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**HOW TO CITE:**  
Reddy V. More eyes on COVID-19:  
Perspectives from Sociology:  
The social life of a virus. *S Afr J  
Sci.* 2020;116(7/8), Art. #8496,  
1 page. [https://doi.org/10.17159/  
sajs.2020/8496](https://doi.org/10.17159/sajs.2020/8496)

**ARTICLE INCLUDES:**  
 Peer review  
 Supplementary material

**KEYWORDS:**  
COVID-19, South Africa, social  
problems, social life, social  
epidemics, sociology

**PUBLISHED:**  
29 July 2020

## More eyes on COVID-19: Perspectives from Sociology

### The social life of a virus

This brief provides a sociological perspective which is the study of how individuals behave in groups and how human behaviour is shaped by groups. The fact that our societies are complex and are made up of a collection of individual people, means that there is a certain connection between the structures and social problems of society and the behaviour of the people who shape it. Human behaviour is complex, far from robotic, but indeed malleable in the way we can respond to social realities and engage with the structures and social problems facing us, such as this COVID-19 pandemic.

The government-imposed 'self-isolation' has certainly activated a range of perspectives that go beyond the biomedical. There is no single story that fully captures the diverse meanings this virus represents. However, the social dimensions of the virus open up an archive of insights related to the physical sense of our experience as social beings. At a personal and collective level, self-isolation – a dominant theme in current language – is not merely about social distancing as a public health measure. A shutdown, with lockdowns and shelter-at-home orders, closed borders and blocked airspace implies a form of self-imposed exile. These tactics highlight the social, and, by forcing us to physically distance from each other, will have implications for our location and our relationships in the world. COVID-19 has created much dis-ease not simply about *what* we know, but also about *how* we come to know our diverse spaces as workers, students, parents, activists, professionals, etc. If, as sociology teaches us, our social world depends on our relationships with individuals and groups, which includes the freedom to move and interact with one another, then we are undoubtedly also living in precarious times. The regulations in place direct us to disengage (and by extension to be disembodied) from our social environments brought about by a disease that will be long and lasting.

The last century has not seen a disease spread (locally and globally) at this rate or on this scale. It is as hasty and impatient as humans are. Self-isolation and self-quarantine limit people in volume and area while time also characterises the incubation period of infections. Livelihoods, communities, small business enterprises, and families have been disrupted in ways that have changed the fabric and texture of our social lives, with social ills such as crime also a factor. As a first pandemic of zoonotic origin since 2013, COVID-19 marshals a history and social context of similar diseases such as H5N1 avian influenza in 1997; Severe Acute Respiratory Syndrome (SARS) in 2002; a H1N1 variant in 2009/2010; Middle East Respiratory Syndrome (MERS) in 2012; and the H7N9 bird flu in 2013. While biomedical science remains at the coalface of the management, treatment, and public health efforts to curb infections, there are indeed other views that matter. I am reminded of the Croatian-born historian of life sciences Mirko Draž en Grmek (1924–2000) who does not deny the reality of individual illnesses but instead emphasises the 'cultural fabrication' of disease as a concept. The point here is that we cannot ignore the social and cultural implications of *how* a disease comes to be, *how* it is shaped and *how* it impacts people as individuals and in groups.

For these reasons, COVID-19 is not just purely a medical pandemic – it is also a social phenomenon whose uncertainty continues to disrupt our social order and risks shaping our social and public imagination. The virus has given governments licence to organise their security apparatus to monitor, shape and modify human mobility and behaviour, including subjecting people to surveillance. The virus has forced international bodies to pursue 'disease diplomacy' that impacts the global health security regime. And it compels us to challenge how we integrate the dis-ease into our social, economic, political and creative 'culture' and histories. The irony is that 'the social life of a virus' has more to tell us beyond the science of the virus, viz. its anatomy, taxonomy and architecture, but also about the virus' impact on human and social costs, including life and its linked meaning, death. The latter connects to an argument made by a prominent Johannesburg-based philosopher, Achille Mbembe, in his philosophical argument *Necropolitics* where he motivates that the political order also increasingly reconstructs itself as a form of organisation for death that results from war and other forms of violence, including in this argument, disease.

This virus and its meanings therefore move us to bigger questions beyond epidemiology. It directs us to query our existence and our very being during this time. It prompts us to ask deeper questions about ways of knowing and our sense of the world we are in. Because we are social beings, our current mental state and our divided emotions trigger our core. More than that, the virus' socio-economic impact is a big unknown as it is surely to impact the local fiscus and the global economy in unprecedented ways. For instance, how is the outbreak felt differently across lines of race, class, gender, age, disability and geography? How has it changed our social lives and relations with one another beyond families, communities and the wider world? How can the decisions South Africans make today inform our responses to the next pandemic? There are no easy answers to these questions as they warrant deeper investigation. Beyond compromising health systems, economic processes, and the glaring challenges of testing and treatment capacity, this pandemic has also manifested stigma and racist ideologies directed, for example, toward China (in relation to the outbreak's supposed origin in a Wuhan wet market), inflaming tension between China and the USA.

Given that there is no single story, we are only scratching the surface of what is a larger project to delve deeper into more sustained arguments about the virus. It is clear that the social life of COVID-19 is arresting inasmuch as it is assaulting. We are learning to renegotiate our world and appreciate parallels with other interconnected social epidemics that are prevalent – poverty, inequality, violence, climate change, the burden of care to name a few. In its social dimensions the epidemic reveals forms of violence, resistance, resilience and new ways of realigning to a new normal.

In spite of the challenges, COVID-19 has also emboldened opportunities to stave off the crisis in a recognition of our intricate human and emotive connections to the social in how we heal, show solidarity, and how we mourn and grieve. As a social species we are locked in the midst of a struggle to regain our social health, an innate human desire to reconnect with life, and with the social groups that give meaning to our identification and relationships in the world. The social life of a virus tells us, sociologically speaking, as of every science, that there are hidden meanings to be revealed and studied.