

PANDEMIC EXPOSURES



Economy and Society in the
Time of Coronavirus

Edited by
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CHAPTER 16

Searching for Life in Times of Pandemic

Federico Neiburg and Handerson Joseph

This chapter deals with how the COVID pandemic becomes embedded in the flow of life of people who inhabit the Haitian diasporic universe, organized by movement within the national territory and foreign routes of mobility. The key to observing these moving landscapes is the Creole expression *chache lavi* (“searching for life”). It unlocks ways of dealing with the materiality of life in extreme poverty and reveals processes of care, even at a distance. The chapter also discusses how, in times of pandemic, *chache lavi* is modulated by memories and practical knowledges acquired over time in the long history of Haitian crises. Thus, Haitian landscapes offer a privileged point of view to observe the dynamics of (im)mobility and care that inform the pandemic as a human experience beyond the Haitian world. We do not seek here anything that resembles a description of the “effects” of the pandemic. Our goal is to use this unprecedented process of uncertain temporality (when we finish this text, it will still be with us) to think about dynamics that structure the Haitian social universe far beyond the pandemic, as well as the relationships between life, care, and (im)mobilities.

During 2019, Haiti’s cycles of endemic crises escalated, as several times in history before. Massive demonstrations with barricaded streets

protested the high cost of living and demanded the resignation of President Jovenel Moïse, accused of corruption and of being responsible for the country's economic and humanitarian collapse.¹ Inflation had been on the rise since late 2018, accompanied by the devaluation of the national currency, the gourde. In October of that year, the Food and Agriculture Organization of the United Nations (FAO) issued a warning that, with the food crisis, almost 40 percent of the country's population needed urgent intervention in order to survive (IPC 2020). For months on end, people stayed at home for fear of street violence. Before anyone had even heard of SARS-CoV-2, or of "lockdowns," the media and social networks were already complaining that Haiti was paralyzed — *peyi lòk*, literally "a locked country" (see Bulamah forthcoming; and Danticat 2019).

On March 19, 2020, the president reported the first two cases of COVID, declaring a national health emergency, imposing a curfew, closing ports, airports, schools, universities, and places of worship, and banning travel and meetings of more than ten people. Haiti's only land frontier, with the Dominican Republic, was subject to strict restrictions, with an imposed limit to the cross-border comings and goings that feed markets and families. Few celebrated the president's presumed "reestablishment of authority" over the fate of the country. Most criticized him severely. For some, the measures arrived too late, for others, they were precipitated (Haiti Libre 2020a; Popovic 2020). Many people scurried to ensure provisions, further amplifying the instability of the price of basic goods and the turbulence of ongoing street violence (see, for example, Le Nouvelliste 2020d).

The measures were only partially enforced, and then gradually relaxed, after July 2020, but their economic impact began to be felt immediately, deepening the crisis that the country was already facing. Remittances from Haitians in diaspora diminished. The health crisis and the slowing down of the global economy also resulted in the return of a significant number of Haitians who had lived abroad. Between March and September approximately 200,000 Haitian migrants returned, mostly from the Dominican Republic, Brazil, Chile, and the United States (US), resignifying mobility and aggravating the impact of the circulation of the

1. In the early morning of July 7, 2021, just as we were finishing the final version of this chapter, President Moïse was assassinated in his Port-au-Prince residence.

virus, as well as the management of the pandemic within the national territory.²

A little over eleven million people live in Haiti, at least three million more live abroad. In 2019, 37 percent of the gross national product was composed of remittances of Haitians who live in, or were passing through, other countries. Most of the money is received monthly in quantities that vary between USD 50 and USD 200, making up a substantial portion of a family's income.³ For decades observers have noted that this Caribbean country has socioeconomic indicators that are very similar to those of countries in sub-Saharan Africa. More than 60 percent of the Haitian population subsists on under USD 60 a month. The centuries-old crises of the rural areas worsened in the last decades, as a result both of environmental degradation and of the opening up of the market to foreign foods; today, 80 percent of food comes from abroad (see PNUD 2014). In cities, particularly in the capital where 2.5 million people live, wage earnings are marginal in personal and family incomes. Most men work in so-called "informality," obtaining their money through temporary jobs, working in the streets in precarious activities or in the services sector. A significant proportion of women works as street vendors, selling cooked food and other items in the streets and markets, and on the roads that link the hinterland to Port-au-Prince and the Haitian commercial capitals outside of the country, such as Santo Domingo, Miami, or Panama.

Restrictions on mobility within the country and in Haitian transnational circuits, including hundreds of thousands of returnees and diminishing remittances, had immediate effects on the existing crisis and on people's suffering, despite the actual number of confirmed cases of COVID remaining relatively low. In July 2021, at the time of writing this chapter, the official numbers from Haiti are of 450 dead and a little over 180,000 infected. In recent months, with the arrival of new variants, the situation seems to have worsened. Nevertheless, even considering obvious underreporting, the number of deaths and infected people are thus far going against all prognoses of a health tragedy of epic proportions. Predictions in March 2020 were of 300,000 COVID deaths by the end of the year, and with every wave of the pandemic, and the emergence

2. Estimates based on data from the Groupe d'Appui aux Rapatriés et Réfugiés (<https://www.garr-haiti.org/>). See also Fortin (2020).

3. On remittances, Ratha et al. (2015); on Haiti, Duroseau and Jean (2019); on the region, Caruso et al. (2021).

of new, more aggressive variants of the virus, apocalyptic projections that are constantly renewed but have not, until now, materialized.⁴

We know that the COVID pandemic has dramatically expanded social inequalities: between people who inhabit the same national territory, as well as between nations, widening the gulf that separates those who can afford to stay at home and those who need to move to make money; between places with robust health infrastructures and those in which they are almost inexistent; and, in the last few months, between those who have access to vaccines and those who do not. In this chapter, we look at these dynamics of inequality across Haitian landscapes, both within the country and in the diaspora, focusing on the articulations of (im)mobilities and care thematized in the Creole expression *chache lavi* (searching for life). *Chache lavi* conflates care with life itself and with the life of those who are not necessarily physically but affectively and morally close, and the process of making do during a life on the move with the search for a better life (*chache lavi miyò*): the identification of the quest for money and sustenance with the exploration of paths (*voye chache*) that others may later follow thus become integrated into activities in movement and the circuits of mobility.

The pandemic of the novel coronavirus recalls memories, practical knowledges, and an ethics of care which are constitutive of the morality of persons and the good life. Memories, knowledges, and moralities, which have been cultivated in the long durée of the Haitian crises, marked by catastrophes like the earthquake of 2010 (which left at least 250,000 dead) or the cholera epidemic that followed it (killing at least another 20,000). Loaded with morality, the use of the expression *chache lavi* also sheds light on singular forms of experiencing the daily proximity of death in the flux of ordinary life.⁵

(Im)mobilities

On March 4, 2020, three days after a state of emergency was declared in Haiti, a video was disseminated and watched by thousands showing a saleswoman expressing her indignation at how the government was

4. See, for example, Bourcier (2020). An example of public debates on these projections on Haiti can be seen in Pierre (2020).

5. On the relations between the permanence of the *kriz* (crisis) and *chache lavi*, see Beckett (2019, 2020).

dealing with the pandemic. Such accounts illustrate the suffering and feelings of frustration which we find, of course, in many other places beyond this Caribbean country. The woman complains:

The President asks us to stay at home, but under what conditions? I have six children, I support my mother, my father, and I have a younger brother I also support. This is where I get by. Do you think I can stay at home wringing my hands? ... He asks us to stay at home, are we to die? If we stay home, it's not the coronavirus that's going to kill us, but hunger, misery. ... Just imagine, I'm used to cooking eight kilos of rice to sell on the streets, but now there's no movement here, I had to cook only two kilos. If I stay at home, I will die. If I die, I'll die in the streets.

Along with the restrictions to street trading, the economic effects of the pandemic soon intensified. Globally, remittances to Haiti were reduced by 15 percent throughout 2020, but if we focus on low-value remittances the slump is even greater.⁶ As with migrants in other places, many Haitians take up devalued and precarious positions in the job market. This is particularly evident with those who live in the US, which is host to the largest proportion of the diaspora and from which most of the remittances come. In a dynamic that is typical of other diasporic landscapes, the interdependence of Haitians at home and those in the diaspora intensifies the crisis provoked by the pandemic.⁷

In May 2020, in New Jersey, the Haitian migrant Ralph, who had been in the US for just over five years, expressed his concerns to one of the authors of this chapter, whom he has known for a long time: “Federico, I can't live like this. I don't know how I will send money to my family in Haiti next month. They need it! The car [Uber] has been parked for two months, people don't leave their houses. This disease may not kill us, but if I can't continue to search for life, it will destroy life”

6. According to World Bank, the decline in low-value remittances may be as high as 20 percent (World Bank 2020a). According to a report by the Banque de la République d'Haiti (Duroseau and Jean 2019), March saw 8.17 percent fewer remittances in relation to the same month in 2019 (see also Banque de la République d'Haiti 2020).

7. See also Cela and Marcelin (2020) and the webpage of the Global Knowledge Partnership on Migration and Development (KNOMAD), a think tank on migration.

(*Si m pa ka kontinye chache lavi, sa ka detwi lavi m*). The destruction of life is less about biological death than about the destruction of the landscapes where life is sought out.⁸

In July 2021, one of our interlocutors, who lives in Port-au-Prince, described as follows some of the effects of the decrease in remittances to Haiti:

As you know, Handerson, I myself live off the diaspora. If it were not for the diaspora, I could be begging for money today. During the coronavirus, the remittances decreased because they [the diaspora people] complain [that] they lost their jobs. When they received aid from the US government, they sent me three hundred dollars. I used it for food, bought large quantities to store at home, so I can live. Remittances decreased for all families. . . . Some people in [the] diaspora work in the care sector, and the people they care for passed away, so they ended up losing their jobs.

Faced with the high value of the US dollar in relation to the gourde, and the Haitian government's determination to prevent the receipt of remittances in foreign currencies, some people, particularly those that live close to the border with the Dominican Republic, move to the neighboring country to receive remittances in US dollars.

The COVID pandemic highlighted, on a global scale, the associations between immobility, suffering, and death. For our Haitian interlocutors in the *katye popilè* (shanty towns) of Port-au-Prince and in the diaspora territories, there is nothing exceptional about these associations. They are part of the everyday and they are part of history. In Plantationocene landscapes (Haraway and Tsing 2019), immobility elicits captivity, sorcery, and death. As Rodrigo Bulamah (forthcoming) carefully explains, *bare* (holding), *kenbe* (tying), and *kanpe* (restraining), among other terms, speak of bodies, moralities, and emotions. Following Lauren Derby (2015), he also remarks that witchcraft can take the form of illnesses that are sent to someone or someone's kin or property, and it is an instrument of power that can prey on or halt and cease movement. Mobility, on the contrary, is always synonymous with life and vitality, as stated in a popular proverb we were often told: *Kote ki gen grangou, kabrit*

8. As we can see in many creole proverbs and songs, such as the beautiful and sad poetry of Haitian troubadour (troubadou) Beken. The title of one of his songs is, precisely, *Chache Lavi Detwi Lavi* (Search for life destroying life).

pa mouri nan kòd (Where there is hunger, no goats die tethered to their ropes). The condition of slavery drives one to escape, to become a *marwon* (maroon). Poverty also drives one to move to *pran wout la* (take to the road), a synonym for life and hope (Montinard 2020).

The semantic field covered by the concept of *chache lavi* has movement at its core. People *chache lavi* daily, making ends meet on city streets, on country roads, along the paths of the diaspora, looking for a livelihood for oneself and those who are emotionally and morally close, persons who are “one of the others,” even at a distance.⁹ This permanent movement, attending to one’s own expectations and to those of others (Audebert 2012; Baptista 2019; Evangelista 2019; Glick Schiller and Fournon 2001; Joseph 2015 and 2019; Richman 2008), is morally constitutive of the person. As we learned from our interlocutors, movement stabilizes relations between those at home, and it upholds bonds with kin and ancestors, between those residents in a place and those moving within and across national borders — even if it achieves all of this at a physical distance. As we have shown elsewhere (Joseph 2020; Neiburg 2021), in these unstable landscapes, houses (in the country and the diaspora) are inhabited by people in motion, and mobile people inhabit many houses. Even children grow up in relation to several houses, accompanying their parents, or spending time with others while the parents are on the move. Movement is morally and relationally productive — while the moralities of relationality are the condition of possibility for movement.

Both people (Sheller and Urry 2006) and money (Maurer 2012) move: money is always circulating, for most people through small transactions between part-time jobs and marketplaces, slight gains, loans, and debts. Monies permanently mutate, moving between places and across scales, among gourdes, US dollars, Dominican pesos, euros and, in the last few years, Brazilian reals and Chilean pesos. Units of monetary value are at once moral, physical, and yet imaginary (Neiburg 2016). Monies and people cross geographical barriers and legal borders, technico-politically regulated by companies that facilitate monetary circulation (Western Union, Wise, MoneyGram) and by laws and devices that hinder the circulation of people (de Genova and Peutz 2010; Domenech 2017; Fassin 2011; Marcelin, Cela, and Dorvil 2017; Sheller 2018).

The pandemic altered global regimes of human mobility. Never before in the history of Haitian mobility has there been a movement back

9. On the category *moun mwen* (my person) and the languages of familiarity and kinship, see Dalmaso (2019).

to the country like the one we have been witnessing since the start of 2020. The land border with the Dominican Republic became turbulent soon after the outbreak of the pandemic. With the help of the International Organization for Migration, the Haitian Embassy in Santo Domingo and the Dominican Embassy in Port-au-Prince drew up a “Plan for Assisted Voluntary Return,” allowing more than 120,000 Haitians to return to Haiti. There were also reports of some additional 20,000 undocumented people being deported from the Dominican Republic at the same time. Among the reasons for these returns was the propagation of the virus in the Dominican Republic and the undocumented status of most Haitian migrants there, which prevented them from accessing government benefits and put them in a situation of extreme vulnerability (see, for example, Haiti Libre 2020b; GARR 2020).

Returnees suffered twice over. First, for the fact that their return was associated with the moral failure of searching a life in the diaspora, both for themselves and their relatives who remained in Haiti. Second, for the stigma of bringing the disease back to Haiti. Some became doubly isolated, through the quarantine demanded by the health authorities, and the moral and social shunning that accompanied their return. Moral dilemmas and health risks were frequently expressed in social networks, as when someone declared, “Dyaspòra pa vini propaje kowona nan peyi a” (Diaspora, don’t come and spread the virus in the country), which was countered by, “Pa gen pwoblèm, nou pa p antre nan peyi a, men nou pa p voye lajan tou” (Well, then we won’t return to the country, but we also won’t send any more money).

These tensions between life in the diaspora and the possibility of returning were a cause of constant anguish for people like Bernadette, a Haitian woman who has been living in Rio de Janeiro for nine years and who now suffers the double threat of the virus and the growing economic crisis affecting her South American host country. Speaking to one of us, Bernadette explained her plight: “There is no life here, there is no way I can stay in Brazil. If I stay, how am I going to help my family in Haiti?” She expressed her sense of failure and the moral risk of returning, as well as the stigma that is associated with the *moun diaspora* (diaspora person) who returns as a potential vector of contagion.

In early 2021, the change in government in the US brought hope (sadly not to be confirmed) for a politics less hostile to migrants, reactivating in South America the so-called *rwout Miami* (road to Miami) (Montinard 2020) through which Haitians living in Brazil and Chile undertook a long journey by land toward the US in the hope of settling

there, economic conditions permitting; or else that they could attempt to return to Haiti. This journey would lead them across frontiers lying in the Amazonian forest, the same frontiers that only a decade earlier were their entry routes into South America during the first wave of migration that brought the continent into the Haitian diasporic geography (Joseph 2015). With COVID, people now wanted to move in the opposite direction, yet border guards in Peru and Colombia had put up barriers in the forests to contain the passage of Haitians — mostly men, but also women and, in some cases, whole families — trying to escape disease and a recession that was heavily affecting Brazil. The pandemic instated a new regime for the government of frontiers (Álvarez Velasco 2020; see also, for example, Delfim 2021).

Caring

There is great risk involved in writing about a process that is still developing. Countries that at first seemed to be models of how to manage COVID later faced situations of extreme gravity. Others, for which high mortality rates had been predicted, such as Haiti, have not yet produced those numbers.

Speculations as to the reasons for the low incidence of the pandemic in the Caribbean country rely on four arguments: (1) underreporting; (2) a low proportion of old people among the population (life expectancy in Haiti is 63 years); (3) the stigma surrounding the disease, which favors concealment of the illness as cause of death; and (4) care among those who are close, particularly among kinspeople and within the home; and (5) the use of traditional medicine combined with the positive agency of the Christian God and the Vodou entities (*Iwa*).¹⁰

In August 2020, Haiti was one of the three countries (along with France and Mauritania) qualified as a model by the World Health Organization (WHO) because of its “domestic administration” of the disease (WHO 2020). The WHO’s assessment concerned not so much Haitian state policies but rather the efforts of a set of agents — including nongovernmental organizations (NGOs), international agencies, local civic organizations, families, and *medsen fèy* (plant doctors). In Haitian

10. For a general overview of speculations concerning the “mystery” of low rates of infection during the pandemic in poor countries (for now, at least), see Cash and Patel (2020) and Mukherjee (2021).

public debate, and in international debates concerning Haiti, a positive relation was thus established between the government of the disease and *jeni ayisyen* (traditional culture), in stark contrast to what Paul Farmer (2006) described for the HIV epidemic in the 1980s. At that time the media and renowned experts wrongly identified Haiti as the global center for the dissemination of AIDS due to its customs and cultural traits, Vodou practices, a supposedly uncontrolled sexuality, and a lack of proper care. Now this very same cultural tradition was said to be responsible for the low rates of SARS-CoV-2 in Haiti.

This is reinforced in the marked contrast between Haiti and neighboring countries. In the Caribbean, the only country that had numbers as low as Haiti was Cuba, which has a robust public health system that scores much more highly on social indexes than that of Haiti. When compared to the neighboring Dominican Republic, Haiti's low numbers stand out more starkly: with 333,000 infected and more than 3,800 deaths, the Dominican Republic had ten times more deaths per million people than Haiti, according to figures (by Worldometer and the Johns Hopkins COVID-19 Dashboard) from July 2021, in a population of about the same size as that of Haiti.

Despite Haiti's ongoing economic and political crisis, and contrary to the prevailing view of the "nonexistence" or "bankruptcy" of its health infrastructure, investment in health has been on the rise since the 2010 earthquake, through efforts by the state, NGOs, and international agencies. The latest report from the World Bank shows that investment in health in Haiti reached USD 13,100 per capita, slightly above the regional average, with 20 percent of this amount contributed by the government and 80 percent by international agencies and NGOs (Cavagnero et al. 2017). Haiti founded the Center for Permanent Information on the Coronavirus (CPIC) and the Multi-Sector Commission for Managing the Pandemic in March of 2020 to monitor the pandemic. During that year, Haiti received medical equipment from foreign countries, mainly from China. The World Bank promised to donate USD 20 million (World Bank 2020b). As the authorities continued to clamor for more international aid, they were berated by the population that was dissatisfied with the value of the benefits and the poor and corrupt management of the resources that were available.

Even so, these agencies ran educational campaigns in the media and social networks on hygiene (washing hands, wearing masks) and social distancing. Drawing on health agents in the communities and *medsen fèy*, they also encouraged people to take care in their homes, particularly

in densely populated contexts such as the popular neighborhoods and “ghettos” of Port-au-Prince. This happened in collaboration with the authorities of the country’s administrative divisions and international agencies, such as the Mirebalais University Hospital, which received the first COVID patients in March 2020,¹¹ or the Zile Foundation, which supplied one hundred doctors to the Dominican and Haitian governments in the border area (*El Día* 2020). In September 2020, echoing the WHO’s positive view of the Haitian model for managing the pandemic, Doctors Without Borders closed its health-care center in the Hôpital des Grands-Brûlés de Drouillard in the deeply impoverished neighborhood of Cité Soleil in Port-au-Prince. Cuba’s Henry Reeve International Medical Brigade, which had been present in the country since the 2010 earthquake, left one month later (*Le Nouvelliste* 2020a). During the same period, the scientific committee of the Université d’État d’Haïti released a widely circulated report that identified seventy-two plant recipes used by the population for preventing and treating COVID and reinforcing immunity (*Le Nouvelliste* 2020b).

The emphasis on traditional medicine and home care recalls forms of dealing with collective sanitary calamities that have become incorporated through memories of other tragedies, such as the AIDS pandemic and the cholera epidemic, the 2010 earthquake and the devastating seasonal hurricanes. We can think of these episodes as “acute-on-chronic events,” extending a concept proposed by Farmer (2011, 21) in his analysis of the earthquake. Such events — or “quasi-events,” in Veena Das’ (2015) terms — offer coordinates for action and care that incorporate issues like hygiene, which are just as critical for the control of the coronavirus. These forms of care can be better understood through the semantic field of *chache lavi* (searching for life).

At the start of the pandemic, the fear that gripped the streets when the first cases were announced was transformed into feelings of concern for the self (*chak moun pran swen tèt yo*) and for mutual care (*pran swen youn ak lòt*). In Haiti, as one of our interlocutors said, “it is necessary to always search for life. If you let your arms down, you die” (*an Ayiti, ou oblije chache lavi, si w bese bra w, w ap mouri*). People thus mobilized, even when in many cases they were forced to remain in a state of immobility, in order to search for life by caring for one another.

11. The Mirebalais University Hospital was founded in 2010 in collaboration with Partners in Health (called Zanmi Lasante in Haiti).

The Haitian diaspora, like all diasporas (Hage 2021), took on a singular density during the last decades through the use of digital social networks. “Remote communication” was part of diasporic landscapes long before the pandemic, fostering extreme familiarity with mutual experiences of being (Sahlins 2012) at a distance. Thus joy, expectations, and sadness are shared; help is offered; obligations are fulfilled; or projects are discussed, such as opening up paths for others to become part of the contact networks (*fè pati rezo kontak*), or acquiring documents such as passports and visas, or engaging in small business in Haiti and/or abroad. Care among those who are socially proximate and physically separated is constitutive of diasporic landscapes, shaped by the circulation of information and care, aid and money.

News on the pandemic first reached Haiti through the media but also, and above all, through the networks of Haitians in Europe, the US, the Caribbean and, later, South America.¹² The dilemma lived by those who considered a return or who began movements of return was accompanied by and molded through existing networks, as with everything in the routes of the diaspora. As Mélanie Montinard (2020) shows, during travel people accompany each other and care for each other. For instance, those who are permanently or temporarily established at points of the diaspora monitor relations with the *ajans* and *raketè* who mediate border crossings (and are usually generically, and mistakenly, identified with “coyotes”). Unexpected longer stays at certain stopovers may require financial help, sent by family or friends situated at other points in the diaspora — as when, for example, family members in the US, France, or Canada sent money to those held up at the border between Brazil and Colombia or Peru, or to the hundreds of Haitians who had to wait in the airports of Santiago for humanitarian repatriation flights (*Le Nouvelliste* 2020c).

Those who remain in Haiti or who move abroad are tormented by the possibility of not having funds due to the economic crisis generated by the pandemic, or the fear of disease and death far from close ones, with

12. “Kowona sou nou” (coronavirus is upon us), people would say. For a description of aspects of the “arrival” of the pandemic in Haiti, see Mézié (2020). Bulamah (forthcoming) describes similarities between views of the arrival of SARS-CoV-2 (thrown through the air from US airplanes, for example) and other pathogens, such as those that in the 1970s decimated Haiti’s indigenous Creole pig population, which had been central to family sustenance, evoking Haitian forms of conceptualizing interspecies relations.

little possibility of fulfilling the proper funeral rites. All of this disturbs regimes of mobility, intensifying feelings of suffering and frustration (on *fristrasyon* see Braum 2019; Neiburg 2017).

We followed closely, for example, a young Haitian woman who, after many years of planning, successfully joined her mother in Rio de Janeiro a little before the start of the pandemic. Just as she was finding her footing in the city, managing a small street shop that allowed her to finish her nursing studies and send remittances to family members in Haiti, she was infected by the novel coronavirus and died. Her mother's immeasurable pain was only mitigated by the arrival on the very same day of her sister and niece, who had begun their journey from Haiti to the south long before the pandemic.

Stories such as this one traversed the paths of Haitian mobility prior to the pandemic, strengthening bonds between those who remain in the country and those who move to points in the diaspora. People take care of each other — affectively, spiritually, and economically — and help each other in Haiti and in the diaspora circuits, sharing practical knowledge and taking decisions that are simultaneously individual and collective: to remain where and with whom, to leave when and how, to return when and how. These are daily dilemmas lived by diasporic subjects, exponentially intensified by the pandemic and increasingly aggravated by scarce resources, in Haiti and elsewhere, brought about by the economic crisis that has accompanied it.

While those that are outside of Haiti send information on their own fate and the course of the pandemic in various places around the globe, those in Haiti mobilize available resources to make do during the crisis in their search for life. In the shanty towns of Port-au-Prince and even in rural regions, markets are visited in a search for medicinal plants that increase immunity and offer protection from the disease; in some places *medsen fèy* go door-to-door to offer their remedies. Everyone moves, searching for life, taking care of those near and far, finding their way in streets and on routes. On their journey, people find their way in the “absence” of the state, activating narratives that constitute relations between people and government, fed by the memories of the country's endemic crises: “Nou pa ka konte sou gouvènman an, se Bondye k ap pwoteje Ayiti ak pèp la, nou oblije ap pran swen kò nou jan nou kapab, fòk nou chache lavi” (We cannot count on the government. It is God who is protecting Haiti. It is the people, it is us, who must take care of our bodies in our own way, who must search for life) (see also Beckett 2019; Kivland 2020; Trouillot 1990, 1995).

Final Thoughts

This chapter is based on long-term research by the authors, one an Argentinian/Brazilian and the other a Haitian/Brazilian, conducted in Haiti and in the Haitian diaspora. As we make clear in our account, the use of remote communication is integral to the landscapes we study. It has also allowed us to maintain, in these endless months of lockdown, our connections with family members, friends, and interlocutors. These connections have contributed data to the research on which this text is based. It has also contributed to the acute feeling of contemporaneity, synchronicity, and simultaneity (Fabian 1983) at a distance, which is proper to these pandemic times, and to the sense of a shared atmosphere of emergency (Beckett 2020; Neiburg 2021).

As we conclude, some countries have started to speed up vaccination against SARS-CoV-2, in the hope that this will provide protection against the new variants of the virus. The unequal availability of the vaccine in different countries reinforces social and economic inequality on a global scale. A number of voices claims that the disease may become endemic in poorer countries, which would heighten centuries-old inequities. Haiti's hope for vaccination at the moment includes the COVAX initiative, a partnership between the WHO and the Pan-American Health Organization announced in December 2020, and a promise by the Cuban government to donate vaccines from those they are producing for use in Caribbean countries.¹³ While they wait for the start of vaccination, the main preoccupation of Haitians in Haiti remains not so much the virus but the daily violence and political and economic crises that stem from the global effects of the pandemic, which have significantly increased the prices of basic foodstuffs.

As with other crises, protests against *lavi chè* (expensive life) are spreading throughout the country. These protests aim at more than the high food prices. They also involve a moral judgment of inequality and a demand for justice. The protesters denounce the impossibility of life for some and the exaggeration of life for others — an abnormality

13. As we finish this text, the first vaccines from the WHO consortium are arriving in Haiti. Meanwhile, vaccination in the Dominican Republic, which excludes Haitians, reinforces feelings of discrimination and inequality amongst the migrant population.

normalized and condemned for its immorality, as in one of the many Creole sayings that speaks to the relationality of poverty: *gran nèg jete, malerèz ranmase* (what the big fish discards, the little fish enjoys). Young people and adults demonstrate, children *dlo kreyòl* (distribute water by bringing it in buckets and serving it in small mugs), women make food in the streets (*fritay, chen janbe*) which they sell or even give away. *Lavi chè* celebrates life, collectively, even when it places life at risk in the context of the pandemic, the fire and smoke of the barricades, and the always latent possibility of violence. Or, as Omar Ribeiro Thomaz (2010) described when he was caught in the midst of the incommensurable catastrophe of the January 2010 earthquake, when it was impossible to see amid the dust that hovered over the city, and when people were calling to *Jezi* (Jesus) and *Bondye* (God) and communicated with the *lwa* (spirits): in that catastrophe women traders ensured the arrival of basic products and made and distributed food in the ruined streets, ensuring the supply of food, thus preventing widespread hunger and celebrating solidarity. Commensality, substances exchanged between persons and more-than-human entities, life in motion. As Michael Jackson (2011) wrote, hunger is also a metaphor for life and for drive, underlining the movement against stasis. Demonstrating against *lavi chè* is also a means to *chache lavi miyò*, to search for worthy and full life.

Haiti is distant from the international debates on the COVID pandemic. The position of the Caribbean country seems to reactualize durable images of silence that mix the odd with the extraordinary (Trouillot [1990] 2000) and that express moral judgments and political stances that accentuate inequalities. Our Haitian interlocutors in Haiti and in the diaspora inhabit inequality, searching for life. And by *chache lavi miyò* they experience and thematize the events that mark the ordinary flux of daily life. Periodization (“the time of the pandemic,” “the time of the earthquake,” “the time of Hurricane Matthew”) marks events and inserts them into an open-ended temporality, into a horizon of movement.

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