

## Commentary

# Putting the world-historical perspective at the center of the social sciences in the post-pandemic world

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The pathogen that has almost completely paralyzed societies the world over had an innocuous beginning. On January 7 2020, researchers in China announced that they had identified a new coronavirus. The tone of the next day's *New York Times* piece reporting on this was nonchalant at best. Rather than pointing towards the potential damage that this virus could cause, it directed our attention to the threats caused by MERS and the SARS.<sup>1</sup> About a month later, on February 11, when the disease acquired its own name, COVID-19, it had already begun to wreak havoc in Asia, and was only a few days away from causing the first death in Europe and only about two weeks away from reaching out to Latin America and Africa. Another month later, on March 12, the World Health Organization called it a pandemic, recognizing the worldwide prevalence of the new coronavirus.

As the time of the writing this commentary in late April, we are still in the thick of this pandemic. The global situation continues to be epidemiologically, economically, sociologically, and politically volatile. Despite the fact that experts in different fields and various global agencies had predicted with absolute certainty that we were going to confront epidemics and pandemics of this kind, and that these predictions were popularized by people like Bill Gates, states and societies were still caught off guard and unprepared. We ended up finding ourselves in an environment of chaos and uncertainty. We do not know when and how the spread of the virus will finally be under control or whether it will come back in future waves. We also do not know what the global economy will look like in the post-COVID-19 world, or how

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1 *New York Times*, "China Identifies New Virus Causing Pneumonia-like Illness," January 8, 2020, [www.nytimes.com/2020/01/08/health/china-pneumonia-outbreak-virus.html](http://www.nytimes.com/2020/01/08/health/china-pneumonia-outbreak-virus.html).

deep and long the economic crisis will be. How long will it take for people to start going to museums and restaurants, or start travelling internationally? Will there be new social conventions that organize work and leisure? What will be the new balance between democratic rights and liberties on the one hand and social and political control measures and mechanisms on the other? What will happen to the already prevailing populist and authoritarian regimes around the world? Are the social sciences ready and prepared to understand the world under the impact of this virus, and more importantly do we have an appropriate framework to understand and shape the world in its aftermath?

In this commentary, we would like to raise some issues on the theoretical and analytical capabilities of the social sciences in getting to grips with the consequences of this pandemic. Although there are a host of questions that it raises – as we list above – we want to focus on two broad issues: What does social and environmental history teach us about contagious diseases and how they have shaped human society? And what can we learn from historical and contemporary social science research on the inequalities generated through the interaction between social forces and climatic and pathogenic factors?

Decades ago, Fernand Braudel invited us to take the non-human structures of the world into account as he was describing the human, in his often quoted statement, as “a prisoner of climate, of vegetation, of the animal population, of a particular agriculture, of a whole slowly established balance from which he cannot escape without the risk of everything being upset.”<sup>2</sup> He was not the first to tell us to take seriously the delicate balance we humans have established with the plants, animals, and pathogens with whom we live and the elements that ensure our survival. He was trailing Lucien Febvre and March Bloch of the early twentieth century and even the likes of Pierre Poivre and Alexander von Humboldt of the eighteenth century.<sup>3</sup>

Remembering Braudel’s and others’ reminders about the nature- and geography-bounded character of human actions and recognizing the agency of non-human elements in the making of the modern world are very important in the present context. Broadly speaking, there seem to be two paths that can be followed. First, it is possible to focus on the ways in which humans have been unsettling and refashioning (or destroying) the delicate balance of nature of which they are a part. This has led to the emergence of the fields of environmental history, political ecology, and environmental studies, among others. The scholarly pursuit along this path has acquired a central role in shaping our understanding of the environment in which we live and what we do to it. Nowadays even the world’s largest asset manager is advising that people invest

2 Fernand Braudel, *On History* (Chicago: University of Chicago Press, 1982), 31.

3 Alfred Crosby, “The Past and Present of Environmental History,” *The American Historical Review* 100, no. 4 (1995).

in sustainability.<sup>4</sup> The other path directs us to look for the ways in which geography, plants, animals, and pathogens lead to a decentering of human societies' supremacy in telling their history, their successes, and their failures. This path has remained a marginal approach.

There are many historical episodes where we see examples of how bacteria, viruses, parasites, and other non-human elements interact with human action often in unprecedented ways leading to new social formations and relations. Studies have shown that the historical developments from at least the early modern world onwards have been shaped by epidemics of the plague, smallpox, influenza, and malaria caused by various pathogens. We know that smallpox, measles, influenza, and even the common cold carried by the Europeans wiped out 90 per cent of the indigenous peoples of the Americas and hence made European colonization and domination of the Americas possible. The lands were not devoid of people and virgin but their populations were wiped out. Sugar cane cultivated on Mediterranean islands found a perfect home in the territories that Spanish sailors had stumbled upon that were colonized to give way to sugar plantations. Sugar cane agriculture is labor intensive and this demand triggered the slave trade. Geography, and again the pathogens responsible for the plague that had already depleted European populations in the fourteenth century, the pathogens that killed local populations, and the pathogens that caused malaria to which Africans had already developed at least partial immunity, defined the nature of the Atlantic slave trade and slavery in the Americas. We also know that malaria played a role in the success of the American Revolution, and that the first international agreements and efforts organized towards containing cholera in the early nineteenth century "were the precursors to the League of Nations and United Nations in the twentieth century."<sup>5</sup>

While scholarly knowledge exists on all these things, this knowledge remains at the margins, however large the margins may be for critical studies. They enrich or at best unsettle the ways in which we make sense of our world, yet they fail to make us unthink and reshape our conventional scholarly or popular accounts. The conventional scholarly or popular histories of the "industrial revolution in Britain" do not include smallpox. Did we even remember that on some estimates the Spanish flu killed more people than World War I until two months ago?

From the thirteenth century onwards, pathogens have thrived in Afro-Eurasia as they could travel faster and further on the increasingly denser

4 *New York Times*, "Blackrock C.E.O. Larry Fink: Climate Crisis will Reshape Finance," January 1, 2020, [www.nytimes.com/2020/01/14/business/dealbook/larry-fink-blackrock-climate-change.html](https://www.nytimes.com/2020/01/14/business/dealbook/larry-fink-blackrock-climate-change.html).

5 Jerry H. Bentley, Sanjay Subrahmanyam, and Merry E. Wiesner-Hanks (eds.), *The Cambridge World History Volume 6: The Construction of a Global World, 1400–1800 CE, Part 1: Foundations* (Cambridge: Cambridge University Press, 2015), 69.

and faster trade routes that human societies were building from what Abu Lughod calls “the thirteenth century world system” onwards.<sup>6</sup> More conduits were built for pathogens as new trade routes and port cities emerged as the modern world economy rose and expanded from the fifteenth century onwards. In turn, pathogens at least partly shaped the modern world economy we live in. So far, we have only recognized them as elements of curiosity, things that made our histories more interesting. However, if we are to reflect on the fragility and immanent risks that the humanity faces, not only vis-à-vis the current pandemic but also the possibility of the generation of other novel pathogens as a result of the ongoing human onslaught on nature that scientists have long been warning about, we need to make non-human elements an integral part of our analysis. In other words, this is a vital intellectual and political necessity that will have serious implications that will determine how effectively we are able to respond to social and ecological challenges in the post-pandemic world.

The importance of social analysis which brings together non-human structures that constrain and enable human actions on the one hand, and social formations that generate uneven outcomes for different societies or social groups on the other, has become all the more evident during the COVID-19 pandemic. We want to address the latter aspect in the rest of this commentary.

When it was announced that Prince Charles was diagnosed with COVID-19 in late March 2020, many commented on social media that the virus was “democratic”: anybody could catch it without regard for nationality, social class, or ethnic group. Although it sounded like a cliché, such statements came as a warning that no region of the world and no social group was immune to the new coronavirus. Indeed, this was important, because just a few weeks before that a non-scientific piece of “news” had been circulating in Turkish media (and perhaps in other countries, too) which claimed that, because of their “genetic make-up,” Turks would not be susceptible to the novel coronavirus (that was before any confirmed cases were announced in the country). Medical doctors specializing in infectious diseases quickly responded by saying that “viruses do not discriminate on the basis of ‘race’.” As the pandemic spread across the world in April, it turned out that the statement about the virus being democratic was not so correct, while simultaneously we also came to realize that social class and nationality as well as “race” actually had important roles to play in the patterns of the spread of the disease and the havoc it left behind.

Sociological and historical perspectives on natural disasters, illness, and health have long taught us that while these phenomena may have climatic,

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6 Janet L. Abu-Lughod, *Before European Hegemony: The World System AD 1250–1350* (Oxford: Oxford University Press, 1991).

medical, or biological root causes respectively, they interact with existing social arrangements to produce divergent results on different societies or social groups. With respect to extreme climate events, we see an obvious case of this in the aftermath of Hurricane Katrina which stormed through the Gulf region of the United States in 2005. Because of failures and gaps in hurricane preparedness, rescue efforts, and other public policies, poorer and African American communities were the hardest hit in terms of homelessness and fatalities. Another well-researched case is the Chicago heat wave in 1995, studied by sociologist Eric Klinenberg.<sup>7</sup> Klinenberg explained that the excess mortality from heat was higher among older African Americans compared to all other social groups because of factors such as social isolation and lack of social networks rather than anything else. There is by now a wealth of studies that show disease and suffering are unequally distributed among different social groups in most societies.

Preexisting social arrangements and inequalities may likewise account for the specific patterns of the dispersion of COVID-19. In the United States, reports on the geographical dispersion of coronavirus cases already show that “race” and social class are important variables in the morbidity and mortality from the virus. For instance, in New York City, Chicago, and Detroit, COVID-19 reportedly has a higher toll on African American and Hispanic communities in terms of severe cases and deaths. The reasons are likely to be multiple: preexisting chronic diseases, residential arrangements that make it difficult to maintain “social distance” (which should have been called physical distance), and employment status, that is, whether one is able to work from home or has a job in which her/his exposure to the virus is high, all play a part. In Sweden, where authorities have been criticized for not imposing a lockdown early enough, the mortality ratio from COVID-19 is currently much higher than other Nordic countries. But the mortality rate is also unevenly spread within the population, 25 percent of which has immigrant backgrounds. A disproportionately higher number of COVID-19 fatalities in Sweden are reported to be Somalis, Iraqis, Afghans, and Syrians, who live in densely populated communities, and where several generations may live in the same household.<sup>8</sup>

Social class plays a similar role in the incidence of COVID-19. Working-class neighborhoods often have higher population density, making social distancing difficult, if not impossible. It goes without saying that it is often the

7 Eric Klinenberg, *Heat Wave: A Social Autopsy of Disaster in Chicago* (Chicago: University of Chicago Press, 2015).

8 Hans Bergstrom, “The Grim Truth about the ‘Swedish Model’,” April 17, 2020, *Project Syndicate*, [www.project-syndicate.org/commentary/swedish-coronavirus-no-lockdown-model-proves-lethal-by-hans-bergstrom-2020-04](http://www.project-syndicate.org/commentary/swedish-coronavirus-no-lockdown-model-proves-lethal-by-hans-bergstrom-2020-04).

middle classes whose jobs allow them to stay at or work from home, whereas blue collar workers, especially in sectors such as delivery and sales that are the most vulnerable to exposure to the virus, have to keep on working. But at the same time, some types of work makes laborers more susceptible to chronic illnesses such as lung diseases. Take the case of Zonguldak province in Turkey, where there is a disproportionately high ratio of severe cases and deaths from COVID-19. Coal mining has historically been the biggest employer in Zonguldak, which is also home to several thermic power generators that run on coal.

However, we should not think that the inequalities in the distribution of illness and suffering are only internal to nation states. To the contrary, as the coronavirus pandemic unfolds through the rest of 2020, its epidemiological patterns are very likely to mimic existing global inequalities. We know this from the history of pandemics and epidemics, as discussed above. Based on historical hindsight, we may conjecture that the current pandemic might even deepen global inequalities. In support of the former prediction, consider for instance the incidence of mortality during the Spanish flu pandemic in 1918 and 1919. While it is estimated that around 1 to 3 percent of the world's population was killed by the virus, Mike Davis reminds us that in fact 60 percent of the deaths were in India, in regions "where grain exports to Britain and brutal requisitioning practices coincided with a major drought."<sup>9</sup> For the latter prediction, we may again recall Davis, in his pioneering work in historical political ecology on the El-Niño famines in the last quarter of the nineteenth century in India, China, and Brazil.<sup>10</sup> What turned droughts caused by El-Niño climatic events into very deadly famines was the position of each of these regions in the capitalist world economy. For instance, in India stored grain was exported to Britain rather than being used for famine alleviation, condemning millions of Indians to death from hunger. Davis argues that these famines partly account for the making of the Third World.

Not only historical but contemporary examples from the last several decades also come to mind. Here, malaria may be singled out, not only as a disease of the *longue durée* of human history, as James L. A. Webb, Jr. explains (for instance, the migration of the Bantu-speaking agriculturalists across tropical Africa in the first millennium BCE), as well as of the capitalist world economy,<sup>11</sup> but also as a signal of contemporary global inequalities. In 2018,

9 Mike Davis, "The Coronavirus Crisis Is a Monster Fueled by Capitalism," March 20, 2020, *In These Times*, <https://inthesetimes.com/article/22394/coronavirus-crisis-capitalism-covid-19-monster-mike-davis>.

10 Mike Davis, *Late Victorian Holocausts: El Niño Famines and the Making of the Third World* (London: Verso, 2017).

11 James L. A. Webb, Jr., *Humanity's Burden: A Global History of Malaria* (Cambridge: Cambridge University Press, 2015).

according to the World Health Organization, an estimated 228 million clinical cases of malaria occurred, killing 405,000 people, mostly African children. That malaria is as old as human history, we may grasp. But the fact that it has taken decades for the first vaccine against malaria to reach beyond the stage of clinical trials (2019, to be precise), perhaps should not be explained solely with reference to the strength of the parasite attacking the immune system; we should also pay attention to the unequal structures of power in the capitalist world economy, especially the role of the pharmaceutical industry, which wants to hold on to its patent rights on life-saving drugs and vaccines for some illnesses. A relevant case from recent decades is the history of the global response against HIV, the virus that causes AIDS. In the late 1990s, Big Pharma was reluctant to make antiretroviral drugs available to HIV patients through either lowering their price or allowing the production of generics in developing countries on the grounds of the Agreement on Trade-Related Aspects of Intellectual Property Rights (TRIPS) of the World Trade Organization (WTO). It took sustained pressure from developing countries against the United States and other industrialized nations before things changed in 2001, when the Doha Declaration on TRIPS and Public Health was adopted, obliging the WTO to ease rules for making generic antiretroviral drugs.<sup>12</sup> Taking just the cases of malaria and HIV, the inequalities in availability and access to disease treatment has had a tremendous human cost. Early death from disease shortens average life expectancy in many African countries, also causing shortages in the labor force in agriculture and other sectors, which are much needed for human development. There is a vicious circle here: unequal global power relations exacerbate the morbidity and mortality from disease, and the latter stifles development, further contributing to global inequalities.

Projecting these observations onto the COVID-19 pandemic, we might suspect that the adverse consequences of the disease may well be amplified in developing countries. There are several issues to consider in this respect, especially regarding sub-Saharan Africa and South Asia: the weakness of healthcare systems, lack of access to clean water (hence difficulty of conforming to hygiene requirements), poverty and unemployment, crowded housing conditions and problems of food security. From India to Nigeria, in megalopolises with high population density social distancing can only be a luxury. From Lagos to Mumbai, the choice for people surviving on daily jobs in the informal economy is between poverty and possible hunger due to lockdowns on the one hand, to being on the front

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12 WTO, "Declaration on the TRIPS Agreement and Public Health," November 20, 2001, Doha WTO Ministerial 2001, [www.wto.org/english/thewto\\_e/minist\\_e/min01\\_e/mindecl\\_trips\\_e.htm](http://www.wto.org/english/thewto_e/minist_e/min01_e/mindecl_trips_e.htm).

lines of the contagion due to poverty, undernutrition, chronic diseases, and the impossibility of maintaining social distance on the other.<sup>13</sup>

Notwithstanding the fact that Turkey has a general healthcare and social security system, a comparable remark can be made about Istanbul, where it has already been reported that the hotspots of COVID-19 in a city of sixteen million are districts with high levels of working-class populations and dense building structures. In addition, some of these neighborhoods also have high concentrations of immigrants and refugees living in already crowded and poor-quality units. The commonality between the most vulnerable segments of the “native” working class and immigrants is that both groups rely on precarious and insecure jobs in the informal economy. In the meantime, the stay-at-home advice given to the urban middle classes is not extended to either urban workers or the seasonal agricultural workers who do most of the harvesting in Turkey from spring to fall every year. Tens of thousands of Kurdish and Syrian workers have already started their trek for picking vegetables, fruits, and nuts. The authorities have so far only paid lip service to imposing rules about social distancing during the harvesting season, given that it is difficult to maintain social distance during the road trips in crowded buses and in tent camps for seasonal workers in the agricultural regions.

The available advice for slowing down the spread of COVID-19 – social distancing, sheltering in place, and hygiene – are nearly impossible in many communities in developing countries as well as urban areas of the industrialized nations. As such, these recommendations largely work for the middle classes both in the North and the South, but especially the South. The game changers in the COVID-19 pandemic might be the development of a vaccine to prevent the disease and targeted medicines to cure it. However, as we have tried to explain with respect to past epidemics, it is yet to be seen how equitable the distribution of such remedies to broader populations will be.<sup>14</sup> In conclusion, we need to adopt a world-historical social science perspective that both recognizes the interdependency of the human and non-human elements of historical formations and the patterns of inequalities that such non-human elements (including diseases and climate events) cause for historical and contemporary societies.

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13 Libby George and Katharine Houreld, “Millions Face Hunger as African Cities Impose Coronavirus Lockdowns,” April 16, 2020, *Reuters*, [www.reuters.com/article/us-health-coronavirus-hunger-africa/millions-face-hunger-as-african-cities-impose-coronavirus-lockdowns-idUSKCN21Y14E](http://www.reuters.com/article/us-health-coronavirus-hunger-africa/millions-face-hunger-as-african-cities-impose-coronavirus-lockdowns-idUSKCN21Y14E).

14 Joseph E. Stiglitz, Arjun Jadayev, and Achay Prabhala. “Patents vs. the Pandemic.” April 23, 2020, *Project Syndicate*, [www.project-syndicate.org/commentary/covid19-drugs-and-vaccine-demand-patent-reform-by-joseph-e-stiglitz-et-al-2020-04](http://www.project-syndicate.org/commentary/covid19-drugs-and-vaccine-demand-patent-reform-by-joseph-e-stiglitz-et-al-2020-04).