SCOTT STONINGTON

Data-in-terror: *ad hoc* local epistemologies and social life in crisis

Do criteria for evaluating truth-claims shift in a crisis? As a physician-anthropologist caring for COVID patients in the USA, I have been participant-observing how people make decisions. Strikingly, decisions seem to be simultaneously uncertain and information-intensive. Outside of medicine, many of us isolated at home have been tracking research studies – twitter feeds, newspaper articles, DIY YouTube videos – and synthesising them into models of risk to help us decide whether to go outside or what kind of protective gear to wear.

This mode appears equally true in early COVID clinical medicine. 'We cling to the data we can find', said one of the physicians working in a COVID unit at the hospital where I work, 'and when we have no data, we make our own.' Information, even sloppily obtained or unverified, seems somehow better than none at all. Two weeks into our hospital's COVID crisis, protocols and paradigms seemed to be changing several times a day, assembled and reassembled out of feeds, texts, conversations, emails.

One day, the hot question was whether and which hospital procedures might aerosolise COVID. We learned of a group of engineers who had given various intensities of oxygen to volunteers to measure the aerosols produced. There were low levels from high-flow, so we changed our hospital's protocols to allow its use in normal-pressure rooms, hoping to buy time to transfer crashing patients to ICUs.

Would we have used this source of information before? Unlikely. We were usually slow to change protocols, awaiting clinical trials with outcome data. But in the 'immediate present', p. 346 (Redfield 2005) of COVID, we could not wait. Interestingly, we did not move into a data-free mode; in fact, information remained the nerve impulse for the decision-making muscle. Elsewhere, I have described that decision-making at the edge of death draws less on certainty than on that which can facilitate action (Stonington 2020). Doctors in intensive settings operate like jazz musicians, building temporary explanatory narratives to move things along (Stonington 2020).

This seems broadly true of social life during COVID. To prevent an imagined dark future, we act on projections, and it is easier to build projections from low-fidelity data than from none at all. What are the consequences of a multitude of rapidly assembled *ad hoc* epistemologies? Do they stabilise group behaviour toward effective solutions? Or do they introduce distortions, pendulum swings, overreactions? What is their relationship with affect: do they simply drive terror? Our early COVID moment calls for an inquiry into the effects of unstable, local and improvisational epistemologies on collective social life.

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MARILYN STRATHERN

Underestimation/complacency: two comments on the language of warfare

Warfare is a poor vehicle of expression in the circumstances. Once the enemy is made present, we hardly notice the anthropomorphism; so let's first take anthropomorphism to a certain limit. Second, warlike calls to action conceal inaction; I speak, at the beginning of April 2020, of the UK's lamentable failure to test widely.

Underestimation. We may see coronavirus as an enemy, but it does not see us that way. Amerindian philosophies would not be bothered that Euroamericans don't consider the virus sentient; their focus would be on what a predator reproduces (it makes kin for itself) and thus – Euroamericans would say – turns people into its host. This borrowing from the metaphysics of perspectivism exposes the symmetrical language of warfare. Treating coronavirus like a human enemy radically underestimates its danger – as in its power to spread – as it underestimates just how we make ourselves a danger to one another. Euroamerican tropes of warfare bind the imagination to fear of totalitarianism and defence of political liberties, while downplaying the many means by which the world is laid to waste. Thinking instead of the virus's perspective carries us closer to appreciating its rapacity. So to bring the danger(s) home, let's equivocate between Amerindian and Euroamerican concepts, and see the virus's search for hospitable conditions less as a fight than as an eager colonisation. If that then generates some reversal of viewpoint, perhaps drawing for illumination on how dangerous we are to ourselves (as colonisers) will encourage the critical leap towards harnessing the present global predicament to mitigate and accommodate – hardly

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