Good Pandemic People:
Citizenship and Ethical Striving during the COVID-19 pandemic in Ottawa, Ontario

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Abstract

When the COVID-19 pandemic first reached Ottawa, Canada in March 2020, the lives of nearly all residents were dramatically impacted. From the loss of jobs to the loss of loved ones, many experienced an intense period of loneliness, fear, and uncertainty. This thesis explores residents' experiences of the pandemic in Ottawa and how these were shaped by the state's response to COVID-19, namely its public health and economic response. It is based on fieldwork conducted during the first waves of COVID-19, which combined participant observation, interviews, and online observation. It begins by exploring how the state called on residents to take responsibility for public health, thereby enacting a certain type of citizenship, and the ethical striving of my interlocutors to become responsible. It then focuses on how state officials urged people to use their common sense at the limits of state advice and how my informants attempted to cultivate their ability to make safe decisions. Lastly, it analyzes how the introduction of CERB, a social program that targeted un- and underemployed Canadians, renewed public discourse about the purpose of welfare and how the program served as a technology of government that encouraged applicants to reflect on their receipt of the benefit.

Acknowledgements

Before I begin, I want to take a moment to thank some of the people in my life who have helped me create the text you are about to read. First, I want to thank my supervisors, Dr. Thushara Hewage and Dr. Meg Stalcup. I am grateful for the careful attention they offered me throughout my studies, their expertise, and, above all, for their guidance during a chaotic time. They grounded me and gave me a sense of direction, and I am fortunate to have them as mentors. I would also like to thank Dr. Ari Gandsman and Dr. Larisa Kurtovic for offering me invaluable feedback and for taking the time to be my committee members.

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Introduction

On Wednesday, March 11, 2020, the municipal public health department of Ottawa, Ontario confirmed its first case of the COVID-19 virus. This would become a landmark date in the city, signifying when the daily lives of residents changed. Ottawans, myself included, would reflect on how long it had been since that day. The new coronavirus had been identified in China near the end of 2019. Initially, it was largely contained within China, but the deadly respiratory illness became a global threat within a matter of months. The same day that Ottawa detected its first COVID-19 case, the World Health Organization (WHO) declared COVID-19 to be a pandemic due to increasing viral cases outside of China. Nations needed to ready themselves for the eventuality of the virus breaching their borders if it had not already done so. "This is not just a public health crisis," the WHO Director General stated. "It is a crisis that will touch every sector – so every sector and every individual must be involved in the fight (WHO, March 11, 2020)." Less than a week later in Ottawa, businesses shut their doors and schools moved classes online with the aim of preventing viral transmission by keeping people at home. Where previously the state warned residents to stay vigilant through hygienic practices like hand washing, public health messaging intensified in mid-March. Residents were incited to take up numerous practices to contain the virus. Their cooperation would be key to managing the pandemic.

Ottawa is my hometown and its where I lived when the COVID-19 pandemic began. Shortly after the 11th of March, I made myself comfortable in my parent's home where I would remain in relative isolation. It would be months before I would meet my grandmother, my sister, my partner, and my friends once again but I was not yet able to fully imagine just how long it would be. At the time, I felt as if so much was changing and so much was charged with feeling. I wanted to explore how Ottawans were living in this context and how they were managing the

uncertainty the pandemic had brought about. This thesis investigates these topics. It explores the state's response to COVID-19 in Ottawa, Ontario and how it influenced residents' experiences of the pandemic. Specifically, it examines the ways in which the state called on residents to enact a certain type of citizenship and how, in turn, many strived to become, as one of my informants put it, "good little pandemic people."

Literature Review

Citizenship

COVID-19 was broadly labeled a global crisis in the spring of 2020. A lethal threat, the pandemic required an extraordinary response to protect the lives and livelihoods of people everywhere (WHO, March 26, 2020). The term crisis is typically used to denote an emergency requiring immediate attention (Beckett, 2019). In addition, it also refers to a period where normal activities can no longer be maintained (Barrios, 2017) and assumes a break between some past and hoped for normal (Vigh, 2008). This disruption is often thought to serve the dual function of calling for an urgent response and exposing a truth about the present (Roitman, 2013). Prime Minister Trudeau (June 10, 2020) discussed the pandemic in this way in a speech he delivered to graduating students. "[The pandemic has] exposed the limitations and flaws of our world. The world that you are set to inherit," he stated. "That can be unsettling and even alarming but it's also a wakeup call. A wake-up call of how much you are needed." Comparing the graduating class of 2020 to that of 1939 who, working together, "left us a world far better than they found it," Trudeau claimed, "[this pandemic has] taught us just how much we need one another. To defeat this virus, everyone has to play their part." Thus, Trudeau spoke of the pandemic as revealing the ability of Canadians to step up to challenges and communicated a continued need for solidarity. "What matters most is looking out for the most vulnerable," he claimed. "It's time that we reclaim the idea of community, of being a good neighbour, of being a good friend."

This speech exemplifies how the state summoned Canadians through the language of citizenship, solidarity, and care to respond to the COVID-19 pandemic during my fieldwork. The state invoked past struggles to highlight assumed Canadian characteristics and values that enabled perseverance and framed citizen's actions as capable of protecting their neighbours, their country, and their collective future. Situating itself within the anthropological literature on citizenship, my study explores the work the concept does at the level of the state's response to COVID-19 and people's experiences of the pandemic. When I refer to citizenship, I employ a paired back definition that extends past the legal category: citizenship as membership of a collective (Brown, 2016), namely, those who lived in the city, province, or country over the course of my fieldwork.[1] Describing citizenship, Andrea Muehlebach (2012) defines it "not [as] a state or possession, but a process, social position, or orientation that can be precarious and that must be repeatedly asserted and attained (18)." Not only is citizenship something that one actively reasserts but the quality of citizenship, meaning the shared expectation of what it entails, changes over time and from place to place (Bloemraad, 2018). I take this ongoing (re)articulation of one's belonging to be a "process of making membership claims on polities, people and institutions that must be recognized within particular normative understandings of citizenship (Bloemraad, 6, 2018)." Thus, people practice citizenship through claiming their belonging and receiving recognition. However, citizenship can be exclusionary and is not available to everyone equally. In addition, some, often marginalized people, refuse the forms of state recognition that citizenship offers, seeking to redefine citizenship (Fernando, 2019) or reject it (Simpson, 2014).

[1]While my research subjects had legal citizenship status, I employ a broader definition that better encompasses the relationship between those living in Ottawa and that with the state. This is useful for such things as exploring the Canadian Emergency Response Benefit (CERB) which was available to those who resided in Canada rather than legal citizens.

While acknowledging the importance of the recognition of citizens, Alejandro Paz (2019) adds that citizenship also entails a process of being interpellated by the state. Citizens recognize themselves as a certain type of subject when called on by the state in such instances as driving through a toll station or seeing election campaign signs. As citizens, people are encouraged by the state to adjust their behaviour (Blackburn, 2009) and to imagine themselves as members of a much larger whole. During the COVID-19 pandemic, the state encouraged people to recognize themselves as citizens, and, in doing so, recognize their shared responsibilities and shared goals. Citizenship purportedly serves to unify an assumed nation, binding people through commonalities. While Canada is regularly described by scholars as lacking a clear, unified identity, unlike USA its neighbour to the south (Howes & Classen, 2020; Dunk, 2002), Canadians are invited by the state to imagine themselves as sharing certain values or experiences. The state regularly presents Canadians as responsible, "compassionate, caring, and committed to values of diversity and multiculturalism (Thobani, 4, 2007)." These supposedly Canadian qualities were often mentioned in politicians' speeches during the COVID-19 pandemic to promote safe conduct. Often, these Canadian attributes are defined against non-Canadianness, frequently referring to supposed American traits. Indeed, Canada and its citizens have a long history of positioning themselves as more tolerant, more law-abiding, more stable, and better governed than USA (Berger, 2013; Dunk, 2002; Howes & Classen, 2020). Moreover, citizenship incorrectly implies that all members face equal treatment and receive equal rights from the state (Blackburn, 2009; Bloemraad, 2015). The unequal treatment of indigenous people in Canada serves as but one example of the manifest incorrectness of this assumption. In these ways, the term citizenship alludes to commonality, belonging, and kinship.

The normative conception of citizenship promises membership and rights in exchange for the fulfilment of social responsibilities such as paying taxes. Trudeau's graduation speech nodded to these obligations calling on young Canadians to do their part as citizens. Invoking nationalist rhetoric, Trudeau tied present-day social responsibilities with the fight against fascism and portrayed the willingness to fulfill these duties as a Canadian quality (Ismail, 1997). Canadian public health campaigns have long leveraged this language of social responsibility, the responsibility for citizens and the country. During the mid-20th century, public health messaging asked Canadians to "take care of their bodies (and, increasingly, their minds) for the good of themselves, their children, and their nation (Carstairs et. al. 9, 2018)." A person's actions to better their own health was put forward in these campaigns as capable of impacting their community and the nation at large while also being a moral good. Canadians who did not take up these practices were presented as "failing in their responsibilities of citizenship (Carstairs et. al. 17, 2018)." Similarly, this thesis explores how my research subjects adapted themselves to and inhabited certain new practices, articulated by the state as social responsibilities. Adopting these practices were often framed as standing in solidarity with other Canadians. Solidarity typically concerns collaborative action and political aspiration (Vrasti & Michelsen, 2017). Yet, Jacques Donzelot (1988) complicates the term arguing that solidarity diffuses responsibility such that no one person is fully to blame. In the context of the COVID-19 pandemic, the image promoted by the state of Canadians working together to manage the virus both made all residents responsible and diffused blame.

In this thesis, I consider the state's expedient of a model responsible citizen who contributes to the collective project of managing COVID-19 as embodying a neoliberal understanding of citizenship. As such, neoliberalism is a running theme throughout this thesis.

This study approaches neoliberalism as an ideology that has select key features while also being informed by "local structures of meaning and histories (Kanna, 102, 2010)." A common critique of neoliberalist rhetoric and policy leveraged by scholars is that it shifts responsibility away from governments and institutions and onto individuals. As such, individuals are held accountable for their successes and failures (Brown, 2016). The concept of resilience, ubiquitous in its popular and political uses in recent years, comports well with this neoliberal emphasis on individual responsibility. In the face of uncertainty, resilience advocates advise systems and citizens to develop the ability to withstand and learn from inevitable crises (Walker & Cooper, 2011; Joseph, 2013; Evans & Reid, 2013). Responding to the prevalence of resilience strategies, scholars have argued that rather than advocating for systemic change that might prevent emergencies, resilience-thinking places the burden on people to adapt to inevitable threats (ranging from the effects of climate change to personal trauma) (Joseph, 2013; Neocleous, 2013; Orsini, 2020; Uekusa, 2017). In this way, resilience comports well with neoliberalism in that its proponents ask people to look inwards for a solution to a wide array of problems and to take responsibility for their circumstances by becoming flexible or adaptable. During the COVID-19 pandemic, not only did state officials urge people to become resilient in the face of challenges, but their behaviour was also framed as integral to the nation's resilience. Throughout this thesis, I examine the many ways the state incited people to enact a certain ideal pandemic citizenship and how my interlocutors reflected on their responsibility to and for others.

Ethics

This thesis also engages with the anthropology of ethics in exploring how my research subjects strived to become "good little pandemic people." Expressed in Trudeau's graduation speech, the state pressed people to become "good neighbours" and "good friends," caring for their community through their actions. I examine how my subjects reflected on and responded to

this incitement, by working on themselves to become responsible. In this analysis, I am not interested in adjudicating appropriate behaviour, determining what is or is not the proper way to comport oneself during a pandemic. I consider the ethical to not be the "good" but how people strive to act in the ways they believe they should. Thus, I deem reflection and evaluation to be a core element of ethics (Laidlaw, 2018).

My approach to ethics is informed by Michel Foucault's (1990) work on subjectivation which he describes as the "process in which the individual delimits that part of himself that will form the object of his moral practice, defines his position relative to the precept he will follow, and decides on a certain mode of being that will serve as his moral goal (28)." Foucault's work on the ethical formation of subjects is especially concerned with "self-activity," yet in as much as this "involves a relationship with the reality in which it is carried out (28, 1990)," it allows me to examine how power relations figure in a transformation of oneself. Thus, the analytic of ethics enables an examination of how one's actions are influenced by the expectations of one's peers, family members, fellow citizens, and the state. Moreover, it achieves this without necessarily requiring one view this relational power as manipulation or domination. It also allows me to "attend to the historical processes that, through discourse, position subjects and produce their experiences," (Scott, 779, 1991).

Inspired by anthropologists who have advocated for locating ethics within the everyday (Das, 2020; Mattingly, 2014), this thesis focuses on the mundane activities of my informants such as the enactment of routines, the adoption of new practices, and the submission of welfare applications. I strive to demonstrate the ways in which these quotidian practices involve regular self-reflection in an effort to take them seriously as a mode in which my informants conducted moral work (Mattingly, 2014). This element of reflection and evaluation (though not necessarily

always consciously carried out) is central to my approach to ethics since this process is what renders everyday life "pervasively saturated with meaning (Laidlaw, 188, 2018)." In chapter 2, I explore the role of common sense within this everyday ethics due to the term's recurring usage by politicians and my informants. While common sense is notoriously flexible and difficult to define, today it generally refers either to a body of everyday knowledge that is universal (or at least common to a community) or to good judgment (Rosenfeld, 2011). Common sense often refers to a kind of everyday etiquette: how one should behave or should know was the appropriate behaviour under ordinary circumstances. In this way, common sense, and the way the term was invoked by politicians and citizens alike, is tied to everyday ethics.

My exploration of ethical work is particularly concerned with how my informants discussed their actions and how the state and media portrayed their actions in terms of its impacts on others and the future. While the ethical is arguably always other-oriented to a certain extent, this dimension of ethical work is explored in detail in this thesis because people were encouraged in state, media, and public discourse during the COVID-19 pandemic to comport themselves in a certain way to protect the lives and livelihoods of others. Citizens were incited to care about (feel) and care for others (act) (Muehlebach, 2012). At the same time, this ethical work of adopting certain practices and mulling over certain decisions was future-oriented. The ethical striving of my informants took place in the context of intense uncertainty, or the inability to fully imagine the future both near and far (Cooper & Pratten, 2015). As a period during which what was widely deemed normal daily life was suddenly upended, or at the very least replaced by what was commonly referred to as a "new normal," the COVID-19 pandemic destabilized many residents' relationship to their future. Questions like "how long will public health measures be in place," "will my business survive the year," "will my actions today result in heightened viral

case counts later" were all without clear answers. The lives of my research subjects were tied to the ever-changing shape of the pandemic through such things as policy, public health guidelines, and illness. Thus, this thesis is aligned with Cheryl Mattingly's (2014) claim that ethics is experimental and suspenseful in the sense that "moral becoming does not occur in a world of already realized ends (207)." At the same time as my informants struggled with uncertainty, they also imagined causal links between their actions in the present and future outcomes. These expectations of the future were informed and regularly reformed by interpretations of experiences. Yet the future imagined in the present remained a "horizon of expectations" "behind which a new space of experience will open, but which cannot yet be seen (Koselleck, 273, 1985)." To explore the other-oriented and future-oriented nature of the ethical work citizens were encouraged to conduct, I examine the term responsibility. The term allows me to attend to what people expect of themselves and others while also analyzing the attribution of blame. Overall, this thesis explores how my informants strived to become responsible.

Methodology

Fieldwork for this project took place primarily during the first and second waves of the COVID-19 pandemic in Ottawa, Ontario. I began noting my own experiences of the pandemic in April 2020 and formally started my fieldwork that May. From September to October 2020, I continued data collection in a more scaled back manner that I will detail shortly. While conducting fieldwork, I lived with my parents in an Ottawa suburb which afforded me space to live comfortably and gave me access to the outdoors. Since experiences of the pandemic were so affected by one's living space, I feel that it is important to disclose this.

This project aims to capture both the state's response to the COVID-19 pandemic and that of Ottawans. Accordingly, I devised methods that tracked both. To trace the state's response, I followed official social media accounts, watched Prime Minister Trudeau and Premier Doug

Ford's regular public briefings, and read news articles from prominent local newspapers. This allowed me to keep track of announcements and to observe the language state officials used in communicating with citizens. I tracked these websites daily between May and August, and weekly between September and October. In addition, I visited relevant government websites observing not only the language used but also such things as the infrastructure of the website, the format of the pages, and the pages that were linked (Stalcup, 2020a). Much of the information these methods produced were not specific to Ottawa but pertained either to the province or country. However, since the actions taken at the federal, provincial, and municipal levels of government all worked together to create the unique pandemic context that my informants engaged with, it was important to observe these large-scale decisions.

To explore how my Ottawan informants experienced the pandemic, I conducted participant observation, interviews, and unobtrusive online observation. All of these informants have been given pseudonyms to protect their anonymity. My ability to conduct in-person participant observation was limited due to public health measures that restricted my mobility and that of other residents. Therefore, I developed most of my key informants among people who were readily accessible: my parents, neighbours, and friends. To recruit people I did not previously know, I joined a volunteer organization in late summer. Significantly, my key informants were predominantly middle class or came from middle-class backgrounds. This meant that many of them could access material resources such as backyard space and paid suck days, which offered them some level of comfort and security during this crisis. Their middle-class sensibilities (Wickberg 2007) also informed the interpretations of pandemic policies that they shared with me, and which are the focus of my analysis throughout this thesis. Participant observation enabled me to examine how my key informants interacted with others, developed

everyday routine practices, and reflected on their experiences. As part of this method, I conducted unstructured interviews, which resembled casual conversation, allowing me to question my subjects in a more natural manner than a structured interview (Bernard, 2011).

I conducted fourteen semi-structured interviews that featured open-ended questions and a loose framework to allow the conversation to venture into unexpected territory while maintaining some level of order (Bernard, 2011). While I adjusted my interview guide depending on the participant, I canvassed all interviewees on their experiences with public health measures and thoughts on CERB. When recruiting interviewees, I sought out people who were interested in self-reflection and who's experiences of the pandemic were relevant to my study. For example, I looked for potential interviewees who had been recipients of CERB. Moreover, many of these interviewees also were involved in participant observation which provided context to their responses. When recruiting people I knew personally, I was careful to express that I had no intention of pressuring them into participating in my study. Alongside this recruitment strategy, I used a snowball method asking my informants to share my contact information with those who might be interested, such that others may contact me to participate (Bernard, 2011). This allowed me to reach people I might not have otherwise been able to contact.

Alongside these traditional methods, I conducted unobtrusive observation in local online forums. I tracked these forums daily from May to August and weekly from September to October. Because of the size and nature of these forums, it was challenging to participate in any meaningful way or to fully disclose my intentions. To protect my informants, I have anonymized all findings from these sources by omitting names, usernames, photos, avatars, and forum names (Boellstorff et. al, 2012). Alongside these sources, I also followed Letters to the Editor sections of newspapers, comment sections of newspapers, and a popular Canadian call-in radio show. As

I observed these spaces, I employed internet techniques (Stalcup, 2020a) by being attentive to the ways people interacted, what language they used, what memes they shared, and how topics of conversation changed over time. I collected data by capturing screenshots that provided visual information that I then paired with written notes to provide context (Boellstorff et. al, 2012). These online sources allowed me to track popular online discourse as the pandemic unfolded.

Throughout my fieldwork, I also conducted autoethnography by documenting my thoughts, feelings, and experiences of the pandemic (Wall, 2008). While I did not include many of these notes in this thesis, they were useful in tracking and processing my own feelings as I conducted fieldwork. An unfamiliar and isolating time, I experienced waves of stress and depression throughout this project. Documenting this period allowed me to review my field notes at a later date with more context. Moreover, these reflections made me more attentive to my own mundane experiences of the pandemic.

Thesis Outline

Chapter One explores the role of Ottawa residents in the public health response to the COVID-19 pandemic. During my fieldwork, there was no vaccine or treatment available to manage the virus nor was there initially an effective viral testing strategy. Due in part to this lack, the state's public health response relied heavily on the cooperation of citizens to employ certain practices. Drawing on the language of neighbourliness, selflessness, and patriotism, the state's public health messaging worked to make people responsible for containing the virus and protecting others. I argue that it achieved this task by promoting a causal link between residents' behaviour and COVID-19 transmission. Consequently, Ottawans were encouraged to modify their behaviour by adopting public safety practices so that they could protect and care for others. Eager to protect the vulnerable and to contain the virus as quickly as possible, my informants

took up these responsibilities and strived to become responsible people who could be trusted not to harm others through their behaviour.

In Chapter Two, I turn to the period leading up to the COVID-19 pandemic and examine the state's attempt to prepare for what experts considered to be unknowable, expected, and inevitable future pandemics. Using the anthropological literature on preparedness, a popular public health strategy at the time of writing, I analyze Canada's pandemic preparedness plan and highlight its goal of clear communication with citizens. Despite this preparation, public health messaging during my fieldwork was both inconsistent and incomplete. I argue that this failure to provide clear messaging was in part a result of the limits of a strategy of preparedness, which implies that one can never be prepared enough. In light of this confusing messaging, my research subjects cultivated their common sense, or good judgment, so that they could make safe decisions that would allow them to fulfill their responsibility of preserving public health.

Finally, in Chapter Three, I move away from public health measures to focus on a key part of the federal government's economic response to the COVID-19 pandemic. The chapter analyzes CERB, a social program aimed at un- and underemployed residents that ran from March through September 2020, to manage the wave of unemployment that arose as a result of public health measures during the pandemic. I explore the concept of a deserving recipient of aid, a category that has a long history in Canada, especially within the realm of welfare, and examine how the state and my informants promoted a certain idea of CERB deservingness. I then turn to CERB recipients' experiences of applying for the benefit to analyze their understanding of their receipt of CERB. Using the anthropological literature on technologies of government and Colin Koopman's (2019) concept of formatting, I examine how CERB urged applicants to reflect on their decision to apply for the program. Entitlement emerges from my findings as a counter to

deservingness with its own lengthy history in Canada and I explore how recipients interpreted their eligibility in terms of these two perspectives. Finally, I conclude by depicting the ways in which activists took advantage of CERB to expand the category of the deserving or entitled recipient of social aid.

Chapter 1: Becoming Responsible

It was a crisp spring day, and I was sitting outside in my parents' backyard having lunch when my neighbour Ashley and her daughter Mackenzie waved me over to their fence. Only a few weeks earlier, the Ontario government had declared a state of emergency in response to the COVID-19 pandemic's introduction to Canada. Since then, my parents and I had only left our house for groceries as the provincial government advised in order to minimize our chances of contracting or transmitting the virus. Keeping a distance, we met our neighbours across our shared fence, chatting about our sedentary day. Ashley complained about someone she knew who had gone to work despite feeling ill. "It's really irresponsible!" she said. "She could have caught COVID and she could give it to other people." I nodded along, shocked that her friend had not taken her symptoms more seriously. "I think I might call her and let her know," she continued. As she spoke, Mackenzie appeared to grow tense. She whispered to her mother, "You have to be careful talking to someone about that. Telling someone they might have COVID is kinda like insulting them." I was confused by Mackenzie's statement, but the topic of conversation was changed before I could ask questions.

That was very early on in the pandemic. The fear of the virus was still very fresh among my informants who were only starting to familiarize themselves with the provincial government's public health advice. At the time, the lethal viral outbreaks were being identified primarily in long term care homes where vulnerable seniors lived in close quarters. However, by late summer, likely due to several factors including enhanced viral testing and the reopening of service jobs, circumstances had changed such that young adults comprised a large portion of the reported active cases in Ontario. Many suspected the high rates of transmission in this demographic were due to irresponsible behaviour like reckless partying. In local online forums, residents complained that young adults were spreading the virus among themselves making the

city more dangerous for the rest of us who might encounter them. This was such a popular refrain that it compelled a local newspaper to counter it with an article titled "Young retail worker positive: 'I have done all that I could to avoid it and I still got COVID' (Payne, August 2020)." An anomaly of this period, the article focuses on a young man who contracted COVID-19 despite following public health advice. In an ironic twist, the article's comment section featured many posts questioning the validity of the worker's positive COVID-19 test result.

During the COVID-19 pandemic in Ottawa, my informants often spoke of viral transmission as if it were exclusively a product of unsafe actions. In other words, contracting the virus implied that one had done something wrong or at least that one had been exposed to someone who had. This causal link between behaviour and viral transmission was promoted in state messaging which encouraged people to employ a host of safety practices to protect themselves and others, thus containing the virus. In this chapter, I explore how the state obligated residents to take up these practices and urged them to become responsible. I begin with an analysis of how the state's messaging made residents responsible for preventing viral transmission and protecting the local economy. Then, I depict the challenges some people faced in attempting to follow guidelines that did not account for their circumstances. Next, I turn to the ways my informants responded to the pandemic by attempting to cultivate responsibility as a virtue. Finally, I examine how my informants policed themselves and others as part of their efforts to become responsible.

Preventing Viral Transmission

The first few weeks of the COVID-19 pandemic in Ottawa were a strange and intense experience for many residents. The provincial government introduced an extensive list of guidelines and restrictions that would undergo a series of changes in the months to come. These measures were in part a reaction to the frightening potential for asymptomatic viral transmission

(Bai, Lingsheng, et. al., March 2020). This meant that anyone could transmit the virus without their knowledge. The absence of rigorous and effective testing in the early days of the pandemic meant asymptomatic carriers could not be discovered and managed appropriately. Consequently, in March 2020, the state instructed Canadians to assume that everyone, including themselves, was a carrier and to act accordingly. The most crucial provincial guidelines were dubbed 'the golden rules' by Premier Doug Ford: practice physical distancing by maintaining a distance of at least two meters from others; wash your hands often; and wear a mask when indoors or incapable of maintaining a distance (September 2020).

Each level of government created slogans that communicated the need for citizens to take on these public health practices. The federal government's catchphrase in the early months of the pandemic, 'Stay Home. Save Lives,' highlighted the lethal potential of COVID-19 to create a sense of emergency (PHAC, March 2020). It framed the decision to stay home as an action that directly resulted in the preservation of lives. In a sense, this slogan positioned Canadians as healthcare workers who could save people through their actions. Given that healthcare workers at this time were celebrated as heroes, the implication was that you too could be virtuous if you adopted this practice. The Ontario government would later use the same slogan paired with an ad campaign on Facebook depicting a cheerful family gathering that transforms into an emergency room scene (See Fig. 1). Whilst the slogan asserted that citizens had the power to save lives, the imagery showed that they also had the power to kill. Because of this, the

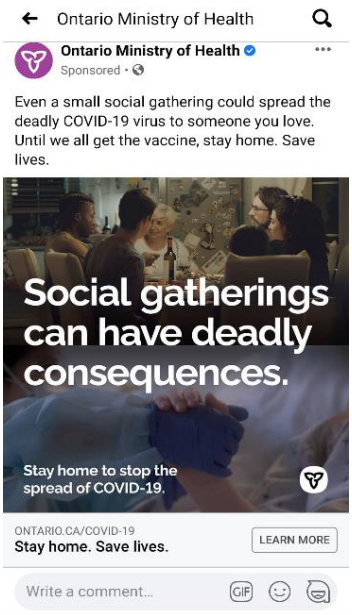


Figure 1. Screenshot captured by author of an Ontario advertisement on Facebook

ad implied, citizens were obligated to adopt safe practices. Come summer, Ottawa Public Health (OPH) created its own slogan: 'BeCOVIDWise' (See Fig. 2). As an acronym, 'WISE' represented the foremost public health practices expected of residents which, when followed, enabled one to be 'wise.'

Figure 2. Screenshot captured by author on Facebook depicting an OPH slogan used all summer 2020.

The moral underpinnings of public health messaging were explicit in the regular public briefings held by Prime Minister Trudeau and Premier Ford. In a series of announcements in May, the Prime Minister tied the struggle to defeat COVID-19 to Canada's historic military victories. On May 4th, he stated:

> [This is] not the first time that Canadians have been called to do their part. Over the past generations, Canadians have time and time again stepped up in defense of our shared future…From the fall of 1944 to the spring of 45, thousands of Canadians pushed back the occupying forces road by road, town by town…Lets reflect on how each of us can live up to their example. Maybe you'll do your part by staying home to protect our healthcare workers…With your actions, you're contributing to your community and demonstrating that Canadians time and time again will continue to step up. (Trudeau, May 4, 2020)

This speech attempted to mobilize a sense of national pride and imbued the decision to stay home with the glamour of fighting for one's country. Moreover, it portrayed the adoption of public health practices as "doing one's part" during a crisis, just as exemplary Canadians did 75 years prior. Thus, Trudeau marked the COVID-19 pandemic as a significant historic moment within an ongoing national history. He framed Canadians as capable of "defending our shared future" and obligated to do so. Similarly, in Ford's speeches, he established willingness to comply with regulations as a quality of Canadian citizenship. Juxtaposing the province's measured success in minimizing viral transmission with that of USA, Ford claimed, "Canadians

listen a lot more than the Americans do (Ford, August 28, 2020).” Thus, he positioned adhering to public health advice as both the morally correct choice and the Canadian thing to do.

These quotes are examples of how the state’s messaging worked to make Canadians responsible for preventing viral transmission and preserving public health. Messaging like this has been used in previous public health campaigns to encourage practices such as receiving the annual flu vaccine (See Fig. 3). However, the existential responsibility to prevent the transmission of COVID-19 differed in how it extended to all areas of daily life. Not only were people depicted as capable of being responsible for public health, but their cooperation was “the only way to get through this (Ford, May 8, 2020).”

Figure 3. Screenshot captured by author on Twitter depicting a PHAC 2019 flu vaccine advertisement tweeted by the Chief Public Health Office of Canada. The line “Protect them all. Get your flu shot.” works to make citizens responsible for each other and public health through vaccination

A recurring theme in government messaging was that of citizen responsibility to and for current and future Canadians. A highly malleable term, responsibility has the capacity to connote multiple related meanings at once. On one level, responsibility has to do with who or what can be held accountable or considered blameworthy for something. Exploring the connection between responsibility and causal explanation, James Laidlaw (2013) argues that the attribution of blame is a “matter of interpretation (184).” One’s mood or opinion of the accused may influence one’s perception of what caused events to unfold as they did. Thus, attributing responsibility is always subjective relying on factors such as intent and the need for redress. Expanding this description of the term, Peter Strawson (2008) argues that blame can only be

attributed to those who are considered capable of being responsible at the time. Children, pets, dementia patients, to name a few, may not be held responsible for their actions since they may be deemed incapable of being responsible. Thus, when calling on Canadians to take responsibility for public health, the state claimed that citizens were capable of being responsible for such a thing. In a related fashion, responsibility also refers to an obligation to perform certain duties expressed in the phrase "to be responsible for something." The one in charge of a task is expected to ensure it is conducted correctly and can be blamed if it is not (Clancy & Svensson, 2007). When framing citizens as responsible for public health, the state presented a causal link between their actions and COVID-19 cases while also positioning residents as the only ones capable of containing the virus. In turn, this framing was taken up by the media and my informants. The failure to fulfill this responsibility was viewed not just as unsafe but a moral transgression.

Rendering citizens responsible for containing the virus encouraged them to adopt public health practices but also made them blameable. In his briefings, Ford promoted public health practices by thanking Ontarians for good behaviour and shaming bad apples. On August 28th, he addressed Ontarians with compassion: "Since everyone, the 14.5 million people have been following the guidelines of the Chief Medical Officer and the protocols, the results speak for themselves…I want to thank the people of this great province. It had nothing to do with the government." Conversely, on July 20th, Ford chastised Toronto residents who congregated in large numbers saying, "Do the right thing." Shifting his tone from praise to blame, often in accordance with the viral case count, Ford's messaging worked to attribute the province's successes and failures to Ontarians. Because residents were deemed responsible for protecting public health, they could be blamed should they fail to do so. Neglecting one's duty to follow

expert advice, Ford argued, was an act of selfishness that directly harmed others. Moreover, by differentiating Ontarians from the "odd bad apple that falls out of place," he positioned safe behaviour as an element of Ontarian citizenship (July 21, 2020, Ford).

The ways in which the state rendered citizens responsible for public health during the COVID-19 pandemic aligned with a neoliberal style of governing that has gained prominence in recent decades. Under neoliberalism, the state sheds its responsibility for protecting citizens and devolves this to individuals who should imagine themselves as autonomous subjects (Trnka & Trundle, 2017). As responsible people, they can be held accountable for their own successes and failures (Brown, 2016). With respect to the COVID-19 pandemic, the state shifted its responsibility to protect citizens to Ottawans who should care for their body and that of those around them through employing safe behaviour (as well as a host of self-care practices). Thus, the state provided guidelines that would empower residents to take responsibility for themselves.

Importantly, residents were not always required to take up public health practices. While there were some measures that were enforced and periods with heightened enforcement, the state also urged people to follow guidelines by positioning it as the correct way to behave. In these cases, Ottawans possessed the freedom to act as they liked while their actions were guided by state communication (Rose, 1999). Public health messaging during the COVID-19 pandemic focused on one's ability to potentially harm others through transmitting the virus. And so, voluntarily adopting safe practices was promoted as a way of protecting others. This work of translating the "corporeal stirrings of the heart into publicly useful activity" is what Andrea Muehlebach terms "soulcraft" as opposed to "statecraft" (18, 2012). As soulful beings, people were incited by the state to care for others and as potential carriers of a lethal disease, people were deemed responsible for the health of Canadians.

Protecting the Local Economy

The economic impacts of the COVID-19 public health measures were particularly visible, quite literally changing the cityscape. Businesses were required to shut down or restrict access and, many were incapable of withstanding the resulting decreased income. In the months of March and April 2020 when public health measures were relatively strict, there were almost twice as many business closures in Canada as there were in the same period in 2019 (Statistics Canada, 2020a). These challenges posed by the public health response were not experienced equally by all Canadian workers. Where some work could be conducted from home, other sectors that required physical presence like retail and construction faced a high number of layoffs (Statistics Canada, 2020b). In response, the federal government released multiple emergency financial programs for businesses in the hopes that employers would maintain a connection with their employees and that they would have the flexibility to survive periods of decreased income. However, these programs received fewer applicants than hoped for and news articles accused them of having too many design flaws to be useful (Ex. Cross, 2020). In turn, the poor uptake of these programs led to increased stress over the decline of the local economy.

When asked why his government did not provide funds for businesses to buy protective equipment to facilitate their reopening, Ford replied "To be very frank if we funded every single company in the province, we just don't have the money (Ford, July 13, 2020)." Provincial financial support, he argued, would not be a viable solution for managing economic strain. At the same time, the provincial government claimed in official statements that maintaining public health was their primary concern even if doing so harmed the economy. "Without people's health there is no economy," Ford stated (Ford, July 20, 2020). The key to a true economic recovery, he asserted, was through following public health measures. Yet, many Ottawans worried that some of the state's decisions, such as the reopening of businesses, sacrificed public

health in the name of the economy. Many pointed to decisions like permitting non-essential air travel as evidence that the state was more concerned with the economic insecurity of companies than public health.

The process of reopening businesses after the first lockdown began in late spring 2020 with Ford promising that these public spaces should be safe, provided they follow mandatory provincial guidelines. At this time, the provincial government adjusted its messaging to advise Ontarians to return to work and to shop local while continuing to practice physical distancing to enable the economy's recovery. When asked to provide more support for local businesses, Ford's typical response was, "The best way to help them? Let them open their doors and get their customers back (Ford, July 13, 2020)." Similarly, Mayor Jim Watson promoted shopping local by publishing a tour of local businesses on his social media. These messages depicted citizens as capable of being responsible for local businesses where provincial and municipal governments were not. My informants' opinions of the first wave of businesses reopening were split with some relishing their ability to access public spaces again and others preferring to stay home where they felt safe. Yet while some took advantage of the ability to go shopping or dine out, others complained that the reopening of these spaces seemed to contradict public health messaging. The reopening of businesses and the encouragement to go shopping or return to work felt at odds with the responsibility to behave like an asymptomatic carrier.

Through its messaging, the state framed citizens as both responsible for public health and responsible for supporting the local economy, despite the frequent incompatibility in the ways residents were called on to fulfill these obligations. People were expected to support businesses through shopping and returning to work while also preventing viral transmission through keeping out of public spaces. The implications of this double responsibility were not distributed evenly.

For example, those who could work from home remained safe from criticism whereas those who were called back to work in public spaces faced potentially unsafe environments and judgment from peers. The conflict in how residents were incited to protect the economy and public health resulted in public and media discourse that communicated these goals as mutually exclusive. My subjects battled in online spaces over which objective was most valid. “Let the bars and restaurants fail,” read a comment on a local Reddit forum. “There is no need to play Russian roulette with the countries health [sic].” Conversely, an opinion piece in a local newspaper read, “either we learn to start living with COVID-19 risk or we can say goodbye to substantial chunks of the retail, tourism and hospitality sectors, along with many of the hundreds of thousands of jobs they create (Denley, 2020).” At both extremes, my informants argued that the stakes were high, and the repercussions would be enduring.

I found this assumed dichotomy challenged on a day trip with my parents and our neighbour Ashley to the small Ontario village of Merickville. The main street was lined with city signs reminding passersby to follow public health advice, bearing the slogan “Save a Life. Save a Business (See Fig. 4).” As I pulled out my phone to take photos, Ashley asked what I had found so interesting. The signs seemed to place similar importance on saving lives and saving businesses, I told her. I was used to these responsibilities being spoken of in opposition. “For people in these small towns, your business is your life,” she replied. Losing it could have long-lasting consequences. Ashley had grown up in a nearby village and she was familiar with the unique challenges of rural life. Her matter-of-fact statement tied the protection of public health to that of the economy such that saving a business

Figure 4. Photo captured by author July 8, 2020, Merrickville, ON

could be saving a life. The sign implied that both were achievable if one followed public health advice.

Challenging Guidelines

Public health messaging was largely successful in promoting the goal of containing COVID-19 with many residents adapting their behaviour in some way in response to the virus. Guidelines provided by the state served as a model for safe behaviour among my informants. This is not to say that they followed these guidelines fully. One reason for this was that the guidelines were not well understood. Undoubtedly, the bubble, formally called the social circle, was the most notoriously misunderstood guideline of them all. A bubble was comprised of up to ten people with whom public health practices may be forgotten. Vitally, a person could be a member of only one bubble. By limiting bubbles to ten people, they were intended to fulfill social needs while also minimizing the potential spread of COVID-19. However, in practice, bubbles were messy, and my informants often disagreed over what behaviour effectively included someone in one's bubble.

In an interview with my partner's close friend Milos, I learned that he had a bubble of five friends. The friends in Milos' bubble had bubbles of their own composed of family and friends making Milos' circle much larger than the five people he listed. Knowing Milos well, I knew that he was trying in earnest to behave safely. And while he may not have fully appreciated what the rule entailed, he also was not in a position to easily implement the bubble as it was intended. The bubble was one of many public health guidelines whose design did not cater to all citizens' needs and living conditions. Where adhering to guidelines was difficult for everyone, doing so was more difficult for some than others. Simply put, the guidelines were created with a certain type of Canadian in mind: one who was financially secure, had a backyard, had a spacious home, and lived with their loved ones. This was not a uniquely Ontarian problem. The

nearly global message to “stay home” garnered attention early on from scholars for its implication that everyone had a safe home to return to and that this home could fulfill all manner of needs from office space to entertainment (Fitzgerald, 2020). The realities of apartment-life with its limited space and communal areas were neglected by public health guidelines. This was made especially clear in September when OPH temporarily decided to hand out fines worth $5000/day to anyone who did not isolate properly after contracting (or suspecting they had contracted) COVID-19. Isolating properly involved remaining on one’s property until one was considered no longer contagious. This posed a problem for apartment dwellers who were unsure of how they would be able to perform basic activities like walk their dogs, wash clothes in communal laundry rooms, or get groceries delivered. As such, the guidelines neglected to offer advice for living safely in a popular form of housing and introduced the potential of fining those who found themselves incapable of adhering to the rules.

My informant Milos’ inability to adhere to the social circle guideline was similarly tied to the ways in which his lifestyle conflicted with the guidelines. Milos did not have a partner to visit, nor did he feel comfortable seeing his parents who he considered to be vulnerable to COVID-19. Because of this, he could not form a bubble with family, the obvious option. As an apartment dweller, he also lacked a backyard in which he could host gatherings in the relative safety of the outdoors where airborne transmission was minimized. While he initially restricted contact to his apartment roommate, he eventually opened his circle to a handful of friends. Between weekly visits with his bubble members and online video games, he claimed his social needs were fulfilled. Despite improperly adhering to the guideline, he still restricted the number of people he was in contact with “so that the people I hang out with can feel comfortable and

confident in the fact that I haven't been hanging out with other friend groups." He demonstrated concern for the safety and comfort of others even as he failed to properly follow official advice.

Another young, single adult living in an apartment, Laura faced similar challenges as Milos. However, where Milos developed a large bubble, Laura opted not to create one at all. In our interview, she told me, "It was really hard to accept that I'm not going to be seeing another person for an indeterminate amount of time. That was really hard. Especially for a big life transition." The early months of the pandemic had marked both Laura's graduation from medical school and the discovery that her mother had been diagnosed with cancer. Being incapable of processing these moments with friends and family had been challenging for her. She was candid about her struggles with loneliness, and she admitted that while she made a concerted effort to practice safe behaviour, she occasionally made decisions that went against official advice, such as inviting a friend into her apartment during a period of lockdown, so that she could see people. In moments such as those, Laura faced what Cheryl Mattingly (2016) calls a "moral tragedy" referring to a choice that is made when "the pursuit of one ethical good undermines another good that is equally worth cultivating (444)." Deliberating whether to follow official advice or to care for herself created internal tension as she valued both.

State messaging flattened differences between residents in its assumption that they were all equally capable of withstanding and adhering to public health guidelines. This framing, while flawed, was picked up in public discourse. One online comment read: "If we end up having to shut things down again, everyone is ***inconvenienced*** [sic]…It's merely unpleasant." Feeling inconvenienced, the comment suggests, is a poor excuse for neglecting your responsibility. But Milos and Laura's failure to adhere to guidelines cannot be attributed to a lack of interest in preventing viral transmission. Both were invested in taking up the responsibility of protecting

public health but doing so by following state advice proved especially challenging for them and others like them. Reflecting on the criticism she faced for meeting with people, a Calgary woman who, like Laura, lived alone shared on a call-in radio show, "There's always that comment 'Well you have people. Connect with your people.' But when you don't have a lot of people you find it even more isolating… [When you do connect with friends] you feel that there is a shame with that because you're not supposed to be connecting with people that are outside your household (McCue, 2020a)." In another episode, that same radio show featured an online dating coach who claimed that where he previously received requests for permission to cheat on a partner, now his followers asked if they could cheat on guidelines (McCue, 2020b). The desire to "cheat" in both anecdotes signals the difficulty in following guidelines. In sending requests to greenlight cheating, the dating coach's viewers hoped to divide the burden of this decision so that it would be lightened (Ivry & Teman, 2019). These requests for permission demonstrate that cheating even under difficult circumstances weighed heavily on the dating coach's audience.

Cultivating Responsibility

As I have described, the pandemic had a disruptive impact on the everyday lives of my subjects. Informed by such things as COVID-19's circulation, the state's public health response, and changing expert knowledge of the virus, the pandemic served as an infrastructure that shaped daily activities (Beckett, 2019). My informants responded to the change brought on by the pandemic by adapting their everyday behaviour and crafting new ways of living. In an interview with Charlotte, my retired neighbour, I listened to how the emergence of COVID-19 in Canada dramatically changed her plans as she rushed home to Canada with her husband from their vacation in Mexico before quarantining themselves for the required fourteen days in their home. "Anyway, that's how the pandemic started out for us," she laughed. "And then, we didn't go out much. I guess we're pretty good little pandemic people." She then told me about her experiences

undergoing major surgery, cancelling travel plans, and missing her family, smiling the whole time. She spoke as if living in the pandemic was effortless but being a good pandemic person required that she adopt a number of practices as it did for all Ottawans. It required learning the latest public health measures, adapting her habits, and monitoring her behaviour. This was an ongoing process of self-reflection and evaluation as she continually shaped her behaviour (Laidlaw, 2018).

It is at this point in my chapter that introducing a final dimension of the term "responsibility" is useful. The Oxford English Dictionary (OED) (2021) refers to responsibility as the "capability of fulfilling an obligation or duty; the quality of being reliable or trustworthy." In this sense, responsibility is a virtue that a person may possess permitting them to fulfill their obligations in a dependable manner. The responsible subject is expected to uphold certain commitments and reliably succeeds in doing so. My informants, like Charlotte, who attempted to protect themselves and others by developing safe practices spoke of being or becoming responsible. Cultivating responsibility was a form of ethical striving "realized in and through activities," or praxis (Mattingly, 10, 2014). Typically, this ethical work was mundane involving the development of new routines and new ways of evaluating acceptable behaviour. Striving to become responsible, as the OED definition implies, involved developing the capacity to protect others and to prevent COVID-19 transmission. Thus, when my informant Milos claimed he was restricting his contact with others to ensure he would not transmit the disease, he claimed he was "being responsible." He believed the practices he had developed would render him capable of protecting others. Being responsible entailed successfully performing safe behaviour over and over. As such, cultivating responsibility required vigilance and the development of self-monitoring practices capable of preventing mistakes.

The desire to cultivate responsibility arose from the conditions that residents found themselves in; conditions that were informed in no small part by public health messaging. Just as state messaging positioned protecting public health as the responsibility of citizens, it also encouraged them to become responsible. This was achieved through a language of neighbourliness, selflessness, and care. Discourse on the responsible subject reflected what Andrea Muehlebach (2012) terms a "*souci des autres* (8)." Ottawans were asked to care about and care for others but to do so in a way that was, to borrow a phrase from OPH, "wise." By developing the capacity to care for others in this way, residents would become responsible. In state messaging, as in public and media discourse, the inverse of responsibility was stupidity and selfishness. Referring to the ultimate refusal of public health guidelines, anti-pandemic protests, Ford expressed (Ford, May 9, 2020), "It's irresponsible, reckless, and its selfish... Obviously, they don't care about everyone else in Ontario." In refusing to fulfill their obligation to protect Ontarians, these protesters demonstrated a lack of responsibility and awareness of the long-term consequences of their actions. "I understand that people want to get out there, but we have to be responsible," he continued. This statement presented the reasons one might not follow guidelines as the desire to fulfill one's own needs. While this was an understandable sentiment, it was also a selfish one that should be overcome. A responsible person should be willing to sacrifice their comfort, health, happiness, and passionate convictions to protect others. They should care for and about Ontarians.

My research subjects were invested in becoming responsible through developing and maintaining public health practices. Of course, they did so in part because they were concerned with protecting themselves, their loved ones, and their neighbours. However, they also did so as part of their duties as citizens for other citizens, people they may not know or care for directly

but who they were responsible for nonetheless. This register of care cropped up when my informants discussed their desire to protect their region through contributing to lower viral case counts or when they criticized the behaviour of strangers. While expressing frustration over incorrect face mask usage, one resident wrote in an online forum "be a good citizen and think of others." In a similar manner, a common reply in newspaper comment sections to people who claimed they were free to choose not to wear a face mask in public spaces was that an integral part of citizenship is having one's freedoms limited by one's responsibility for other citizens. One resident addressed anti-maskers in the Letters to the Editor section of a popular local paper, "A society that confers rights upon its citizens also requires those same citizens to behave responsibly (Ottawa Citizen, 2020)." In the comment section of an article voicing opinions similar to the last quote, one person wrote, "Thank you for your common sense in highlighting our responsibilities as citizens in Canada…Canada was founded on the basis of 'peace, order and government.'" When speaking in this way, my informants recognized themselves and others as citizens whose membership relied on regularly performing certain social responsibilities such as adopting public health practices. They owed notional strangers this care and were owed it in turn. Thus, my informants understood cultivating responsibility as something they did in part to protect other citizens.

Many of my informants fixated on their potential to transmit a disease that could cause others serious harm. The guilt that would ensue should this occur was a regular feature in my interviews. A healthy young man, Milos stated plainly, "I don't want people around me to get sick. I don't want to be the one that would spread it. But if I caught it, I wouldn't be upset. I would have no problem being locked indoors and quarantining and staying safe until it's gone." Milos was more afraid that he would transmit the virus and be to blame, than he was of suffering

from the virus himself. Thus, becoming responsible by altering one's behaviour in accordance with what one perceived as safe was also an attempt at reckoning with one's ability to unknowingly harm others.

Becoming responsible was a deeply personal process involving the development of safety practices that suited one's unique circumstances. A key part of this process entailed constructing and adapting safety routines. The mundane nature of these routines belied the ethical work required to create, maintain, and adjust them. This labour demonstrated a deep commitment to my subjects' ethical project (Mattingly, 2014). The commitment to safety practices was most apparent in my interview with Farhad, a middle-aged electrical engineer whose safety routine was especially elaborate. In great detail, he recounted his typical working day: drive to work, sanitize hands, turn off office alarm, sanitize hands, work, sanitize lunch space, eat, sanitize lunch space, work, sanitize hands, drive home, remove outerwear in the garage, throw clothes in the laundry hamper, and finally, take a shower before resuming ordinary activities. It goes without saying that this routine required exceptional dedication and rigour. Farhad regularly impressed upon me the toll that it had taken on him and his family. "It's a hard life," he confessed. Afraid of bringing COVID-19 home to his immunocompromised family, he felt that performing his safety routine reliably enabled him to care for and protect his loved ones.

Many of my informants described the process of carefully crafting usable safety routines and habits. I was given reasons for why certain practices had eventually been incorporated into routines and why others had been excised from them. My informants evaluated relevant information from experts, the government, the media, and their peers as they selected which practices to adopt. The process of creating, adapting, and refining routines demonstrated a dynamic effort to become responsible and respond to changing circumstances. At the same time,

routines and habits needed to be maintained through repeated and consistent practice. These routines made day-to-day life easier by replacing the need to decide how to comport oneself safely in regular activities like grocery shopping. The ethical work involved in safety routines largely involved maintenance. Marking a distinction between the more dynamic aspect of ethics concerned with becoming and the more invisible homeostatic aspect concerned with maintaining, James Faubion (2001) demonstrates that both have to do with living in line with a desired subject position. The maintenance of safety practices presupposed that such practices were useful and necessary in order to be responsible. In maintaining them, my informants remained responsible.

Policing Oneself and Others

One challenge that citizens faced in becoming responsible was that the goal of preserving public health required cooperation from others. Moreover, the actions of others were presumed to drive viral case counts and, in turn, public health guidelines and restrictions. An Ottawa resident summarized the frustration this caused commenting in a local online forum, "I thought the numbers [of viral cases] would stay low, even as more stuff opened up, because people would be responsible. Maybe that was naïve… Now we'll go back to having more restrictions, because people cannot be trusted to behave responsibly." Another stated, "Bullshit selfish reasons do nothing to stop the spread of the virus. This sucks for everyone, don't make it suck worse for everyone just so it's [sic] sucks a little less for you." Contraction and transmission of the virus was articulated in state and public discourse as proof that someone did something wrong. Thus, heightened viral case counts stood as proof of the irresponsible behaviour of others as well as negligent citizenship. The frustration that strangers could render one's efforts useless by behaving unsafely led to a desire for increased enforcement among some residents. At times, some Ottawans expressed wishes to police poor behaviour themselves. Their fantasies of

vigilantism and revenge spoke to a desire to force others to behave as they ought and to a need for a legible source of culpability.

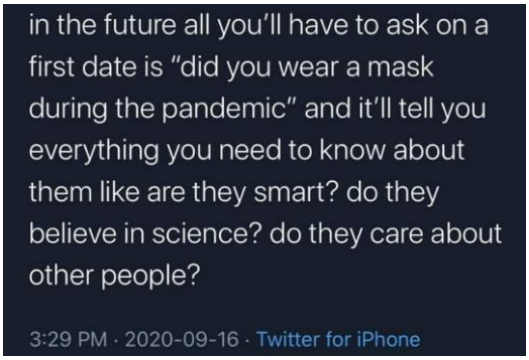


Figure 5. Screenshot captured on Facebook. The meme has been anonymized. The meme echoes Lexy's claim that mask usage hints at someone's moral character. Here, the author claims that it is a reliable indicator of whether someone is smart and caring.

When I asked my interviewees what behaviour irked them the most, improper face mask usage was the typical answer. From their perspective, wearing masks was a simple habit that could provide protection to others at little expense to the user. Wearing one, and wearing it properly, was the right thing to do. Lexy, a young woman who had previously worked in service, got especially worked up, discussing the topic of improper mask usage multiple times during the interview. She vented, "[it's] a shitty thing to publicly and so visually announce to everyone. 'It doesn't matter what happens to me. I'm in a place of economic means where if I get it, I'll be fine, but I don't really give a shit about anyone else.'" Going to a public indoor place without a face mask, was understood by Lexy as the visible refusal to conduct an easy act of consideration for others. "I can appreciate everyone wanting to live life as normal," she said. "But it would also be pretty irresponsible to be like 'oh if I pretend the disease isn't there it won't be.'…You still have to do the right thing even if you are uncomfortable." Improper mask usage served as a visual cue of irresponsibility, hinting at the perpetrator's moral character (See Fig. 5). As someone with the potential to harm others, Lexy saw herself and others as obligated to respond in the small ways that were available to them such as wearing a face mask. It was in taking responsibility for public health through employing safety practices that one became responsible.

Among my informants, the tension caused by differing ideas about what constituted safe behaviour was most intense between those who were in regular contact. The likelihood of contracting COVID-19 from these people was higher and so their behaviour impacted one's ability to prevent transmission. Throughout our interview, Farhad recounted how the behaviour and expectations of his coworkers and family placed demands on him. His coworkers took fewer precautions against contracting COVID-19 than he did, he stated. "They think we are in the same bubble. I think we are not." On multiple occasions Farhad reestablished his boundaries with his coworkers, dictating what he was not comfortable with. Meanwhile, at home Farhad recognized himself as the least cautious person. As the only member who had to regularly leave the house for work, he was most likely to introduce the virus to his family. "I've become a little bit relaxed. But my wife is very concerned," he said. "She always argues with me, 'You are not taking care. You have touched this!' And it sometimes drives me crazy. But I think she's right." Returning frequently to the concern that he was becoming too lax in keeping up his safe practices and how this caused his wife stress, Farhad seemed to struggle with guilt. He felt his wife was correct in demanding more and more strict behaviour. There was always a way to become even more responsible. Still, keeping up with these practices, especially with pressure at work, was trying.

Determining what others were comfortable with and trying to keep them at ease was an important element of COVID-safe behaviour among my informants. One should "play to whoever's the most cautious" as one of them put it. Many of my subjects talked about the occasionally awkward process of establishing boundaries with others. Laura, a healthcare worker, explained that she always sought informed consent before interacting with someone. "I say very openly that I'm working in healthcare. There's an increased risk but are you comfortable with that or not?" she said. Engaging with others, Laura explained, was a matter of

open communication and respect. While this was partly about making a given interaction safe, it was also about the performance of safety. Demonstrating safe behaviours helped others identify you as someone trustworthy. In other words, adjusting your behaviour to suit the comfort level of those around you could prove to them that you were responsible just as improper mask usage signaled that you were irresponsible. In this way, responsibility involved contextual, relational sets of practices.

However, while many saw "playing to the most cautious" as the polite course of action, this was not universally true. Sometimes my subjects felt that adhering to another person's set of safety rules was too restrictive or irritating. Naturally, this generated tension between people. In my interview with Natalia, a close friend of mine, she vented about how she was the most cautious member of her bubble. "I know my parents are doing shit and I don't know how to deal with it," she said. "Because then I see other people and I'm like, 'Wait! No! Now I'm also a problem vector!'" I shrugged reminding her that she could only do her best. Natalia rarely left her apartment and her bubble consisted exclusively of her parents. How much more could she do? "I feel bad cause I know that I'm not doing my best," she replied. "I feel like I have a weight of responsibility to honestly do as best I possibly can." She worried that she could always take on stricter, safer practices and that her parents' behaviour impacted her ability to reliably prevent transmission. She complained that her parents had held a barbecue with friends without telling her. "I'm fucking salty about that shit! That's bullshit! You can't do that." Cause now it's in your bubble? I asked. She responded, "Well yeah it was violently introduced." She was exaggerating to lighten the mood, but her irritation was evident. I understood how she felt: an overwhelming helpless frustration that you could not convince others to change their behaviour and that their behaviour introduced additional uncertainty in your life. If only we all did our best, maybe the

pandemic would end, and we could go back to how things were. At least, that is what I hoped though I was beginning to doubt that. She joked with me later saying, “Anyone that’s doing less than I am is unacceptable and I’m pretty sure that’s everyone’s frame of mind.”

Natalia was not alone in deciding to keep loved ones out of her bubble in part because she worried about their behaviour. These decisions were painful and could put strain on relationships. Another informant of mine, Abigail, a woman with two young children, made the tough decision to keep her mother out of her bubble for many months. Her mother initially did not understand the public health guidelines and later actively resisted them. “We explained it to her and then she did understand but she didn’t like it. So, she would pretend she didn’t understand,” Abigail told me. Her voice was saturated with disappointment. “I cannot sympathize with people who should know better and who I know know better…People I know know better than to make selfish decisions because they taught me not to make selfish decisions.” As she spoke, Abigail seemed deeply let down by her mother’s behaviour. Her mother’s unsafe actions did not merely imply a disagreement over what was considered safe. Rather, it betrayed her mother’s selfishness and thus her moral character. This was a painful realization for Abigail, that her mother would act selfishly, irresponsibly. The sincerity of her response made me uncomfortable, as if I had intruded on a family matter. “Why do you think she’s doing that?” I asked. I listened as she hesitated, struggling to reconcile the mother who had raised her to care about others and the mother that was not a good pandemic person. “I don’t know,” she said finally.

Conclusion

In this chapter, I have shown how Ottawans were called on to take responsibility for public health as well as the local economy and how they were encouraged to become responsible. Becoming responsible involved the development of practices that my informants

believed enabled them to protect others reliably. However, maintaining these practices was taxing. It required ongoing self-reflection, keeping loved ones at bay, and conducting oneself in such a way that was often uncomfortable, time-consuming, and isolating. They yearned for a "return to normal" when they might be able to abandon these practices. They longed for a vaccine that they hoped would restore the city to the way it had been. As I write in the spring of 2021, the vaccine rollout is finally underway, and people are relieved to hear of its efficacy in preventing serious cases of illness. For the moment, viral case counts are decreasing, and circumstances feel promising. About a month ago, I spoke with my friend Liam over video call as we waited for the vaccine to be available to us. "The vaccine's going to get us off the hook," he sighed. "I kind of wish we developed it later so that we could figure this out." I was surprised by Liam's statement that did not share in the general public's excitement. He sighed, "We haven't learned how to deal with this yet." Liam worried that when the next pandemic or crisis arrived, we would not be able to handle it. We were not capable of containing COVID-19, he argued. There were too many people who had been irresponsible, spreading the virus. We had not earned our lowered viral case counts. We were being rescued by vaccines. Refusing to feel relieved that the end of the pandemic seemed in sight, Liam asserted that the previously high viral case counts were proof enough that Ottawans broadly speaking had not become responsible enough. He was disappointed in our collective failure. What is more, he was irritated that the vaccine would save us from being held accountable.

Chapter 2: Developing Common Sense

It was a hot July day and I had just parked my parent's car near Strathcona Park for what must have been the hundredth time that summer. The park was far from my house, but it had a wooden stage shaded by trees that was large enough to dance on. Outdoor space like this was hard to come by and the stage pulled in many dancers like myself from across the city. Before the COVID-19 pandemic started, we would have been pickier avoiding the stage's uneven flooring that pooled water in shallow, dangerous puddles. But by that summer, we were grateful enough to have space. I had gotten closer to two dancers, Lexy and Laura, as we practiced on that stage. Lexy had lost her job back in March and she was grateful for our little projects. Later, she told me that the practices pulled her out of a season-long depression. For many of my informants, the summer had provided a much-needed respite after a chaotic and lonely spring. Case counts of the virus were lower and hot weather descended on the city. At last, we could comfortably leave the confines of our homes and visit friends in the relative safety of the outdoor air. I was determined to capitalize on this opportunity.

That July day in 2020 that I drove to Strathcona Park, Lexy had decided to throw herself a mini birthday party. We sprawled our beach towels in a rough circle and set down our snacks. Lexy went in for a hug and I dodged her awkwardly like I always did. Lexy thought hugging was safe since we saw each other regularly, but I disagreed. After some fumbly air hugs, we settled in with the group. Someone had brought up the latest news: face masks would now be mandatory in all public indoor spaces. The rule was a long time coming as face masks grew increasingly accepted by both experts and the public. Many Ottawans that I observed already wore them religiously and local online mask vendors opened to serve this demand. Of course, the party guests knew all this already but as they talked about the new rule, they had more and more questions. How would it be enforced? When would it begin? Was this a provincial or municipal

rule? Luckily, one of the guests was a healthcare worker and she gave us the answers we needed. "I'm aware of the rules because of my work but no one would know them unless they were reading the news on a daily basis," she told us, aggravated. "They're not being advertised well." The group agreed. I too knew the details of this new rule going into the party since tracking the news and watching official briefings was part of my research. But things changed in September when I scaled back my data collection so that I checked local news and government announcements on a weekly rather than daily basis. For the first time, I was experiencing the information landscape of COVID-19 in a way that I assume was closer to the typical Ottawa resident. Within days, I felt that I had lost track of things. What were the current rules? What should I be doing?

In this chapter, I explore how information about the virus, best practices, and public health advice became difficult to identify and follow. This was in large part because of inconsistency in public health messaging. Anticipating a pandemic, the Canadian government had prepared itself in advance so that it would be able to communicate public health advice effectively, yet it failed to do so when COVID-19 arrived. I argue that this failure points to the limits of a preparedness strategy and examine the impact this had on my subjects who strived to become informed so that they could make safe decisions. I begin this chapter by exploring preparedness as it was employed in Canada. Next, I give an account of how public health messaging during my fieldwork was inconsistent. I then explore how in the absence of advice, state officials asked people to turn to common sense. Finally, I examine how my subjects worked to become informed in order to make "common sense" decisions in the face of challenges.

Being Prepared

In the year 2020, it was nearly impossible to avoid hearing the phrase "these unprecedented times." In fact, the word "unprecedented" was used so frequently that

Dictionary.com, a popular online dictionary, listed it as a word that no one wanted to hear ever again (2020). Meanwhile, the website's visitors appointed the word as the "People's Choice Word of the Year (Eubanks, 2020)." While its popular use rendered the word cliché, it also pointed to a general feeling that the pandemic was a unique historic moment. Often, the word was used to highlight how the nearly global experience of nationwide lockdowns and physical distancing for an extended period seemed like an unmatched ordeal. People were reminded by celebrities and experts alike to be kind to themselves as they processed this unusual time.

However, the word "unprecedented" was not exclusively used to describe the popular experience of the pandemic. It was deployed to describe the pandemic itself. A fan of the word, Prime Minister Trudeau often described the pandemic as unprecedented to draw attention to the need for emergency government decisions, as well as to ask Canadians to be patient with the state as different orders of government slowly determined an appropriate pandemic response. He used the word to this effect on May 9th when he was asked to respond to a recent Ottawa scandal. The municipal government had decided in early May to ban people from visiting loved ones outside their windows in city-owned long-term care homes only to revoke the unpopular rule the next day (Raymond et. al, 2020). A few days later, the National Capital Commission (NCC), a governing body unique to Ottawa, banned taking photos at the annual tulip festival to prevent people from clustering before also revoking the rule shortly thereafter (CBC News, 2020). Responding to these circumstances, Trudeau claimed that different orders of government were "trying as best they can" to balance protecting people from COVID-19 and addressing mental health concerns. "It's an unprecedented situation. Lots of people are trying different things to keep people safe. We're going to keep adjusting all of us when we get things right and when we get things wrong. I think that's what people expect (Trudeau, May 9, 2020)." In saying this,

Trudeau asked Canadians to empathize with public officials who were working to produce a good public health strategy under uncertain, abnormal conditions. Canadians were incited to be flexible in the face of changing public health advice and to maintain their trust in this guidance.

The state's framing of the pandemic as without precedent implied that it was unexpected and that this explained, if not excused, any awkwardness in the public health response. Yet a new pandemic had been predicted by scientists for decades prior to COVID-19 and its arrival was believed to be only a matter of time (Caduff, 2015). Contemporary conditions including the rise of globalization, urbanization, and trade alongside the rapid increase in global population were expected to facilitate the development of new pandemics (Edge et. al., 2013). Reflecting on the SARS pandemic response in Canada, Michael Tyshenko and Cathy Paterson (2010) forecasted the next major pandemic with shocking accuracy. Their opinions, they stated, were not unique to them but were largely shared by the scientific community at the time. They anticipated the next major pandemic would arise within a decade and would be caused by a highly contagious virus that might be transmitted by asymptomatic carriers. This virus would likely have zoonotic origins and would spread globally via air travel. As we now know, many of these predictions that I have listed proved true. Although Tyshenko and Paterson were confident in the inevitability of another pandemic, there remained many unknowns such as the type of impact it would have on various services. Guided by the WHO's statement that the world needed to be more prepared for a future pandemic, Tyshenko and Paterson advised running scenarios that would aid in the creation of an emergency response plan capable of withstanding a variety of possible impacts.

This public health strategy of preparing for a biothreat, as the WHO advised, is a relatively recent one. Beginning in the late 1900s, experts anticipated an inevitable pandemic and imagined it "as a catastrophic disease whose prediction could not prevent its occurrence (Caduff,

15, 2015).” This pessimistic outlook was influenced by the concern that developed in the late 1980s and early 1990s among specialists that there was no system in place that could adequately prevent a pandemic from developing. In other words, there were no suitable methods established for detecting and containing a pandemic in the making (Lakoff, 2008). Consequently, experts advocated for a preparedness strategy which aimed not to avoid a pandemic, but to minimize its inevitable impact (Samimian-Darash & Rabinow, 2015). The goal of preparedness is not to prevent the event but to deal with it once it has already occurred (Anderson, 2010). The advice that Tyshenko and Paterson propose is typical of preparedness plans. By running scenarios, the public health response can be tested and improved upon in advance. These scenarios cannot accurately predict what will happen but allow people to learn about the as-of-yet unknown future threat, facilitating present decision-making (Collier, 2008). Moreover, they may point to vulnerabilities in public health infrastructure and encourage vigilance (Lakoff, 2008). Thus, by running imaginative scenarios of how the next pandemic may unfold, essential services may ready themselves for its arrival whenever that might be.

A key strategy advocated by security specialists for becoming prepared for unspecific yet inevitable emergencies is to build resilience in related systems (Walker & Cooper, 2011). In Canada, resilience has become a key element of emergency preparedness plans that gained traction in 2007 when Public Safety Canada made developing resilience a primary goal (Boyle, 2019). The term “resilience,” in the way it is currently used in preparedness planning, refers to an ability to withstand disturbances. It is a term whose contemporary meaning is often traced back to ecology where, beginning in the 1970s, experts rejected the notion that there was a state of equilibrium that a complex system could and should be returned to after a shock. This model was replaced with one of turbulence and chronic unpredictable, unpreventable crises (Walker

and Cooper, 2011). Managing these complex systems thus became an issue of building resilience, the ability to weather the storm while still largely functioning. As such, the aim of resilience is survival in the face of threats rather than resistance to them (Vrasti & Michelsen, 2017; Neocleous, 2013). In the domain of security, resilience has obtained the added meaning of a system's capacity to improve through the experience of trials. It entails the belief that "catastrophic events are not just inevitable but also learning experiences from which we have to grow and prosper, collectively and individually (Evans & Reid, 83, 2013)." Resilient systems can both persist and adapt in response to an external disturbance (Joseph, 2013). To become resilient, systems are advised to integrate "emergency preparedness into the infrastructures of everyday life and the psychology of citizens (Walker and Cooper, 154, 2011)." Thus, part of building resilience to impending threats involves encouraging citizens to develop the capacity to handle a range of potential hazards. This is illustrated on the Canadian 'Get Prepared' website where people are reminded that "by definition, emergencies happen when we don't expect them" and are instructed to run scenarios to help them build a plan for an array of threats ranging from a bomb to a flood (Public Safety Canada, 2015; 2019). In this way, people are encouraged to become resilient subjects who will "survive and thrive in any situation (Neocleous, 5, 2013)."

Following the recommendations of experts to become prepared and to build resilience in public health infrastructure, the Canadian government (as well as the provinces and territories) produced a preparedness plan for an upcoming pandemic they assumed would be caused by a strain of influenza. This federal influenza pandemic preparedness plan states that an appropriate public health response should focus on maintaining surveillance systems with the aim of detecting a new virus early; introducing public health measures such as social distancing (currently referred to as physical distancing) in order to minimize and slow the rate of viral

transmission; providing and distributing a safe vaccine; creating an antiviral drug stockpile in advance; ensuring adequate staffing and training of healthcare workers in advance; researching the disease; and "providing clear and consistent information about the disease, who it affects, how it spreads and ways to reduce risk" in order to reduce transmission (PHAC, 2018). The final point in this list was informed by the challenges faced in the Canadian 2009 H1N1 pandemic response which "identified difficulties in communicating uncertainty and dealing with changing information." The plan emphasizes the importance of being transparent and using "plain language" to build trust. Finally, it stresses that "consistent messaging and 'speaking with one voice' will also foster trust and understanding and help avoid confusion (PHAC, 2018)."

In light of these efforts to prepare for an upcoming pandemic, it is surprising that Canadian officials so frequently referred to the COVID-19 pandemic as "unprecedented." Andrew Lakoff (2017) observed a similar phenomenon in 2014 when a Centers for Disease Control and Prevention epidemiologist referred to the Ebola epidemic as "unprecedented." Lakoff attributes this sentiment that the epidemic was unexpected to the failure on the part of expert organizations like the WHO to imagine and anticipate the conditions in which an epidemic might emerge. In a similar manner, when state officials referred to the COVID-19 pandemic as "unprecedented," they often referred to the fact that the virus itself was new and there remained many unknowns about how to manage it effectively. This

Figure 6. Screenshot captured by author on Twitter depicting the first tweet in a series published by OPH regarding a new regulation that made the use of face masks in public indoor spaces mandatory. The tweets came in response to complaints that advice regarding mask usage had been inconsistent since they had previously been deemed unnecessary. OPH promised that changes in messaging were due to changes in expert advice.

newness was emphasized to excuse confusing and rapidly shifting public health advice that promised to be based on the work of scientists in an ongoing process of discovery. As knowledge was produced about the virus, new guidance would be provided as well (See Fig. 6).

This failure to fully imagine how a pandemic will unfold in advance marks the limits of preparedness. Reflecting on the Ebola epidemic, Lakoff (2017) writes, "The diagnosis of a failure of past preparedness, then, can only point toward a hoped-for future of better preparedness. However, insofar as health authorities cannot know what the next emerging pathogen outbreak will be, it remains possible, even likely, that they will once again have prepared for the wrong emergency (161)." Preparedness, as a way of understanding and managing uncertain future threats in the present, implies an inability to be fully prepared. Since a potential threat cannot be wholly foreseen (Samimian-Darash, 2009), we can expect that it will present surprises that had not been anticipated. Indeed, learning through the experience of threats to better orient oneself going forward is a key element of preparedness and resilience. Months into the COVID-19 pandemic, the Government of Canada (2020) delivered a speech from the throne entitled "A Stronger and More Resilient Canada" which pointed to gaps in the response to threats that had been exposed by the pandemic. The speech promised "to build back better" so that Canada would be prepared for future threats such as climate change. The pandemic thus posed as an opportunity for growth to be capitalized on.

As I will describe next, the state failed to meet the goals it set for itself regarding clear and consistent public health messaging in the Canadian influenza pandemic preparedness plan. However, this failure to fulfill this promise listed in the plan cannot solely be explained as a failure to be prepared. Rather, this failure is symptomatic of the limits of a preparedness strategy. After years of readying itself to communicate effectively to citizens in the face of an unknown

biothreat, the result was confusing public health messaging in part because of the limits of imagination and, in turn, the limits of preparedness. Still, as I described in the previous chapter, the state's public health strategy heavily relied on citizen cooperation and made people responsible for minimizing viral transmission through the adoption of state-sanctioned practices. As such, residents were required to learn what practices to take up in order to fulfill this responsibility despite receiving muddled state advice. The state encouraged residents to demonstrate resilience in the face of challenges (Orsini, 2020), including this challenge to become well-informed, and their resilience was considered integral to that of the country. In the next sections, I demonstrate how state messaging was unclear and how this complicated Ottawans' capacity to make informed decisions and stay safe.

Inconsistent Messaging

Clear and accessible public health messaging was deemed necessary by the state in part because it had to compete with a rise of misinformation ("unintentionally inaccurate") and disinformation ("intentionally false or misleading") (Stalcup, 2020b). In a joint statement by WHO, UN, UNICEF, UNDP, UNESCO, UNAIDS, ITU, UN Global Pulse, and IFRC (2020), readers were warned of the dangers of an infodemic that had developed alongside the pandemic. They described an infodemic as "an overabundance of information, both online and offline," that "includes deliberate attempts to disseminate wrong information to undermine the public health response and advance alternative agendas of groups or individuals." Concerns of an infodemic highlighted the availability of mis- and dis-information and the struggle citizens faced in identifying them. The statement published on the WHO's website stressed that COVID-19 mis- and disinformation was dangerous because it "can be harmful to people's physical and mental health; increase stigmatization; threaten precious health gains; and lead to poor observance of public health measures, thus reducing their effectiveness and endangering countries' ability to

stop the pandemic." Moreover, at the time of this statement's release, mis- and disinformation had already led to the harassment of visible minorities in numerous cities including Ottawa. As a result of these concerns, the statement called on its member states to manage the infodemic by collaborating with each other, disseminating information based on science, preventing the spread of incorrect information, and encouraging communities to "develop solutions and resilience against mis- and disinformation." Thus, the abundance of mis- and disinformation was recognized as a problem that needed to be addressed. Given the virus' lethal potential, there were profound repercussions for unsafe information and, in turn, unsafe behaviour.

Consequently, it was crucial that correct information be disseminated by the state and that the state maintained citizens' trust as a source of valid information. Trust in scientific evidence was encouraged by state officials who regularly reminded people that science drove their decisions. In one instance, when a journalist raised concerns about the return to school plan, Premier Ford reiterated that his medical experts had created this plan and asserted, "They're the experts. We are not the experts (Ford, August 4, 2020)." In saying this, Ford set experts above and apart from other Ontarians including himself and he implored residents do the same. Among my informants, scientific evidence presented a legitimate truth claim. Any distrust they had in state messaging came from concerns that officials were diluting expert advice in attempts to avoid scandals or prioritize businesses. Even among the conspiracy theorists I observed, statements that resembled scientific claims had the power to resonate as true and it was often not a matter of whether science was trustworthy but whether scientists were.

Ultimately, my informants relied on state messaging as a model to help them determine how they should protect themselves and others. And yet, most did not follow guidelines to the letter. As noted in the previous chapter, one reason for this was that these guidelines did not

always fit with their needs or lifestyle. Another important reason, and a complaint that I often heard, was that the state's public health messaging was inconsistent (See Fig. 7). The guidelines and public health advice were difficult to understand and hard to keep track of. Although the "golden rules" of COVID-19 safety (wash hands regularly, practice physical distancing, and wear a face mask in public indoor spaces) were well-understood after the first few months of the pandemic, many other guidelines and restrictions were not. This inconsistency was exemplified in the Ottawa window visit ban and the tulip festival photo ban I described earlier. Both bans garnered attention because of their short lifespans as well as the outrage they elicited from residents. Because the motivations behind the decisions to create the bans were not obvious to my informants or clarified adequately, they felt that they were unnecessary and arbitrary. The quick removal of these restrictions only served to further undermine the decision-making process that produced them in the first place. Why had the restrictions been made and why had they been removed? If the restrictions were backed by science as the government had promised, why were they revoked? In the case of the window ban mishap, the authority and expertise of the municipal government was further undercut when Premier Ford was asked to react to the restriction. "That's ridiculous," he said. "Go visit your loved ones as far as I'm concerned. This is critical. I'd go to the window (Ford, April 30, 2020)."

Figure 7. Screenshot captured by author on Facebook of a meme highlighting the arbitrary appearance of Ontario's public health policy. Not only does it argue that policy seemed to be randomly generated but that these policy decisions were justified by Ford with statements like "I didn't sleep last night."

While it was rare to hear a comment such as this that directly threatened the authority of a governing body, it was common for different orders of government to produce different public health advice. This was especially a concern in Ottawa as a city that shares a border with the province of Quebec. Gatineau, the city that lies across the border, is so intimately connected to Ottawa and the lives of residents that it appears on most maps of the city. Public health guidelines differed in Quebec, meaning that Ottawa residents engaged with different sets of guidelines throughout the region they considered their hometown. In addition, the different orders of government (federal, provincial, and municipal) each had different jurisdictions, and this determined how they contributed to the pandemic response. Although the provincial government was primarily responsible for setting public health guidelines and restrictions, the municipal government was often responsible for enforcing them. Occasionally, there were disconnects between these levels of government leaving some provincial guidelines unenforced. While this was all at times difficult to follow, it also generated confusion by providing residents a variety of best practices. As my family's source of pandemic news, I often gave updates over our shared lunch break. A critic of the public health response, my father vented one day that "if something is true somewhere, it should be true everywhere." He was irritated that our relatives an hour's drive away in Quebec were facing different measures than ours. If all state advice was informed by science, why had science been interpreted differently in neighbouring regions?

A further challenge was that the rapid pace at which guidelines, restrictions, and financial programs were created, adjusted, or lifted meant that citizens needed to invest time and energy into keeping track of the latest information. As was the case with the window visit ban, shifts in messaging were often sudden and left my informants perplexed about the sharp turnaround. While my subjects found it difficult to keep track of changing guidelines, many were willing to

tolerate this. Rather, what they complained about were what they considered to be logical inconsistencies. They felt that there were approved guidelines and restrictions that contradicted the reasoning behind others. One of the most popular complaints of this sort focused on the reopening of gyms in the summer and the decision to permit gym visitors to exercise without a face mask (Pringle, 2020). My research subjects expressed that this seemed to contradict the directive that made the use of face masks in all public spaces mandatory to prevent the airborne transmission of the virus. When I interviewed Lexy, one of my dance team members, she expressed her deep concerns about these gym guidelines. This was a personal issue for her as someone who had worked in a gym prior to the pandemic and who had the option to return when they reopened. During our interview, she was distracted by a text asking her to take a shift. With a sigh, she confessed that over the past few weeks she had refused repeated requests for her to return to this job in part because she felt it was unsafe. “Why do I have to wear a mask in Loblaws picking out avocadoes, but I don’t when I’m deadlifting?” she vented. “That’s so weird! I’m not heavy breathing when I’m picking out something ripe.”

These mixed and contradictory messages were a source of frustration and confusion for many of my informants which was exacerbated by the hypocritical behaviour of some politicians who were caught ignoring the public health advice they had promoted. This “do as I say, not as I do” behaviour, as one Twitter user put it, left my informants with a feeling of bitterness. As was the case with the other forms of inconsistencies in public health messaging, these scandals undermined the importance of following public health advice and muddled the messaging.

Developing Common Sense

As a result of these inconsistencies, the provincial government, and to a lesser extent the municipal government, fostered confusion over what was permitted or advisable at any given moment. Moreover, the provincial government neglected to provide guidance for certain

common circumstances leaving residents to their own devices. In a May briefing, when Ford was asked how the soon-to-be-permitted domestic services (such as babysitting and cleaning) could be reconciled with physical distancing, he replied, "[Workers should be adhering to public health advice] to their best ability and using common sense (Ford, May 15, 2020)." This reply did little to address the practical question of how to remain safe while working as a domestic service worker. "Common sense," in Ford's statement, substituted for explicit state advice. The responsibility to make informed decisions was shifted to the domestic worker who could not practice physical distancing or stay home when, for example, caring for a child. By asking citizens to use their common sense, state officials claimed that the state could not respond to all circumstances and citizens were capable and expected to manage these minutiae instead. Thus, these calls for common sense arose at the limits of the state's capacity to provide guidance.

A similar appeal for citizens to use their common sense cropped up in the tulip festival photo ban scandal. As mentioned earlier, the NCC initially banned visitors from stopping or taking photos at the annual Ottawa tulip festival. Before the ban was revoked, an NCC official told irritated citizens that, "If you're there bright and early and if it's your local park, and you want to take a photo, and you're all by yourself, you know, use common sense (Glowacki, 2020)." While this statement was in accord with the intentions behind the ban to prevent clustering and close contact with others, it undermined the authority of the NCC as a governing body that creates rules that must be followed. Ford's statement had advised people to draw on common sense to fill in gaps in state advice, whereas this statement encouraged people to use common sense to decide when to follow state guidelines.

When state officials asked people to employ their common sense, they often did so to provide a non-answer to a question. It was a diplomatic way of telling people to sort the problem

out by themselves. Generally speaking, common sense today refers either to an innate, human ability to draw conclusions on matters that pertain to everyday life or to a body of seemingly obvious knowledge that everyone in their right mind can access (Rosenfeld, 2011). The state asked people to trust state advice founded on expert knowledge while also instructing them to trust their innate judgment in the absence of expert guidance. This bore similarities with a trend in Europe that Morgan Meyer and Göran Sundqvist (2020) observe, in which the state urged citizens to be actively involved in the pandemic response by learning about the virus while also reminding them that they were not experts. Meyer and Sundqvist note that these governments demanded citizens be simultaneously trusting, concerned, and informed. Likewise, in Ottawa, residents were advised to be informed and willing to trust experts. However, they were also required to be able to make informed decisions through shared, putatively intrinsic, good judgment. Calling on citizens to rely on their common sense is tied to the forms of resilience the state demanded people foster. Here, I am referring to the term "resilience" the way it is used today by institutions, the state, and the general public: the ability to survive crises. Just as the state demanded citizens show resilience by persisting despite the numerous challenges the pandemic posed to peoples' health, security, and wellbeing (Orsini, 2020), state officials also asked them to adapt to the challenge of inconsistent public health messaging by drawing on their common sense. Citizen resilience in turn contributed to the country's ability to survive the pandemic. At the same time, common sense was articulated by state officials as something Canadians shared due to the supposed commonality citizenship promises. Citizens purportedly shared similar values, experiences, and worldviews, and thus also shared common sense.

The promise that common sense conclusions are always obvious and natural renders common sense claims "self-evident" and "inscrutable." Because these claims appear not to

require explanation, they foreclose the need to examine the reasoning behind them (Cochran, 2017). Clifford Geertz (1983) pointed to this slippery quality of common sense, writing, "Religion rests its case on revelation, science on method, ideology on moral passion; but common sense rests its [case] on the assertion that it is not a case at all, just life in a nutshell. The world is its authority (75)." Of course, common sense claims rarely point to something that is obvious but rather have the aesthetic of banal, practical, everyday truths. When asking citizens to use common sense to determine how best to act in a given situation, state officials referred to common sense as a natural, human, Canadian ability to come to sensible conclusions regarding everyday circumstances. This way of figuring common sense would likely be very familiar to many Ottawans. For example, if one were lost in a new city, one might use common sense to decide to look for directions online. One might argue that this is an obvious and appropriate conclusion deduced through good judgment. However, during the first wave of the pandemic, everyday life was unfamiliar, and the novel challenges presented by the pandemic were not ones residents were accustomed to addressing. Ottawans lacked common sense in a manner of speaking, meaning they lacked shared knowledge pertaining to living through the pandemic. Although common sense as a body of uncritically accepted beliefs available to the untrained person promises to be universal and easily accessible, common sense beliefs are always historically produced, in flux (Gramsci, 1971; Crehan, 2011), and case and context-specific (Geertz, 1983; Herzfeld, 2015). What did responding to the pandemic with good judgment mean in the absence of commonly established knowledge of this novel situation?

Although state officials called on residents to use common sense as if it were a reliable and readily available way of determining a solution that would resonate as acceptable with Canadians, in practice, pandemic common sense was something that my informants actively

developed. By learning about the virus, the reasoning behind public health measures, and what peers considered acceptable behaviour, my interlocutors became better equipped to make decisions. At the same time, they cultivated their ability to sense when something felt wrong, a form of gut feeling. By drawing on a variety of sources of information, they added to and subtracted from state advice to compensate for gaps or inconsistencies. The combination of common sense with state advice is demonstrated in a comment in a local online forum stating, "People need to stop rationalizing why it's ok to break/bend/distort the rules/common sense." At other times, common sense was employed to challenge official guidelines with an interpretation of what the person believed those guidelines should be, informed by a broader context of expert information. In one case, an interviewee confided that she felt guilty for hiking in a crowded area without a face mask. Although this was permitted by the provincial restrictions at the time, she told me that it was not "in the spirit of the regulations." She admitted, "technically nobody was breaking the rules cause we were outdoors and it probably is fine." But it had felt like people were too close and she regretted not wearing her mask or removing herself from the situation. As this example demonstrates, expanding state guidelines to determine safe behaviour was not only a response to gaps in state guidance but also to competing ideas of what safe practices were.

Just as the adoption of public health practices was moralized in public and media discourse, so too was becoming well-informed and cultivating good judgment. The term "covidiot," a portmanteau of "COVID-19" and "idiot," arose early in the pandemic and was used primarily to insult people who were not behaving in a COVID-safe manner. Generally speaking, the insult was directed at those who actively defied public health measures. At times, however, it encompassed people whose behaviour did not live up to the standards of the accuser. The term implied that unsafe behaviour was a result of the accused's willful ignorance. On the website

"Urban Dictionary," an online forum where users submit and rate slang definitions, one highly rated submission described a covidiot as "a person who acts like an irresponsible idiot during the Covid-19 pandemic, ignoring common sense, decency, science, and professional advice leading to the further spread of the virus and needless deaths of thousands." In this definition, being un- or misinformed is an active process of ignoring rather than a passive state of ignorance. Thus, it was a failure on the part of the accused who was responsible for researching best practices and determining them through common sense. Those who found correct information and worked to become informed would not harm others through their deliberate ignorance. At the same time as the definition points to this concern that others may not conduct the research required to be responsible, it also demonstrates the frustration that others may not come to the conclusions one believes to be common sense despite assumed commonalities between one another.

Striving to be informed, many of my subjects searched for resources that would facilitate this. I was surprised to discover that some were so dedicated to this work that they painstakingly documented information gleaned from scientific publications and news reports in Excel spreadsheets. Self-proclaimed amateur epidemiologists and daily news readers shared their findings in local online forums for others to find. In fact, a primary function of many of the Ottawa COVID-19 support groups created on Facebook during this time was to share information and request advice. Some of these Facebook groups specified in their names that they were community care groups suggesting that providing information and advice was a form of caring for others. Meanwhile, in a local Reddit forum, one resident earned a reputation as a local hero for sharing daily viral case statistics in a digestible manner. Through this work to become and remain informed as circumstances changed, my informants attempted to improve their ability to make good decisions with or without adequate state guidance.

Making decisions under these uncertain conditions was difficult. One Ontarian video blogger likened the experience of making decisions during the pandemic to playing poker, stating that he had learned to settle into the uncertainty. Developing safety practices of the kind I described in Chapter 1 facilitated daily life by reducing instances that would require on-the-spot decision-making. But avoiding all such instances was impossible for some and unsustainable for most. As I touched on at the beginning of this chapter, the summer weather invited many residents to leave their households. Leaving the home introduced residents to more risk of viral contraction or transmission and so my informants resorted to outdoor gatherings where airborne transmission was minimized. But leaving the home, even when staying outdoors, generated new challenges that my informants were unfamiliar with. For example, business closures and new hygiene mandates meant that downtown Ottawa did not feature as many public bathrooms or water fountains as it once did. Adding to this, Ottawa's volatile weather regularly interrupted activities with thunderstorms and heat waves. Even with careful planning, my subjects found themselves at times making decisions outside of their comfort zones upon leaving the house.

That summer, I was in the process of conducting interviews and I hoped to schedule some in-person meetings in outdoor spaces, counting on the accuracy of weather reports. In one instance, a sudden storm interrupted an interview I was holding in my backyard. When the downpour began, we packed my recording gear, put on our masks, and moved indoors only to move back outdoors when the rain ceased. Naturally, the rain picked up again and we repeated this cycle a number of times before the interview was finally completed. I felt awkward inviting my interviewee, Jade, into my house. This was not what she initially agreed to, but she reassured me that she was fine. "I think it's just about taking reasonable precautions and you do what you can within a given situation," she told me. "Like this with the rain. We're inside. We're not

sitting right next to each other. We're wearing masks. Reasonable precautions. It's not perfect. I think we both agree," she shrugged. Jade argued that making decisions during the pandemic was all about assessing risk. While we were not strictly adhering to official advice nor were we following our original plan, we implemented strategies for remaining safe such as wearing face masks and cracking open a window. When making the decision to move indoors, we drew on an array of information about the virus such as viral case counts, information about how the virus is transmitted, and how our peers responded to similar circumstances to determine if the choice was safe and what practices would render the choice safer. Moreover, we drew on assumptions about each other's conduct. Her careful behaviour reassured me that she was taking the pandemic seriously, as it were, and thus was unlikely to be a carrier of the virus. While that impression may have been misguided, that assumption influenced my decision to invite her inside. In this way, Jade and I used our common sense that had been shaped by our efforts to glean information from numerous sources to determine how to act in an unforeseen emergency. Our good judgment was something that we had developed over months to prepare us for these kinds of emergencies.

As Jade said, our choice to move indoors meant that we had agreed to expose ourselves to added risk of contracting or transmitting the virus. We had agreed to some uncertainty. My interview with my close friend Natalia who was not comfortable with accepting risk stood in stark contrast with Jade's. She felt exhausted by the influx of information and claimed she had stopped trying to keep up. In the early months, Natalia thoroughly researched the pandemic, even expressing worries about the virus before it was largely considered an immediate threat to Canadians. As she put it, "If you're nervous about something, you obsess over it instead." But as the pandemic carried on, her search for updates became less rigorous because the process was too taxing. Still, she struggled with the uncertainty generated by the circulation of a deadly virus

and swathes of inconsistent, changing information. “At this point I’m just like everything’s fucked. I’ll just stay indoors,” she told me. And she did for the most part. Natalia recognized her inability to make safe decisions in the face of inconsistent state advice and so her decision was a common sense one. By staying home, she did not have to make any snap decisions about how to act around people to avoid transmitting or contracting the virus. By keeping a distance from others, she was already employing the strictest public health practice she could imagine. While I was glad to know that my close friend was safe, I worried about how isolated she had become.

Conclusion

Despite having prepared for a pandemic in the years leading up to COVID-19, the state failed to provide clear public health messaging. A preparedness strategy such as the one Canada employed is limited by experts’ ability to imagine how an as-of-yet unknown threat will unfold. During the COVID-19 pandemic’s first wave in Ottawa, the limits of preparedness manifested in inconsistent messaging as well as calls for citizens to use common sense. Invested in becoming responsible people and responsible citizens who take up practices capable of protecting others, my subjects worked to develop common sense or the ability to make good decisions. This process of cultivating common sense was taxing as staying abreast of the never-ending stream of COVID-19 information, filtering mis- and disinformation, and making decisions under uncertain conditions were exhausting. Moreover, by leaving residents without clear guidance, the state left them with the anxiety that they might have made wrong decisions. Many of my informants eventually settled into the uncertainty. They grew more comfortable taking risks, leaving their homes. The initial shock of the pandemic wore off and we grew accustomed to these high-stakes gambles.

Chapter 3: Deservingness and Entitlement

It was late spring, 2020, and I was lying outside on concrete warmed by a blanket of sunlight. There were more birds in the neighbourhood than ever, and they animated the air with their song. My friend Mackenzie was in the pool coaxing me to join her. “It’s not that cold if you move a bit.” I was enjoying the heat too much to give it up so soon. Our mutual neighbour, Charlotte, had graciously invited us to take advantage of her backyard pool that year and we took her up on the offer a few times. Charlotte had undergone major surgery and the pool was left relatively unused as she recovered. Both she and her husband were retired, and this was reflected in their lush, beautiful garden. Their backyard was an oasis. When I asked Charlotte how she was handling the pandemic, she shrugged and said they were doing just fine. They went on walks, they avoided public indoor spaces, and they washed their hands, all small adjustments for a greater good. Of course, she missed hugging her grandchildren and she eagerly awaited a vaccine so she could travel once more. But she felt lucky. She and her family were relatively safe.

Succumbing to Mackenzie’s repeated requests to join her, I grabbed a pool bed and eased myself into the chilled water. She was talking to me about money. We had been talking a lot about money lately. Mackenzie had lost her job in childcare and was receiving financial support in the form of the recently established Canadian Emergency Response Benefit (CERB). Like Charlotte, we were lucky. Lucky to live in a safe area with backyards, lucky to live with our parents, and lucky to have few expenses. Still, Mackenzie had lost her income. Treading water, she said offhand, “I didn’t realize the government had this kind of money to give us all $2000 a month.” I shrugged. “And apparently it doesn’t!” She continued. “My friend told me we will all have to pay it back in taxes.” As someone who was financially secure, Mackenzie seemed uncomfortable with receiving CERB. Later, she told me “I feel guilty because now it’s my money. It’s not Trudeau’s money anymore because it’s in my bank account.” I asked her why it

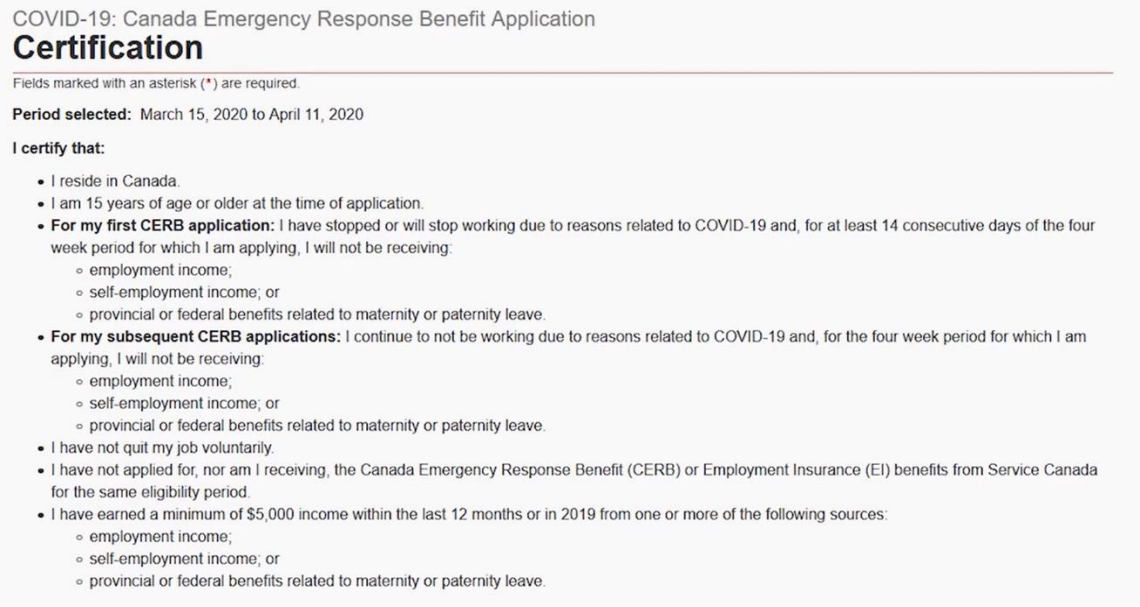
was that she and her friends had decided to apply if they felt this guilt. She shifted her weight. "We don't need it but also, we're going to be paying it off anyway so why not get it."

During the Covid-19 pandemic, the federal government released multiple emergency financial programs aimed at citizens. Many Canadians, like Mackenzie, found themselves newly eligible for state support and had to decide whether to apply. In this chapter, I explore how the state, the media, and some residents understood and promoted the decision to apply for financial support, even if one was eligible, as a moral issue and how recipients made sense of their receipt of the benefit. I begin by introducing CERB and the state's depiction of a deserving CERB recipient. I then examine how my informants spoke about and identified deservingness. Next, I turn to the experiences of some CERB recipients and analyze how they understood their eligibility in terms of entitlement or deservingness. Finally, I detail how some people used CERB as an opportunity to re-examine welfare and demand change.

The Deserving CERB Recipient

On Tuesday, March 17, 2020, the Ontario government declared a state of emergency and all non-essential businesses temporarily closed their doors. "Right now, we need to do everything we can to slow the spread of Covid-19 in order to avoid overwhelming our health care system," Premier Doug Ford claimed in the announcement (Ford, March 17, 2020). In truth, many Ottawa residents anticipated the closures the weekend prior. I remember my mother rushing to shuttle her work equipment home before her office building was locked. The closures were still a shock at the time to us. Luckily, my parents could continue their work from home, but many were not so fortunate. In the period of a few weeks, over a million Canadians lost their jobs (Statistics Canada, 2020c). Work that was deemed non-essential by the Ontario government and needed to be performed in public spaces like retail was particularly vulnerable to the public health measures. Meanwhile, many essential workers voiced fears for their safety.

In response to this tidal wave of unemployment and financial insecurity, the federal government released numerous temporary social programs. CERB was the most applied for and the most hotly debated of all the emergency programs released over the course of my fieldwork. Initially intended to be available for only four months, the benefit was introduced as a taxable "temporary income support" for people who "stopped working because of COVID-19 (Service Canada, 2020a)." Before the pandemic, temporarily unemployed workers were often eligible for EI. Indeed, newly unemployed people were initially directed to apply for EI when pandemic lockdowns first began. However, EI was not equipped to quickly handle the large influx of applications and there remained many struggling people who did not meet EI's strict eligibility criteria. For these reasons, CERB was created to temporarily replace EI.


COVID-19: Canada Emergency Response Benefit Application

Certification

Fields marked with an asterisk (*) are required.

Period selected: March 15, 2020 to April 11, 2020

I certify that:

- I reside in Canada.
- I am 15 years of age or older at the time of application.
- **For my first CERB application:** I have stopped or will stop working due to reasons related to COVID-19 and, for at least 14 consecutive days of the four week period for which I am applying, I will not be receiving:
  - employment income;
  - self-employment income; or
  - provincial or federal benefits related to maternity or paternity leave.
- **For my subsequent CERB applications:** I continue to not be working due to reasons related to COVID-19 and, for the four week period for which I am applying, I will not be receiving:
  - employment income;
  - self-employment income; or
  - provincial or federal benefits related to maternity or paternity leave.
- I have not quit my job voluntarily.
- I have not applied for, nor am I receiving, the Canada Emergency Response Benefit (CERB) or Employment Insurance (EI) benefits from Service Canada for the same eligibility period.
- I have earned a minimum of $5,000 income within the last 12 months or in 2019 from one or more of the following sources:
  - employment income;
  - self-employment income; or
  - provincial or federal benefits related to maternity or paternity leave.

Figure 8. Screenshot captured by author in April 2020 of the certification step in CERB application process.

CERB's design differed from that of EI in a few noteworthy ways. First, CERB was not personalized based on previous income like EI. All applicants would receive $2000 per four-week payment period. Second, CERB's eligibility criteria was relatively easy to meet, available to workers who would not typically be eligible for EI such as gig workers (See Fig. 8). Third, where EI had a lengthy application process, CERB applicants simply attested that they were

eligible for the benefit. Explaining this decision, Prime Minister Trudeau stated that the standard application evaluation procedure was too time-consuming given the emergency. There were too many people in dire need of immediate financial support. Instead, the applications would be evaluated later and those who were ineligible would be required to repay the money (Trudeau, May 14, 2020). Finally, where EI functioned as an insurance that workers contributed to directly, CERB had a noncontributory funding mechanism meaning it was funded by taxes.

These new features of CERB were not intended as a step towards welfare reform. They were extraordinary measures in the face of crisis. In the first few weeks after CERB was created, Trudeau referred to it as a way of supporting Canadians as they did the right thing: stay home. Viral case counts were high and encouraging Canadians to avoid public spaces was a key part of the strategy to prevent viral transmission. On April 30th, Trudeau said "We need Canadians to stay home. We need Canadians to take the measures that will protect themselves, their loved ones, their neighbours, and our healthcare systems and that's why we have made sure that we're sending help to the millions of Canadians across the country who need that help (Trudeau, April 30, 2020)." CERB's stated purpose at the time was both to support needy Canadians who had lost their job and to help people keep away from public spaces of work. It was promoted as a program that enabled struggling Canadians to stay safe and fulfill their social responsibility of protecting public health. A Department of Finance news release (March 2020) claimed that people should not have to choose between their health and their ability to afford food. The government was "working to get money into the pockets of Canadians as quickly as possible" through CERB. The messaging implied that there was no time to determine granular details about which unemployed people should receive CERB nor was there time to evaluate individual applications. Speed was of the utmost importance.

The state's framing of CERB began to change when the country entered a phase of reopening in late spring 2020. While many Canadians remained reliant on CERB, Trudeau's speeches emphasized that the benefit was intended for those who wanted work but could not find it. It was meant for those whose inability to work was not because of their efforts to prevent Covid-19 transmission, as it was in his earlier speeches, but because of the depleted job market. On June 17, Trudeau delivered a statement that I have translated from French as follows: "There are actually around 3 million Canadians who would like a job, who lost their job, but who cannot find a job…We put measures in place to encourage people to take the jobs that are becoming available but we are far from being in a situation where there are enough jobs for everyone who would like to work (Trudeau, June 17, 2020)."[2] CERB's purpose was communicated as a temporary replacement for lost working income. This quote, which is exemplary of the federal government's stance on CERB for the rest of the summer, implied that recipients of the benefit should not want to be recipients at all. They should want to find work as soon as possible and become productive, self-reliant citizens. Furthermore, the deserving recipient was someone in need of support. In adopting the refrain "We took on debt so Canadians wouldn't have to (July 8, 2020)," Trudeau expressed that emergency programs like CERB were intended for those who would otherwise acquire debt.

Just as the state's framing of CERB shifted dramatically over the course of its operation, the program itself also changed. The first major modification took place weeks after its original launch. Initially, applicants needed to attest that they had lost all working income to be eligible for the benefit. This criterion was widely criticized for its exclusion of those who had lost

[2] The original quote in French reads, "Il y a actuellement autour to de 3 millions de canadiens qui voudraient un emploi, qui ont perdu leur emploi, mais qui ne trouvent pas d'emploi…On met en place mesures pour encourager les gens de prendre les emplois qu'ils deviennent disponibles mais on est loin d'être dans une situation où il y a assez d'emplois pour tout le monde qui voudraient travailler. "

income but were still making some money. In response, the federal government altered CERB such that applicants who earned up to $1000 dollars within a given four-week payment period would be eligible for the benefit (Department of Finance, April 2020). Then, as businesses reopened and the option of returning to work became increasingly available, CERB was criticized once more in public discourse for disincentivizing labour. The gap between the $1000 recipients were permitted to earn and the value of CERB itself, critics argued, encouraged citizens to refuse work. In June 2020 the federal government drafted a bill that would require CERB recipients to seek work and to accept reasonable job offers. While this bill was not passed, CERB's application form was altered such that applicants needed to attest to understanding that the state encouraged them to seek work. The employment minister stated, "We know that Canadians are eager and ready to do their part. We expect that workers will be seeking work opportunities or returning to work when their employer reaches out to them (Harris, 2020)." Speaking on behalf of unemployed Canadians, the minister articulated the willingness to work as a Canadian value and social responsibility. In this way, CERB messaging often implied the state's expectations of Canadian citizens.

These shifts in the state's framing and design of CERB marked changes in its moral messaging. In briefings, announcements, and application forms the state communicated what constituted a person deserving of social support during the Covid-19 pandemic. Where initially a deserving recipient was one who was a victim of a public health strategy that resulted in an unfortunate rise in unemployment, later a deserving recipient was one who unsuccessfully pursued work. Deservingness of something is not necessarily about one's ability to obtain the thing in question but about whether one's receipt of it is justified. Did the person merit it? Did they need it? Did they use it properly? Did they appear grateful enough (Laenen, 2020; Huschke,

2014)? Conceptions of deservingness often influence how resources such as welfare, aid, rights, healthcare, and citizenship are made available or inaccessible to certain groups of people (Horton, 2004; Yoltar, 2020; Holmes & Castañeda, 2016). As such, these perceptions of how a deserving recipient of aid should look and act can render some people especially vulnerable. This is particularly a concern among marginalized peoples, such as indigenous peoples, who may fail to convincingly prove their deservingness for a variety of reasons (McCallum & Perry, 2018).

The ideas of deservingness, the value of work, the role of welfare and the qualities of model Canadian citizenship that were encoded in the state's messaging and CERB's design have a history in Canada that predate the pandemic. Indeed, many of these normative ideas can be found in EI, the model for CERB. In language that calls to mind official speeches regarding CERB, EI Regular Benefits' eligibility criteria instruct applicants that they must be "ready, willing and capable of working each day," and "actively looking for work (ESDC, 2021a)." Moreover, the website specifies that EI Regular Benefits is intended for those who lost their job "through no fault of their own (ESDC, 2014)." Readers are warned that applications may be denied if the applicant voluntarily left their job "without just cause" or if they were "dismissed for misconduct (ESDC, 2021a)." Here, just as in CERB's messaging, readers learn that a deserving recipient is a hard worker who has unintentionally lost their job and strives to find employment as soon as possible.

This emphasis on the value of work has deep roots in the West and has long influenced popular perceptions of who deserves welfare. James Ferguson (2015) writes, "the list of those requiring 'social' intervention (the elderly, the infirm, the child, the disabled, the dependent reproductive woman) sketches a kind of photographic negative of the figure of other-than-worker, other-than-man, other-than-able-bodied who is fully authorized to be 'dependent (40).'"

These perceptions continue to thrive in Canada with welfare scholars noting that social aid aimed at disabled people is more likely to gain public support than programs aimed at able-bodied people (Béland & Daigneault, 385, 2015b). In addition, many contemporary social assistance programs today bear the imprint of critiques of welfare that developed in the 1980s and 90s alongside the neoliberal restructuring of the state. At that time, welfare critics argued that work was inherently valuable as a productive activity that allowed one to contribute to society. Thus, the model neoliberal citizen valued and sought the kind of self-reliance and independence that work afforded. Welfare was widely thought to undermine these values (Pratt & Valverde, 2002). Critics of welfare argued that social programs created an unhealthy dependency on the state. Welfare recipients, they asserted, should take responsibility for their circumstances (Béland & Daigneault, 2015a). In accord with this widespread belief that those who can work should work rather than rely on social aid, some of the most supported programs in Canada "activate" recipients by helping and encouraging them to (re)enter the job market (Béland & Daigneault, 2015b). These programs aim to "transform" recipients into productive people who no longer require support (Ferguson, 2015). Normative ideas about the value of work, the threat of welfare dependency, and the purpose of welfare informed the way the state communicated the purpose of CERB. While CERB was a unique program in many respects, the state's framing of deserving recipients as the job-seeking unemployed defaulted to a long-established precedent.

Identifying Deservingness

Given that the state's messaging drew on extant, well-established criteria and imaginaries of deservingness, it is unsurprising that residents also used similar language when discussing the provision of Covid-19-related aid. Examining the many volunteer and community support groups that arose during the pandemic affords a glimpse at how the language of deservingness was deployed. The most common form of volunteer organization over the course of my fieldwork

was the grocery shopping and delivery service. As one of the few public spaces that was nearly universally difficult to avoid, many felt that if they were to contract Covid-19, it would be in a grocery store. These volunteer services provided food for those who felt unsafe entering these spaces. Curious about these organizations and wanting to offer my services, I became a volunteer at one such organization. In late summer, I interviewed Kyra, one of the main organizers. Why focus on groceries, I asked her. "It's clear that it's a needed service," she said. "There are people that need it that still are unable to go out or they're suffering from [illness] … There's one person whose fridge was empty for a couple of weeks!" With other delivery services charging customers, grocery shopping had become challenging for some residents. However, Kyra recognized the value of her service as more than grocery delivery. Thinking about one of her regular clients, she said, "For me to go or for another volunteer to go and drop off her groceries, that is her social contact." Sometimes she would spend close to an hour at a client's door while dropping off food. Proving to me the usefulness of her service, Kyra spoke of seniors with vulnerable immune systems and cancer patients with thin wallets. These were people who obviously needed help. However, not all the clients I had served appeared so undeniably vulnerable as the clients Kyra described. Conveying the importance of her service, she drew on classic examples of the needy, deserving recipients of aid.

Visiting some of the many Covid-19 community support Facebook groups, I observed how residents articulated need when asking for help. Posts mentioned struggling businesses, compromised immune systems, and acute anxiety. In turn, these posts were met with sympathetic comments, heart emojis, and offers to help. Like Kyra, these posts communicated need with recognizable imagery. By performing need and gratitude, they hoped to arouse compassion and support. Later, in the mid-summer months, I began to notice posts in these Facebook groups that

questioned the legitimacy of some of the appeals for aid. Group members worried about scammers abusing the generosity of the platform. Their comments betrayed concerns that some of the requests for aid were coming from people who did not actually need help or who had not made Covid-19-related requests. Because of this, these people did not deserve support. These comments indexed group members' ideas of what constituted a legitimate request for charity and demonstrated how they understood deservingness. My research subjects drew on ideas of the deserving recipient that predated the pandemic and used them to identify those who should be supported by their community and, as I will now describe, those who should apply for CERB.

As a program with many recipients and a minimal application evaluation procedure, CERB received much criticism from Ottawans and the media. Underlying most fears was the same concern parroted over and over: the federal government was racking up too much debt that would need to be paid back. When the program was first renewed in June, a news article was published entitled "This is how much eight more weeks of CERB will cost us" implying that the extension of CERB will impact "us" Canadian taxpayers (Canadian Press, 2020). Such articles urged readers to imagine a collective credit card racking up a bill that taxpayers would eventually be required to settle. To be specific, these worries often focused on income taxes suggesting that working Canadians would be required to pay off CERB. One online comment claimed, "Naïve and honest taxpayers just keep paying their bills, paying their taxes, trying to make a living despite having the country closed all around them, and they observe parents and their children sapping the wealth of the nation." In comments such as these, residents recognized other residents' decisions to apply as impacting them personally. Thus, while many of my subjects initially understood the need for CERB, receiving CERB was also depicted as an act that ultimately harmed future taxpaying Canadians. As such, people who were eligible for CERB

should think twice about their need before deciding to apply. Deservingness, as it was discussed among my informants, had to do with justice as well as what one owed others as a citizen since one's decision to receive CERB purportedly impacted others. Refusing to apply for CERB if one was not deserving was a way of being responsible for other Canadians.

As businesses reopened, the concern that CERB was preventing people from returning to work was voiced repeatedly by numerous politicians, reporters, and residents who often argued that small businesses were struggling to regain their staff. CERB recipients who stayed home despite available work were said to actively damage the economy (See Fig. 9). This concern was both economic and moral with critics calling CERB recipients who refused work parasitic and selfish. One online comment read, "There are many jobs out there, even now. My nephew is planting trees in northern Ontario making good money. My next door neighbour, who lost his job due to covid, is stocking shelves…You could do something about it. If you place a real value on your self worth, on your pride, and on your self sufficiency." This criticism that welfare disincentivized work and, consequently, was a threat to the moral character of the citizenry was not new. In fact, it echoed the critique leveraged by employers in the years leading up to the development of Unemployment Insurance (later named EI) who claimed that it would serve as a "moral hazard" by encouraging people to leave work (Campeau & Howard, 2004). This fear that unemployment signified and produced poor moral character was coupled with the concern that a refusal to return to work harmed businesses and generated debt for Canadians.

Figure 9. Screenshot captured by author in July 2021 of a meme. The content is like memes from the summer prior. It depicts a Florida restaurant sign claiming that they are short-staffed because potential workers opted to receive welfare instead.

Outrage at CERB largely focused on the possibility that there were recipients who could have chosen not to apply for the program either because they could have found employment or because they had the resources to survive the pandemic without the benefit. Recipients who were thought to have this option available to them, critics wrote, applied for the program in bad faith and demonstrated their poor moral character. In local papers, provocative articles detailed how much money these undeserving groups could be costing the Canadian taxpayer. An article titled "Young People Living with Their Parents Could Receive $11.8 Billion from CERB" questioned the deservingness of eligible young adults who were likely still in school, living with their parents, enjoying high household incomes, and had working incomes worth less than CERB prior to the pandemic (Clemens, Palacios & Li, 2020). In a similar article entitled "Up to $22 Billion in COVID Aid May Have Gone to High-Income Canadians," the author argued that people with questionable need were eligible for CERB (Tumility, 2020). These articles reiterated concerns that undeserving recipients were "taking advantage of the system." Reflecting on this possibility, one of my informants stated, "I'm not a greedy person…I don't take something because it's out there being offered unless I really need it. Because I say, maybe someone else needs it. And I don't abuse the system because the system's for everybody." While he prided himself on only taking what he needed, my informant asserted that there were some "nefarious" people who abused the system. His comments as well as the articles I have cited described undeserving recipients as behaving inappropriately. My informant recognized that people who were eligible for CERB were legally permitted to access it. However, he argued, just because one could access an emergency resource, this did not mean it was appropriate to do so. This sentiment was repeated by another informant who relayed that some CERB recipients were

intentionally working restricted hours so that they remained eligible for the program. “It’s smart but it’s not necessarily ethical,” he said. “It’s like you’re playing the system.”

In early summer, concerns about undeserving recipients transformed into anxieties about mass CERB fraud. This too was not a novel criticism of welfare in Canada. Repeating decades old fears, these critics argued that recipients could be cheating to gain access to a parasitic lifestyle (Pratt & Valverde, 2002). Just as state conceptions of CERB deservingness influenced public discourse, the inverse was also true. Growing panic about the possibility of illegal CERB recipients resulted in the federal government taking a harder stance on fraud. In June 2020, a local paper released an article entitled “Is your neighbour cheating on CERB? Here’s what you need to know about the CRA [Canadian Revenue Agency] snitch line (Golombek, 2020).” The article informed readers that the CRA was accepting anonymous reports of people who were “inappropriately taking advantage of billions of dollars of government relief.” As this article suggests, concerns about CERB fraud had to do with inappropriateness, injustice, and illegality. An online comment stated, “Fraud is illegal if you did not deserve the CERB you should not get the CERB. Hopefully it will be clawed back with interest.” This desire to punish fraudsters was recognized in June 2020 when the federal government proposed legislation that would make it possible to fine or jail perpetrators of CERB fraud. While the proposal was abandoned due to a lack of support from opposition parties, this event demonstrated how ubiquitous concerns about fraud were at the time and the intimacies between public discourse and state action (Meyer, June 2020). Moreover, concerns of mass fraud highlighted how old welfare anxieties were reactivated by CERB during the pandemic and how the language of deservingness was employed by state officials, residents, and the media to shame notional CERB recipients excluded from the normative category of the deserving recipient.

Eligible, Deserving, Entitled

Unavoidable and pervasive as it was, this talk about deservingness undoubtedly influenced CERB recipients' experiences of applying for and receiving the benefit. At the same time, their experiences with CERB were also shaped by their interactions with the program itself. CERB and its predecessor EI, as programs that applicants engaged with directly, acted as technologies of government. They provided a link between certain "forms of knowledge" concerning human conduct and the material practices involved in governing this conduct (Dean, 1996). In line with the state's messaging, the design of CERB and EI prompted recipients to conduct themselves as a deserving recipient and model citizen would, to value and seek employment. Through carrying out the application procedure, which is especially long in the case of EI, applicants were incited to comport themselves as deserving (Rose, 1999). For example, by requiring EI applicants to detail the events that led to their unemployment and file biweekly reports detailing their job search progress (ESDC, 2021a & 2021b), applicants are made to reflect on this dimension of their behaviour and prompted to be better workers in the future. Likewise, by requiring CERB applicants to formally acknowledge that the government encourages them to seek work, the application urged applicants (on a monthly basis if they applied more than once) to reflect on the importance of employment and their reasons for being unemployed. Writing about a similar process in accounting, Cameron Graham (2012), refers to this as a form of "confession" that calls on people to morally "atone" for their actions.

As a material practice, the CERB application process allowed the federal government to gather eligibility data about applicants for future review while requiring applicants to reflect on and attest to their eligibility. In addition, the process of filling out the application form required applicants to present themselves in a prescribed manner which, though seemingly unremarkable, impacted the way they understood themselves as CERB recipients. Writing about the collection

and processing of human data, Colin Koopman (2019) argues that gathering human information produces informational persons who are inseparable from their data. He writes that through the banal activity of filling out a form, be it a social media profile or welfare application, people are formatted and rendered legible. They are crammed into checkboxes. As data is inputted, processed, and outputted, people are fastened both in the sense that they are pinned to a limited description of themselves and in the sense that they become easy to understand quickly. Examining the material practice of designing forms, storing forms, developing algorithms to process forms, and publishing formatted information exposes not only the values that have been encoded in forms despite their typical promise of neutrality, but also the ways people are disposed to perceive themselves through being formatted. Applying for CERB required people to fill out a blank form much like the ones Koopman describes. In doing so, applicants made themselves legible in certain ways and recognized themselves as a certain type of person. They presented and understood themselves as people who, for example, had lost work involuntarily and who had made at least $5000 the year prior through working income. These data points became key components of who they were. Moreover, since it would be months before applications were reviewed by a government employee and since there was no guarantee that the review process would be rigorous, deciding to apply for CERB, which entailed understanding oneself as eligible and as someone who should receive the benefit, was the primary determining factor in who received the benefit. This data collection process offered applicants an opportunity to reflect on their informational portrait, influencing their self-perception, and, perhaps, inspiring a change in behaviour (Schüll, 2018).

Applying for CERB largely involved checking a box certifying that one met the eligibility criteria. While this appears simple on the surface, it was not in practice. CERB's

description and eligibility criteria were written in vague language. Some details, such as whether the minimum required income from the previous year was in terms of gross or net pay, were only clarified months after the program expired. To demonstrate the confusion generated by the criteria, take for instance the line "stopped working or will stop working due to reasons related to COVID-19." At first read it appears relatively straight-forward but it can be (and was) interpreted in numerous ways. For example, could a contract worker whose contract was due to end and was struggling to find new work apply for CERB? Their contract's expiration was not triggered by the pandemic, but their ongoing unemployment was. My friend, Philippe, found himself in this exact circumstance and reached out to me for advice. "I'm far too anxious about applying for the wrong thing," he typed. We sent page-long messages to each other contemplating the possible interpretations of CERB's criteria only to give up and call the help line. Applicants like Philippe were left to interpret their eligibility of CERB to their best ability without an official up-front application review process in place. Because of this, as well as other reasons to do with complications in the application process, some Canadians unwittingly committed fraud. In fact, when the CRA released an online portal for recipients to repay the benefit, they received nearly 15 000 voluntary repayments on the first day (Cullen & Everson, 2020). The confusion generated by the vague language in the criteria was exacerbated by the moralization of CERB in the media and political speeches. My subjects often interpreted eligibility criteria with this discourse in mind and their ideas of who they believed should be able to access the benefit conditioned their interpretation of the criteria.

Confusion over eligibility criteria worried me and I only grew more anxious as moral panic about fraud emerged in mid-summer of 2020. Concerned about those who may be affected by the CERB fraud outrage, I vented to my friend Laura. She shook her head dismayed. "Yeah, I

know people who are receiving it, but I decided not to apply cause the rules seemed too messy," she told me. Later, I asked her to elaborate on this decision. Laura had graduated from medical school that spring and started her residency in July. While she was not employed when the pandemic began, she eventually found a short-term job making her ineligible for the program. She told me that most of her cohort had similarly decided not to apply even though some had been unemployed. "Ultimately, they don't qualify because even if they wanted the money, they weren't actively looking for jobs [since they would be starting residency soon]." I was surprised, I told her, since I knew medical students were notoriously in debt. "Oh yeah! They are incredibly in debt," she replied. But still, they were not eligible. "I think people were a bit hesitant," she continued. "If the government comes back and questions them about it, it would be hard to justify. And maybe they would've gotten away with it, but I think for the most part medical students are pretty ethical people." Contrary to what Laura claimed, CERB recipients did not need to explicitly attest that they had been seeking work. Switching between bureaucratic-categorical language ("they don't qualify") and moral language ("it would be hard to justify…they are pretty ethical people"), Laura conflated eligibility for the benefit with deservingness. Her understanding of the deserving recipient who seeks work inflected her interpretation of the eligibility criteria resulting in her choice not to apply for the benefit.

I observed a similar slippage in my interview with James, an anxious and unemployed accountant waiting for a new contract to begin. Nodding reassuringly, I listened as he nervously tried to justify his receipt of CERB. He told me that he had lost his job through no fault of his own, that he was seeking work while he waited for his new job to begin, that he had paid into EI, and that the value of CERB was approximately what he would have received from EI. "I feel so guilty not being able to find work right now or not actively looking for it every single day," he

said. Throughout our interview, James shifted back and forth between worrying that he was not deserving enough of the program and worrying that he would discover too late that he was not in fact eligible for the money he had already received. Scared that he would be audited at a later date, he sought a way to document his reasons and justification for receiving CERB both to prove that he was eligible for the benefit and that he had been deserving of it. In his responses, James detailed what he was doing to earn the benefit and what more he felt he, and other recipients, should be doing. Scrutinizing CERB's lack of job-search documentation requirements, James said, "It's an honour system. If you decide to morally not look for work, we can't do anything." He sighed, "You hope that people are still looking for work." In both Laura and James' account, the fear of being asked to prove by a government official why they had chosen to apply for the benefit haunted them. It influenced their reading of the eligibility criteria and of their own eligibility. In the case of James, it also spurred him to seek work and to document his efforts.

As these cases indicate, the feeling and worry that this program "is not for me" had a powerful hold on potential CERB recipients. Some of my informants went so far as to refer to CERB as a limited resource claiming that by not applying for the benefit, they hoped to reserve the money for someone who needed it. When speaking of deserving recipients, residents often envisioned people with an overwhelming need for support, such as broke single mothers, and people who lacked control of their circumstances, such as immunocompromised people who could not leave their house to work in public spaces. Falling outside of this limited purview of deservingness left some recipients, like James, feeling intense guilt. This discomfort with receiving the benefit was shared by another of my interviewees, Jade, a temporarily unemployed barista and student. At first, she told me, she did not feel like she deserved the benefit since there

were many others in greater need of money. And so, she initially did not apply for it. Only after discussing the matter with one of her professors did she decide to apply. “He was like, ‘Don’t be silly. That money is there for people like you. You were working and you were expecting to make money.’” Reiterating the eligibility criteria and Jade’s compliance with them, the professor claimed that Jade should apply for the benefit not because she deserved it, but because it was made for people like her. This different perspective had an impact on Jade resulting in her decision to receive CERB. But, when she returned to work for reduced hours, she stopped applying despite remaining eligible for the program because she “felt bad.” Trying to make sense of her receipt of welfare, she told me that she liked to think of it as sponsored education since the total value she had received from CERB coincidentally matched her student debt.

While Jade struggled to be fully convinced by her professor’s argument that the benefit was made for people like her, people who met the eligibility criteria, I observed many others making similar claims when explaining their reason for applying. Unconcerned with questions of deservingness, one of my informants, Misha, stated that his brother applied for aid because he was eligible. There was no question about whether he should do so. He could, so he did. And what was so wrong with this? Serving as a counter to deservingness, my informants spoke of entitlement. Where talk of deservingness invoked the image of being worthy of aid, entitlement suggested that one was simply exercising one’s rights as a citizen. It referred to the recipient’s legal right to apply for the benefit and applicants received what they were owed by the state as eligible applicants. It was a perk of citizenship much like employee benefits are often a perk of employment. Receiving the benefit as an entitled recipient was akin to optimizing one’s income taxes. Borrowing the words from one local tax accounting firm’s advertisement, it was a matter of “getting what’s yours.” Thus, entitlement did away with the moral question of needing or

deserving the benefit since the money was, in a sense, already yours to begin with. You only had to go and get it. Moreover, entitled recipients did not need to perform gratitude or use the resource "properly" since it was their money to do with what they will. Misha's brother was not seeking work nor was he particularly in need. Living with his parents in a comfortable suburban home, he was not by any means financially insecure. By interpreting the eligibility criteria in terms of entitlement rather than deservingness, he read them differently. Accordingly, the act of certifying his eligibility when filling out the application form was a simple, routine matter like "applying for a job," he stated. He checked the box claiming that he was eligible and understood himself as such.

My retired neighbour Charlotte shared Misha and his brother's outlook on CERB. Isolated as we all were, Charlotte could relate to CERB mainly as a program her grandchildren received. Like Misha's brother, her grandchildren were fortunate to live with their parents and enjoy comfortable household incomes. "I guess the best thing to say is thank you," she told me. "You probably won't get another handout again. I know within my family, my grandkids, they're getting it and there's no way that they wouldn't apply for it." Although she felt that CERB's true purpose was to support those struggling to afford rent and food, she believed that those who were eligible should take advantage of the once-in-a-lifetime opportunity made available to them. Charlotte was ineligible for CERB herself, but she was eligible for a different emergency financial program. In early summer, Trudeau announced that he would be providing seniors with a one-time tax-free payment, consisting of $300 for recipients of the Old Age Security pension and an extra $200 for recipients of the Guaranteed Income Supplement (Service Canada, 2020b). Unlike CERB, seniors did not need to apply for this benefit but would receive it automatically. Charlotte told me that she was happy to hear that struggling seniors would be supported in this

small way and while she was not struggling herself, she certainly was not going to complain about free money. By contrast, some seniors publicly pledged in the Letters to the Editor sections of local newspapers to donate their benefit to charity so that it could reach "far more deserving people (Globe & Mail, 2020)." Where Charlotte understood her eligibility for the program in terms of entitlement, these seniors understood it in terms of deservingness. Since they could get by without additional support, they opted to pay the money forward.

Just as ideas of deservingness existed in Canada prior to the pandemic, so too did ideas of entitlement. In the realm of social aid, this is particularly evident in the different ways in which the state promoted contributory and non-contributory programs. In a contributory program, like EI, potential future recipients pay directly into the program in case they later need it. Nancy Fraser and Linda Gordon (1998) argue that this welfare model mimics a contractual interaction whereby supposedly equal people freely engage in the exchange of resources. As contributors, recipients of these programs are widely considered entitled to aid. Indeed, the introduction of unemployment insurance in Canada was put forward by the state as pairing the worker's obligation to avoid voluntary unemployment with their dignified right to aid (Campeau & Howard, 2004). In contrast, non-contributory welfare programs, like CERB, are often framed as asymmetric gifts from the state. Recipients appear to receive something for nothing (Ferguson, 2015). Such programs resemble charity "on which the recipient had no claim and for which the donor had no obligation (Fraser & Gordon, 123, 1998)." However, the difference in the ways contributory and non-contributory programs are imagined is overstated since "all welfare programs are financed through 'contributions,' differing only as to where and how these are collected (Fraser & Gordon, 124, 1998)." It is worth noting that this framing of recipients of contributory programs as "entitled" and recipients of non-contributory programs as "deserving"

has gendered roots with the former resembling a masculine, rational, contractual exchange and the latter resembling the sentimental "flow" of resources found in feminine domestic spaces (Fraser & Gordon, 1998). It is no coincidence that contributory programs like EI were initially designed for working men.

This link between direct contribution and entitlement features strongly in Canadian public and state discourse dating back at least to the 1930s (Tillotson, 2008). Indeed, one of the marketing strategies used by Canadian charity fundraisers, and later by the federal department that collected income taxes, to increase the number of donors was to promote the idea that it was the social responsibility of all but the utterly destitute to pay "part of the price of the services he or she uses (Tillotson, 57, 2008)." More recently, the logic that contribution leads to entitlement underlay posts in a newspaper's comment section that wealthy people were more deserving of CERB because they contributed more income taxes. One comment claimed that poor recipients of the benefit were forcing "the rest of us to pay for your existence." As these comments demonstrate, being an entitled recipient allowed for a measure of dignity and the possibility of distance from the moralized discourse that plagued deserving and non-deserving recipients.

At times, when CERB recipients spoke in terms of entitlement, they intentionally refuted the normative discourse of deservingness. This was the case for an online trend that I was first introduced to by my neighbour Mackenzie. Showing off her brand-new iPad, she quipped, "It's a birthday gift from Daddy Trudeau!" I laughed, caught off guard. "It's a joke with my friends," she explained. "You know, cause he's giving money to all of us." After Mackenzie headed off, I looked up #DaddyTrudeau to discover numerous intentionally inflammatory posts by young adults joking that the prime minister was their sugar daddy since he was supplying them with CERB. On Tiktok, where the trend was most popular, the hashtag received 6 million views.

Some posts thanked Trudeau for creating CERB and saving them from going broke. Some depicted all the expensive goods they claimed they would, or already had, purchased with CERB money. Others featured the creator dancing while asking for fewer public health restrictions and more CERB checks. Most of the posts were obviously intended to be provocative jokes. They were deliberately inappropriate both in the ways they sexualized the prime minister and in the ways they described social welfare. Referring to a post that depicted a young adult sitting on a new Jeep while thanking CERB, Mackenzie told me, "I think it's a joke…You can't get a good Jeep for $8000 so you have to have some money already saved up to buy a good Jeep. The hashtag is to make people laugh, to get attention."

Part of the appeal of the trend was surely, as Mackenzie stated, to make people laugh and quell the boredom of isolation. The posts seemed to be a parody of "flexing," an online trend whereby people flaunt their wealth. However, there was also a sense that the hashtag was a halfhearted celebration of earning what felt like a decent amount of money without working. It was exciting to receive money. The creators of these posts typically demonstrated little if any effort to perform "need." While some claimed they were financially insecure, the majority did not. At the same time, creators did not express shame or guilt. Rather, they reveled in their good fortune. They were eligible for the program and so they received their due. While the trend #DaddyTrudeau could be analyzed in many ways, its flagrant and public refusal to engage with ideas of deservingness is striking. This purposefully inappropriate behaviour fell in line with Tiktok's tendency to promote eye-catching content. But the videos also demonstrated that some creators sought to depict themselves and be recognized in terms other than deservingness.

The Pandemic as an Opportunity for Change

While welfare reform was not the intention of CERB, its novel features coupled with a heightened sense of precarity generated by the pandemic created space to re-evaluate welfare and

work. The $2000 value of CERB was interpreted by many people as an admission on the part of the federal government that this was the minimum livable income for an adult if not in general then at least during the pandemic. Some residents were unwilling to return to work in what they felt were unsafe environments for pay that could not compete with CERB (See Fig. 10). Similarly, student and disability activists argued that welfare programs targeting their demographics should be equal in value to CERB. In an article entitled "Do Our Lives Count for Less," an Ontario resident argued that she, a woman who was unemployed due to her disabilities, should be able to receive the same amount as she would have if she was unemployed due to the pandemic (Bresge, 2020). Likewise, a petition called #Don'tForgetStudents (2020) called on the federal government to make CERB available to students and recent graduates regardless of their prior income. The petition, which received over 47,000 signatures, stated, "Students and recent graduates who are just starting their lives and careers now face the most uncertain job market since the Great Depression." Falling outside of the normative category of the deserving CERB recipient, these activists claimed that deservingness should be expanded to include them. Protesting welfare policy, these activists asserted that what citizens should expect from the state, meaning the relationship between citizens and the state, must be reimagined.

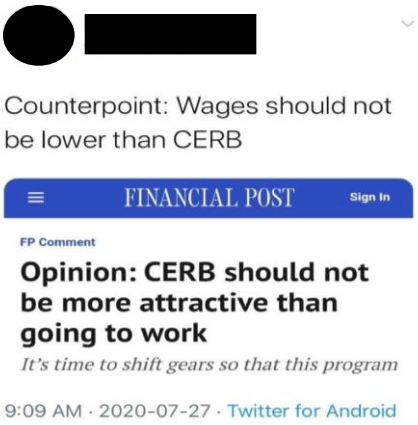


Figure 10. Screenshot captured by author on Facebook of a meme depicting a reply to a popular local newspaper's article. The meme, and others like it, claimed that employment should be able to compete with welfare.

At the same time, there were people calling for a long-term solution to replace CERB. One tweet read, "CERB needs to transition into Universal Basic Income [UBI or BI]. The reason it's so hard for workers to go back to low paying high stress and high risk jobs is because a life isn't worth less than $15/hr. People were already beyond broke before this pandemic. The

pandemic just highlighted it." The tweet claims that the pandemic exposed pre-existing precarity that needed to be rectified going forward. Often the call to replace CERB with something new was expressed as a desire for BI, a system where all residents would receive regular cash transfers. Many pointed to similarities between what they imagined receiving BI would be like and their experiences of receiving CERB, a regular cash transfer with few eligibility criteria and a short application process. They felt that converting CERB into BI would be relatively simple, include more people who were in need, and make the process of applying for welfare relatively uncomplicated. In a sense, BI would largely render deservingness irrelevant since cash transfers would be distributed to anyone residing in Canada. James Ferguson (2015) writes that BI has the potential to restore the dignity of recipients who would no longer have to prove their employability, need, or moral character. Essentially, converting to BI would allow welfare to be understood primarily in terms of entitlement.

However, I continued to observe the language of deservingness crop up in the speech of some of my subjects who promoted BI. In my interview with Abigail, an unemployed co-owner of a small dance studio, I asked who she felt should be eligible for CERB. She replied, "anyone and everyone," confessing that she was a proponent of BI. She wanted people to have the resources to do the things they wanted to do. "And I say that knowing somebody very close to me who did not need it [CERB] at all and applied for it and got it anyway," she told me. "I very much hope that when they audit all this, she has to pay it back." I was puzzled by her response, so I asked if her friend was eligible for CERB. "She was eligible. She fit the criteria. She didn't really need it," Abigail replied. The contradiction in her response stuck with me betraying a struggle to reconcile her ideas of a deserving recipient with her desire for something new.

Conclusion

In this chapter, I explored CERB, a program designed to temporarily replace EI as a support for un- and underemployed workers that became a key talking point during my fieldwork. Existing imaginaries of deservingness informed the state's messaging and design of the program as well as public and media discourse. Meanwhile, applicants' attempts to interpret the vague eligibility criteria of CERB were influenced by their ideas of deservingness and entitlement. As they filled out the form, applicants formatted themselves as eligible recipients who should receive the benefit and attempted to reckon with what this meant to them. My neighbour Mackenzie, with whom I introduced this chapter, seemed to struggle with understanding her receipt of CERB, sometimes describing it in terms of deservingness and other times in terms of entitlement. In June 2020, she started to seek work in childcare. The initial four-month run of CERB would expire shortly and, at the time, none of us were certain it would be renewed. We were sitting by the pool once again when she told me that she had received the call to return to work. She seemed noticeably upset. "I was hoping I could just stay on CERB all summer." Mackenzie was afraid of the virus and children seemed like perfect vectors for disease. Wanting to protect her loved ones, she promised to avoid meeting them when she started work and I did not get to see her much after that.

Conclusion

As I write this conclusion, it has been nearly two years since the Ontario government first declared a state of emergency to manage COVID-19. A new highly contagious variant of the virus is circulating and Ottawans once again face strict public health measures in the hopes of containing the disease. The pandemic has lasted much longer than I initially imagined, and it continues to complicate the lives of Canadians. CERB, which ended in the fall of 2020, has long been replaced by other programs with more stringent eligibility requirements and application processes. Yet CERB's impact has continued long after the program's run-time. Federal officials began reviewing CERB applications in the months following the program's termination and many recipients received notice that they were required to repay the benefit due to ineligibility or overpayment. Local newspapers reported on the surprise and horror this caused some recipients who claimed they would struggle to repay the thousands of dollars they had received believing in good faith that they had been eligible for CERB (Ex. Campbell, 2020). In the comment sections of many of these news articles, some residents argued that these recipients had been caught red-handed. "Looks like a lot of people jumped in to grab a free lunch and are now whining because they have been caught," wrote one commenter. Their lack of deservingness had been proven.

Many of my informants understood the receipt of CERB in much the same way as they understood the transmission of the virus. Both had the potential to impact Canadians. They had the potential to impact those who you may not know but who you were nevertheless tied to as citizens. The decision to receive CERB or refuse work was assumed to cause long-lasting federal debt that would result in higher taxes and long-term impacts on the economy. Similarly, unsafe behaviour and poor judgment were assumed to cause COVID-19 transmission resulting in an extended pandemic and potential loss of life. As such, my informants' critiques of the safety of others' actions and of their deservingness of CERB had to do with what they expected of other

citizens. In much the same way, when my subjects discussed their efforts to be safe, mulled over their decision to apply for CERB, or claimed that they hoped vulnerable Canadians could receive aid, they often expressed a desire to care for others and reflected on what they owed others as a citizen. In working to become responsible subjects, my informants strived to be responsible to and for not only themselves and their loved ones, but also other Canadians.

The ways my informants discussed citizen responsibility echoed state communication that worked to shift responsibility to Canadians, be that the duty to protect public health, to make good decisions, or to determine whether one should receive social aid. In making citizens responsible, the state rendered them blameable for such things as fluctuating viral case counts and the state of the local economy. As such, some residents were held accountable by the state for purportedly failing to develop appropriate safety practices, losing track of public health advice, failing to employ good judgment, and misunderstanding their eligibility of CERB. At the same time as it made residents responsible, the state also defined properties of Canadian citizenship. Residents were described as sharing certain commonalities by virtue of being Canadians such as having similar values, goals, and common sense. Resilience, solidarity, and cooperation in the face of COVID-19 were portrayed as especially important properties of Canadian citizenship and necessary for Canada's survival.

This message that Canadians have profound similarities resonated with many of my informants. In memes and online posts, they discussed assumed similarities in our experiences of the pandemic by virtue of being here together. We were living through the pandemic in the same place, receiving the same public health advice, and learning about the same financial programs. While joking with each other about how frustrated they were with the pandemic or complaining about the government's awkward pandemic response, my informants pointed to what they felt

was a specifically Ottawan or Ontarian experience of the pandemic (See Fig. 11). For some of my informants, the assumed similarities of residents' experiences of the pandemic and assumed shared values motivated them to carry on despite hardship. In an online forum intended for people interested in learning about pandemic-related emergency financial programs, one of the highest rated posts stated "[This pandemic and difficulties with receiving financial aid have] left us wondering how we're going to survive, how we will pay rent or bills, and even how to just save ourselves from becoming homeless or worse…We as Canadians will make it out okay. We're not going to leave our fellow humans in hell…We're Canadians, and we will get through this." The post's attempt at positivity in a forum that typically featured anxious, frustrated, or melancholic posts about welfare applications was well-received by readers. It promised that we can get through this because we are Canadian, and we are resilient in the face of uncertainty. Moreover, we can get through this because Canadians care for Canadians.

Figure 11 Screenshot captured by author on Facebook on January 5, 2022, days after the Ontario government announced new public health measures to protect against the omicron variant of COVID-19. The meme derives its humour from assumed similarities in the ways Ontarians experienced the pandemic. In addition, it distinguishes Ontarian experiences from other experiences of the pandemic.

While this thesis explored the ways in which the state and my informants drew on the idea of Canadian citizenship, it also explored the ethical responsibility to and for others. In response to the state's call for Canadians to take responsibility for public health and the economy, my informants strived to become responsible pandemic people. This ethical work was conducted in the context of intense precarity and uncertainty generated by the pandemic. My

subjects strived to manage uncertainty and prevent harm through self-reflection, self-monitoring, and adjusting their actions. They hoped that by doing so they could ensure they would not contract illness, harm others, or prolong public health measures or economic recovery. Yet becoming responsible was a difficult process involving mentally tracking information about best practices, developing new routines, maintaining these detailed routines, and reflecting on their behaviour. It also involved taking up practices that often generated intense loneliness, exhaustion, discomfort, and depression. Moreover, considering oneself responsible for others produced guilt and anxiety over the possibility of having acted poorly. Thus, I have attempted to convey in this text, how Ottawans were encouraged to adjust their conduct, how my subjects strove to do so, and how these responsibilities were burdensome.

In the first chapter, I examined the state's public health response to COVID-19 in Ottawa which relied heavily on the cooperation of citizens. Examining official messaging, I argued that the state framed citizens as responsible for the health of others by positing a causal link between people's behaviour and COVID-19 transmission. Consequently, it instructed residents to shoulder this responsibility by taking up several safety practices and claimed that the willingness to do so was a Canadian trait. By making residents responsible for the health of others, the state also rendered them blameable for decreasing or increasing viral case counts. Eager to care for themselves, their loved ones, and citizens, my interlocutors endeavoured to cultivate the virtue of responsibility, or the capacity to protect others reliably, through developing what they considered to be safe practices. My informants became responsible, and expected the same from others, in part because they understood this to be a duty of citizens.

In chapter two, I explored the state's failure to provide consistent and clear public health messaging during the first year of the COVID-19 pandemic. Prior to the pandemic, the Canadian

government anticipated the emergence of new pandemics and, like many other states, employed a preparedness strategy to manage a threat that experts envisioned as both inevitable and, at least to an extent, unforeseeable. As part of this preparedness strategy, the Canadian government acknowledged that a key part of a pandemic response should be clear messaging so that the state could maintain citizens' trust and guide them through the emergency. With this in mind, I argued that preparedness as a public health strategy relies on the ability of experts to imagine a biothreat in advance and that this limit to preparedness was a factor in the state's failure to provide clear public health messaging during the COVID-19 pandemic. The result of this failure were inconsistencies in state advice and calls for people to rely on common sense, or good judgment. While state officials invoked common sense as if it were an innate, Canadian ability shared by all Canadians, in practice, it was something that subjects needed to actively develop.

Finally, Chapter 3 examines the design, promotion, and reception of CERB, a temporarily available emergency financial aid program intended for un- or underemployed residents during the first months of the COVID-19 pandemic. Taking up the category of a deserving recipient, I explored how state, media, and public discourse articulated CERB's purpose and target demographic. I then turned to some CERB recipients' experience of applying for the benefit and their response to the unclearly written eligibility criteria. Through applying for the benefit, applicants formatted themselves as people who should receive CERB in terms of deservingness or entitlement, concepts that have to do with what one can expect from the state. Last, I analyzed activists' demands for welfare reform in response to CERB and examined how they called on the government to expand the categories of the deserving and entitled recipient so that more people could become welfare beneficiaries.

My final chapter ends on a hopeful note demonstrating how residents called for change. It is important to note that the conditions that generate uncertainty, and the anxiety and vulnerability that comes with it, also hold the potential to produce hope (Kleist & Jansen, 2016). Crises can be understood as revelatory moments that have the potential to expose and draw attention to pre-existing problems (Muir, 2015). In many ways, the COVID-19 pandemic provided this kind of diagnosis, revealing problems such as insecurity and inequality. Rather than becoming paralyzed in the face of these challenges, I see signs of a productive hope and advocacy for long-needed change now and onwards. Cultivating hope under these conditions may be difficult but it is a task that will continue to be necessary even after this pandemic has ended, whenever that may be.

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