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Review Symposium:

Claire Decoteau's *Emergency: COVID-19 and the Uneven Valuation of Life*

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Abstract

*This symposium is based upon comments from a 2025 author meets critics discussion at the Eastern Sociological Society Conference. Between August 2020 and May 2021 Dr. Decoteau worked with four graduate students: Cal Garrett, Fructoso Basaldua, Cindy Brito and Bianca Perez to recruit interviewees from across the city of Chicago at a time when COVID-19 made any sort of qualitative analysis incredibly challenging. Interviewing Chicagoans living under increased public health focus because of COVID-19, those subjectified and hailed as Essential Workers as well as policy makers and health professionals, *Emergency* captures the struggles of communities living under the weight of legacies of racism, structural neglect and oppression and the limits of addressing systemic harms through the lens of emergency response.*



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Robin Wagner-Pacifi:

I am honored to be a participant in this Journal of World Systems Research book symposium discussing Claire Decoteau's excellent book, *Emergency: Covid 19 and the Uneven Valuation of Life*. Indeed, it is an excellent book – empirically rich and theoretically sophisticated. It's also a hard book to read – for the complexity of its arguments (though a close and careful reading is highly rewarded), but mostly for the long-and-short term tragedies it lays bare. One city (Chicago), one pandemic (Covid-19), one national social and cultural context (the United States) on which history weighs heavily and often. And as our political history has moved onward both with and from the pandemic, we are now also confronted with an equally intensified vision of the city of Chicago under the deportation and militarized “emergency” frames of the Trump administration. All the prior vicissitudes of the undocumented “essential” pandemic workers are exacerbated by their sudden refiguring now as not only non-essential but actually intolerable.

Part of the very project of Decoteau's book is the articulation and management of multiple “events” (like pandemics and military occupations) through the analytical strategies of making both connections and distinctions. Decoteau argues that COVID-19 was actually a convergence of three emergencies (each with different symbolic and material emphases, types of media of formation, and temporalities): a combined short and long term state of emergency protecting white supremacy and wealth; the slow emergencies of deindustrialization and minimal (to absent) social safety net infrastructure confronting minority populations; and the sacrifice “essential workers” were asked (make that required) to make in order to protect the US economy over the course of the pandemic. And the analytical challenge of tracking these three emergencies in the context of the city of Chicago is superbly met as the book forthrightly takes it on with all of its contradictions: “This book seeks to explain why a local commitment to racial equity and unprecedented expansion of federal welfare failed to protect Chicago's most vulnerable from a series of converging “demics.” (p.2)

To this end, the book highlights fundamental distinctions of the period being analyzed. It lays out some fundamental contradictions and oppositions conceptually relevant to contemporary U.S social and political structures and policies: fast and slow; essential and unnecessary (though the opposite of essential is hard to pin down – inessential, marginal, accidental, contingent): acute and chronic; local and national; ordinary and spectacular; letting die and making die. And the book raises important questions about how to acknowledge and understand the linkages between these binaries and their inter-dependencies on each other. For example, Decoteau asks: “How do we make theoretical sense of both ordinary and spectacular state violence, and the link between letting die and making die?” (p. 52) In fact, one of the great accomplishments of the book is to force the reader to consider what and when something is “spectacular.”

In posing these various alternating perspectives on the pandemic, the book makes a significant contribution to the sociologies of time and space. One major theme is parsing the meanings and modalities of fast emergencies and slow emergencies – and their intersections. Decoteau demonstrates that while it is indeed very difficult to specify and track multiple, simultaneous, emergencies operating along different temporalities and through different spaces – it is possible to do so. The book does this with its own dramatic urgency and effect. One way it manages this is to “follow the money” (money being a prime medium through which events take shape, a medium perhaps not sufficiently recognized as such). We read of fast emergency funds flowing out to communities, but not flowing into slow emergency channels (for example into providing housing and education). And sometimes not necessarily even flowing into fast emergency channels either, but rather into non-emergency or what I might call anti-emergency arenas: “In February 2021 it emerged that Mayor Lightfoot spent 60 percent of the city’s discretionary funding from the Coronavirus Aid, Relief, and Economic Security (CARES Act) totaling \$281.5 million on police personnel.” (p. 47) And “The city of Chicago used ARPA funds as an opportunity to pay down debts instead of funding direct services and expanding the social safety net.” (p. 96) These practical decisions by a local government in theory focused on overcoming racial and economic inequities are striking and demonstrate a sort of crisis fungibility when discretion is provided.

I would like to pose a few questions for the study - not so much of criticism as curiosity. The concept of exclusionary inclusion is central in the book, but I think it needs more elaboration. How are the people exposed and sacrificed to the pandemic and its short and long term force fields really included, other than with fake and toxic rhetoric about being essential? The book illustrates convincingly how it’s not the people who are essential it’s the services they provide. This is a contradiction at the heart of the inequities of the event and the attempts at its management. Decoteau captures something essential about essential workers: “certain populations are deemed both essential and replenishable. Workers’ social reproduction is withheld or threatened to the point of exhaustion, until others take their place in a system of renewable exploitation.” (p. 8) To view people as essentially replenishable, replaceable denies their singularity, an element often connected to that which is essential. Here it’s worth thinking about the singularity of people and singularity of the event – and it’s interesting and productive to think about how to get singularity into focus at the micro and macro levels, and at both the levels of theory and the levels of practice and policy. Decoteau’s careful and thorough methodological choice to carry out interviews with over a hundred Chicago residents along with 65 public health experts, service providers, and government officials is especially sound in the context of this very theoretically sophisticated study. But the (practical and theoretical) relationships between individual and event singularity itself is a worthy topic for analysis.

Another reference about which I'd like to hear more is what Decoteau terms "the nation's norm." Decoteau writes: "Laborers (many of whom were unable to access safety nets because they were undocumented or from mixed-status households) were forced to expose themselves to a deadly virus to protect the nation's norm." (p. 3) I'm not sure what norm means here, though I suspect the Foucauldian idiom is being invoked as Foucault is a theoretical touchstone for the book. Maybe it's linked to what Decoteau calls "the experience of normality": "the ability of the white middle-class majority to experience normality (that is only intermittently and sparingly disrupted by crisis) relies on the constancy with which racial others experience converging emergencies and accumulated vulnerability." (p. 7) The specification of the nation is particularly intriguing now that the idealization of white supremacy nationalism is actively embraced by the Trump administration. But I would be interested to hear more.

Let me conclude by expressing my admiration for this important book. It makes several genuinely original contributions to the studies of historical events, to that of the sociologies of time and space, and to that of social inequality. It holds up several apparently commonplace concepts (e.g. "essential," "emergency," "inclusion") for scrutiny as they are deployed in real time and exposes their tendential and consequential political assumptions. I congratulate Claire Decoteau for this intellectual accomplishment. If you would allow me to say – it's essential reading.

Gowri Vijayakumar:

When I taught my course on HIV in the fall of 2021, enrollment was higher than ever. Students had previously seen the study of AIDS as a kind of haunting (Decoteau 2008), in a kind of temporal displacement I would often spend the semester laboring to correct (Cheng et al. 2020). Now they saw the intricacies of racialized health disparities, prevention measures, pharmaceutical pricing, and disease activism as fiercely urgent. The class became a raw and intense space for understanding the unfolding pandemic around us. Students shared personal experiences, cried, shared music, asked questions, thanked me for the course, told their friends.

Then in the fall of 2023, I offered the course again. Only a few students signed up. I asked my colleagues for advice. One colleague told me that, when the students in Brandeis's Health, Society, and Social Policy Major were polled about their course preferences, they had put pandemics and COVID-19 at the very bottom of their list. "No one wants to think about the pandemic anymore," she said. In just two years, my course had experienced the ebb and flow of crisis temporalities, the dance between intense attention and deliberate forgetting that had defined my own research interests in the study of HIV (Vijayakumar 2021).

Emergency ends with a poignant reflection on the politics of forgetting. Who can afford to forget a pandemic? What parts of the story are most likely to be forgotten? My students clearly seemed eager to forget. But in a way, the entire book is an antidote to forgetting. It offers a meticulous and expansive account of the COVID-19 pandemic and the overlapping emergencies (what Shantal, at the beginning, calls multiple "demics") that precede and outlast it.

The book operates on three registers simultaneously. On one, we see the author as a theorist, making sense of the ways city and state government govern through exception, detaching the public health crisis of COVID-19 from the slow emergencies that enable its devastation, and are exacerbated by it. We see how COVID-19 measures deepen the racial stratification of a deeply segregated city. On another, we see the author as a public sociologist, a meticulous documentarian of a crisis unfolding in real time. In some moments, we see this more activist voice emerge more directly, but mostly it simmers under the surface, offering a powerful critique of the compounding ways the city of Chicago abandons its Black and Latinx residents even as it relies on their labor. And finally, we see the author as a compassionate neighbor and fellow city resident. Notably, the book is a collaborative product, produced by a team of researchers for both sociological and policy audiences. Decoteau reflects thoughtfully on the experience of conducting phone interviews in the midst of an unfolding pandemic. The book makes space for the interviewees not only to report on the brutal conditions and contradictions of their lives, but also to theorize themselves on the ways the city unevenly values life and ignores the deep structural underpinnings of pandemic suffering. The interviewees often offer brilliant and insightful critiques that skewer city elites and lay bare the ways the logic of crisis operates to deepen neglect even as it appears to manage it. As Decoteau notes of one of her interviewees at one point, Foucault couldn't have said it better.

The analysis in *Emergency* is disturbing and comprehensive, brutally truthful and deeply felt. Here, I will briefly summarize the book's main arguments, and then offer a few questions. The book argues that the spectacularized response to the COVID-19 virus, one that, in the case of

Chicago, was touted as driven by the concerns of racial equity, obscured the underlying causes of its racialized and classed effects. Using Nixon's (2011) conceptualization of "slow violence," Decoteau argues that the mundane crises of racial capitalism undergird the exceptional crisis of COVID-19. At federal, state, and city levels, state officials responded in temporally bounded ways that presumed that the crisis was temporary and the slower emergencies of racism, poverty and capitalist exploitation were unsolvable (and thus could be left intact.) But paradoxically, by doing so, temporally bounded emergency strategies often failed to reach Black and Latinx residents: 72% of deaths from COVID-19 in Chicago are concentrated in Black communities, and so-called "essential workers" were sacrificed in service of the protection of the "mainstream."

Decoteau builds a formidable theoretical toolkit, drawing on Nixon's (2011) theorization of slow violence, Anderson's (2020) theorization of slow emergency as a technique of liberal rule that makes some lives possible at the expense of others, Marxist theories of labor exploitation and the production of surplus value, Nguyen's (2010; 2009) theorization of government by exception, and maybe most centrally, Agamben (1998), in theorizing exclusionary inclusion as a way racialized others are both excluded from liberal rights but included as producers of value (and sometimes as political pawns in a supposed project of urban racial equity). Many contradictions ensue. On the one hand, some poverty measures improve during the pandemic as the state does extend some limited social protections and stimulus payments; as Candice says, "it took a pandemic to do it...[but] people out here that need this stuff way before the pandemic and still need it after the pandemic!" (p. 11) On the other hand, COVID-19 creates immense precarity, putting Black and Latinx Chicagoans at heightened risk of illness and death; exacerbating economic instability, indebtedness, housing instability, and food insecurity; and putting pressure on family ties. Most painfully, perhaps, Decoteau documents deepening distrust within communities. But the book avoids homogenizing the intents or effects of pandemic management on everyday life. Pushing back against Berlant's (2011) cruel optimism, for example, Decoteau insists that residents do find ways of imagining alternative relationships to work, and building alternative infrastructures of care.

As Decoteau points out, it takes epistemic work to extract a crisis from its underlying context in the way city officials in the book do. As a way of countering this amnesia, the book takes a deeply historical approach in contrast: tracing the histories of suburbanization, neoliberalization, immigration, the gutting of public services, the fragmentation of health care provision, the political structure of the city, the narrowing focus of public health infrastructure, and the hyperexploitation at the neighborhood level to understand why the effects of the pandemic play out as they do. As Ebony says, the COVID-19 pandemic simply "pulled the veil off" these emergencies (p. 72).

Several insights in the book will be widely applicable, not just to scholars of the US or of COVID-19 but to scholars around the world. Chapter 3, "Quantifying Emergencies," shows how the claim to a racially equitable disease response focuses so much energy on quantifying racial disparities that it ends up being reactive and triaging resources rather than proactively building up a robust disease response that protects vulnerable citizens. Here we encounter a somewhat different standard of public health knowledge than we did at the height of HIV—officials know there are

racial disparities and meticulously document them using increasingly advanced techniques, but then use them paradoxically to say that racial disparities are deeply entrenched and unsolvable. Knowledge of racial disparity, rather than producing reparative or redistributive shifts, instead serves as the justification for deferring racial justice in favor of piecemeal solutions. The chapter offers a sobering assessment of the ways social scientific knowledge itself, in an age of proliferating quantitative metrics (Merry 2016), may not alter political commitments to racial justice. The book also shows how the state outsources services to a confusing set of actors that complicate the path to accessing services, particularly for undocumented people surviving and resisting surveillance. Particularly memorable is the book's attention in the last chapter to the concept of distrust, and the ways racially minoritized communities distrust the vaccine. Reminiscent of Farmer's (1990) early work on AIDS conspiracy theories, and Decoteau's own previous work (2013; 2021), the chapter offers a sensitive account of the structural and political roots of distrust. The chapter's conclusion, as in Sweet's (2019) work on gaslighting, is that when people feel that their diagnosis of structural violence is acknowledged, that they are not being gaslit, they are more likely to pursue vaccination.

The book raises several prescient questions about the aftermath of pandemics. One enduring link the book examines is that between the "letting die" of structural neglect and the "making die" of spectacular racialized violence, most significantly the murder of George Floyd. Decoteau's interlocutors see the two as operating hand in hand. How might we see the political response to the two as linked? The protests around George Floyd could be seen as an eruption of anger about COVID-19, and, indeed, the willingness of liberal institutions to rapidly roll back their racial justice initiatives in the face of right-wing backlash since 2020 is perhaps just another feature of crisis logic. Is spectacular violence a necessary precondition of social eruptions and mass political action? How do such moments become "international causes" (Roychowdhury 2013), and how are international causes taken up in longer-term social movement activism? How do activists (and scholars) expose the links between letting die and making die?

Mutual aid is an important element of this kind of grassroots emergency response. In Chapter 4 and again in Chapter 6, Decoteau describes the work of a mutual aid organization that facilitates drug recovery, distributes resources, connects people to the social safety net that does exist, and even enables collective mourning. But in light of critical studies of neoliberalism, how might these grassroots efforts inadvertently absorb and mute the effects of racial capitalism, particularly when we know that these efforts can also be co-opted through neoliberal strategies of outsourcing? In my own research in India, measurement strategies proliferated alongside social movement innovations, increasing the burden of monitoring and evaluation that has become central to data-driven global health management (Vijayakumar 2021; Peck and Theodore 2010). In Decoteau's account, too, activist efforts to make racial inequality visible become absorbed into state efforts to measure (but then deflect) the racial contours of COVID-19.

I began this commentary with the shifting fortunes of the sociological study of AIDS, and now COVID-19. In this context, the book counters the effects of a kind of collective trauma in the deliberate resistance to remembering. Reading the book, itself, recalls the visceral navigations of

risk, touch, breath, and embodied connection that we each experienced, even as the book reminds us of the starkly different, racialized ways those experiences played out. But ultimately, the book speaks beyond the study of pandemics. Now, in a moment when sociology as a field is under attack, everything is claimed to be a crisis and yet all the predeterminants of crisis have been forgotten. Perhaps what is so threatening about sociology is precisely the fact that it counteracts the logic of exception, the impulse to scapegoat or criminalize or even just to capitulate, that it exposes slow violence and links letting die to making die, forcing a reckoning with underlying and enduring patterns of exclusion.

Joseph Harris:

Claire Decoteau's latest book may be not only her best, but also her most important. *Emergency: COVID-19 and the Uneven Valuation of Life* takes readers into the City of Chicago's response to the coronavirus pandemic, using a critical lens influenced by ideas about racial (bio)capitalism and most notably the work of Michel Foucault. Decoteau argues that the city failed its most vulnerable residents even as its mayor declared that equity and inclusion were imperative.

While the "slow" emergencies of poverty and segregation in Chicago impacted the city's residents unequally and had their own human costs, COVID-19 represented an urgent emergency that made racial inequality and underlying racism even more visible. A full 72% of the deaths from COVID, and 52% of the total cases in Chicago, were black, even though less than 30% of the population was black. Interestingly, Chicago's response took place under the leadership of black Democratic Mayor Lori Lightfoot, who was sympathetic to these issues. And although an unprecedented expansion of federal welfare assistance supported the city's response, Decoteau finds that emergency policies failed to reimagine welfare and simply bolstered an already existing patchwork of means-tested systems; sacrificed frontline workers at the altar of the economy; and not only ignored but exacerbated ongoing endemic crises that lower-income and racially marginalized populations were already facing.

Drawing on 65 interviews with people involved in the response and 110 people from diverse groups in three racially marginalized neighborhoods who were either essential workers or people who lost work in the epidemic, Decoteau finds that this failure happened "by delinking the virus response, as an urgent and spectacularized emergency, from the causes of its uneven racial and class impact" (Decoteau 2024: 2). While local officials built an infrastructure to track disparities, the government failed to initiate policies that could have immediately helped the vulnerable that included sick leave and work protections, cash and rental assistance programs, or policies that forced private hospitals to bear more of the burden for caring for Medicaid and uninsured patients.

A great deal of the evidence for Decoteau's arguments rests on pages 95-100 of the book. There she shares that out of the money that Chicago received through federal CARES Act money, \$470 million of it was discretionary, and Lightfoot herself bypassed the city council to determine use of those funds, spending more than \$281 million of it on police personnel expenses and leaving \$68 million unspent, not prioritizing direct services such as food provision and rental assistance. Using \$2 million of its own money, Chicago's Department of Housing created its own emergency rental assistance lottery that gave \$1,000 to 2,000 households of the more than 83,000 that applied. Later in the pandemic, using federal funds, the IDHA disbursed two further much larger tranches of funds for rental assistance for Cook County residents that included flat payments of \$5,000 to a much larger number of people than were reached initially.

A poor city with a history of taking on high interest debt to balance its budget, the city used \$1.32 billion of America Rescue Plan Act money to pay for budget gaps for the fire department and spent more to pay down debts to commercial banks than any other city in America – 69% of its American Rescue Plan Act money. The trade-off was that this money could instead have been

used to provide more funding to direct services, invest in the social safety net, and create hazard pay for essential workers as some other cities did, to give but a few examples.

What is worse, instead of proactively targeting racially and economically marginalized communities, the city under Lightfoot's leadership waited to design policies that targeted marginalized communities until after data were collected. The history Decoteau shares is detailed, and these points both seem damning.

One of the most illuminating parts of the book is its comparative design, which involved in-depth study of the response in three very different communities, one predominantly black, one predominantly Latinx, and one racially and ethnically diverse. By organizing the research design this way, the reader sees both how the pandemic and the response unfolded in three very different communities in the same city. Here, Decoteau masterfully blends descriptive statistics and qualitative accounts, producing an insightful understanding of how events unfolded comparatively.

Three issues came to mind as I read this important book. First, while the Lightfoot administration was the main target of criticism from the author, there were times when government officials more broadly received blame. Here, I wondered if the narrative might have benefited from parsing out in a bit more detail different government actors and their missteps. In a political system dominated by two main political parties, a government with local, state, and federal levels, and different departments and politics in each, what might have been gained from further disaggregating government actors? Would a different story emerge? At a time when institutions of government and the work of civil servants are under unprecedented attack nationally, arguably there is some value to ensuring that terms and labels used are appropriately circumscribed so that faceless bureaucrats don't become the bogeyman – and also giving appropriate credit where credit was due: some policies that weren't discussed much in the book – such as an eviction moratorium that lasted from June 2020 to October 2021 – did help keep people in their homes.

Second, government officials in Chicago faced a tall task, not only due to the reasons the author articulated but because of the comparatively weak financial position of the city. While some passing discussion of Chicago's response in relation to Philadelphia and Seattle on page 96 put the city's weak response in comparative perspective, what was missing in this brief comparison was the fact that these three cities were in starkly different financial situations. As of July 2018 – less than a year and a half before the pandemic – Chicago's bond rating was Ba1, BBB, and BBB- by the three main credit rating agencies. By contrast, Seattle's was AAA by all three, and Philadelphia was A2, A, and A-. This is important because the lower a city's debt rating, the higher the interest rate a city pays on its debt, the fewer resources it has to pay for everything else. And while Chicago's coronavirus needs were definitely urgent, the city's financial picture would have been worse if it didn't direct some of the resources that it did to address some of the issues it faced, like pension obligations (which is a form of care). This underscores the very serious financial constraints officials in Chicago labored under. And cash-strapped Chicago still had many other vital needs as well: in 2024, it was estimated that Chicago Public Schools would need nearly \$1.2 billion to be adequately funded.

Finally, dating back to Marmot's foundational Whitehall studies, sociologists have known that even when one enjoys robust protections such as stable and secure employment, a meaningful wage, and universal healthcare, a social gradient that runs along the lines of class still remains. Given that and the legacies of racism and segregation in the city, even though it's fair to suggest that more might have been done and to call out the Lightfoot administration for prioritizing spending, particularly on police, what was reasonable to have expected in terms of improved outcomes? Greater social protections would certainly have helped, but the literature on the social determinants of health tells us that health disparities still would not have disappeared.

I raise these questions merely to underscore the incredibly difficult challenges government officials faced in responding to this unprecedented pandemic. The larger point I wish to leave the reader with, however, is that Decoteau's book is an impressive one that offers a great deal of food for thought on disease response and its relation to both the short- and long-term. I, for one, eagerly look forward to her

Response by Claire Decoteau:

While *Emergency* describes the entangled crises that converged during the COVID-19 pandemic, I would be remiss if I did not begin my commentary with at least a brief reflection on the conjunctural crises we are currently experiencing under the second Trump administration, and how these relate to the converging emergencies I document in the book. During the early days of his second presidency, Trump used the invocation of emergency to bypass congress, existing legislation, and to avoid court orders. He declared emergency at the border, invoked the Alien Enemies Act of 1798 to facilitate deportation, declared an energy crisis to allow him to bypass environmental protections, and suggested US cities with liberal mayors are war zones, to enable sending in the national guard. He is currently contemplating sending the US military to Minneapolis in response to protests that have erupted after US Immigration and Customs Enforcement (ICE) agents killed two US citizens: Renee Good and Alex Pretti in January 2026. In June 2025, NPR wrote that “Trump has invoked emergency powers more times in his first 100 days than any other modern president.” Trump may, in fact, be reading Carl Schmitt (2005), as he uses emergency declarations to buttress white supremacy and target internal racial “enemies” he believes tarnish his particular vision of a “great” America. He is also using letting die strategies by failing to provide reproductive healthcare, trans affirming care, and cutting educational and welfare funds in his so-called “Big Beautiful Bill.” And in fact, his entire approach to his second presidency is coached in the logic of emergency – America is “in decline” and he is the savior called in to save it. The temporalities of these crises and how they foreground crisis for the privileged (white, middle-class) while naturalizing and exacerbating both slow emergencies and the “making die” of racially marginalized groups demand our theoretical and political attention. The convergence of distinct temporal “emergencies” and the ways in which they fuse together strategies of “letting” and “making” die are main themes of my 2024 book, *Emergency: COVID-19 and the Uneven Valuation of Life*.

I am incredibly honored to have *Emergency* reviewed in the *Journal of World-Systems Research* by three distinguished and discerning scholars, and I greatly appreciate their generous reviews of the book. To begin, I will provide a very brief summary of the book and then respond to each reviewer’s questions and critiques.

City of Chicago officials initiated a “racial equity” approach to mitigate the disproportionate impact of COVID-19 on racially marginalized communities, yet according to interviews with Black and Latinx Chicagoans, this approach failed to address core vulnerabilities associated with health, housing, mental health, welfare, and food. Why? Based on 175 interviews with residents, city officials, epidemiologists, hospital and clinic staff and community stakeholders, I argue that COVID-19 represents and exacerbates the convergence of three sets of emergencies. First, I argue that federal and local governments governed through emergency, enacting temporally bounded governmental strategies that presumed scarcity, triaged care, and naturalized structural inequality by delinking the effects of racism from its causes. This temporary emergency response was spectacular and anticipatory – designed to safeguard the status quo until “normalcy” could be restored. But such an approach exacerbated two longer-term endemic emergencies already taking

place: 2) the slow emergencies racially marginalized populations have faced for decades due to neoliberal restructuring and the fragmentation of care infrastructure, and 3) the sacrifice of lower-income frontline workers to premature death to safeguard the economy and protect the middle-class. The city's "racial equity" project used data to determine which communities would be given scarce resources, but once positivity or death rates declined, resources were retracted and redistributed elsewhere. City officials thus attempted to manage these converging emergencies by manipulating epidemiological data and orchestrating systems for interpreting that data. The book analyzes how and why states that took racial disparities in COVID-19 outcomes seriously, failed to redress existing emergencies among communities marginalized by race and class.

In her comments, Robin Wagner-Pacifici focuses on how Emergency combines theoretical attention to events, temporality, and conceptual and political contradiction. I appreciate her deep engagement with the theoretical crux of the book. She critiques my use of Agamben's theory of "exclusionary inclusion" by challenging me to consider whether people ensconced in slow emergencies are really "included" within the body politic. She points to my discussion of "essential workers," and the ways in which their labor was valued, but their singularity and humanness was denied as they were deemed exhaustively replenishable and fungible. This is certainly a valid critique, and throughout much of my analysis, I illustrate the many ways in which racially marginalized Chicagoans were valued only for their labor or the symbolic capital state actors could claim when they celebrated the achievement of equity in vaccine roll-outs or epidemiological statistics, while ignoring the racial and structural determinants of mortality. While performative "inclusion" to achieve representational capital is certainly part of my analysis, I think it is dangerous to suggest that frontline and immigrant workers, as well as other racially marginalized residents of Chicago, are completely excluded from political processes. Such a move can reify and ontologize racial differences, but it also ignores the political will of marginalized communities, which they exercised in voting Lightfoot out of office when she lost her bid for re-election in 2023. Wagner-Pacifici also questions my use of the term "norm," in referring to the population protected by biopolitical administration. She is correct that this stems from my reliance on Michel Foucault. For Foucault, biopower optimizes the health of the normative population, while condemning to slow or quick death those who live on the margins of the body politic. These are interdependent processes: some peoples' lives are deemed unworthy of being lived so that others' lives can be protected (Foucault 2003). Foucault did not always attend to the structural processes whereby gender, race, ability, and nationality are crucial to these politics of valuation – an oversight I attempt to correct in the book by attending to the dynamics of racial biocapitalism.

Joseph Harris summarizes some of the core puzzles the book sets out to answer, but then asks some important and difficult questions about governance and the structural determinants of poor health. His final point is, of course, spot on – even the most progressive, justice-oriented approach taken to mitigate racial disparities in pandemic infections and deaths could not have overcome decades of entrenched structural inequalities. And yet, as I argue throughout the book, this fact should not be used as an excuse to avoiding trying. Often, politicians claim an equity approach while simultaneously suggesting there is nothing they can do to counteract decades of racist

policies. Because slow violence is spatially and temporally distanced from its causes, it is easy to point to it in political rhetoric, but to completely avoid addressing in policy initiatives. When politicians or sociologists claim we cannot counteract structural inequities, these schisms become intransigent, historic truths, impossible to remedy or politically address. Rather, we should work to unveil the causes of structural harm in order to counteract their ongoing impact.

Harris's other critique is equally persuasive, especially his important point about how Chicago's bond ratings could have played a role in Lightfoot's economic decision-making. My point was not that paying down city debt was incomprehensible, but rather, that it revealed Lightfoot's priorities: buttressing the city's social safety net was not in her plans. He is equally correct that in Chapter 3, the onus of blame is laid at Lori Lightfoot's feet and directed at her Racial Equity Rapid Response Team approach. Harris suggests that I could have better disaggregated the various state actors and bureaucrats involved, especially given Trump's efforts to dismantle the very infrastructure built up with CARES Act funding. And yet, Chapters 2 and 3 draw on interview data from myriad city administrators, epidemiologists, policymakers, and non-profit actors called on to operationalize the city's mitigation strategies. Many actors and informants detail the complexities of responding to COVID-19 in real time and offer their thinking on how the plan played out. In Chapter 2, I try to humanize the many public health workers and nonprofit and for-profit organizational actors who worked tirelessly during the pandemic, while also critiquing some of their choices and priorities. Public health actors are embedded in discursive formations and complex structural conditions they have inherited from earlier practitioners, and these situated complexities help to explain some of their actions during the pandemic. I analyze processes of devolution, outsourcing, and administrative burdens, as well as the ways in which public health policies over a long historic arc built the existing infrastructure that was then repurposed to respond to COVID-19, often in ways that failed to serve vulnerable communities.

I appreciate the way Gowri Vijayakumar attends to the linkages between the management of temporal emergencies and the politics of "letting" and "making" die, and how her comments reflect on a comparison between HIV and COVID-19. Vijayakumar asks what we gain from analyzing political protests (like those that erupted after the murder of George Floyd or the most recent protests surrounding ICE interventions) as a response to both "letting die" structural neglect and "making die" racialized violence. Often, in the US, because of our focus on immediate and spectacular crises, I think we miss that these two dynamics are intimately linked in public protest. Public, political responses to pandemic neglect, immigration policing, and police violence are also enacting a politics of care that is meant to counteract necropolitical and racist devaluation. Recent protests against ICE and the national guard are certainly countering militarized dehumanization and the ways in which immigrant communities are denied affordable housing, accessible healthcare, and bilingual education. They are, in fact, engaging in a radical politics of protection. When Chicago was at the brunt of ICE repression, I was awed and humbled by the ways in which neighbors were showing up for each other, refusing to let their community members be abducted and disappeared. And in Minneapolis, scores of everyday citizens are tracking ICE and sharing their whereabouts on their apps, while simultaneously buying groceries and picking up medication

so immigrant families do not need to leave their homes. These innovative care tactics operate in spaces and through processes that are difficult to discern, but nonetheless work to undo exclusion, neglect and necropolitical devaluation through compassion and connection.

Vijayakumar ends her commentary by suggesting that while state actors and the media may still focus on the urgent and spectacular, what makes sociology such a vital practice is its attention to slow, incremental, historical and structural processes, forcing the public to recognize and reckon with enduring patterns of inequality and exclusion. To see, comprehend, and explain, however, is not enough. We must also work to counteract and reverse these slow yet enduring injustices.

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