others. They also struggled to reach out for help because they knew other people were also trying to survive. In any case, remittances slowed as the pandemic persisted, but places of worship remained important spaces to seek and provide aid and find solace.

There has also been a resurgence of old traditions of mutual aid. In Cochabamba, the practice of *olla común* (common pot) re-emerged across the city to meet the basic need for food. This practice involves bringing and cooking food together in a common pot. The *olla común* varies in scale, from larger community kitchens that service entire neighbourhoods, to smaller gestures of care when, for example, two sisters exchange ingredients like potatoes and rice to make a complete meal for their families.

In the Workers' New Villages in Shanghai, a volunteer-run food canteen specifically designed for elderly residents became a lifeline for many community residents and personified the spirit of Chinese socialist collectivism, *guanxi* (social connectivity). Through the food canteen, Y Ayi was able to source affordable food and everyday necessities for her family; she did not own a smartphone or know how to navigate the online food ordering system that was encouraged by the state. Contrary to Y Ayi, her daughter was more adept at navigating new forms of social benefits, as she sought out discounts and point systems available at shopping centres, designed to entice shoppers to use the new automated payment modes. These new technological innovations are provided by private capital in contrast to the socialist traditions and infrastructures in the Workers' New Village that centre life-sustaining practices.

Our research also reveals that new solidarities based on necessity and proximity are being forged during the pandemic. In Delhi, as people were mandated to stay indoors, water consumption increased significantly. Women prioritized water for their children

and other household members to the detriment of their own basic sanitation needs. For example, they reduced their own water consumption by skipping baths and discarding clothing stained by period blood. In this neighbourhood in Delhi, even though the water infrastructure is relatively new, water distribution is uneven as the water pressure decreases as it travels further along the laneways. The women came together to devise a water sharing scheme providing every household one bucket of water filled from the first house in the lane with the highest water pressure. This led to a more even neighbourhood water distribution and minimized water related conflicts.

New forms of solidarity also emerged in this Delhi locality between the women tenants and the wives of landlords. For example, agreements on rent waivers were negotiated between the women and their landladies, who then convinced their husbands (the landlords) to honour the arrangements. Further, when the tenants ran out of gas to cook, the landladies would often allow the tenants to cook on their stoves. Pooling resources among neighbours, tenants and landlords, presented new forms of solidarity that emerged during the pandemic due to the close proximity of networks. As H Ayi in Shanghai relates in her diary, proximity was an important factor for women's support networks:

My neighbour who lives alone came to me. . . and said: "You are a member of the Party branch of our community and the group leader of the Party. Could you come to my home often to chat with me so that I don't feel so lonely? Some of my children have heart disease and some are seriously ill. They all have grandchildren to take care of, so I have to ask you." I don't know whether to laugh or cry.

H Ayi is herself recovering from cancer, yet, she ensured that her elderly neighbour, whose family members were unable to provide her care, would receive visits from people in the community. Across cities, these everyday practices demonstrate shifting temporalities extending beyond market-based practices, such as collective food-sharing practices, shaped by the changes in relationships to space that facilitated a commonality of care work that has been essential to survival during—and prior to—the pandemic. The resurgence of care and mutual aid involving innovative and collective reciprocal efforts outside of state or capital (Ho & Maddrell, 2021; Maddrell 2020; Moraes et al., 2020) holds the possibility of creating caring cities that visibilize social reproduction work (Williams, 2020). Celebrating the transformative potential of "caring geographies of togetherness" (Springer, 2020, p. 114) must be met with recognition and valuing of the gendered nature of social reproduction.

Conclusion

At the time of writing, the five cities in this study are experiencing divergent stages of the pandemic under rapidly changing conditions. Our understanding of the impacts of the pandemic is on-going as the waves of Covid-19 oscillate and devastate in real time, leading to questions around praxis and our role as feminist scholars in GenUrb. Just as the disease permeates unevenly so does the recovery and vaccine rollout, meaning the more privileged among us will be vaccinated and potentially resume travel, whereas the research participants may not have access to the vaccine, once again reinforcing hierarchies in the research project. Amidst the uncertainty, exhaustion, death, and grief,

we carry out research to share the plight of women and how their burdens of pre-existing inequalities and unjust urbanization are heightened during the pandemic. We also continue our commitment to engage in supporting the participants as they approach future waves of the pandemic.

The existing conditions of precarity in cities troubles the before-and-after terminology of Covid-19, yet the crisis has magnified how unpaid and low-paid social reproduction work, primarily undertaken by women, crucially supports urban economic and social life. The Southern cities in this comparative analysis have striking differences, yet paying attention to the processes of social reproduction at the household and collective scale in the narratives of the women's everyday lives reveals the different ways that temporalities and spatialities are being reshaped. In the pandemic city the interruption of temporal and spatial formations disrupts the social reproduction work taking place and has multiplied hardships for women facing structural inequalities. Measures to restrict movement have increased the time and efforts required to undertake essential activities, the retraction of employment has increased care work, and mental health is strained as women and their families navigate the pandemic. In contexts of political conflict, the pandemic was seized upon to enact violence, deepening landscapes of urban insecurity. However, the women's accounts also reveal that amidst the challenges and destabilized social reproduction processes, they organized circulations of care via traditional networks of reciprocity and have formed new social reproduction solidarities.

Notes

1. The Indian government enacted the Citizenship Amendment Act and associated proposals in December 2019. These were contested for their discrimination against Muslims and against poor Indians unable to produce the required documents to obtain citizenship, spurring a wave of protests that were met with forceful police intervention.
2. In the Bolivian federal elections in November 2019, incumbent president Evo Morales (MAS) ran for a fourth mandate, despite the referendum "No" result to extend the constitutional terms of the mandate. On election night, after an exceptional interruption in the vote counting system, Morales took the lead to win. This prompted 21 days of protests, resulting in police and military mutiny and Morales' exile. The self-appointed presidency of Añez and a right-wing government incited further protests and strikes met with violent military intervention.

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