

## Epidemics Eroding Public Life: An Analysis on the Covid-19 Pandemic

DOI: 10.26466/opus.873896

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### Abstract

*Epidemics have several impacts on different dimensions of the social structure. First of all, epidemics bring people to change many routines in their daily life and to rearrange their lives. Discussing the impact of epidemics on social life in the context of COVID-19 will allow us to understand that this process, which seems only a medical process, actually has many social effects. This study focuses on the Covid-19 pandemic as an inducement of the rising individuality of modern man under the light of Sennett's affirmation regarding the fall of public man. To this end, changes in consumption of goods and spaces, medicalization of daily life, the effect of the experience of lockdown during the pandemic on the self and consequently the disruption of the interaction order were analyzed. During the pandemic, the issue of individuals' retreat into their own private sphere and the growth of private life and private sphere asymmetrically in the face of public sphere and public life were addressed. As a result, the lockdowns experienced during the pandemic negatively affected the social self and the interaction order, accelerating the collapse of the public man which is a process that has been going on for a long time.*

**Keywords:** COVID-19, Pandemic, Public Life, Consumption, Medicalization

## Kamusal Yařamı Ařındıran Salgınlar: Covid-19 Pandemisi Üzerine Bir İnceleme

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### Öz

Salgınlar sosyal yapıların farklı boyutları üzerinde pek çok etkiye sahiptir. Salgınlar her şeyden önce insanların gündelik hayatında birçok rutini deęiřtirmelerini ve hayatın yeniden düzenlenmesini beraberinde getirmektedir. COVID-19 bağlamında salgınların sosyal hayata etkisini tartıřmak sadece medikal bir süreç gibi görünen bu sürecin aslında birçok sosyal etkiye sahip olduęunu anlamamızı sağlayacaktır. Bu çalıřma Sennett'in "kamusal insanın çöküřü" tartıřması bağlamında Covid-19 pandemisini modern insanı bireysellięe sürükleyen kořullar açısından ele almaktadır. Bu bağlamda deęiřen eřyaların ve mekânların tüketim alışkanlıkları, gündelik hayatın medikalleşmesi, pandemi boyunca yařanan kapatılma deneyiminin benlik üzerindeki etkisi ve bunun sonucunda etkileřim düzeninin bozulması konuları analiz edilmiřtir. Bütün bu konu başlıklar pandemi süresince kamusal bir varlık olarak bireylerin ie kapanması, özel hayatın ve özel alanın kamusal alan ve kamusal yařam karřısında asimetric bir řekilde büyümesi sorunu ele alınmıřtır. Sonuç olarak, pandemi boyunca yařanan kapatılmalar sosyal benlięi ve etkileřim düzenini olumsuz etkilemiř, eskiden beri devam eden bir süreç olan kamusal insanın çöküřünü hızlandırmıřtır.

**Anahtar Kelimeler:** COVID-19, Pandemi, Kamusal Yařam, Tüketim, Medikalleşme

## **Introduction**

Epidemics are periods of social instabilities which are observed on a wide range of different aspects. Although the core problem is related to health during those times, there exist many others as the results or outcomes of them. As it is the case for many other issues, the time and place of this health crisis bears a significant position here. That is to say, the causes and reflections of an epidemic may change depending on the place and period of time in history that this problem takes place. For instance, epidemics in premodern times and modern or post-modern times should not be expected to carry the same features. The COVID-19 pandemic which came into the picture of world agenda in the last months of 2019 and has been dominating worldwide occasions since then is an example of a health crisis in a global era. Before everything, living in a globalized world has made the virus which is the main reason of this pandemic to be spread all around the world in a very quick pace. However, the virus is not the only thing which is traveling all around the world but some behaviors, understandings and ideas are also on a quick spread on an international level. These are no doubt not brand new. In other words, the social inclinations which are frequently observed during the COVID-19 pandemic have already been there for a long time and they are more obviously seen compared to the prepandemic times. This manuscript focuses on some of these tendencies in the framework of Richard Sennett's idea regarding "the fall of public man". To this aim, medicalization of everyday life during the pandemic, the lockdown of self and the disruption of interactional order and the changing consumption habits is put under the spotlight in the framework of the decrease of social life and increasing individual patterns in daily life.

## **Medicalization of Daily Life under Covid-19 Conditions**

If we are to define medicalization which is a dominant point of criticism in especially the field of the sociology of health, it can be identified "as the process by which some aspects of human life come to be considered as medical problems, whereas before they were not considered pathological" (Maturro, 2012, p.122); or as a situation which is "defined in medical terms, described using medical language, understood through the adoption of a medical

framework, or “treated” with a medical intervention” (Conrad, 2007, p.5). This is a process which “is largely an insidious and often undramatic phenomenon accomplished by “medicalizing” much of daily living, by making medicine and the labels ‘healthy’ and ‘ill’ relevant to an ever-increasing part of human existence” (Zola, 1972, p.487). The two main motivations triggering the birth and development of medicalization are “secularization and the changing status of the medical profession” (Conrad, 1992, p.213). With the secularization, health issues that were attributed to the supernatural powers in the past by sorcerers and later by clergy began to be explained with purely material powers. Thus, many situations are now seen as a medical illness rather than a deviance or sin understood in a religious context. In addition, the authority gained by the medical profession as a specialty in modern society has turned into a domination and monopoly on people's bodies and souls (Conrad, 1992, p. 213-214). Now, all kinds of treatment that people can seek out of the boundaries of modern medicine for their physical and mental illnesses are labelled as quackery, pseudoscience, superstition. As it is clearly seen during the COVID-19 pandemic process, “scientific boards” consisting of different sub-specialties of medical science have been established in many countries and the issue was seen as a medical problem above all. However, in the following process, social sciences committees were established by considering the social effects of this pandemic. In this case, it shows us that the rationale underlying the establishment of “scientific boards” is the medicalization of all spheres of life with a special focus on medicine.

While the medicalization process creates authority and social control by defining what is normal and what is pathological on the one hand, it also creates problems due to its organizational form and institutional structure. In addition to the clinical iatrogenesis that is widely discussed in medicine and arises from the clinical mistakes and other actions of doctors and other actors in the medical system, perhaps the other significant dimensions of the problem are social and cultural iatrogenesis. Social iatrogenesis describes a life in which a whole society becomes a consumer of medicinal products and drugs at different levels, a purely medical monopoly is created, and all processes from birth to death are dominated and monopolized by medicine. Social iatrogenesis describes the negative effects of the secondary problems caused by the commodification of health services and the functioning of the health sys-

tem on society (Illich, 1976, p. 6-7). During COVID-19 pandemic, we are experiencing a period in which not only the symptomatic and asymptomatic patients who are reported to have positive cases but the whole society has to rearrange their daily lives according to the COVID-19 pandemic and the media is trying to shape people's daily life accordingly. On the other hand, this pandemic process has further aggravated the cultural iatrogenesis created by medicalization. Cultural iatrogenesis is that people are not allowed to deal with elements such as death, disability, illness, pain, pain autonomously on their own, and meanings of these phenomena are transformed by objectifying them with medical techniques. For instance, cultural iatrogenesis means killing and total annihilation of pain by pain-killers by the medical technologies of cosmopolitan civilization. In the modern world, people are born and die in hospitals, not at home, for a long time now. This situation occurred similarly during the pandemic process. During this pandemic we see a lot of elderly people saying to their children "I would like to die at my home." However, in a pandemic, patients are in intensive care or intubated, completely isolated, and they have to fight this disease by following the prescribed medical treatment techniques. During the pandemic, elderly citizens who are not sick were also largely isolated from public life. This situation affected their daily lives negatively (Türk, 2020a, p. 449).

Medicalization bears tight connections with everyday life. In general sense, medicalization is an outcome of deviance and everyday events of life but it has impacts on a wide range of areas of society and human life. Additionally, common life occasions such as menstruation, mood, childbirth, aging, and death have been medicalized (Conrad, 2007, p.6). In addition to that it is important to point out that medicalization overlaps with the holistic understanding of health. Therefore, medicalization should be evaluated in the framework of three main aspects of health which are "body, psyche and society" (Maturro, 2012, p.132). At this stage of medicalization, being healthy has turned into a state that can be continuously improved rather than being a state of well-being defined at a certain time. Thus, there is a transition from the "disease and health" paradigm to "wellness culture". The stage of wellness culture can be considered as a stage in which health and well-being is completely commodified and commercialized. There are no more patients, there are consumers of health services in this new system (Koivusalo and Mackintosh, p.18). In parallel with this idea, medicalization requires people to try for

better for all these three aspects of their health. To this aim, options such as “prosthetic limbs, cosmetic surgery, and emotional and cognitive enhancement through pharmaceuticals” are tried to reach “enhancement” (Maturro, 2012, p.127). Therefore, people want to buy commodified and commercialized wellness throughout their life. This can sometimes appear as a smile design that means getting your face, jaw, teeth done and having a new smile. Sometimes it is a lifelong anti-aging activity against aging. The authority that this medicalization, now very strongly marketed, gives to large medical companies, pharmaceutical companies and other healthcare managers, is a new form of despotism dominating the society and has been called “pharmacocracy” (Szasz, 2007, p.150). Moreover, health should be considered more as a “process”, than a state. A process in which “physical, mental and social well-being” is constructed, maintained and rebuilt. An asymptotic process without an end – as biocorporations and advertising know very well” (Maturro, 2012, p.132). “Doctors are still gatekeepers for medical treatment, but their role has become more subordinate in the expansion or contraction of medicalization. In short, the engines of medicalization have proliferated and are now driven more by commercial and market interests than by professional claims-makers” (Conrad, 2005, p.11). In this context, the new actors of medicalization are now the global managers of the medical industry, along with the doctors, and transnational organizations that set the rules in the field of medicine. Together with doctors, they hold a monopoly of coercion and use of power over people on behalf of modern nation-states and global health authorities (Szasz, 2007, p.151).

Medicalization is not evaluated as an innocent try easing people’s struggle of living a healthy life but as a step giving birth to some risks which “may be connected to the individualization of social problems, biological reductionism, and the shifting borders between normal and pathological” (Maturro, 2012, p.126). From the historical sequence standpoint, it coincides with the emergence of neoliberal understanding of health. Neoliberalism has transformed all the responsibility of individuals’ health behaviors onto themselves and this shift exacerbated the power of medicalization since it offers people with a bunch of alternatives in terms of food, sports, wellbeing with the claim of helping them to lead a healthier life. As a result, “it seems that a bionic healthscape could lead to the transformation of social problems into medical problems of the single individual, therefore de-responsabilizing political and

social institutions” (Maturò, 2012, p.132). For that reason, “the criticism of medicalization fundamentally rests on the sociological concern with how the medical model decontextualizes social problems, and collaterally, puts them under medical control. This process individualizes what might be otherwise seen as collective social problems” (Conrad, 1992, p. 223-224). In addition to that, medicalization is a process in which the determinants and dynamics are rapidly changing. That is to say, the occasions to medicalize may change depending on time and space. Therefore, “line between the medicalization of pathologies and the enhancement of normality is blurred, as there are actions carried out at the borders that do not fall into either category. Moreover, it is likely that the enhanceable of today becomes the pathological of tomorrow, which brings about an ever-broader area in which biomedical interventions are required” (Maturò, 2012, p. 127). As a result, an abstract category such as public health is built and patient privacy or patient rights can be limited in the name of public health or the public interest. Thus, on the one hand, responsibility for the public health is put on individuals, and on the other hand, individual rights are ignored in the name of public health. The individual, who becomes vulnerable in the face of clinical, social and cultural iatrogenesis created by medicalization, is faced with the reality of individualization and commodification of health services in the medicalized daily life (Sezgin, 2011, p.80).

### **The Lockdown of Self and the Disruption of Interactional Order**

As mentioned in the previous section, all these results created by medicalization are read by the medical language as symptoms and complications and are treated in the same way. Problems caused by medicine itself and the form of medical organization, iatrogenesis in Illich's term, has led to the emergence of a series of problems with social and cultural dimensions. Iatrogenesis actually makes the patient a defenseless person, both clinically, socially and culturally. These problems created by the medical system have huge social effects over time. Here, the biggest drawback of medicalization is the demand to transfer all the power to make social and economic decisions to the "authorities" whose positions are not known exactly. For example, in the process of COVID-19, the epidemic was declared a global pandemic and subsequently lockdown decisions taken in different countries caused this process

to be limited to the medical field built with a purely technical and medical discourse. Here, positions of World Health Organization and global companies that claim to manage the process as a global authority and the pharmaceutical industry, which Szasz calls "pharmacocracy", is highly controversial (Szasz, 2007, p.150). However, this pandemic process, which has been continuing for more than a year since January 2020, leaves very deep and permanent marks on social life. Almost all nation-states, while following the instructions of the aforementioned global medical authorities and establishing "scientific boards" in their own countries, in fact have carried the results of the medicalization of daily life to a higher level. The final result of medicalization on the individual and society can be read as the lockdown of the self as a social being and consequently the disruption of the interaction order. All those who have been subjected to different closures and other arbitrary punishments for a long time during the COVID-19 process are now defenseless persons as potential patients, potential criminals and potential dead. In this section, the results that transform the self into a defenseless person and destroy the interaction order will be briefly discussed.

Both the pre-modern person and the modern individual consider it an important virtue to have the autonomy to manage their privacy and distance with other people. Although this is not always possible for people with different social status and in different hierarchical relationships, it is still one of the privileges that are considered indispensable for every person. As the saying goes distance is civilization. Why? Human beings, prone to be a civilized being by nature, while feeling the need to establish companionship with other people in daily life, reserve the right to protect their privacy and to live in peace at a certain distance to others, as well. As a matter of fact, different forms of social life that we call civilization arise as a result of three basic needs such as establishing companionship, security and livelihood. Therefore, people establish civilization not only because of the imperatives such as security and livelihood, but also by a voluntary choice to establish affinity and companionship with other people (Ibn Khaldun 1967, p.39). The important point here is that people choose intimacy and companionship with their own preferences and will, and come together with other people or retreat into their private space to protect their privacy whenever they want. Therefore, perhaps the most important feature that distinguishes man from other living things is that he can find different forms of solidarity in different conditions



and continue his life in groups on earth and thus maintain his life as a social being. A person whose social existence has been removed cannot be imagined. Until now, all cultural systems, whether religious or secular, have seen human existence together with their fellows as a triumph of nurture and culture (and eventually of the civilization) against nature. During COVID-19, which is the first pandemic that humanity has experienced in an over-medicalized system, it is seen that modern humans have experienced a significant crisis in managing their own physical and social autonomy, solidarity with other people and distance. Here we mean both physical distance, which has been incorrectly used as social distance since the beginning of the COVID-19 pandemic, and true social distance. The concept of social distance has been used for the first time in modern sociological literature by Georg Simmel in the context of the geometry of social life. Simmel used this concept in relation to being a stranger and the other in the life of the metropolis that had just started to emerge in the 19th century in Europe. In Simmel's days, according to him, German Jews in the Middle Ages represented the category of "strange" (Simmel, 1971, p.148).

Today, there are millions of people of different races, different colors, different religious beliefs and languages living in big urban centers. These people live at a certain distance from each other. Especially in today's multicultural societies where immigration is intense, we cannot talk about a homogeneous public culture and city life. Differences, diversity and plural appearances stand out more. These differences are the more visible ones based on socio-economic status and identity. Thus, people of different social classes and different cultures and identities come together both in city life and in decision-making processes in politics. Although the principle of equality is accepted as the basic political principle in today's democracies, we live by maintaining our social distance together with our prejudices and differences (Park, 1924, p. 340). As stated in the previous section, in today's urban centers sterilized and hygienic lives within suburban life or gated communities are continued. In this way, COVID-19 has caused the compartmentalized city life to fall further down the now declining public man figure. Fall of public man, in this sense, is the introversion of individuals who are constantly drawn out of the common, vibrant public life of the city and into their own private life, with concerns such as health, cleanliness and harming others under epidemic con-

ditions. Just like Alexis de Tocqueville, whom Sennett referred to at the beginning of his book, we have missed the vitality of the social life that existed in pre-pandemic conditions (today when we call it the old normal and put a great and impossible distance between us and the old normal) (Sennett, 2001, p.xvii). Perhaps the social life in the city we lived in before the pandemic was not that lively as exaggerated now by the effect of the sense of nostalgia. However, it is certain that this pandemic has physically trapped us completely in our own narrow circle, our own family, home and office. We even stayed away from hugging other family members living far from us, namely our siblings and especially our elderly parents. Today, there is no trace of the enthusiastic city life that flows between the joyful shouting and noise of people. The beachside cafes are empty, the city's once liveliest restaurants are closed, schools, libraries and all public gathering places are closed.

As the famous catchword of COVID-19 in media channels says; "Mask, Distance and Hygiene". It means that people became the sanitation officer of their own body, home, office, family members and friends in workplace, respectively. Here, the management of bodies, individuals, and selves is possible not only through controlling the governed by the governors but also through a series of negotiations, struggles, conflicts, and concessions between these two (Foucault, 2008, p.12). Thus, the public spot, which is summarized as "mask, distance and hygiene", is not only dictated from above, but internalized by people and finds a strong resonance. Hence, we can say that, the state of public man during the COVID-19 process is a new type of estrangement because medicalization de-humanized the human element in social life. People as patients or health care consumers are experiencing harsh consequences of the bureaucratization of medical services. Here, interaction order, which expresses the whole of all kinds of social relations that are re-established every day based on face-to-face interaction, has suffered greatly. This injury to daily life based on face-to-face and immediate relationships means the decline of interaction order and the experience of interactional anomie (Romania, 2020, p.59). Because, as stated before, interaction order, which means adjusting social distances and arranging their life accordingly, is at risk due to the destructive effects of COVID-19, with the balance between distance and intimacy in daily life. Some efforts of the public authority to prevent total medicalization of social life and to maintain interactional order should also be mentioned. For instance, "Vefa Social support groups" composed of public

officials in Turkey have had some efforts to reduce the negative impact of the pandemic on public life (Türk, 2020b, p. 140). However, the influence of these efforts has remained limited. Social distancing for Goffman, is often a set of collective norms, adjustments to conformity and inappropriateness, or customs and rules that enable us to play the game of interaction. Therefore, we can say that as defined since Simmel, it is the measure of the geometry of social life regarding who is the strange and who is the other (Goffman, 1983, p.5). Here, the process of COVID-19 caused cyberspace to grow and squeeze asymmetrically against real space and private space against public space by reducing and distorting the interactions that regulate the geometry of social life. Therefore, it had a significant negative and permanent effect on the already collapsing “public man” figure. Prolonged quarantine days and nights, health concerns may make people who are worried about themselves, their family, parents and their immediate surroundings and who experience even greater fear with deaths more prone to be oversocialized in the post-COVID-19 period. However, this does not mean that people will be more public figures in city life and politics. Probably, in the post-COVID-19 world, a society of individuals who are much more immersed in their private lives will be waiting for us.

### **A Consumer of One’s Own**

The Covid-19 pandemic has exacerbated a long list of social issues which had already been planted in the vast land of public life. That is to say, even outbreaks such as epidemics do not usually give birth to a social change out of nothing but the phenomena which are called as “social change” are the last bricks in the wall of a long-term journey. The so called “new normal” is a time span which can be read in the light of this assertion since the phases of public life which are identified as being new have already been there for a long time. Sure enough, plenty of topics regarding public life during the pandemic can be put into the pot of analysis of this debate. This part of the manuscript aims to focus on the intersection of individualization and consumption in the framework of the transformation of public life and public man. The following words of Sennett pose a clear summary of the background of the debate that is being digged into in this framework.

The belief in closeness between persons as a moral good is in fact the product of a profound dislocation which capitalism and secular belief produced in the last century. Because of this dislocation, people sought to find personal meanings in impersonal situations, in objects, and in the objective conditions of society itself. They could not find these meanings; as the world became psychomorphic, it became mystifying. They therefore sought to flee, and find in the private realms of life, especially in the family, some principle of order in the perception of personality (Sennett, 2001, p.260).

The days with pandemic will most probably be reminded with some certain phrases one of which is "social distance". The recurring reminders of being away from public places have made people obliged to keep away from not only public places but also each other which is a giant step towards changes in consumption behaviors. Since this global problem of health is a result of an extremely contagious virus, the main vital precaution is being physically away from public. In parallel to this, the period of pandemic has been dominated by curfews and lockdowns which are ways to force people stay home and away from each other. Besides plenty of other dimensions of daily life, this new daily routine has changed not only the goods but also the places people consume.

One of the most challenging aspects of the pandemic is the feeling of ambiguity which is really a hard one to live with for human beings. This illness is such a novel one that even health authorities have been having a hard time in defining its main characteristics and making provisions about the upcoming days and this paves the way for a gray shadow for people. Living in such an ambiguous atmosphere leads changes in individuals' daily lives on a wide range of occasions including the one of consumption patterns. It is known that "uncertainty may heighten either a goal to relieve negative feelings (compensatory consumption) or a goal to protect one's future (resource conservation)" (Pomerance, Light and Williams, 2020, p. 14). Both of these options are chosen with the aim of coping with this global problem on their own; finding individual solutions to this global crisis. Therefore, it can be asserted that consumption culture leaks into the picture very subtly and turns this anomic situation into one of its own benefit and adorns the individual stuck at home with plenty of choices which help him/her feel contended and live his/her individuality at the same time.

As it is a current phenomenon which is prevailing still, the up-to-date research reports are among the most highlighting sources of information regarding the consumption patterns of people during this crisis. Wide-scale researches have found out that almost one third of the society belongs to the group of people who are taking cautious steps towards returning back to the days before the pandemic and are cautious also with their spending behaviors. Their shopping focus is on fresh food, personal hygiene and cleaning products and they are not eager to spend money for luxurious products. They prefer not to use public transport or go to public spaces (Accenture, 2020a). Additionally, there are researches which indicate that the consumption of household cleaners, soap etc., supplements has increased whereas cosmetics consumption rates have decreased during this period (J. P. Morgan, 2020). In parallel with that, research results show that household goods, and groceries are the top two items that consumers plan to spend more whereas furnishings, restaurants and clothing/footwear are the ones that are at the bottom of this list (Deloitte, 2020). These results overlap with the picture of life drawn by Sennett in terms of seeing the end of public man in the way that the pandemic has turned consumer prepositions in such a way that people tend to possess goods which are mostly for private space use. For instance, people prefer to buy household goods whereas they hesitate in buying clothes or footwear which are generally bought for public use. Therefore, the preparation in terms of shopping for spending time in public places diminishes whereas individualized shopping is on an increase. Additionally, the report puts forward a consumer behavior which is in direct coincidence with the medicalization debate that was thrown light onto in the previous part. The consumer trends these days have shown that people tend to look for a holistic kind of health and spend money on health and wellness products for that aim in mind. Moreover, %69 of the people interviewed states that they are planning to cling to more than one habit regarding health even after the pandemic is over” (Accenture, 2020a). This is again a glimpse of the neoliberal idea of individualism and individual’s responsibility of leading a healthy life.

Regarding shopping habits, consumers tend to shop in closer neighbor shops and prefer local products much more compared to the prepandemic times. In addition to that, shopping online has shown a significant increase (Kim, 2020, p.215) which is expected to continue even after the pandemic is

over. According to some survey results, an increase rate of %169 will be detected in terms of e-commerce purchases of both new and low-frequency consumers in the upcoming times (Ipsos, 2020). Another indication of shopping on one's own is the numbers regarding consumers' current usage and plans of future usage of digitally-enabled services for shopping. Research have pointed out that people tend to make use of such services during the pandemic and they are planning to do so in the postpandemic period, too. Some examples of these are contactless payment, in-app ordering and home delivery (Accenture, 2020b). All these points indicate shopping on one's own or with some family members or close friends instead of going to public places. As asserted earlier, through such touches the period of pandemic has been triggering the individualization by eroding the era of public man.

In addition to these remarks indicating the goods that are consumed during the pandemic, place preferences of people are also signs of individualization. As it is known that, "capitalism and neocapitalism have produced abstract space, which includes the 'world of commodities', its 'logic' and its worldwide strategies as well as the power of money and that of the political state. This space is founded on the vast network of banks, business centers and major productive entities, as also on motorways, airports and information lattices" (Lefebvre, 1991, p.61). However, things have been on a changing trend for a while in the way that people have been looking for alternatives of living in places like ghettos in which they have the opportunity of living with the ones who are from similar socio-economic levels or searching for living opportunities in the countryside in traditional houses. Modern life has provided people with modern urban places and living in a metropolis is a shining star in the list of modernization signs. However, recent years have showed a changing picture in which urbanites are looking for peace not in big cities but in countryside instead. The period of pandemic increased this search and motivated people to live or at least spend their holidays or weekends in places which are far from the city crowd.

Apart from the desire mingled with obligation regarding moving away from the city, another dominant tendency of people regarding space during the pandemic is staying at home. This period is identified as "decade of the home" (Accenture, 2020c). People tend to spend time at home with family members more than before. "Sheltering in place became the catalyst to compress the adoption curve of many of these offerings at an unprecedented

speed, assisting consumers in their efforts to cope with the pandemic” (Kirk and Rifkin, 2020, p.128). Although, the situation today is a result of an obligation, this is actually a journey which has started long before in individual’s search for meaning in modern daily life. “They are the results of a change that began with the fall of the ancien regime and the formation of a new capitalist, secular, urban culture. Blatant signs of an unbalanced personal life and empty public life have been a long time in the making” (Sennett, 2001, p.92). As Sennett points it out, the individual who cannot find the meaningful gatherings s/he is looking for, chooses to lead a life in his/her own or with the closest family members (Sennett, 2001, p.289). The pandemic circumstances have appeared as a perfect occasion for the ones who have already been questioning shallow public relations and struggling for finding or forming genuine ones. Researches have shown that people tend to spend most of their time at home not only for the time being but also for a long time in the upcoming months. The mostly preferred locations for socialization are home and virtual space whereas the least preferred ones are indoor facilities like gyms and clubs. Therefore, home becomes the new hub for most of the people which is an inclination changing their consumption habits, too (Accenture, 2020b). Not only free time activities but also the obligatory ones like school and work have been conducted from home and it seems this also will prolong since the ratio of people who are planning to continue to work from home even the ones who never worked from home before is pretty high (%53) (Accenture, 2020b).

Another prominent issue that is analyzed here as the last remark in terms of consumption indicates that cyberspace is the new atmosphere of socialization since people tend to arrange almost anything and everything online during the pandemic. This is not a brand new trend as well since “electronic communication is one means by which the very idea of public life has been put to an end” (Sennett, 2001, p.282) and screens are the first places to be turned on for any kind of need today (Avcı, 2013, p.255). Not only casual friend gatherings but also all kinds of business meetings, academic organizations including conferences, seminars and dissertations, all kinds of educational activities, sports facilities, and almost all kinds of courses have started to be given via internet technologies. Moreover, indoor places have moved their activities to online platforms and provide people with the opportunity to attend numerous kinds of events via their screens and sitting at home in their pyjamas. The pioneering ones of these places are museums, concert halls, libraries, theatres

etc. This framework that is tried to be drawn here shows that the pandemic is a strong element in paving the way for the eroding of public life and strengthening the ways of individualization on several realms.

## Conclusion

Extraordinary events such as epidemics have definitely left important marks on human history and societies. In a truly globalized world, such an epidemic faced by humanity has had significant effects on social life. In this study, we tried to understand how the individual living in the society is affected by the negativities of the global pandemic. Of course, social events are difficult to fully understand in the short term. However, it is very clear that this global pandemic will have long-term and lasting consequences. In the pre-pandemic period, the vulnerability of the modern individual against medical technologies has increased with pandemic conditions. In fact, by going one step further, all stages of daily life have been medicalized. As a result of this medicalization, it is seen that people's social selves are damaged and insecurity and social distance come to the fore in public life. On the other hand, while the new normal living conditions created by the pandemic negatively affect the social life of people and the vitality of public life in many countries, we have observed the results of this effect on consumption patterns. It is seen that people no longer want to use public transportation, online shopping and credit card shopping have increased greatly, and cyberspace consumption has increased many times over. All these developments unfortunately lead to negative predictions about the future life of modern individual in the twenty-first century. While increasing rationalization and bureaucratization imprison us in a bigger iron cage, on the other hand, new ways of the liberation struggle are tried to be discovered in the face of this huge bureaucracy governed by global ruling actors of medicine and technological discourses.



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### Kaynakça Bilgisi / Citation Information

Bölükbaşı, A. and Kıran, E. (2021). Epidemics eroding public life: An analysis on the Covid-19 pandemic. *OPUS–International Journal of Society Researches*, 17(Pandemi Özel Sayısı), 3727-3744. DOI: 10.26466/opus.873896