Chapter 3: Feminist Recovery

Immediately after the outbreak of the novel coronavirus and the introduction of measures to prevent the virus from spreading, many new hashtags began to appear online: #stopspreadingthecoronavirus #washyourhands #covercoughs andsneezes #stayathome #wearamask #becalmbesafe #besafe #keeping-peoplesafe #stayhealthy #keepadistance #socialdistancing #quarantinecare #protectothers #wereallinthistogether #takecareofyourself #takecareofothers #takecareoftheworld. Such hashtags show how policy measures and public health rules like self-isolating, physical distancing, wearing a mask or washing one's hands, as advised by the World Health Organization and implemented by governments around the world, created new social realities, which were immediately reflected online. Rules translated into new behaviors and routines, as people had to change habits and adopt new ones. A number of hashtags speak of responsibility, mutuality, and of protecting others. There was also the claim to pandemic solidarity based on the understanding of all of us being in this together. It was well understood that a pandemic, with the Greek word *pan* meaning all and *demos* meaning people, involves all people on their shared planet and requires societies around the world to develop new collective social practices globally. States and their societies, which make up the planetary society, of course responded in highly differing ways to these measures in terms of politics, policy, economy, and stratifications within the societies living within the borders of nation states.

While the World Health Organization communicated the physical distancing rules by means of appealing to a military ethos as they encouraged people to "be a hero and break the chain of Covid-19 transmission by practicing social distancing", such militarization was conspicuously absent from the translation of the new rules into the digital language of hashtags which emerged in March and April of 2020.[1] Metaphors of war, as they were mobilized in public political oratory, were not much used in these new pandemic hashtags. Quite the

contrary: in the online language, care was omnipresent. Care was being understood at the different and interrelated scales of the individual, the social, and the entire world: takecareofyourself, takecareofothers, and takecareoftheworld. Even in many of the personal e-mails along with other digital messages which I received from colleagues as well as from family members and friends who live in different parts of the world, such expressions of care and concern for each other's safety and protection formed a new and central part of the communication during the first months of the pandemic. Practically overnight, this new practice had formed, and e-mails I received right after the global virus outbreak began with sentences like the following: 'Hoping that you and your loved ones are safe', or ended with 'Stay safe and take best of care.' There seemed to have been a mutually understood reciprocity of the need for care and a real desire to know how others were living and surviving in the pandemic catastrophe. New practices for giving answers to such questions had to be found in order to share, but not to overshare; in order to appreciate the other's concern, but not overburden them with one's own worries, fears, and sadness. It was also necessary to practice new ways of expressing empathy and sorrow when learning that someone had caught the virus, had fallen seriously ill, was having a hard time recovering, had family members whom they could not visit in hospitals or nursing homes, or was grieving loved ones they had lost to the pandemic or during the pandemic. I began to understand how extensively expressions of emotional caring are still connected to physical presence and closeness to others, with facial expressions, gestures, and moments shared in silence often taking the place of words. In e-mails and other digital exchanges with my friends, colleagues, and collaborators, there was also, maybe even paradoxically, an expression of hope for more care, precisely because of the rising awareness that the catastrophe of the global pandemic was Man-made. Massive urbanization and deforestation led to increased human exposure to new and deadly viruses. This specific responsibility for the pandemic catastrophe—and that catastrophe arises from the historical situation in which the capitalist economy has taken command of the planet as a resource—, for what political scientists Ulrich Brand and Markus Wissen call the "imperial mode of living", gave rise, perhaps counter-intuitively and paradoxically, to the hope that care, for the planet and all its living and non-living beings, would finally be placed where it belongs: at the center of politics and economies.[2] There was hope that the "new awareness that each of us belongs to the whole and depends on it" in Rebecca Solnit's words would finally lead to the recognition of interconnectedness and interdependence as the ground for organizing responsibility and mutuality.[3]

There was hope for change in real time, not abstractly, in and for the future, but in the here and now. There was feminist hope for recovery and what I have suggested seeing as a call for building a new "international global care order".[4]

This chapter focuses on recovery, identified as a pandemic keyword and, in my interpretation, also a keymetaphor. Approaching the public imaginaries of care in pandemic times as they were articulated through keywords, my feminist cultural analysis places recovery adjacent to war and the frontline. War, frontline, and feminist recovery as new political terminology emerged in response to the pandemic lockdown conditions in March and April of 2020. While war and the frontline articulate the militarization and forcible conscription of care, the meaning of recovery is closely associated with processes of healing, mending, and getting better. Feminist recovery is a novel concept that was introduced in response to the pandemic catastrophe or, more precisely, in response to how hegemonic politics and economies led to a new regime of care dictated by militarized essentialism and care heroism. Feminist recovery was elevated to policy level in feminist recovery plans, which this chapter presents and analyzes. Refusing the hegemonic imperative of returning to normal, feminist recovery plans centered on the essentiality of care and on care justice. Normal would mean the continuation of massive urbanization and environmental destruction as well as deadly extraction, and exploitation. Normal would mean a continuation of inequalities defined by health, by housing and food insecurities, failing infrastructures, impoverishment and no access to basic provisions. Normal would mean continued care extractivism and exhaustion for large swaths of the global population. Therefore, feminist recovery plans defied the warring logic of back to normal. The policies for the feminist recovery plans were developed horizontally and transversally by policy makers, public administrators, and scholars and researchers together with feminist grassroots organizations, activists, and civil society groups. Feminist worry was a central method to my approach of war and frontline as political imaginaries in pandemic times. Feminist hope is key to my reading of feminist recovery plans, yet feminist hope is not separated from feminist worry. On the contrary, feminist hope makes space and time for shared worry in recovery, seeking to re-imagine the rights to care through a new international global care order.

How, then, to collectively imagine rights to care in light of the interlinked pandemic and climate catastrophes? How, then, to begin to work for the imagination of care's recovery from the necro-epistemic patriarchal violence that is based on epistemologies of separation, of policing, and regulating the boundaries of life and death. How to imagine healing so that planetary being can re-

cover from the ideological onslaught on ways of thinking and imagining that led to separating humans from one another by means of hierarchies that result from ableism, classism, casteism, sexism, or racism as well as speciesism, which separates humans from all other living and non-living beings by placing the former above the latter? The violence of the epistemology of separation has been diagnosed in many different traditions of feminist thought, in particular Afrodiasporic, indigenous, environmental, or materialist perspectives, as a regime of domination through the logic of binary oppositions. Binaries—even though always reductive, as they describe states of being to be fully understood in pairs of two—do not, per se, have to be oppositional, hierarchical, or necro-epistemic, as in you can live and I cannot, or I can live and you cannot. Feminist theory, particularly from the 1970s onward, has analyzed the impact of binaries such as Man/Nature, Black/White, culture/nature, mind/body, productive/unproductive, active/passive, man/woman. These binaries have captured the imagination. They have informed Western and globalized ways of thinking that underlie economic, legal, or policy imaginaries. Binaries, separations, and boundaries are ideas, imaginaries, and realities. Imagination is needed to imagine otherwise, to re-learn how to think, feel and care beyond and outside of them. In this context, recovery, and in particular the novel notion of feminist recovery, provides inspiration and, at the same time, requires reflection on what it can, our could, mean when approached through a feminist cultural analytical perspective.

Recovery is an interesting term. Recovery takes time. One can plan for recovery, but recovery cannot be planned. There is an element of unpredictability in recovery. Recovery requires patience, endurance, and care. Recovery is always tied to what one needs to recover from. At the level of language, the semantics of recovery are closely connected to disease, war, and economy. Recovery is the process after a disease, recovery is the process after economic collapse, and recovery is the process after war, genocide, and ecocide. Recovery, most broadly understood, is the process of getting better after a crisis. The medical view on crisis is useful to understanding this, with crisis meaning the turning point for better or for worse in an acute disease. The pandemic is a moment of global crisis, in which it is socially and politically decided whether this crisis presents a turning point for the worse or a turning point for the better in relation to the Man-made conditions, which have not only caused the pandemic to break out but also include insufficient preparedness for pandemics despite abundant warnings by scientists, epidemiologists, and public health policy makers.[5] In the pandemic situation, recovery has to be understood at

the scales of the individual, the social, and the planetary, which are most intimately physically and materially interconnected. No-one can recover on their own. Recovery, when one is still weaker, when one is still more vulnerable and more fragile than usual, makes one even more dependent on structures of care and support and their dependable availability. All living and non-living beings depend upon others for their recovery.

The infected planet needs the support and care of human beings for its recovery. Thinking of individuals as planetary beings constituted by the conditions of the planet is helpful to understanding what living with an infected planet means. The different scales of the individual or personal, the social, and the planetary are interconnected, as they foreground needs for different infrastructures and supports, as they actually enable caring for one another's interdependent recovery. Recovery is mediated across the personal, the social, and planetary through environmental, material, infrastructural, and technological conditions. Processes of physical, mental, and spiritual recovery are tied to the specific local environmental, material, infrastructural, and technological conditions, which makes clear that recovery is very much about these conditions as well. One cannot recover independently from these conditions. Therefore, people need to work together so these conditions, which are themselves not well, can recover from the centuries-old onslaught of patriarchal colonial violence, extraction, and exploitation. The conditions for recovery need to be restored in order for recovery to actually become possible. Bodies, minds, spirits, environments, materials, technologies, and infrastructures have to be understood not as separate from one another in their processes of recovery, but as deeply interdependent. Feminist activism and theory have long proclaimed that the personal is political. One has to add many more dimensions to such a conception of the personal: the personal is social, the personal is environmental, the personal is material, the personal is infrastructural, the personal is technological, the personal is planetary. In short, the personal is never alone, the personal is never on its own. There is, therefore, the need to recover from the modern ideology that the personal can be thought of as standing alone, separate from all these other dimensions that constitute it and support it, and, in turn, make persons able to have what is called personal relations, that is relations with other living and non-living beings. Modernization and large-scale urbanization define these relations through infrastructures. Therefore, modern life has to be understood as infrastructuralized life. The modern infrastructural condition reshaped not only the relations among humans, but also the relations between humans and their planet with all its living and non-liv-

ing things. Modern human inhabitation of the planet is founded on systems of infrastructures that intimately connect bodies and environments. One may think, here, of modern sewage or ventilation systems as salient examples that bound infrastructure and bodies as they began to reshape nature into a Man-made environment. Expanding inhabitation means encroachment onto territories that were previously nowhere near humans. The Covid-19 pandemic was caused by zoonotic spillover, which occurs when pathogens are transmitted from wild animals to humans. Such virus spillover results from infrastructure stitching bodies and environments closer together. The modern infrastructural condition, which I understand through dimensions of social equity and notions of support in tension with harmful and violent effects on bodies and environments, is a crucial starting point for understanding what feminist recovery entails and for reimagining care. In historical terms, periods of recovery after wars are linked to investment in reconstruction and rebuilding. Twentieth-century realities and imaginaries of post-crisis, after the 1929 Depression or of the post-war period after World War II, are firmly linked to investments in large-scale infrastructures. Understanding how deeply linked wars are to the research and development that result in new technologies, which in post-war life are immediately translated into everyday infrastructures that define bodies and environments, is important to understanding how war has materially, infrastructurally, and technologically extended into life in so-called peace.

Technologies and infrastructures invented for preparedness for wars—or even during times of war—have fully penetrated the everyday life of all living and non-living beings on their shared planet in times of so-called peace. One may be put in mind, here, of DDT—called "the atomic bomb of the insect world"—or of the military origins of the internet: those go back to the work of the Advanced Research Projects Agency of the US Defense Department in the 1940s, which was motivated by bringing "computing to the frontlines".[6] Military infrastructures and war weaponry migrated into so-called civilian use and have profoundly defined everyday life, as such infrastructures not only surround living and non-living beings, but pass through them and unfold their effects inside of them. In this sense, a feminist recovery from infrastructural effects and within infrastructures that bring technologies of war into everyday life would need to expand the understanding of care to go far beyond the establishment of care infrastructure, which is understood primarily as healthcare or social care infrastructure. Imagining such recovery as necessary is made possible by the term feminist recovery. (Re)building and (re)constructing infrastructures that care, as well as infrastructures of care more narrowly under-

stood, are both central to feminist recovery. Such rebuilding and reconstructing needs to include infrastructural awareness-raising and work on cultural imaginaries that enable people to actually envision care-full and peace-full infrastructures that would come into being through a coming together of bottom-up social movements and grassroots knowledge in collaboration with top-down state politics that enacts infrastructural responsibilities. Making infrastructural politics matter to the continuous labors of feminist recovery, and to public policy and public imaginaries at once, will necessarily have to include the development of robust collective forms of "feminist infrastructural critique" in order to understand better how infrastructuralization, with its origins in war, is the main cause behind today's conditions of living with infected planet.[7] At the same time, critique as awareness of these conditions is crucial to a politics of hope for imagining and building new care-full infrastructures for planetary recovery.

The notion of feminist recovery was introduced in feminist policy which was written during the first months of pandemic lockdown. I understand feminist recovery to be a response to the language of war present in public pandemic oratory and the organization of the global frontline of care. *Feminist recovery plans for Covid-19 and beyond* articulate a dual aim: equitable preparedness, and accountability to the harms caused by centuries of (infrastructural) patriarchal violence. I see the work of feminist recovery as preparedness, understood as accountability to the future, and as reparation, understood as accountability to the ongoingness of the past: a different present is imagined as possible through the coming together of preparedness and reparation. The violence and deadliness of inequality is caused by the lack of infrastructural supports. This led to broad swaths of the planetary society not being enabled to follow pandemic measures. The feminist response to the pandemic centered on this inequality. I find inspiration for critical hope in the term feminist recovery, the meaning of which this chapter explores through my close reading of the feminist recovery plans as, at the same time, the chapter seeks to expand the meaning of feminist recovery in relation to patriarchal history as a whole and to imaginaries of healing the infected planet. The concept of a specifically feminist recovery is useful for questioning the "epistemology of mastery" inherent in modern ideologies of policy and planning.[8] Processes of recovery are, per se, unpredictable. What bodies and environments that have been critically infected need to really heal today is still largely unknown, and might even change in surprising and unforeseen ways along the process of recovery. Therefore, planning for feminist recovery needs to stay attuned to such long-term

processes of recovery, which, above all, require the responsiveness of care to changing needs of care.

In order to imagine feminist recovery from within, and beyond, the pandemic catastrophe, I apply the following questions: What does the infected planet, beyond the acute disease of the current pandemic, need to recover from? What does the infected planet need in order to recover and heal? When will the planet have been enabled to recover? While there is, as we have seen in the previous chapters, an official politics of beginnings and endings when it comes to declaring wars or pandemics, one can never declare the end of recovery. One can never be really certain that recovery, or healing, are over or complete. One cannot declare the end of recovery. One cannot declare the end of healing. Quite the contrary: recovery is always durational, marked by ongoingness and unfinishedness. The temporality of recovery, like all processes concerned with healing and restoring, is complex, never linear, unpredictable, and, in a certain way, never ending. When recovering from a disease, one may feel better one day and worse again the next. Recovery can be slow and unpredictable. Recovery is, first and foremost, a process and, therefore, has to be understood in temporal terms. While not only plans for disaster preparedness, but for recovery preparedness and all the necessary support structures and infrastructures are most certainly needed, there needs to be, at the same time, a better understanding of the uncertainty and the unpredictability of recovery. Planning that remains open to such uncertainties can be most responsive to recovery needs as they emerge, and to adapting supports and infrastructures accordingly. Planning based on mastery would assume knowing for certain what recovery needs. Planning that followed the needs of recovery would remain responsive to the kinds of changes needed during processes of recovery. The impact and traces of previous trauma and diseases live on in bodies, societies, environments, and the planet as a whole. The historical inequality and the harms enacted on bodies and their environments by sexism, racism, and speciesism on a planetary scale is an expression of war: war against Black and Brown people, war against indigenous populations, war against nature, war against poor people, war against vulnerable populations, war against women. This logic of war extended, in pandemic times, to forcibly enlisting care.

Feminist recovery does not only address the current pandemic situation, but the historical ongoingness of multiple and interlinked wars against women rooted in the violence of colonial-patriarchal ideology as warfare. The effects of this ideology continue to penetrate conditions of life and death. Silvia Federici diagnoses that "capitalist development begins with a war on women".[9] Fem-

inist anthropologist Rita Segato argues that femicidal violence has to be understood as "femigenocide".[10] Colonial-patriarchal warfare takes many forms that interpenetrate and support each other, economic and intimate, militarized and legal. Domestic violence has been described as "invisible war" or as "shadow war".[11] In pandemic times, as yet another example of the close traffic between imaginaries of war and epidemiological imaginaries, the so-called shadow war of domestic violence was referred to as "shadow pandemic".[12] Taking the notion of feminist recovery to refer to recovery from pandemic conditions and the lasting aftermath of ideological and material patriarchal warfare on bodies, minds, and environments as well as to recovery from the historical violence of patriarchy, which has led to the production of gendered, sexualized, racialized, and classed vulnerable populations and the large-scale ruination of their habitats and environments, requires an understanding of recovery as a slow and lasting process, the end of which can neither be planned for nor easily predicted. Feminist recovery is about never giving in to the afterlife of patriarchal violence and never giving up on the possibility of recovering. Perhaps, a politics of hope for continued living with an infected planet begins with understanding that feminist recovery will necessarily have to be never-ending, that it is ongoing for, and in futures to come.

Providing in this chapter an attentive reading of feminist recovery plans as they were developed in different parts of the world, along with the policy advice for caring economies as well as the imaginaries for broader social and cultural transformation, I want to bring into play one additional dimension of recovery. Recovery can also mean the possibility of regaining something that has been lost or taken away. I argue that placing this meaning of recovery in relation to patriarchy's centuries-old ruination of care, which includes the loss of care's centrality and the taking away of its fundamental importance, value, knowledge, and visibility, makes for both a much more complex and, at the same time, more insistent and hope-full reading of what feminist recovery would need to entail. Regaining care from patriarchal capitalism and making the essentiality of care a source of value and recognition will require hard work, a new and much richer and more nuanced language for care as knowledge, and new social and cultural imaginaries.

The idea of modern Man as an autonomous and independent individual which underpins care under patriarchy led to the silencing of the interconnectedness and interdependencies of bodies, minds, and natures. Feminist recovery, therefore, will need to regain, relearn, and retrain a deep sense of interdependency, which was violently taken away by toxic patriarchal "epistemologies

of separation".[13] The political and economic silencing, and persistent structural devaluation of care included the erasure of care as knowledge in hegemonic understandings of what counts as knowledge, of what matters to knowledge and what does not.[14] Such silencing and "epistemic ignorance" is not a-historical, but continually reproduced, as care theorist Riikka Prattes has recently diagnosed.[15] Central to the feminist recovery of care will be continuous work on epistemic and economic imaginaries that overcome the lasting epistemic violence of separation and ignorance, which have led to political, intellectual, spiritual, and cultural silencing and economic devaluation and deprivation of those who perform caring labors.

Common to recovery and care is that they are characterized by temporalities of ongoing-ness and the complexities of unpredictability. Processes of care and recovery are also, perhaps in differently felt ways, shaped by the continuous experiences of learning, which may be filled with disappointment, disenchantment, and hope-making surprise, as one understands better oneself and others as not only maintained or restored, but also as transforming as a result of caring activities, and as one understands bodies, minds, spirits, or environments as changing in the process of recovering. This has epistemic and economic implications. The knowledge of care and the economies of care are concerned with maintaining consistency and duration, while they need to respond to complexly unpredictable change and the process of ongoing relearning. This, as one can readily see, does not conform with the patriarchal economization of time as efficiency and Fordist and post-Fordist rationales of productivity. The need for new and differently care-full economic imaginaries based on different ways of knowing resonate with what Carol Anne Hilton, founder of the Indigenomics Institute and the Global Centre of Indigenomics, has described, in a special issue of *Site Magazine* dedicated to *Provisions, Observing & Archiving Covid-19*, as "a collective response to the systemic de-valuing of Indigenous ways of being and knowing" and as "economics from an indigenous worldview", which is premised on "care for all".[16] Seeing the premise of care for all and the idea of feminist recovery as part of a larger twenty-first century feminist movement, I propose understanding this newly emergent feminist organizing and theorizing as care feminism. This means working through the aftermath of violent epistemologies of separation that result in extreme social, economic, political, infrastructural, technological, and environmental inequality. Furthermore, this includes a more profound acknowledgment of the nascent imaginaries of what I suggest calling the rights of care which go beyond human rights and include the rights of nature. Care feminism provides

the potential to move beyond the separated feminist traditions of care ethics and social reproduction theory, placing at the center the essentiality of care and the inseparability of bodies, minds, and natures as mutually constituted and ontologically co-vulnerable and interdependent. This is foundational to a new international global care order, which will have to overcome human-centricity. While equitable access to care, and new cultural and economic value systems that counteract the systemic silencing and extraction of caring labors are paramount, the interconnectedness and interdependence of all living and non-living beings with their planet demands that care overcome regimes of separation that regard the care needs of human minds and bodies as being separate from the care needs of all other living and non-living things.

Inequality Is Death-Making

How can one respect physical distancing rules in overcrowded spaces? How can one wear masks when there are no masks being made available or when they are unaffordable? While policy measures sought to counteract the spread of infection and to ensure public health for all, there was evidence that, for the most vulnerable populations around the world, it was not possible to follow pandemic rules. This put their own care and safety at risk, but also the care and safety of others. Interconnectedness in care, safety, and risk came to the fore because of the pandemic. Lack of infrastructures and resources, combined with shortages of supplies, prevented people from being enabled to follow pandemic rules. Informal settlements, which make up about thirty percent of the world's urban population with an estimated total of 1033 million dwellers, and the living conditions of displaced people and refugee populations, with the United Nations High Commissioner for Refugees estimating that there are 89.3 million forcibly displaced people worldwide, make physical distancing or handwashing for disease control a huge challenge.[17] Handwashing, as communicated by the World Health Organization and governments around the world, is one of the best ways to protect oneself and those with whom one lives in a household against transmission of and infection with Covid-19. With pathogens spreading from person to person, or from surfaces to persons, preparing food or drink with unwashed hands or touching surfaces presents a heightened risk of infection. In order to curtail these risks of infection, people were instructed to always wash their hands before touching their face, after touching their mask, after touching surfaces touched by others, and after

having been outside of one's home in the street or anywhere else. How can one wash one's hands frequently with soap for a minimum of twenty seconds when there are severe water shortages, when there is no hygiene infrastructure, when no good and cheap soap is available? The compound effects of poor housing, overcrowded living conditions, lack of adequate infrastructure as well as the impact of extreme weather events—the results of the ongoing climate catastrophe—made it impossible to follow the pandemic rules. The infrastructural dimensions of inter-vulnerabilities and the interdependencies in infrastructural shortages were thrown into stark relief by the pandemic, with exacerbated risks of disease and heightened vulnerability of individual lives and equally of global public health. Such shortages are a form of infrastructural violence. Such violence is produced by political and economic systems and largely defines how lives can or cannot be lived, how health can or cannot be maintained. Judith Butler has written that

> our enduring dependency on social and economic forms of support for life itself is not something we grow out of […]. When there is nothing to depend upon, when social structures fail or are withdrawn, then life itself falters or fails: life becomes precarious.[18]

Just as violence to body, mind, spirit, and health is infrastructurally produced, acting responsibly also has to be understood as being produced, and enabled, by infrastructure. What, then, does one make of international organizations and governments which implement responsible preventive measures to reduce transmission of Covid-19 in order to keep oneself and others safe, when one knows that the people in these organizations and governments are very well aware of the catastrophic situation of infrastructural shortages and what they mean to populations who are at heightened pandemic risk precisely because of missing infrastructures?

When responsibilities and risks are offloaded onto those who have been instructed to keep as safe as possible, without, at the same time, having been provided with the necessary infrastructural support systems that would make it possible for them to actually follow these instructions, we see a form of politically produced care violence take shape. Pandemic measures then become an expression of pre-existing inequality with its structural carelessness. Such inequality defined the lives of many long before the outbreak of the virus and led to increased pandemic risks and higher mortality rates for vulnerable populations whose lives are defined by everyday infrastructural neglect and the political failure to organize economies in such a way that there is access to adequate

and good public health infrastructures for all. Covid-19 disease and mortality statistics provide evidence of this infrastructural neglect and political failure. There were significantly higher Covid-19 death rates among ethnic minority groups. In the United States, as observed in mid-2021, "people of colour are two to three times more likely to die from COVID-19 than white Americans".[19] The office for National Statistics in the United Kingdom reported that during the first wave of the pandemic between January 24, 2020 and September 11, 2020

> [t]he rate of death involving COVID-19 was highest for the Black African group (3.7 times greater than for the White British group for males, and 2.6 greater for females), followed by the Bangladeshi (3.0 for males, 1.9 for females), Black Caribbean (2.7 for males, 1.8 for females) and Pakistani (2.2 for males, 2.0 for females) ethnic groups.[20]

The pandemic has not only made highly visible such inequalities, but, in fact, worsened existing inequalities, producing heightened vulnerability and higher mortality rates among people living in poor conditions and low-income neighborhoods. An intersectional economic, legal, statistical, and empirical social and environmental studies approach reveals class, caste, race, gender, and sexuality as determining factors of the compounded impacts of environmental degradation and structural injustices that arise from deep-rooted classism, casteism, racism, sexism, ableism, and speciesism.

Furthermore, many of the essential frontline workers were confronted not only with the new militarized public imaginaries of care as heroism, but faced with everyday realities defined by feminization, racialization, classism and casteism as well as infrastructural vulnerabilities. If anything, the myth of the hero—able to overcome and surmount all obstacles, hindrances, or lack by relying on their own superpowers, and thus seen as not dependent upon essential infrastructural support systems—worsened the condition of carers, who were expected to heroically make do without proper infrastructures of support. The convergence of masculinized values and feminized realities worsened the conditions for care on the ground. Those whose bodies, minds, energy, capacities, knowledge, and skills performed the caring labors required by the frontline policy of critical essential infrastructure, indispensable to the basic functions of society and the economy, were failed by the infrastructure in their sectors. Underpaid and mentally as well as physically stressed, drained and exhausted, these essential care workers faced grave dangers and heightened risks of infection as they had to cope with infrastructural neglect,

which resulted in unsafe working conditions and shortages of personal protective equipment. The frontline ontologies were marked by masculinist and militarized values of duty and heroic selflessness, but the essential critical infrastructure workforce is not only confronted with feminized labor conditions, but is also majority female. This did not go unnoticed. Early on, in March 2020, Phumzile Mlambo-Ngcuka, who has been serving as United Nations Under-Secretary-General and Executive Director of UN Women since 2013, observed that women were "front and centre" as the world changed dramatically because of the virus.[21] At the very beginning of the pandemic, data collected showed that the mortality rates of men were higher than those of women. Yet the reason for this reported higher mortality of men may actually be a result of the lack of accurate data brought about by profound gender bias, as economist Yeva Aleksanyan and radiologist Jason Weinman observe. They write that in social contexts where women are devalued, as they rely on family resources to have access to healthcare, households are likely to prioritize men's health, with more men being tested and going to the hospital. Thus, their hypothesis is "that countries are reporting higher male COVID-19 cases and deaths due to underreporting of women's cases and deaths."[22] What was evident, though, was that women were the frontline of the frontline, with many of their working hours performed in the context of private homes as women had to meet the increasing care needs of those dependent upon them, who included children, the sick, the frail, or the elderly. The increase in care needs was caused by lockdowns, but also by pandemic conditions in general, with people not only acutely sick with Covid-19 but also developing long-term symptoms, which include physical, neurological, and mental health symptoms. Gender-responsive policy needs to examine "differing rates of infection, differential economic impacts, differential care burden, and incidence of domestic violence and sexual abuse."[23]

In the *Responses to the Coronavirus* published by the Organization for Economic Development, OECD, in April 2020, one reads that

> around the world, women carry out far more care work than men – up to ten times as much according to the OECD Development Centre's Social Institutions and Gender Index (SIGI). The travel restrictions, at-home quarantines, school and day-care centre closures, and the increased risks faced by elderly relatives can be expected to impose additional burdens on women, even when both women and their partners are confined and may be expected to continue working from home.[24]

This brings back the historical memory of feminist conflict in domestic settings, for which socialist feminist, journalist and columnist Barbara Ehrenreich used the expression "chore wars", which were typical of feminists disagreeing and fighting with their male partners or husbands over who does the care work at home in the 1970s and 1980s.[25] Under lockdown conditions, women globally worked much longer hours at home to take care of all the chores. At the same time, women suffered increased domestic abuse and violence. This leads to the diagnosis that imaginaries and ideologies of war and realities of physical, sexual, intellectual, spiritual, and emotional violence have long infiltrated the domestic territories of the home, as they shaped cisgendered heteronormative relations between men and women. In the context of lockdown and quarantine, theorist of architecture Henriette Steiner and theorist of culture Kristin Veel diagnosed this situation as "pandemic stuckness", highlighting the home as a site of "tension" and "contestation".[26] The home is where reproduction takes place, at once "a sanctuary and a site of caring duties, labor, abuse and violence".[27] Following the metaphor of chore wars, social, emotional, and sexual reproduction are shot through with fighting and struggles. The use of the metaphor of war in the context of the gendered social and emotional responsibilities and bodily availabilities for reproduction at home renders clear that feminist analysis saw power struggles and violence as constitutive of an understanding of the home as a site of work. Viewing feminist struggle over housework the 1970s and 1980s through the lens of chore wars allows us, today, to put into historical perspective the lastingness of imaginaries of war, which captured feminist politics and desires and—this is of particular relevance to the notion of care feminism—informed ways of seeing care as a central cause of a gender war. Ehrenreich has also observed that these chore wars of the 1970s and 1980s—which coincide with a time when much caring labor and caring services were transformed into a paid-for commodity with large numbers of women joining the workforce, particularly in jobs in the care sector—were solved by hiring badly paid domestic workers to perform these chores and the caring labors needed for maintaining households. This gave rise to new classed and racialized uneven economic relations among women during, and since, the heyday of feminist struggles in the 1970s and 1980s, which were described by Ehrenreich as the "mistress-maid relationship"[28]. This not only led to new forms of economic, infrastructural, health, and legal inequality and violence during the pandemic, with many domestic workers—who work in the informal economy—losing their income due to lockdown and pandemic conditions more broadly speaking, but it also

exposed these workers to vaccine injustice, as they often have immigrant status and are not part of a country's public health system (if there is such a system in place), or are unable afford to access paid-for health services; or, with mobility restricted in pandemic times, they are confined within the boundaries of their country of work and thus hindered from reconnecting with their own families.[29]

Gendered Conditions of Care and Health: Feminist Activism and Policy

Early on in the pandemic, the human rights dimensions of the gendered conditions of care and health were internationally recognized and became a focus of feminist activism and global feminist debate and policy writing. In July 2020, the forty-fourth session of the Human Rights Council of the UN included a full-day discussion on the human rights of women, specifically dedicating one of its panels to Covid-19 and women's rights. As background information to their panel discussion on the gendered impact of the pandemic on the economic and labor condition of women, they provided the following information:

> Globally, women comprise 70 per cent of health workers, including midwives, nurses, pharmacists and community health workers. Women are also playing key role in essential services, such as in the food production and supply chain, cleaning and laundry, and care work. And yet, many of them are working in low-wage and precarious conditions. In many countries women are concentrated in irregular employments and in the informal sector that are highly prone to disruption and with no or limited access to social protection. In formal economy, women are also over-represented in hospitality (hotels, restaurants), manufacturing, retail and leisure and recreation industries that have been among the hardest hit by the response to COVID-19. Pre-existing gender inequality, such as gender pay gap and gross imbalances in the gender distribution of unpaid care and domestic work, is likely to lead to women giving up participating in labor market during the pandemic and beyond.[30]

One may also be put in mind, here, of the *Equal Care Day*, which was initiated in 2016 by journalists Almut Schnerring and Sascha Verlan in Germany. It is conceived as a day of public action on February 29—an extra day added to the year every four years to keep the human calendar synchronized with the astro-

nomical seasons—and draws attention to the fact that it takes men four years to perform the same amount of caring labors in private, volunteer, and professional contexts that women perform in one year. In 2020, in response to the pandemic's effects on care, they added to this day of action the German-language *Equal Care Manifesto*, which focuses on fair labor conditions, fair distribution, and fair remuneration of caring labors.[31]

Early on, there was a decidedly feminist response to the coronavirus outbreak situation. This included the critical analysis of, and a push-back against, the hegemonic political and economic response. Many international organizations and local state level organizations—including UN Women; global networks of women politicians, like Women Political Leaders; transnational NGOs, like the Feminist Alliance for Rights; feminist research advocacies, like the Centre for Feminist Foreign Policy; health care worker unions, such as Global Nurses United—organized transnational exchanges, provided information, and went public with their response to the situation. In mid-April 2020, the anti-sexist and anti-colonial *Hawai'i Feminist Recovery Plan*, the first of its kind, which was soon followed by other such plans, articulated this new policy activism in response to the pandemic catastrophe. This global transnational and national policy activism not only highlighted and responded to the highly gendered and racialized dimensions of the pandemic, but also started to immediately work horizontally with many different local and transnational women's organizations, groups, networks, and individuals on such feminist plans to do everything possible to prevent a return to normal. Feminist advocacy, policy activism, and relentless work, on local levels as well as on the levels of transnational knowledge exchange, led to writing, and implementing, other such multi-sector feminist recovery plans, which included the *African Feminist Post-Covid 19 Economic Recovery Statement*—presented in the form of a policy recommendation to the African Union by the NAWI Collective, a pan-African feminist initiative—the *Feminist Economic Plan for Recovery in Canada*, the *Feminist National Recovery Plan in Northern Ireland* as well as the *Covid-19 Feminist Recovery Plan to Achieve Substantive Gender Equality by the Center for Women's Global Leadership at Rutgers* and the *Feminist Recovery Plan Project at the University of Warwick*. It is of particular interest that writing feminist policy happened in very close connection with grassroots feminisms, with, for example, the *International Women's Rights Activism Watch Asia Pacific* organizing online workshops in order to learn from transnational grassroots activism and its visions for policy when writing feminist recovery plans. Understanding that a plea for a return to normal is a plea in favor of politics and an economy that, in

fact, caused the anthropogenic Covid-19 pandemic catastrophe as well as the climate catastrophe, the *UN Women feminist recovery plan*, in resonance with many other feminist plans for recovery, advocates for nothing less than a "a new social contract".[32]

Feminist Pandemic Studies and Feminist Organizing

Feminist collection of data, critical analyses, research, and theory across many different fields and disciplines gave rise to what I view as the formation of a new field of feminist pandemic studies, which, even though still nascent, is very active and has, in many instances, moved research, activism, and policy closer together. A large number of feminist researchers, scholars, theorists, and educators in the disciplines of law, public health, political theory, international relations, economy—in particular, feminist political economy—, heterodox economy, and development economics—but also feminist political ecology, health and environmental humanities, cultural studies, sociology, anthropology along with feminist, gender, queer, decolonial and critical race studies, broadly understood— focused their intellectual energy and their different methodological perspectives on dimensions of discrimination, injustice, violence, and the rights of humans and nature under pandemic conditions. Feminist academic journals, such as *Signs*, *Feminist Studies* or *Feminist Economics*, devoted special issues to the pandemic, or made calls for special issues, as did the *Journal of Social Politics*, which in 2021 called for papers for a special issue on Covid-19 and the Social Politics of Crises.[33] Michael Fine and Joan Tronto guest-edited a special issue of the *International Journal of Care and Caring*. Published in 2022, it is titled *Care, caring, and the global Covid-19 pandemic*.[34]

Feminist pandemic scholarship and theory examine Covid-19 realities and the societal and cultural consequences of the disease's effects. In this scholarship, there is a clear focus on making categories such as gender, sexuality, race, ethnicity, indigeneity, and class and caste matter to the analysis. Feminist academics and scholars, who carried out their research in the context of universities as well as through special funding obtained from governments, NGOs, or philanthropic institutions, actively sought to transcend the academic community in order not only to produce analysis, but to effectuate change together with care practitioners and policy makers. One such example of self-organized transnational feminist scholarship is the *Gender & Covid 19 blog*. Starting with the outbreak of the virus, the group of researchers began to organize regular

meetings every third Wednesday each month, actively encouraging and inviting people's contributions and sharing publicly a growing list of resources. [35] The new Gender Working Group behind the Gender & Covid 19 blog grew out of a small number of academic researchers, who immediately took action as they recognized that the gendered effects of the pandemic were not taken into consideration in government response. They were able to obtain funding from the Canadian Institute of Health Research in order to study the gendered effects of Covid-19 in Canada, the UK, and China and Hong Kong in real time, and have expanded the original scope of their study to include the following additional countries: Bangladesh, Nigeria, Kenya, the Democratic Republic of Congo, and Brazil. The publication of their findings in the *Lancet* in early March 2020 marked a turning point in the way in which the pandemic was studied. Pointing out that, in past pandemics as well as in the current Covid-19 pandemic, "policies and public health efforts have not addressed the gendered impacts of disease outbreaks", they were able to raise awareness for this data gap and contributed to making it understood that the impact of the pandemic on the lives of men* and women* were very different.[36] This rendered evident that dimensions of gender had, in the past, remained unrecognized in the political and policy responses to disease—and catastrophes more broadly—and therefore dimensions of gender have also been absent from the policies for pandemic preparedness. This also showed that a collaborative effort by a transnational group of feminist researchers who set out to organize and collect important data so that "primary and secondary effects of a health emergency on different individuals and communities" can actually effect immediate change and provide the basis for "effective, equitable policies and interventions."[37] Their initiative to introduce gender as an analytical and simultaneously a policy category contributed to public awareness not only of the highly gendered impact of the pandemic, but also of the importance of working out gender-responsive plans for pandemic preparedness, response, and life in the aftermath of pandemics. The virus outbreak was immediately followed by new forms of remote feminist organizing, transnationally and on a local scale, where use was made of online tools for gathering and meetings, for disseminating findings and reports via webinars, digital townhall meetings, and other forms of digital sharing and publishing. It also led to developing and testing new research methods to gather data, counteract the impossibility of travel, and understand pandemic impacts in global comparisons.

Counteracting Gendered Pandemic Violence

With feminist organizations highlighting the gendered differences of pandemic impacts, other international organizations began to pay more attention to studying these differences as well. Women and girls suffered disproportionately because of the pandemic, not only because of many societies considering women to be of less value than men, but because of a globally observed (re)turn to stereotypical gender norms and expectations, particularly with regard to the heteronormative gendered division of domestic labor, with men considered breadwinners, and women losing their jobs. There was a globally observed increase in domestic violence against women, and rising rates of teenage pregnancy and early marriage. In May 2020, UN Women launched the *Shadow Pandemic*, a campaign to raise awareness for "the global increase in domestic violence amid the Covid-19 health crisis."[38]

On the occasion of the *16 Days of Activism Against Gender-Violence Campaign* in 2021, Rowan Harvey, an activist and consultant who specializes in gender and development, writes in an OXFAM brief that even though

> it is evident that the Covid-19 pandemic has intensified gender based violence, including domestic violence and intimate partner violence […] the investments in GBV prevention and response are dramatically inadequate with just 0.0002% of the overall COVID-19 response funding opportunities going into it.[39]

The pandemic also increased gendered education inequality and reinforced gendered stereotypes when it comes to families supporting girls' access to education. Girls dropped out of secondary education during the pandemic and the risk that they will not return is high. A brief on *Covid-19 and Girls' Education in East Asia and Pacific* released by UNICEF, the United Nations Children's Fund, in October 2020 reported that the disruption to education systems had a devastating impact on girls' access to education and learning, with many having no internet or very limited access to distance learning. This report also observed increases in gender-based violence against girls as well as rising numbers of early marriage and teenage pregnancy.[40] Furthermore, as a report by the World Bank highlighted, girls are less likely to return to school after the pandemic, as many "caregivers are missing from the household" and they "typically have to (partly) replace the work done by the missing caregiver, who might be away due to Covid-19 related work, illness, or death."[41] With 129 million girls out of school there is an estimate that "globally 20 million addi-

tional secondary-aged girls could drop out of school due to COVID-19."[42] The international healthcare crisis, which predates the pandemic, deepened. In 2020, the *World Health Organization* estimated that "there was a global shortage of 5.9 mn nurses – almost one-quarter of the current global workforce of almost 28mn."[43] Faced with infrastructural shortages, physical, mental, and emotional pressures, and mass death, nurses globally are suffering. Jama, a US research network, "found female nurses were twice as likely as women in the general population to commit suicide" during the pandemic, and a survey by the American Nursing Association found that "one-third of nurses were not emotionally healthy."[44] Nurses are suffering from Covid-19 exhaustion, burnout, anxieties, trauma. They are also feeling a growing sense of betrayal with so many lives lost despite their efforts, with the declaration of heroism a shallow and uncaring form of recognition, and with no structural and systemic changes to labor and infrastructure conditions of the health sector in place yet. The *Understanding Coronavirus in America Tracking Survey* found out that women were "disproportionately affected by job loss, childcare duties and mental distress."[45] Despite the hyper-visibility of critical essential infrastructure and the frontline of care, there was a pronounced lack of policy provisions and political aims with regard to caring better for care infrastructures and for those who perform caring labor, be it for pay or unpaid. Politics, and hegemonic economics, failed the complex realities of care and those who worked tirelessly to produce it.

Worried about the grave pandemic realities marked by injustice and discrimination, and despite personal experiences of pandemic stresses, anxieties, and work overload, feminists relentlessly organized in real time in order to respond to these multiple crises within the pandemic, counteracting gendered injustices. The feminist response to the pandemic shows that feminists were discontent with the way in which the political response was organized and articulated, in particular under the notable absence of gendered differences in a global health emergency. Infrastructural violence and care inequality and injustice result from the specific ways in which the world is organized and structured through dimensions of class, caste, race, indigeneity, gender, sexuality, and species. Organizing around produced vulnerabilities and against structures and infrastructures of violence is key to the feminist response to the pandemic: a response to emergency policies and measures that failed to account for the gendered dimensions of a disease outbreak and the lived realities of women and girls, while the political imaginaries and the use of war vocabulary led to a dramatic re-gendering of the global frontline, with essential workers

viewed as the foot soldiers of pandemic care services. Across many different scales, times zones, and locales and, perhaps, more than before, there were swift exchanges and effective collaborations among feminist activism, advocacy, consultancy, campaigning, researching, policy-making as well as women and feminists working in academia, international organizations, and politics. Very many different women's and feminist organizations, working groups, and networks and informal gatherings around the world are enacting feminist responses to the pandemic, questioning the hegemonic responses and proposing feminist visions for societal change, transformation of the economy, and new understandings of care beyond the pandemic. Researching and analyzing the compounded effects of the pandemic on women's and girls' lives, minds, bodies, labors, education, economic realities, social relations, and sexualities, feminist scholarship and militant research highlights how addressing the interdependencies in bio-material and eco-social realities are dependent upon how the response to the pandemic is organized. Living in the aftermath of infection places new demands and pressures on care. There are the still little-understood conditions of long Covid that continue for weeks, months, and even years after the original illness. There is an observed lack of cultural practices of mourning mass death and expressing collective grief. Extra care for those who cared for the infected and are directly confronted with the consequences of infrastructural violence, complete exhaustion, and pandemic loss is not being provided. Understanding that the pandemic catastrophe and the climate catastrophe are interlinked and Man-made and result from the death-making exploitative and extractivist imaginaries of hegemonic politics and economies is heavily incumbent upon feminist political imaginaries of hope for futurity.

Care Feminism and Recovery

Situating the feminist response to pandemic realities in the larger context of what I consider to be the formation of new expressions of present-day feminisms concerned with working against and transforming economic and political regimes, institutions, and infrastructures that violently and unjustly regulate conditions of life-making and death-making across bodies, minds, and natures, this chapter is particularly interested in the notion of feminist recovery and in understanding how this notion of recovery can be seen in relation to the larger contemporary developments in feminism, which I propose to call care feminism. Recovery makes for a very interesting keyword in the pandemic

vocabulary, as it so closely conjoins the contexts of disease, war, and economy, which are central to pandemic realities and imaginaries. In everyday communication people wish their loved ones, friends, acquaintances, neighbors or colleagues who have been ill a speedy or quick recovery. They inquire what they can do to make the recovery easier. Recovery is thus understood as a process of healing and transition, which is still defined by special needs and requirements because of the effects, the pains or weaknesses, the disease still has on body and mind. While recovery is very closely associated with medical conditions and with the period after a disease or a medical intervention, the term is also central to wars and economic crises. We may think, here, of the *European Recovery Program*, maybe better known as the *Marshall Plan*, as one such historical example of a post-war situation framed through the lens of recovery. After World War II, material and economic reconstruction was considered primary to recovery—perhaps in pursuance of the belief that from material recovery and economic well-being social and political recovery and democracy will result. This understanding of post-war, post-conflict and post-trauma recovery also extends to notions such as "recovery after genocide".[46] In the context of economic or financial crises, the term recovery pertains to how what the economy does after a crisis is understood: for example, after the 2007/08 global financial and economic meltdown, the economy was framed by the OECD as moving "from crisis to recovery."[47] These examples served to underline that imaginaries of recovery are constitutive of how conditions of crisis and catastrophe owed to disease, war, or the economy are seen as a situation that will pass. Recovery means that the effects and impact of crisis can, and will be, overcome.

My reading of feminist recovery aligns this new concept with existing anti-capitalist, anti-racist, decolonial, and ecological struggles and insists that recovery can be slow, unpredictable, fitful, and forever incomplete. Placing the notion of feminist recovery from colonial and racist patriarchy adjacent to decolonial and indigenous notions, as well as critiques of hegemonic understandings of restitution and reconciliation, and understanding recovery as the articulation of the need for not only long-term, but permanent planetary care, I see the emergence of a new twenty-first century care feminism. Care feminism organizes around interdependencies and vulnerabilities in and of care. This is evident in movements such as Black Lives Matter, Ni Una Menos, Idle No More, and many emerging forms of climate activism for climate justice, especially in the Global South, but also in the Global North.[48] Foregrounding intersectionality, interrelatedness, and interdependencies in economic, environmental, social, and sexual vulnerabilities and violence, care feminism can

be observed across many different strands of feminist approaches including among others, but not limited to, African feminism, Asian feminism, Afrodiasporic, indigenous, immigrant, decolonial, and transnational feminisms. There is also newly invigorated social reproduction theory and care ethics in many different fields. And there are many new forms of ecofeminism, many new forms of climate feminism as well as anti-sexual violence and anti-femicide movements.

Scholarly, theoretical, and activist articulations of the formation of this new twenty-first century care feminism can be traced through a large number of publications, of which I can name only a few here: the call for "a care movement" by researcher on the politics of public policy researcher Deborah Stone, who focuses on the politics of policy making; political theorist and care ethicist Joan Tronto's *Who Cares? How to Reshape a Democratic Politics*, the Network Care Revolution and social scientist Gabriele Winker's book on the *Care Revolution*; feminist theorist, science and technology studies and environmental humanities scholar Maria Puig de la Bellacasa's *Matters of Care*; the transnational research project and network of activists, scholars and practitioners *Pirate Care Project* convened by Valeria Graziano, Marcell Mars and Tomislav Medak; the manifesto *Feminism for the 99%*, written jointly by philosopher and one of the main organizers of the International Women's Strike, Cinzia Arruzza, Marxist historian, expert on social reproduction theory and also one of the main organizers of the International Women's Strike, Tithi Bhattacharya, and philosopher and critical theorist Nancy Fraser, who actually coined "feminism for the 99 percent"; curator and architectural theorist Angelika Fitz's and my own work on *Critical Care. Architecture and Urbanism for a Broken Planet*; *Decolonial Feminism* by Françoise Vergès, who has written widely on the racialized dimensions of women cleaning the world; the *Care Crisis: What Caused It and How Can We End It* by sociologist and feminist political economist Emma Dowling. Further, there is *Rebelling with Care. Exploring open technologies for commoning healthcare* edited by Valeria Graziano, Zoe Romano, Serena Cangiano, and Maddalena Fragnito; the *Care Manifesto. The Politics of Interdependence*, written jointly by The Care Collective which includes Andreas Chatzidakis, Jamie Hakim, Jo Littler, Catherine Rottenberg, and Lynne Segal; climate activist Vanessa Nakate's *A Bigger Picture: My Fight to Bring a New African Voice to the Climate Crisis*; and sociologist and journalist Anne Karpf's *How Women Can Save the Planet*.[49]

Care feminism recognizes the ontological vulnerability of life and the interdependencies of all life and non-life on planet Earth as well as the political, eco-

nomic, and social responsibilities that result from the centrality of care to living interdependently in vulnerability. Care feminism fully investigates and seeks to dismantle the colonial-patriarchal ideology of warfare based on turning care into a means of deadly bodily, environmental, emotional, and epistemic violence, relentless extraction, and ruthless discrimination. Yet care feminism is also impacted by legacies of epistemologies of separation that split the social from the ecological, that split care for humans from care for all other living and non-living beings; this is something which, as I explain in more detail later, needs to be addressed and overcome. Taken together, vulnerability and interdependency make it explicit that the ways in which interdependencies are socially, economically, and politically organized and culturally understood define how lives can be lived. The ways in which interdependencies are organized through imaginaries of reciprocity, mutuality, and peace or imaginaries of exploitation, exhaustivism and war make lives less or more vulnerable, that is less or more livable. Vulnerabilities, therefore, are politically, economically, and socially produced, as life and nonlife are always open, that is vulnerable, to systemic and structural infra-political, economic, and epistemological violence. Returning to and insisting on the inseparability of bodies, minds, and natures, care feminism—in particular when conceived of as recovery from patriarchy—works to overcome the aftermath of violent epistemologies, politics and economies. Judith Butler has written most lucidly on vulnerability, equality, and interdependency. Butler has explained that "equal treatment is not possible outside of a social organization of life in which material resources, food distribution, housing, work, and infrastructure seek to achieve equal conditions of livability."[50] The situation of pandemic catastrophe and climate catastrophe has exposed the extreme inequality of access to resources and infrastructure as well as the extreme labor inequality impacting those who are required to perform the essential work of keeping resources available and infrastructures running. The patriarchal violence of the social organization of life results in the rampant destruction of livability and in the denial of interdependency as primary. Judith Butler observed that "the facts of global interdependency are denied."[51] Such denial of interdependency is the epitome of structural carelessness connected to the warification of hyper-individualism, where all compete against all for livability, and also, as I have shown in the second chapter, the epitome of the forceful militarization of obligations to provide care, with individuals heroized as Covid warriors and corona heroes who are expected to have the superpowers necessary to overcoming dependencies—especially those of infrastructural shortages, failures, and lack—with their indi-

vidual physical powers. During the pandemic, Butler has explained in public essays and online lectures why "rigid individuality" stands in the way of organizing social obligations, of raising awareness of what it means that a body is always "bound up with other living creatures, with surfaces, and the elements, including the air that belongs to no one and to everyone."[52]

Aware of the interdependency in pandemic care needs, and in particular critical of the violent impact on the present economic organization of social life, which renders lives and labors of care vulnerable, the new Global Alliance for Care, which was publicly launched by the National Institute of Women in Mexico in alliance with UN Women at a so-called high-level event on International Human Rights Day on December 10, 2021, argues for "care as human right".[53] This leads to a reflection on how this notion of recognizing care as a human right relates to the international care order as it was established in the twentieth-century as part of the recovery process after the Great Depression as well as after World War II, along with a reflection on how the right to care can be understood in relation to today's struggles for the rights of nature which, in fact, need a much more expansive and inclusive understanding of care than does any right of humans. Finally, this chapter ends with placing in conversation the newly emerging legal imaginaries of the right to care and the rights of nature, which I approach with critical feminist hope.

Hawai'i's Feminist Economic Recovery Plan

By mid-April 2020, in the short space of five weeks, a group of close to forty feminists, gathered together by Khara Jabola-Karolus, a specialist in native Hawaiian law and the Executive Director of the Hawai'i State Commission on the Status of Women, which is a feminist government agency located in Honolulu, had written a feminist recovery plan. By June 15, 2020, Maui Council became the first council in the United States to have such a plan. Understanding themselves as the "Feminist Covid-19 Response Team", the group consisted of Native women and immigrant women, with Jabola-Carolus specifically inviting people into the team "whose working status or economic attainment normally keeps them out from engaging in policy formation and implementation", as stated in an article reporting on Hawai'i's Post-Covid recovery plan in the *yesmagazine* in July 2020. The plan's key recommendations include one to "diversify and reshape the economy" by moving away from tourism and the military and investing more in "subsistence living and the perpetuation

of land- and sea-based practices traditional to Hawai'i's ecological and food system."[54] There is a particular focus on care, demanding at once to build the state's social infrastructures of childcare, education and healthcare, to focus on midwifery and maternal health services, to introduce a universal basic income—which is seen as particularly relevant to combating sexual violence against women, with economic dependencies increasing the exposure to violence—and to "fully incorporate gender-based violence prevention in the immediate response and long-term recovery."[55] The plan calls into question the presumed neutrality of economic recovery stimulus funds and renders such neutrality legible as one of the instruments of power violence in unequal societies, insisting that a recovery plan need to "tie in gender with race, indigeneity, and class."[56] Viewing policy as a means to effect "deep cultural change", they insist that "response and recovery" has to necessarily include "repair and revival" in order to address historical violence and revive "place-based practices and knowledge."[57]

Building Bridges, Not Walking on Backs is the title of the Hawaiian feminist economic recovery plan. This seems to be an unusually poetic title for a policy document, the language of which is widely held to be bureaucratic or dry. Its metaphorical and literary quality is an indication that this feminist economic recovery plan understands changes in economy and politics to be necessarily part of larger processes of cultural transformation that are deeply connected to imaginaries. The title speaks to infrastructural consciousness and evokes images of feminized physical exertion, pain, exploitation, and even breakage. Forcing human backs to make up for missing bridges is an act of infrastructural violence and harm. It also raises the question who will walk and who will be walked on. This speaks to societal and political violence in the form of economies of inequality, with some enabled to walk while others become their system of support and are walked on. The title also places the feminist recovery plan in the larger cultural context of feminist writing as it is evocative of the seminal anthology *The Bridge Called My Back: Writings by Radical Women of Color*, edited jointly by Cherrie Moraga and Gloria E. Anzaldúa in 1981. Here, "the bridge" placed alongside spaces and infrastructures—which include roads, paths, tables, beds, and streets which can hold women back, which in the aftermath of colonial, racist, and sexist patriarchy can become sites of violence, exploitation, harm, and even death—is used as a powerful metaphor for liberation. In "Acts of Healing", placed at the beginning of the volume *The Bridge Called My Back*, feminist and queer cultural theorist Gloria Anzaldúa writes: "We carry this bridge inside us, the struggle, the movement

toward liberation. No doubt all of us have found by now that you don't build bridges by storming walls – that only puts people's backs up."[58] Bridges for liberation, carried inside, have to be translated into material bridges for liberation understood as real infrastructures of support and care. The struggles, and ethics, of decolonial, indigenous, and feminist-of-color politics are acknowledged and honored in the recovery plan's title. This underlines that this plan consciously builds on legacies of feminist liberation and understands its aims as part of the ongoing process of liberation, which is the very process of recovery from colonial racial patriarchy. Viewing the title for the feminist economic recovery plan as a programmatic declaration, a feminist manifesto and an acknowledgment of earlier feminisms, I also identify a distinct perspective here, which I view as feminist infrastructural consciousness-raising. The title speaks to infrastructural imaginaries. If infrastructure is lacking or failing, then bodies are obliged to make up for this and, at the same time, are imperiled, endangered, put at risk and exhausted more through forms of extractivism that require bodies to make up for lacking or failing essential infrastructures, in terms of both material-technological as well as human resources. Considering bodies as living infrastructure, in particular gendered and racialized bodies as well as bodies marked by class or caste, is constitutive of colonial racial patriarchy. Addressing gender, class, caste, ethnicity, race, and indigeneity as discriminatory and violent dimensions of infrastructure and working toward a distinctly feminist infrastructure politics makes explicit the crucial importance of infrastructure to both recovery and liberation. The enormity of violent planetary infrastructural penetration and the inequity and harm caused by lack of infrastructure, in particular the exclusion of the most vulnerable populations from access to infrastructural equity, requires thinking with the close, even intimate connection between bodies, environments, and infrastructures, which the title suggests. This situates infrastructure, as I argue, at the crucial intersection of social and environmental justice and makes socio-environmental and bio-material interdependencies central to infrapolitical accountability and responsibilities. Heightened infrastructural awareness motivated by the vulnerabilities that result from the compounded effects of pandemic and climate catastrophe requires conceiving of infrapolitics in terms of infrastructural intimacy, acknowledging that this "intimacy … poses a question of scale that links the instability of individual lives to the trajectories of the collective."[59] Connecting backs and bridges is a powerful way of introducing historical infrastructural harm and the need for recovery as well as repair, revitalization and liberation beyond Covid-19.

"The road to economic recovery should not be across women's backs."[60] This is the opening sentence of the Hawaiian Feminist Economic Recovery Plan. Policy advice, here, begins by stating what economic recovery should not be. The sentence was widely quoted, as the Hawaiian feminist recovery plan drew much attention in the context of feminist policy making, administration, and economics and provided strong inspiration and a model for feminists in many different parts of the world. It was also included in a new *Handbook on Gender and Public Administration* in the latter's chapter on gender-responsive budgeting.[61] Across women's backs is a captivating metaphor, not an idiom per se, but evocative of idiomatic expressions and other metaphors which foreground body and materiality. Across—movement across—women's backs makes one think of a long line of women: it is, perhaps, even evocative of the frontline. There are other images that come to mind: that each single woman's back, from one side to the other, is exposed to a heavy burden or weight causing pain and suffering, as though the paving of the road to recovery were repressing them and running across their backs rather than providing infrastructures of support. Across women's backs evokes their bodies, labors and strength, but also the pains caused them by too much weight. It invokes the dangers of exhaustion and of breaking. It makes one think of extremely arduous and exhausting labor, of hard physical efforts, with dictionary examples of how the word back is used often associated with the military, as in digging trenches. One may also think of the context of construction, where strongbacks running across joists are secondary support members to existing structures, and, interestingly enough, are also referred to as formwork soldiers—another indication of how deep-reaching such military imaginaries are, as they have informed literal and figurative language in many different contexts. Placing the formulation of 'across women's backs' next to familiar idioms including 'behind one's back', 'watch one's back' or 'have one's back', one realizes that this phrasing is strongly associated with watchfulness and carefulness. Doing something behind one's back means that it is done without someone's knowledge, most often to the person's disadvantage. To watch one's back means that one has to be very alert to what danger is happening. To have one's back means that this person is willing to look out for someone, to help, to be of assistance. The first sentence of the recovery plan seems to suggest, therefore, that women have to be most watchful that a hegemonic economic recovery plan does not run them over, does not hit them, while at the same time it is a recommendation to be very careful that such plans are not made behind women's backs, that is without their involvement and their knowledges in plural, that come from their his-

tories, biographies, and their care worlds. Raising awareness of women's past exclusion from writing economic recovery plans after economic crises, environmental disasters, or wars also explains that, in the past, such recovery plans have silenced the essentiality of care, as they knowingly placed extra burdens on women's backs.

Highly critical of "capitalism, white supremacy and systemic sexism", the feminist recovery plan demonstrates that policy can be used as an instrument in order to build bridges between grassroots activism and government as well as between the needs and interests of different women and act as a vehicle for "women's liberation".[62] Viewing policy as a means of effecting wider cultural change beyond the economy, this feminist recovery plan encourages "a deep structural transition to an economy that better values the work we know is essential to sustaining us" and stipulates a requirement to "recognize and value all members of our communities beyond their value to economic production in capitalism."[63] Jabola-Carolus, who initiated the plan, stressed the following: "I'm an anti-imperialist feminist. I am a transnational feminist, and I'm also a bureaucrat. I get to occupy this space because I had built up a sisterhood around me and that sisterhood existed before me, built by other women", as she emphasized that planning and working for feminist recovery is "a manifestation of the women's movement in Hawai'i."[64] This makes visible the importance to bureaucracy of anti-imperialist, transnational, and liberatory feminism: and there needs to be assurance that bureaucracy will not become an instrument in the hands of "femocrats", but truly works for liberation, in alliance and close collaboration with grassroots feminisms, activists, and researchers.[65] The Hawaiian plan sparked other feminist recovery plans on national as well as international levels. Feminist planning for recovery in pandemic times and beyond can thus be viewed as a manifestation of the contemporary transnational women's movement, which seeks to recover from the wounds of patriarchal violence and the harms of historical and mainstream white-centric feminism as care is placed at the center of political and economic organizing and cultural imaginaries.

African Feminist Post-COVID-19 Economic Recovery Statement

In July 2020, the NAWI Afrifem Macroeconomics Collective, which had been launched earlier the same year to work intersectionally and transformatively on macroeconomic policies, wrote the *African Feminist Post-COVID-19 Economic*

Recovery Statement, which was signed by 340 African feminists from different places across the African continent. The statement was sent as a letter to Ngozi Okonjo-Iweala, Donald Kaberuka, Tidjane Thiam, Trevor Manuel, and Abderrahmane Benkhalfa, the Special Envoys mandated by the African Union to mobilize international support in order to address the Covid-19 pandemic across the African continent. Writing from a perspective of Pan African liberation, the collective argues against economic orthodoxy and compulsory neoliberalism and connects a macroeconomic perspective to a human rights lens in order to foreground the centrality of a different economy, not based on profit and the exploitation of lands, resources, and care. They critically point out that the "gender dimensions of prevailing policies" are not well understood and that the pandemic crisis has exposed women's economic and "fiscal precarity" and that women's unpaid care and domestic work continually subsidizes economic profits.[66] They strongly recommend that states reorient their economies to the "popular or horizon economy", with "almost all of the agricultural sector in Africa, 97.7 percent" informal and thus invisibilized. Further, they demand debt cancellation and argue for the right of African communities, who are "the custodians of the land and environment", to veto finance or development projects.[67] The *African Feminist Post-COVID-19 Economic Recovery Statement* places care at the center, stating that "no turnaround in Africa's socio-economic fortunes will happen without recognizing the economic, social, political and cultural value of the care economy", that states have harmed care as they withdrew from their international human rights obligations and that the "time is well overdue for policies that recognize the centrality of care work for health systems and the economy."[68]

A Feminist Economic Plan for Recovery in Canada

The YWCA in Canada, which is Canada's largest, and oldest, women's multiservice organization, diagnosed that the

"COVID-19 pandemic has deepened a trio of interlocking crises that threaten women and girls around the world: spiking levels of gender-based violence, steep losses in employment and an unmanageable increase in unpaid care work", which also led to establishing its #GenderEquityDuringAPandemic virtual series featuring online town hall discussions and open space resource sharing."[69] In July 2020, *A Feminist Economic Plan for Recovery in Canada* was released, co-written by the YWCA. The homepage of the website, which offers

the key recommendations along with the full plan document, states that "there *is* no recovery if we leave women, Two-Spirit, and gender-diverse people behind."[70] This reveals what hegemonic understandings of economic recovery choose to ignore. If there were a return to so-called normal, the bodies, minds, energies, spirits, and lives of those left behind would never be supported and enabled to recover, because of lack of health, housing, education and income. The precarious economic actualities of the majority of people around the world would worsen, if global recession, rising debt, and job loss were not counteracted with transition to a different economic model that places the care for humans and all other living and non-living beings and their shared planetary environments at the center. The plan's opening sentence clearly states the brutal reality that recovery is no recovery at all if the majority—who, in all countries around the world, are populations who have historically been made vulnerable and marginalized—are left behind again and are not considered central to how economic recovery is defined and organized. Such leaving out and leaving behind are characteristics of structural carelessness and uncaring policies.

The Canadian feminist economic plan for recovery, which was the first national plan of its kind, was led by innovation scholar and founding Director of the Institute for Gender and the Economy at Toronto's Rotman School of Management at the University of Toronto Sarah Kaplan and by social worker and CEO of YWCA Canada Maya Roy, who, in 2019, had been a member of Canada's official delegation to the United Nations Commission on the Status of Women. The two report authors are Anjum Sultana, who focuses on public health, gender equity, civic engagement, and public policy and serves as the National Director of Public Policy and Strategic Communications at YWCA Canada, and Carmina Ravanera, whose research focuses on feminism, equity, and social and economic justice and who is a research associate at the Institute for Gender and Economy at the University of Toronto. Acknowledging that the two institutions at which the people behind the feminist plan are based have "benefited from colonial policy" and expressing that "Canada's economic prosperity is rooted in the appropriation and theft of indigenous lands and resources", the objective of the feminist plan is to support "policies, which enable the decolonization and indigenizing of Covid-19 recovery efforts."[71] Observing that there is growing public understanding that feminized and racialized labor is essential to the production of public health and well-being and that this is owed to the caring labors of women, "especially women of color and recent immigrants", who are leading the current response to the pandemic crisis and

are actively preventing further fallout, the report suggests that there is actually a larger paradigm shift underway that recognizes the centrality of care.[72] According to the Canadian feminist plan, public policy for recovery should be built on the following eight pillars: intersectionality, analysis of the root causes of systemic racism, care work as essential work, investment in good jobs, fighting sexual violence, bolstering small businesses, strengthening infrastructure, and political change through diverse voices in decision-making.[73]

Covid-19 Feminist Recovery Plan: Women's Policy Group in Northern Ireland

July 2020 also witnessed the release of the Covid-19 Feminist Recovery Plan by the Women's Policy Group in Northern Ireland. Much like the Hawaiian feminist plan, this one was a collaborative process, which provides evidence for women's capacity to organize in pandemic times, as feminists in public policy, labor and health organizing, community mobilization, advocacy, activism, civic society organizations, and research have long been cultivating exchanges and collaborations before the pandemic. One could say that feminists were prepared to respond to the hegemonic response prompted by the pandemic crisis. Drawing on years of feminist organizing and bringing together on this platform perspectives and knowledge from trade unions, grassroots activism, women's networks, campaigning organizations, LGBT+ organizations, migrant groups, support service providers, NGOs as well as human rights and equality organizations, they explicitly acknowledge the Hawaiian plan as a source of inspiration and also refer to their 2019 Women's Policy Group NI Manifesto. Highlighting the detrimental effects of the austerity measures following the economic/financial crisis of 2008 on the economic situation and the lives of women, the report draws on the evidence of the pandemic, which, again, disproportionately impacted on women, who had already been suffering for over a decade. Resting on four pillars—economic justice, health justice, social justice, and cultural justice, which refers to women and girls in the media, hate crimes and online abuse, rape culture, violence against women, and to education and training—their recommendations are aligned with the Purple Pact, a 2020 initiative by the European Women's Lobby that proposes feminist economics for "peace and wellbeing for all on a healthy planet", seeking to reconcile economic, social and environmental justice, the

infrastructures needed for a universal social care system, and a labor market that focuses on care, social protection, and equality.[74]

Covid-19 Feminist Recovery Plan to Achieve Substantive Gender Equality–Center for Women's Global Leadership at Rutgers

In 2021, the Center for Women's Global Leadership at Rutgers, a public research university in the United States, published its policy recommendations as part of the 2021 *Covid-19 Feminist Recovery Plan to Achieve Substantive Gender Equality.* These recommendations are written from the perspectives of macroeconomics as well as women's rights as human rights. The Center for Women's Global Leadership at Rutgers, which is behind the plan, was founded in 1989 and is active in international policy and United Nations monitoring as well as being a contributor to transnational campaigning and mobilizing, as exemplified, among others, by the making of the campaign *16 Days of Activism Against Gender-Based Violence*. The feminist report was written by former faculty director at the Center for Women's Global Leadership at Rutgers and president of the International Association for Feminist Economics Radhika Balakrishnan, and by women's rights advocate Melissa Upreti and social anthropologist Camila Belliard. Based on the rights approach, they share the following diagnosis of the UN Working Group on discrimination against women and girls:

> there has been a systemic failure to properly integrate the biological function of reproduction and the gendered function of unpaid caring into macroeconomic policy in a holistic, effective and coherent way, to ensure that reproduction and caring go hand-in-hand with the overall economic empowerment of women.[75]

Their policy recommendations follow not only from a literature review on "care work, feminist macroeconomics, human rights and Covid-19 recovery reports" but also from additional online exchanges with people from different parts of the world over a period of three months in the fall of 2020, in particular with the New Zealand Human Rights Commission. The feminist plan of the Center for Women's Global Leadership specifically recommends a "purple economy" with its focus on the centrality of unpaid caring labor and a broad understanding of care across human care needs and environmental care needs.[76] According to their recommendations, the purple economy should be "organized around sustainability of caring labor through a redistributive internationalization of

the costs of care into the workings of an economic system" and they advocate access to universal social care services, labor market regulation for a work-life balance for all regardless of their gender, ecologically sound infrastructure, in particular for rural communities, and a macroeconomic environment that enables decent employment.[77] They strongly emphasize that it is important to "work to transform the international economic system" for "caring economies across the world." [78]

Feminist Recovery Plan Project at the University of Warwick

One example of fostering transnational exchange at grassroots, policy, and academic levels for the purpose of writing policies and plans for feminist recovery during and after the Covid-19 pandemic was an event hosted online by the University of Warwick in June 2021.[79] The event brought together the following people, who had been working on feminist recovery in different parts of the world: Khara Jabola-Carolus, women's sector lobbyist; Rachel Powell from the Women's Policy Group NI, WRDA Northern Ireland, who published a Feminist Recovery Plan in July 2020; Constanza Pauchulo from the International Women's Rights Action Watch Asia Pacific in Malaysia (IWRAW AP has Special Consultative status with the Economic and Social Council of the United Nations); and Anita Gurumurthy, who works at the nongovernmental organization IT for Change in Bengalaru, India and focuses on how Covid-19 has exacerbated the existing disadvantages for women in the digital economy, particularly for women in rural contexts. Further, the event brought together Beatrice Karore, community mobilizer and founder of the Wanawake Mashinani (grassroots women) Initiative in Mathare in Kenya's capital, Nairobi, who works with survivors of abuse and violence and was joined by Nairobi-based activist Felogene Anumo, who is with the Association for Women's Rights in Development, a movement-support organization dedicated to gender justice and women's human rights; Enrica Rigo, Teresa Maisano, and Michela Pizzicanelle, from the Non Una di Meno movement Roma in Italy, who focused on the Covid-related rise of femicides in Italy; social scientist and leader of Ni Una Menos Argentina, Verónica Gago, and sociologist and Ni Una Menos activist, Lucí Cavallero, who co-authored *A Feminist Reading of Debt*; and Rocío Rosero Garcés and Silvana Tapia Tapia, who focus on violence against women, from the Coaliciòn Nacional de Mujeres del Ecuador.[80] I have listed here, in detail, the speakers brought together by this

workshop, which was organized by socio-legal scholar Serena Natile in order to emphasize how transnational organizing not only kept alive, but in fact invigorated feminism in Covid-19 times and how these feminist approaches specifically address economies and politics that result in violence, injustices, and increased inequality that puts lives and labors under deadly pressures.

Concerned with structural transformation, this gathering also exemplifies how expertise and expert findings generated across sectors in politics and across fields in academia need to converge, because the body that experiences a lack of care, burdens of care, pressures of debt, and violent attacks is the same body that suffers from being split into sectors or fields when these very much needed specializations in these sectors and fields fail to come together and listen to one another. This is one way in which feminist organizing and knowledge-making counteracts the legacies of epistemologies of separation. Understanding the university, here, to offer a platform for listening and learning with grassroots activism inspires hope that unlearning patriarchy is, in fact, possible. This event demonstrated that plans for feminist recovery can bring together activism, community mobilization, policy, research, scholarship, and theory from university institutions in order to respond to the catastrophic conditions of the real world. The resulting report, written by Serena Natile at the University of Warwick and titled *Towards feminist recovery plans for Covid-19 and beyond*, is a policy brief aimed at national and transnational levels. It was published by the Centre for Law, Regulation & Governance of the Global Economy, GLOBE, as part of their Policy Brief Series dedicated to matters of public interest and contemporary concerns. Natile describes systematically, and methodologically, the differences between hegemonic recovery plans and feminist recovery plans, making it clear that the so-called normal of top-down policy-making, which assumes a self-contained, neutral subject and gender equality and is only of interest when viewed from the perspective of profit and growth, can be counteracted by policy based on grassroots expertise, listening and learning from and with marginalized and jeopardized subjects, and on redistributive measures against global injustice and for long-term wellbeing.[81] This emergent feminist understanding of recovery addresses "global injustice" in its locally specific contexts and is highly aware of infrastructural violence, income injustices and debt violence, and the devaluation of caring labors. Concerned, at the same time, with how policies, and politics, should be made in the future and how economies should operate, the recommendations include transnational labor standards and enforcement mechanisms by community and grassroots groups, universal basic income,

social services connected to infrastructure, reparation by means of cancelling countries' external debt, food and land rights, and digital technology useful to reparation and redistribution.[82]

UN Women: Beyond Covid-19

In September 2021, UN Women published a close to hundred pages long feminist plan, which has the title *Beyond Covid-19. A Feminist Plan for Sustainability and Social Justice.* With the support of expert advisors as well as in consultation with a large group of people from organizations around the world—among them NAWI, who had written the Pan-African feminist recovery recommendations, or Rhadika Balakrishnan, who had worked on the plan at the Center for Women's Global Leadership at Rutgers—the plan acknowledged the expertise of others who had already worked on feminist economic recommendations for public policy. Highlighting that the feminist plan is written from the perspective of "diverse feminists" and drawing attention to the long history of Black and Indigenous activists resisting the idea of a universal woman subject based on notions of Whiteness and class privilege, the feminist recovery plan is based on the concept of intersectionality, as developed in legal terms by civil rights advocate and scholar of critical race theory Kimberlé Crenshaw.[83] During the pandemic, Crenshaw hosted the podcast *Intersectionality Matters!* which is available at the website of the African American Policy Forum and foregrounds how the pandemic has laid bare intersectional vulnerabilities.[84] Intersectional politics, in the context of this plan, advocates the recognition of historically produced injustices arising from colonialism, which also enforced compulsory heteronormativity and gender binarity on the plurality of lived sexualities and multiple genders, as well as an understanding that feminist struggles are linked with other social and environmental justice movements.[85] The plan argues that the acute pandemic crisis has revealed a "livelihood crisis", which increases the vulnerability of the majority of people, along with a "care crisis", which leaves those in need of care, in particular children and adults, who are dependent upon care, without support while, at the same time, "imposing hard choices and enormous costs on women and girls". To these two crises, they add a third the "environmental and climate crisis", which poses new threats to social justice and in particular to gender equality.[86] The recommendations and proposals include focusing on social protection, care-led recovery and building a new care economy, producing more data on care,

and a green recovery with gender-responsive and gender-just transitions in energy and agriculture and more data on the gender and environment nexus.[87] Perhaps one sees here, in the language of policy and perspectives on human rights and macroeconomics, a coming together of a politics of intersectionality and a politics of interdependencies of bodies and natures, which has long been the focus of ecofeminist analysis and struggles—and, perhaps, that often criticized project of examining together the state of women and the state of nature will be revitalized by the real actualities of social and environmental catastrophe.

Broadly speaking, these different feminist economic recovery plans, whether aiming their recommendations at local, state, or international contexts, demonstrate the capacity of feminists to organize in times of crises. I argue here that this feminist preparedness made manifest in reply to the acute crisis provoked by the way many governments and economies responded to the pandemic and moved toward recovery as back to normal is owed to the fact that the histories, and practices, of feminisms can be understood as a continuously transforming response to changing conditions of crises, with the actualities of each crisis different, but the structural dimensions of crisis under patriarchy continuous. While it may appear reductive to understand feminism through its very capacity to respond to crisis, since this might suggest that feminism does not act, but simply re-acts to the given, I see feminism's special, and intimate, relation to crisis as its strength, in its capacity to never give up and to continue to work for liberation, emancipation, and just transformation precisely when liberation, emancipation, and just transformation come to seem impossible. The structural crisis of care has long been understood by feminist activism and scholarship and much spoken and written about by, among others, Margaret Prescod, Silvia Federici, Selma James, Nancy Fraser, or Françoise Vergès. Feminist philosopher and critical political theorist Nancy Fraser, a seminal diagnostician of this crisis, explains that "the gendered separation of social reproduction from economic production constitutes the principal institutional basis for women's subordination in capitalist societies."[88] With the pandemic exposing the essentiality of care, the structural and pre-existing crisis of care, which extends beyond human care and includes the planetary care needs of all living and non-living beings and their shared environments, became highly visible.

Building on decades and centuries of feminist legacies that have all—albeit in different ways, with different emphases or even very different arguments—argued for the centrality of care for bodies, minds, spirits, and na-

tures, feminist economic recovery plans began to envision a present and a future which will make care the center of economic and political organization.[89] These plans used the tools and language of public policy for care. Acknowledging the violent, and deadly dimensions of pandemic conditions, and the economic and mental pressures on care, these conditions were also viewed as a moment to bring the uncaringness to light and to work for a transition to a just organization of livelihoods that cares for humans and environments. In the pandemic crisis, writing public policy became an articulation, and an instrument, of feminism. The way in which the feminist plans and their recommendations are written demonstrates that this feminist policy is informed by grassroots activism as well as feminist theories, in particular transnational, multidimensional, race critical, indigenous, gender-critical, decolonial, ecological, and environmental feminist theories, and that thinking and writing policy is understood through horizontal, collaborative, and transversal feminist politics. In the Hawaiian feminist economic recovery plan, the choice of language continued traditions of feminist theorizing through metaphor as expressions of materially lived actualities and articulations of hope for liberation and transformation.

The feminist plans for recovery and their policy recommendations for caring economies and infrastructures, and the care feminism of the twenty-first century more broadly, suggest that the need for a new international care order is held to be central.[90] In March 2020, Oxfam, the British-founded and Nairobi-headquartered confederation of twenty-one charitable organizations that focuses on poverty eradication, disaster relief, and policy research, released a briefing titled "Coronavirus does not discriminate, but inequality does. Beating the pandemic means dealing with inequality". They state that "our fates are not predestined" and that "Coronavirus shows us the raw outlines of the system in which we live, the inequality that we had hoped to ignore, and the urgent need to revalue and strengthen our sense of what is public, common, and collective."[91] Writing in 2020, diagnosing the pandemic situation in the United States of America, health activist and epidemiologist of microbial diseases Gregg Gonsalves and legal scholar Amy Kapczynski, who specializes on health justice and political economy, share an observation that goes beyond their geographical context and is of global relevance:

> We must build, in short, a new infrastructure of care to protect us all – a new order that, instead of perpetuating the virulent inequality and exploitation

> of late twentieth-century capitalism, makes health justice and care a core feature of our democracy.[92]

A new global international care order is, indeed, needed. The Global Alliance for Care argues for recognizing "care as human right".[93] In what follows I will examine more closely the notion of the right to care, placing it in historical relation to how care was framed and defined through the two central international economic and human rights frameworks that were established in response to traumatic experience of war and crisis in the twentieth century. Thinking expansively on what care feminism is and does, I place the present-day feminist plans for recovery, in particular the notions used by the Global Alliance for Care, not only in relation to the historical modern international care order, but also adjacent to emergent developments around the rights of nature, asking how there are imaginaries and articulations of care feminism that are moving beyond the separation of humans from all other living and non-living beings.

The Modern International Care Order: Gross Domestic Product and Universal Human Rights

In the twentieth century, the crises of economic depression and of genocidal war became the defining moments of how care has been defined through a new international order in economic, legal, and political terms. Understanding that the definition, and thus the economic and legal conditions of care are not naturally given, but historically produced, leads to better understanding of the original conflict and the persistent contradiction between economic values and human rights. The impact of the economic meltdown that followed the 1929 Great Depression upon the global economy and upon how lives can be lived, and conditions of life in the aftermath of mass death and genocidal murder after World War II, gave rise to the establishment of two international frameworks which still determine, today, how economic values and human rights are understood. These frameworks are the measurement of national economies through the Gross Domestic Product GDP, which was internationally accepted after the Bretton Woods Conference in 1944, and the Universal Declaration of Human Rights, which was adopted in 1948. Placing these two frameworks in dialogue with each other allows a much clearer understanding of the structural causes behind the care dilemma that arises from the prevailing and, if anything, deepening contradiction between the economy and

politics. The Great Depression, which Gita Gopinath, the chief economist of the International Monetary Fund, compares with the economic shock caused by the Great Lockdown in pandemic times, shattered the world economies after the stock market collapsed in October 1929.[94]

The Great Depression endured throughout the 1930s. In response to the experience of the crash in 1929, governments felt that they needed to have much better data on the state of their economies in order to be better prepared for future economic crises. Governments wanted an early warning system to be in place so that economic crisis would not hit so unexpectedly. This led to the first such statistical account measuring the economy of the United States in 1934 and, subsequently, to the adoption of this model of measuring their gross domestic product by other countries ten years later, in 1944. Measuring the economy was firmly tied to the organizational model of the nation state. In 1934, statistician Simon Kuznets produced, in the United States, the first such set of data, which is widely understood to mark the beginning of what is called the GDP.[95] During the process of economists, statisticians, and policy makers deliberating and eventually deciding on what counts as valuable to the economy and therefore needs to be measured, the exclusion of unpaid care work was a "deliberate decision".[96] The economist and advisor to public finance and public administrations Paul Studensky observed in his 1958 *The Income of Nations* that the "omission of unpaid services of housewives from national income computation distorts the picture" and that even though "unpaid work in the home should be included in the GDP", it was not.[97] In her book *GDP A Brief But Affectionate History*, which was first published in 2014, the economist and expert on public policy Diane Coyle, who also conducts research and advises on new measures for the economy in the twenty-first century beyond the GDP, explains that the main reason provided in hegemonic economic views to justify "not counting unpaid housework as part of the 'economy'" is "the difficulty of measuring it."[98] How can it be that what keeps economies alive and is essential to them is too difficult, too time-consuming to measure? What does this tell us about such hegemonic economic ways of seeing? Why is it so much easier to exclude from economic viewing angles the complex ways in which caring labors are obliged to view the world? How can it be that the productivity of the *oikos*—the ancient Greek word for household—from which emanates a specific *nomos*, the ancient Greek for a habit of social and political behavior (that is the etymology behind economy) was actually excluded from hegemonic economy? We can view this establishment of twentieth-century statistical silencing as a distinct form of classed, gendered, and racialized

data violence as well as economic violence, at the level of state economies. As activist and journalist Caroline Criado Perez observes, "what governments do and what businesses do came to be seen as the definition of the economy".[99] Everything else, even though understood to be essential to the economy, has been divested of any economic value. One of the founding figures of feminist economics and expert in public policy, Marilyn Waring, elucidates in her book *Counting for Nothing: What Men Value and What Women are Worth* that the GDP is "used to monitor rates and patterns of growth to measure 'economic welfare'" and that all the activities outside of the "production boundary"—the "great bulk of labour performed by women in an unpaid capacity" in all the nations around the world—"are excluded from the GDP."[100] Coyle explains that in the historical fixation on productivity, the "production boundary" can be understood as an "imaginary line" that divides the productive from the unproductive.[101] Following Waring, everything outside of production is "economic inactivity".[102] One can see, here, that the diagnosis by the International Monetary Fund's director Georgieva of the standstill of the world economy is, in fact, a continuation of this historic production boundary, with its imperative of growth and of ignoring what is held to be economic inactivity. This distinction between so-called economic activity and so-called economic inactivity is also an effect of epistemologies of separation. What is of interest, here, in tracing the formation of the international care order—along with its potential transformation, in its historical lineage, which continues to powerfully and lastingly shape economic realities just as much economic imaginaries—is how closely related to war measurement of the economy and of what, today, is understood as the GDP actually is. National accounting, as Coyle explains in her history of the GDP, is linked to the history of war and emerges from the need of England and Wales to understand the "resources to fight a conflict and finance it through taxes" during the seventeenth-century Anglo-Dutch wars.[103]

With the 1929 Great Depression, as stated earlier, leading to the modern idea of data on the state's economy-relevant government, the development of the GDP in the decades that followed was, in fact, based on the idea of a war economy, with states needing information so they could "see the economic potential for war production". Instead of welfare, which is what statistician Kuznet had had in view when collecting data on the state of the economy, warfare became the economy's defining objective.[104] Better statistics were needed for preparedness for the war effort.[105] Better statistics for understanding economies from the viewpoint of care, and through the lens of hours

needed to provide for care in order to sustain and continue life in social and environmental terms, could have been an approach to the economy in general, but they were not—for the obvious reasons of masculinist and militarist values. Interestingly enough, subsistence economies became crucially relevant and women's labor needed for producing food and care was visibly harnessed for the war effort at the time the new standard for measuring the GDP was being developed. As now, in pandemic times, when the centrality of care is highly visible and the pandemic gaze celebrates this centrality through visual forms of care militancy and care heroism, there was a comparable visual mobilization not only of women's paid labor in the war workforce (as in the iconic image of Rosy the Riveter, who became the poster girl for women who worked in factories and shipyards for the war effort of the United States during World War II)—the poster images of Victory Gardens, which showed women as agricultural workers and therefore nurturers of the nation on the home front, were equally iconic.[106] This specific hinterland economy, essential to the functioning of the war economy, lent high visibility to women's labor—in particular, also, to their unpaid labor in the nation's war gardens—while denying this labor economic value. Visual visibility of care should not be mistaken for economic visibility or acknowledgment in data. Yet the data collection methods for visualizing women's unpaid hours of caring labors would have been readily available at the time. In scholarly terms, the statistical tools for collecting data on unpaid caring labors actually predate the development of measuring the GDP of states.

During the 1920s, political scientist and economist Käthe Leichter introduced statistics and time-use surveys in order to gather data on working women's conditions of work and life in Vienna. In the context of the establishment of the Chamber of Labour, introduced by law in Austria in 1920, socialist women demanded a special Department for Women's Affairs. Leichter became the first spokesperson of this department and immediately set out to organize the collection of data. Mobilizing the context of the organized labor movement, thousands of women workers, including domestic servants and homeworkers, were interviewed on their hours of work, housework, and childcare. Combining in the survey what came to be known as the double shift, that is working women's economic condition of having to do paid and unpaid work, Leichter's development of time surveys was aligned with the "battle for the rights of working women" and aimed at "equal pay for equal work" as well as "protection for working mothers."[107] Even though working class women's political demands, at the time, were not focused on pay for housework or on

how unpaid caring labors could be more equally shared, but, rather, on the equality of pay for work performed in the factories, as domestics, or as homeworkers, the specific political struggles of women within the working-class labor movement led to Leichter establishing a scientific method of collecting extensive information on how the economy actually works. Interestingly, we can see in her approach a practice and a politics of what I suggest calling data pedagogies. In her books and publications, Leichter employed the new graphic design method for the visualization of complex data as they were developed at the time, which was devised by Otto Neurath and Marie Neurath, née Reidemeister. These statistics in visual form, which later became well known as isotypes—International System of Typographic Picture Education—, are icons that aim to translate statistical data collected through sociological research into easily graspable imagery. This approach of making data visible and thus more easily accessible and useful to those who are being represented via the data, speaks at once to political socialist activism, research ethics, and a nascent form of data pedagogies. I therefore see Leichter's work as an early twentieth-century contribution not only to feminist economy, social research, and policy, but also to innovative feminist data pedagogies which developed ways of making care visible, thus counteracting the systemic invisibilization of women's caring labors. In particular, the method provides evidence of the time needed for and invested in these labors.

Today, we are still faced with a persistent data gap when it comes to statistical data on the number of hours women invest in doing unpaid work. According to British journalist and campaigner Caroline Criado Perez, "the failure to measure unpaid household services is perhaps the greatest gender data gap of all", with estimates "that unpaid care work could account for up to 50% of GDP in high-income countries, and as much as 80% of GDP in low- income countries." [108] With unpaid caring labors trapped in global economic invisibility, viewing care as inactivity and unproductive has, of course, largely impacted on ways of seeing paid caring labor. Far from organizing measurement of the economy from the viewpoint of the centrality of care, care was erased from what is officially viewed as counting as the economy. Referring to John Maynard Keynes, Waring states that "much of the economic discipline is a matter of perception", as she concludes from this that "what does or does not constitute production" depends on "the way you see the world." [109] As a cultural theorist, I am particularly interested in this emphasis on ways of seeing, as this underlines how hegemonic economic imaginaries of what counts as production and what does not have had far-reaching consequences beyond the economy and

impacted largely not only on the economic status of people, but impacted on their bodies, minds and spirits in epistemic, emotional, and affective ways of how they came to think of their own ways of seeing and knowing the world and their political subjectivities. The production binary, that is the imaginary line that divides what is held to be productive from what is held to be unproductive, and the realities and imaginaries of war informed the economic order, in which care was devalued in economic terms, a phenomenon which has to be placed in relation to epistemological, cultural, social, and political devaluation. What patriarchal economy has taken from the ways in which the world is seen is the value of care. Such hegemonic imaginaries can exhaust, dry up, and kill off people's collective cultural and social imaginaries and also threaten individual people's capacity to imagine care differently and to become able to have, again, ways of seeing care outside of the economic policing of the production boundary, which is governed today by punitive, and compulsory, neoliberal capitalism.

So far, I have examined the establishment of the GDP as one of the two frameworks that defined the new international care order in the twentieth century. I will now turn to the second framework, the Universal Declaration of Human Rights. Just one year after the global standard for measuring the economy was adopted internationally in the Bretton Woods Conference, representatives of the Allies of World War II including China, France, the United Kingdom, and the United States came together for a conference in San Francisco in 1945 that led to the Charter of the United Nations, which is the foundational treaty of the United Nations. At this meeting, human rights were not even on the official agenda. Yet the very recent experience of having lived through enormous pressures on human rights on account of the hardships suffered during the Great Depression and during World War II, the trauma of the Holocaust, and also the incipient struggles for liberation from colonial oppression, led many to argue for the inclusion of human rights on the agenda of the United Nations. Following from the political understanding that human rights are central to the postwar transition and to working toward peace, in 1946 a nine-person commission with members from Norway, Belgium, France, Peru, China, the Soviet Union, Yugoslavia, India, and the United States was appointed. The group began to work on what ultimately became the international document of the Universal Declaration of Human Rights. The commission was chaired by the US Delegate to the United Nations, Eleanor Roosevelt, a political activist and social reformer with ties to the civil rights movement and to the women's movement. Historian Allida M. Black has pointed out that Roosevelt's understanding of

what human rights are was shaped not only by her learning about the Holocaust and the life conditions of survivors of Nazi concentration camps, which has often been emphasized as central to Roosevelt's active engagement for basic human rights, but also by the experience of the Great Depression, which impacted disproportionately the lives of African Americans and other disenfranchised and marginalized communities with the increase in racialized violence and injustice caused by the economic meltdown.[110] Roosevelt's awareness of these traumatic historical contexts led to her insistence that political rights were real only in the concrete actualities and practices of everyday life.

Human rights do not exist as abstract ideas or ideals. Consequently, owed to Roosevelt's insistence, such basic needs for human life and survival, including food, shelter, clothing, or health—which are, of course, all essential to care—have been written into the universal declaration of human rights. Realizing that it was, in fact, one person's understanding of what centrally matters to human life and survival, along with this person's insistence, that led to including these rights to food, shelter, clothing, and health—in short, care—makes this a crucial moment, which allows a realization, in historical hindsight, that the hegemonic patriarchal view, the epistemologies of separation and mastery, could have easily led to forgetting, silencing, and excluding what is essential for human life from human rights—in the way that caring labors were excluded from the hegemonic framework of the GDP, which was internationally adopted at the same time. One can identify, here, a moment in which the presence and insistence of one woman's perspective did make a change. This also leads to understanding how important it is to feminist policy-writing in today's pandemic times that policy is written together by advocates, bureaucrats, activists, researchers, and many other perspectives: this necessarily changes the knowledge perspectives on what matters and how rights are viewed and defined.

I will now quote, in full length, Article 25 of the Universal Declaration of Human Rights, in order to show how the rights to care, even though they were not called rights to care, were defined as part of human rights in 1948:

> (1) Everyone has the right to a standard of living adequate for the health and well-being of himself and of his family, including food, clothing, housing and medical care and necessary social services, and the right to security in the event of unemployment, sickness, disability, widowhood, old age or other lack of livelihood in circumstances beyond his control. (2) Motherhood and

> childhood are entitled to special care and assistance. All children, whether born in or out of wedlock, shall enjoy the same social protection.[111]

In a 1953 speech to the UN, Eleanor Roosevelt highlighted the realities of rights:

> Where, after all, do universal human rights begin? In small places, close to home – so close and so small that they cannot be seen on any map of the world. Yet they *are* the world of the individual person: The neighborhood he lives in; the school or college he attends; the factory, farm, or office where he works. Such are the places where every man, woman, and child seek equal justice, equal opportunity, equal dignity without discrimination. Unless these rights have meaning there, they have little meaning anywhere. Without concerted citizen action to uphold them close to home, we shall look in vain for progress in the larger world.[112]

Such an understanding of human rights in actual material realities foregrounds that conditions of everyday life are defined by access to what these rights are intended to guarantee. Reading her description of the everyday sites and spaces in which human rights are enacted (where lives have rights to live or to assert that their rights are being violated, harmed, or infringed upon), one cannot help but notice the omission of the home, which is of course a central, essential site for human rights. For human rights as they were conceptualized at the time after World War II, and for the newly emerging notion of a right to care today to be substantive, one has to think of rights everywhere in order to understand more fully the enormity of their absence. The global international care order created by those two frameworks—the measurement of the Gross Domestic Product and the Universal Declaration of Human Rights—manifests how care was being torn up through this split that separates economy from politics. I see this as one central expression of an epistemology of separation, as it is translated into economic and political realities. This separation, with care absent from economic imaginaries and frameworks yet present in legal ones, resulted in the creation of a global international care dilemma. This care dilemma is faced with an economy that does nothing to uphold the rights to care but demands everything in order to provide for care. This care dilemma is caused by a political world order that recognizes human rights as legally binding, yet does very little to actually guarantee that these rights, including the rights to care, are upheld in lived concrete realities. A different politics in and for the economy is needed in order to reconcile this dilemma. I see this politics embodied and practiced in care feminism, which can offer the basis

for imagining a new global international care order around a new economic framework that defines the value of everything and, most importantly, the value of care differently.

These two twentieth-century frameworks have become dominant. They have not only shaped political, social, and legal realities, but they have also informed people's ideas and imaginaries of what economies and human rights are and are therefore hugely influential on ways of seeing care. Here, we see how care has been placed outside the active economy and inside what matters to human rights-bearing subjects. Since the universal declaration of human rights, the idea of universality has been the reason for deep unease, profound questioning, and, in my own reading, feminist worry. The title of the declaration does not proclaim universal human rights, but, rather, makes their declaration universal, which is a strong indication that these are Man-made laws, made by Men, who wielded power to declare that their declaration is universal. Yet critiques and contestations of universality in relation to human rights have elided the discussion of the universality of the declaration, and focused on the universality of rights. Who is the human who was thought to have universal rights? Who is represented in this notion of the human as bearer of universal rights and can therefore claim legal representation through this idea? To make this even clearer: Whose ideas and whose epistemic understandings defined historically who counts as human and who does not?

The violent histories of racist and sexist colonialism, the philosophical and political ideas of who counts as a citizen which are behind the modern institution of citizenship as well as more recent critical understandings of the supremacist violence inherent in speciesism, provide plenty of grounds for feminist worry in relation to this notion of universality. In 1948, the very year of the Universal Declaration of Human Rights, South Africa introduced and implemented the system of apartheid. At the very inception of any substantive universality, the aftermath of conquest, the annihilation of indigenous life, and the afterlife of slavery globally, but particularly in settler colonial contexts—as, for example, across the Americas and the Pacific or in the context of Northern colonialism in Europe or Russian colonialism, with the Soviet Union's territories based on the imperial conquests of Tsarist Russia—would have required practices of reparation, restitution, and recovery to be enshrined in such a universal declaration of human rights. There would have been the need to acknowledge and account for the historical violence with its epistemologies of separation, which rendered some of the humans human

while denying other humans their humanity. Racist and anti-Semitic science produced death-making realities and supported extinction imaginaries, mass violence—including exploitation through slavery—, and genocide. But rather than confronting these violent legacies of defining who counts as human, modern supremacist Man informed the ideology behind the universality of rights—as decolonial and anti-colonial thinkers have tirelessly pointed out. At the time the universal declaration was written, philosophical and legal imaginaries of who counts as human were still keeping the violent expressions of the epistemologies of separation very much alive and present.

Following decolonial thought traditions, as first developed by psychiatrist and political philosopher Frantz Fanon, writer and cultural theorist Sylvia Winter, whose focus is on the overrepresentation of Man, observes the following on how human rights are delimited by what constitutes being human:

> The struggle of our new millennium will be one between the ongoing imperative of securing the well-being of our present ethnoclass (i.e. Western Bourgeois) conception of the human, Man, which over represents itself as if it were the human itself, and that of securing the well-being, and therefore the full cognitive and behavioural autonomy of the human species itself/ourselves.[113]

Feminist legal studies and decolonial citizenship studies have produced critical analyses of the exclusionary philosophical and political ideas of class, gender, and race. Such epistemologies of separation of who counts as Man, as Citizen, and, finally, as human were foundational to the legal concepts of first the Declaration of Rights of Man and of the Citizen in 1789 and then the Universal Declaration of Human Rights in 1948. Following the analysis of legal historian William Rogers Brubaker, the "ideology of national citizenship", which was developed during the French Revolution, became the paradigm for modern citizenship and central to the formation of Western political imaginaries of universalism and human rights, based in liberty, equality, and fraternity.[114] This ideology of citizenship is tied to the power of the nation state that grants and regulates the status of citizenship. At the same time, it is necessary to consider the global patriarchal impact of this ideology, which defined Man as citizen and citizen as Man and therefore the only one who is fully human and the bearer of rights. Gender historian Joan Wallach Scott observed that "slaves, wage-earners and women were initially ruled out of active citizenship."[115] The citizen was fundamentally based on the idea of privileged White Man, that is on racist and

sexist modern ideas of supremacy that had been shaped by Enlightenment philosophy and were most influential on the formation of institutionalized disciplines of modern science, including deadly scientific racism and sexism. Epistemologies of separation and necro-epistemics, with their politics of life and death boundaries, separated those whose lives mattered to protection and care from those whose lives did not count. Frantz Fanon, uncovering the "imperial humanism" of citizenship that was so hugely influential on both understanding human rights as rights of the individual and defining who counts as a universal model for this individual, extends the anticolonial struggle to peoples. Wynter has diagnosed that this universal humanism is actually a monohumanism: "The larger issue is [. . .] the incorporation of all forms of human being into a single homogenized descriptive statement that is based on the figure of the West's liberal mono-humanist Man." [116] These deadly wrongs to humans who were excluded through mono-humanism need to be most care-fully accounted for when beginning to think of new rights today, such as the right of nature or the right to care. Rights only become realities in relations. Even if granted to individuals, rights come to life through social, material, infrastructural, and technological relations of interdependencies, in which they are embedded and through which they are made real and can or cannot be lived. Care, which is always understood through interdependencies and relationalities, therefore offers a very helpful interpretative lens in order to understand the violent and deadly impact of exclusionary mono-humanism. How the planet and all its beings will recover from the afterlife of mono-humanism, the accelerated hyper-individualization, and the hubris of speciesism which became the dominant ideology in the decades following the universal declaration of human rights is the central question for feminist recovery in the present and the future.

Demanding a new "social contract", the UN Women feminist recovery plan uncovers the interconnected impacts of mono-humanism that underlie the 1948 declaration of universal human rights and the exclusion of caring labors from the measurement of the gross domestic product of nation states. This plan states that the old social contract "never fully included women" as it was based on a model of "universal citizenship" that reinforced pre-existing hierarchies and led to demanding from women "so-called solidarity" in the form of their unpaid or underpaid work without, in return, providing "protection against economic risks and physical and emotional harm".[117] The UN Women feminist recovery plan critically observes that the old social contract was focused on "the relationships between states and markets, workers and capital, while ignoring relationships that fall outside of these requirements but are

required for social reproduction and the preservation of global ecosystems."[118] In short, the old social contract was care-less, uncaring and threatening to annihilate care for humans and environments. The UN Women plan inspires hope. It emphasizes that it is actually possible that a new feminist social contract can come out of the "wreckage of the pandemic".[119] In their words, the new social contract needs to be based on the recognition of multiple discriminations, under the acknowledgement that "no one is safe until everyone is safe".[120] This resonates with my diagnosis that a "new care feminism for post-pandemic futures not only has to rely on the broadest concept of care possible" but also "has to start from the premise that global care is only as good as the worst kind of care available for those who need it the most."[121]

Planetary Imagination Beyond Epistemologies of Separation

Perhaps quite unexpectedly for such an international policy document, UN Women state in their plan that recovery needs "imagination".[122] Such an appeal to the capacities of the imagination, to the powers of the mind, intellect, creativity, and spirit that make imagination come into the world, reveals both feminist worry and feminist hope. The realities of punitive neoliberalism, forcible authoritarianism, austerity extractivism, and chains of debt can erode the capacity to imagine a different politics of care. The pandemic declaration of war on the virus and the conscription of care into the global frontline of care put further pressure on the realities and imaginaries of care. Invoking imagination is, in my understanding, also an expression of feminist hope. Crisis can lead to recovery. Recovery needs care, time, and imagination. Imagination then becomes a form of care. How recovery is imagined, how care is imagined is a distinct articulation of ideas held about care. Such ideas, as we have seen in the historical realities of frameworks such as the gross domestic product or human rights, are influential and agential, they produce agency. Imagination, therefore, is crucially agency for care and empowerment of care. That the imagination was limited through epistemologies of separation is painful. It raises troubling concerns and questions that hurt: How was it possible that imaginaries—such as the one that envisages Man as separate, and independent, from nature, when every breath of air most deeply connects human bodies to the earth's atmosphere—became foundational to dominant Western thought traditions? How can anyone think or feel that the human mind can exist separately from, that is independently of, the human body?

Epistemologies of separation are harmful to relations of interdependencies, as they fill these relations with unequal hierarchies and the violence of classism, racism, sexism, and speciesism. What are new imaginaries for the rights to care in relation to the historical necro-epistemologies of separation? International humanitarian law researcher Anamika Misra has thought about reimagining. Misra writes that "reimagining the human as a verb that is alterable and dynamic, existing as a living form within asymmetrical relationships can introduce a reciprocity and care for humanity and other living and non-living beings." [123] Imagination is needed to actually imagine, that is grasp, the vast historical ruination and mass genocidal and ecocidal violence of the necro-political and necro-economic impacts of epistemologies of separation. Imagination is needed for caring and lively epistemologies in order to envision recovery from the wounds caused by this history.

Today, there is the imagination provided by new care feminism, which, while extending across such epistemologies of separation, remains marked, and impaired, by their legacies. Rights are central to the work of re-imagining living with an infected planet. Rights of humans are constantly being expanded and fought for to be understood more expansively as human rights as disability rights, as human rights as children's rights, as human rights as LGBTQIA+ rights, as human rights as trans rights, or as human rights as women's rights. There is also the emergence of a new understanding of rights of nature, not the old version of humans having a right to nature and to preserved and protected environments for their own good, but the rights of nature understood also through the realities of human-nature interdependence. In 2008, Ecuador became the first country globally to recognize the rights of nature in its constitution. Pacha Mama, as nature is known in the Quichua and Aimara indigenous languages, is acknowledged in all its life forms. Article 71 one of the Ecuadorian Constitution reads as follows: "Nature, or Pacha Mama, where life is reproduced and occurs, has the right to integral respect for its existence and for the maintenance and regeneration of its life cycles, structure, functions and evolutionary processes."[124]

Placing, now, the demands made by the Global Alliance for Care in relation to the Rights of Nature and a planetary understanding of care, I argue here that imaginaries of care and a new imagination of the rights to care will need to extend beyond the notion of human rights. Medical physician and public health expert Nadine Gasman Zylbermann, who is the President of INMUJERES, the National Institute of Women in Mexico, stresses that for a new global care agenda it is necessary, on "International Human Rights Day", to

"make visible the double dimension of the concept of care: care is at the same time a right that people should have access to, but also the act of caring is a key function for the reproduction of society."[125] I interpret this to refer to the different semantic interpretations of what the "right to" can mean—one can have a right to something as well as a right to *do* something. In relation to care, this means that there is the right to have access to care infrastructures and necessary provisions as well as the right to give care, to perform care, and to have a political say in both how care infrastructures are shaped and how care can be given. The Global Alliance for Care views care as "a public good" and calls for the responsibility of the state as "the main sponsor of care."[126] Its commitments include the following: to develop and increase care services, involving actions by states, families, communities, and the private; public policies to reconcile personal, family, and work life with flexible hours; recognition of the rights of care providers and recipients; transformative actions for joint responsibility for care; investment in social and physical care to meet various needs under equal conditions; and more extensive data, research, and dissemination of practices in care work through an experience exchange platform and the creation of a fiscal space for the financing of a universal and sustainable care system.[127] Other local initiatives around care include, for example: the Bündnis Sorgearbeit Fair Teilen, the alliance for balancing unpaid care work by the Federal Ministry for Family Affairs, Senior Citizens and Youth in Germany, and the association ISS, the Institute for Social Work and Social Pedagogy; the activist organization of the Congress for Care in Berlin; or the network Mehr für Care Wirtschaften fürs Leben, More for Care Economies for Life, which resulted from a 2021 event organized by Femme Fiscale in Austria together with other feminist platforms.[128] Globally, there is much feminist organizing for what can be understood as the right to care, with a particular focus on the economic realities of care, the responsibility of the state, and the infrastructural dimensions of care. While I absolutely agree with "the right to care as a human right", as stated by expert in law and social science and UN Women Regional Director for Latin America and the Caribbean, María Noel Vaeza, at the UN Women event co-convened by the Government of Mexico, through its National Institute of Women (INMUJERES), and UN Women (and I agree, equally, with all the other initiatives for improving care and the economic conditions of care work, with some of them mentioned here), I do think that reducing the right to care to a human right not only follows from the logic of epistemologies of separation, but actually still follows them.[129] We

need imagination for the infected planet to heal from these epistemologies in order for there to be true recovery.

The legacies of human exceptionalism and speciesism, which are fundamental expressions of the epistemologies of separation, are continued if the right to care remains human-centric. The legacies of hierarchies and selection are still not unsettled if some mountains, some rivers, some forests are protected through environmental personhood and others are not. I argue, here, that death-making separations and all forms of speciesist hierarchies, which formed the political imaginaries of human exceptionalism, need to be overcome for there to be truly caring imaginaries for the right to care. Such androcentric human exceptionalism, which is the deep structure for speciesism, led to a political economy that was based on subjugating land and nature, with Man taking the position of God who has the power to decide over life and death. Feminist recovery needs to regain what has been lost on account of such violent separations. Connecting legal imaginaries of rights to economic, political, and social imaginaries, and the realities in which they are deeply embedded, one comes to understand that a right to care can only be substantive if the international care order changes fundamentally, to the effect that *care counts at all levels and at all scales*. I also want to point out again, here, that the existing declaration of human rights, even though the ideologies behind it are penetrated and shaped by fundamental racism and sexism, in fact already contains many dimensions that can be useful to mobilizing around care as a human right, as human rights include the rights to food, shelter, health, and education. With the pandemic exposing the interconnected infra-political crises of public health and the climate, of care and the environment, with systemic vulnerabilization resulting in interlocking and mutually reinforcing forms of violence against humans and other living and non-living beings, the UN Women's feminist plan, unlike the Global Alliance for Care, addresses the structural conditions shared by care and the environment: "Like the care economy, ecosystems and natural resources are a critical foundation for the economy but are taken for granted and treated as though their supply is limitless and their use costless."[130] The plan foregrounds the accountability of states and their responsibility to counteract these conditions. Reporting on the UN Women Feminist Plan, the editorial team of the Gender & Covid-19 website observe the importance of the local community level and women's leadership for ecological care.

> Women leaders in local communities are spearheading innovative approaches to promote gender-just green transitions in key sectors, for exam-

ple in sustainable energy in Nigeria, South Africa, Uganda and Tanzania; and in agroecology in Brazil, Cuba and Nicaragua, efforts that protect local ecosystems based on Indigenous knowledge.[131]

The Recovery Will Be Green and Feminist or it Will Not Be

Reporting on Chile's new constitution in May 2022, which is perhaps the "world's first green and feminist constitution", international human rights expert and former United Nations Special Rapporteur on extreme poverty and human rights Magdalena Sepúlveda Carmona states what is at stake when one speaks of recovery: "the post-pandemic recovery will be green and feminist, or it will not be."[132] I read this to be the expression of hope and of worry, of insistentialism and doubt. It will be. But, there is the very real danger that it won't be at all, if those conditions for its coming into being are not there. If those conditions do not even form part of how it is imagined, then surely, it will never be at all. Stating that it will be—indicative, declarative, and affirmative—, but only if—conditional, doubtful, and questioning—is an appeal to the imagination. The imagination becomes the condition based on which different realities—always imperfect, always in need of improvement, but still changed for the better—can and could come into being. Only if there is this imagination of recovery in the first place can recovery then be green and feminist. This does not mean that the path from imagination to reality is ever smooth or even guaranteed. But without imagination, the path does not even appear, it cannot even be imagined to exist.

Arguing that there is a new care feminism necessarily has to acknowledge that social reproduction theory, care ethics, and ecofeminism, which are specific traditions of transnational and Western feminism at once, are all essential to how care has been understood as shaped by hegemonic politics and economies. At the same time, today's feminist movements, as they take shape in transnational exchange and with deep local roots everywhere in the twenty-first century world, have begun to move beyond the specific care boundaries that are particular to modern traditions of feminist activism and thought, as these often inherently reproduced epistemologies of separation by way of introducing new, and also violent, epistemologies of opposition. Ultimately, oppositionality follows the binary logic of war and competition. Today, the imagination supplied for life-making and feminist recovery of care is articulated in many different imaginaries and articulations by multidimensional

feminist perspectives, in particular by previously marginalized worldviews. Imagination extends across imaginaries and realities and becomes manifest and public in articulations. I have shown here that such articulations can importantly include collective feminist policy writing. Expanding and deepening imaginaries of care is as important to care feminism as is working on material, infrastructural, technological, and labor conditions of and for care.

With many arguing that a new global international care order is paramount for life and survival and that this order should emerge through notions of rights and a right to care, I have shown the importance of international frameworks to ordering care, not just in economic and political realities, but in terms of the imagination. The impacts of international frameworks that ordered care in the aftermath of genocidal trauma and economic collapse after World War II, which still largely define the global international care order today, have to be better understood. This includes studying how they shaped deep-rooted cultural imaginaries and social ontologies of care that are based on epistemologies of separation. At the same time, this requires studying where there are points of departure for reimagining such frameworks today. In our times of ecocide and pandemicide, it is crucial to re-imagine rights to care in order to heal the deep wounds and splits that have resulted from the logic of separation with its hierarchical and violent structure of boundaries and oppression, and ultimately notions of disposable life and environments of extraction and extinction. While any care feminism based on the idea of rights to care has, of course, to be centrally concerned with the fundamental essentials such as food, housing, and healthcare and the economic and political rights of the global care workforce, it is equally important not to repeat the violence of epistemologies of separation, which underpinned the deep structure of the international frameworks in the twentieth century by splitting human rights from the rights of all other living and non-living beings, known as nature.[133] Postcolonial environmental humanities scholar Graham Huggan and postcolonial and literary animal studies scholar Helen Tiffin state that "the righting of wrongs in relation to all living creatures, as well as to the extra-human environments cannot be accomplished as long as we continue to treat these issues as discrete".[134] A new framework of care and rights to care needs to include epistemic, mental, emotional, spiritual, social, cultural, economic, and political recovery from the aftermath of the old frameworks. There is hope. There can be recovery. But, there is a very clear warning. The recovery will not be, unless the right to care extends across humans and all other living and non-living beings. Only if political, and economic, life are finally organized in such

a way that their aims are to "support care" will it become possible to collectively take care of the world so all living and non-living beings can recover together with their infected planet.[135] Feminist recovery means learning how to breathe again carefully, aware of the fundamental interconnectedness of all living and non-living beings with the air and the planet and overcoming the patriarchal supremacist violence of reducing beings and the planet to subservience to human life; and doing this without reducing care to a service reserved for some humans but not for the majority of all the other humans. Feminist recovery is an expression of the hope that recovery is, and will be, possible. Feminist recovery is, at the same time, an expression of worry that recovery will only happen if there is a different care for care. Feminist recovery is, and will be, the continued laborious process of healing from the fundamental theft, neglect, and loss caused by the war of patriarchy that has infected, damaged, and wounded the planet. Feminist recovery will be planetary or it will not be. Some days I feel that a right of care can be imagined, not a right to care, but care having a right to be with the planet.