

# Covid-19's pandemic braking policies: a rise in generality of disorder to limit irreversibilities

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## Abstract

The Covid-19 epidemic generated a situation in which, in many countries, the health system could not handle the situation alone, leading governments to institute limitations on travel and social interaction. These measures led to a flurry of changes, temporary or more lasting, in social relations, forms of work, police surveillance, economic activities, education, food circuits ... If one measures the generality of a phenomenon by the diversity of the spheres of activity affected, then lockdown is a rapid and massive rise in generality that can be considered a form of disorder. Just as a therapy used to preserve a patient's health can have side effects that are disorders in a patient's body, so the measures to curb the epidemic have effects on various aspects of the social world. This analysis is supported by results from a survey conducted in France during the spring 2020 lockdown among more than 16,000 people, and then repeated in December 2020 and January 2021 among 3,620 people who responded to the first survey.

## 1 Introduction

In contemporary societies, social life is largely organized in "spheres of activity", contexts regulated by institutions: economic activity, health, family life, politics, etc. Each sphere presents mechanisms that have the effect of transforming the unpredictability of individual paths into statistical regularities and relative collective predictability. The health system takes care of the various pathologies that affect people and limits their effects as much as possible. For individuals, health is a source of great uncertainty. But, in ordinary situations, at the level of the system, this uncertainty is framed by organized responses that result in fairly regular statistical distributions. At the individual level, a health problem can "spill over" into work or family life, but at the collective level, the health system is not supposed to create strong uncertainties in other social spheres.

The Covid-19 pandemic generated a situation in which, in many countries, the health system alone could not manage the situation, prompting governments to take measures to limit travel and collective activities that disrupted other social spheres. The lockdown solution as implemented in the spring of 2020 in countries such as Italy, Spain, France or the United Kingdom, is an overflow of great magnitude, affecting economic life, the family sphere, the educational world, etc. If the generality of a phenomenon is measured by the diversity of the spheres of activity concerned, then the lockdown

is a brutal and massive increase in generality, which obviously translates into a situation of even greater uncertainty for people. The other measures to curb the pandemic (curfews, health pass) were more limited in this respect, allowing most economic and educational activities to continue, but still strongly restricting leisure activities, social interactions and interpersonal relations.

If one thinks of restraint measures as a kind of societal therapy designed to limit the effects of a pandemic, then it is useful to examine its side effects in the same way as one does for drugs. Since the therapy is political and concerns social activities, the side effects are not on the health level but on the level of social activities, notably life courses and relationships between people. The adaptation of the health care system to the situation is analyzed by various researchers [1], but is not the subject of this text. Whatever one's judgement on the appropriateness and relevance of these measures, and there seems to be a broad consensus that they are justified in the face of the virulence of the epidemic, it is useful to assess their social effects.

In this paper, I attempt to do so partly on the basis of a survey conducted in France during the spring 2020 lockdown among 16,224 people, then repeated in December 2020 and January 2021 among 3,620 people who responded to the first survey and left their address. This survey focused on residential status (housing type, household composition), work status, feelings about the situation, and personal relationships.

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In what follows, I will first develop the theoretical framework on which I rely and then present some of the results of the survey on social life during the health crisis to show some aspects of the rise in generality.

## 2 Theory and vocabulary elements<sup>a</sup>

If social activity often appears disordered, it is obviously not entirely so. If it were, people would not be able to live together. There are social orders that can be more or less constraining. These social orders do not fall from the sky, nor do they result from any natural law, nor are they inscribed in the genetic baggage of the species. They are the fruit of historical processes that have led to the emergence of what appears, in a given situation and for a given population, as a set of **coordination resources**. These resources strictly define, or suggest, or are only supports for determining what it is essential, desirable, or possible to accomplish. People go to great lengths to coordinate themselves, to perform activities that they deem necessary. The sick must be cared for, classes must be taught on time, vehicles must be repaired, etc.

### 2.1. Spheres of activity and institutions

In the social sciences, many notions have in common that they deal with interrelated activities and that, through their relationships, draw processes with relatively regular rhythms and rather stable frameworks. Here I use the old expression of Max Weber, "**sphere of activity**" to designate a set of activities sharing resources. In the relatively stabilized, identified and instituted spheres, there are in the current States, administrations, bodies of specialists, ministries, social science specialties: arts; sciences; family; health; education; labor; economy; justice; defense; etc. The list is not fixed, it is taken in historical evolutions where spheres emerge, merge in others, disappear according to the social processes and the political balances, but this evolution takes place on relatively long durations. Spheres of activity involve resources that define their coherence, that frame them, some of these resources being bodies of professionals whose role is precisely to carry out this framing. These framing elements, which promote the continuity of the spheres of activity, are sets of coordinating resources that can be designated as **institutions**. These institutions are of course associated with forms of political power.

### 2.2 Predictability, unpredictability, disorder<sup>b</sup>

Coordination resources and the institutions that integrate them produce a certain predictability of social situations, for the people concerned and for observers, and limit the amplitude of the possible consequences of these situations. **A disorder is defined here as a**

**significant change, for the people concerned and for observers, in the predictability of situations and in the amplitude of their possible consequences.**

In many situations, people do what others expect them to do, especially when a role can be used to support these expectations: a doctor heals, a teacher teaches, a parent cares for a child, and so on. This predictability is obviously not absolute and cannot be equated with determinism. People always have the possibility of deviating more or less from the roles, or more generally from what others expect of them, at the risk of being misunderstood, disapproved of, or sanctioned in a more formal way.

But activities are not always meant to be predictable.

In many cases, individuals or collectives organize, even plan, situations with a high degree of unpredictability. Elections are an example of these situations corresponding to a **first type of unpredictability**: the candidates are known at least a few weeks before the event, it is carefully programmed in time, framed in multiple ways to allow for individual choices that are supposed to be independent of each other at the time of their expression (voting booths, ballots, ballot boxes, etc.). The unpredictability of election results is an essential condition of the democratic order. At a more individual level, exams, competitions and other job interviews appear as situations of this type, where the possible outcomes and the moment are programmed but where the unpredictability of the situation is high. In this case, however, what is highly unpredictable at the individual level is routine at the more aggregate level: one cannot predict the success or failure of a given student in an examination, but the proportion of those who pass obeys statistical regularities. In the case of competitive examinations, it is even fixed at the outset.

In other situations, which fall under a **second type of unpredictability**, the possible outcomes are more or less known, but not the moment of occurrence of the situation. Here again, we can distinguish between cases where unpredictability is at an aggregate level (climatic events for which we have standard responses, for example) and those where it concerns more individual levels (illness, loss of employment, damage to a dwelling) and corresponds to collective frameworks (insurance systems, regulations, presence of professionals managing these situations, etc.) and statistical regularities.

In a **third type of unpredictability**, the moment of occurrence is more or less known, but not the possible outcomes. A diplomatic negotiation takes place, but we do not know what can come out of it, unless we stick to very general categories (war or peace, for example). Life-cycle transitions follow a similar logic: we know more or less where the period of transition to retirement is located in contemporary France, but it is difficult to predict what the people concerned will do (unless, again, we use very general categorizations).

In the first three types of situation, unpredictability is framed by institutions that limit the possible consequences or the period of occurrence of situations in which it is strongly present. But there is at least a **fourth**

<sup>a</sup> This section includes elements of a work in progress to develop an ontology for the social sciences (see [2]).

<sup>b</sup> This section summarizes the analyses presented in [3]).

**type of situation**, in which neither the moment of occurrence nor the possible outcomes are predictable. These situations are often (when the consequences are considered negative) qualified as "catastrophes": unanticipated climatic events, the unexpected outbreak of a conflict that we thought we could avoid (the First World War), brutal changes in living conditions. Often, these situations correspond to "overflows" of different collective frameworks. These are the "systemic crises" described by economists, in which a problem that has arisen in a particular sector (housing finance in the 2007 crisis) "contaminates" other economic sectors and can trigger social and political crises. At the level of individual trajectories, similar cases are quite frequent: for example, when a loss of employment is accompanied by a health problem and then by a family breakdown, the trajectory then shifts into a completely different logic. In this case, the collective frameworks (unemployment insurance, health system, family reconciliation mechanisms) may be overwhelmed and gradually undermined.

This typology is reminiscent of older ones, in particular that of the economist Frank Knight, who distinguished between risk, a term he used to describe situations in which probabilistic models could be used, and uncertainty, when the use of models is not possible ([5]). Knight's risk corresponds to the first two types that I have described, and uncertainty to the other two. Of course, this typology does not exhaust all the possibilities, but it allows us to identify the most common cases.

**Table 1.** Forms of predictability of social situations

Time of occurrence  Outcomes	predictable	unpredictable
<b>predictable</b> (possible formalization: Knight's "risk")	<b>1. Crossroads</b>  <i>Level of individual courses :</i> academic orientation, competitions  <i>Collective level :</i> elections, sports competition	<b>2. Anticipated risk</b>  <i>Level of individual pathways:</i> sickness, unemployment  <i>Collective level :</i> Anticipated climatic or technological events
<b>unpredictable</b> (impossible or very difficult formalization: Knight's "uncertainty")	<b>3. Programmed status change</b>  <i>Level of individual courses :</i> life cycle transitions  <i>Collective level :</i> diplomatic negotiations	<b>4. Crisis</b>  <i>Level of individual pathways:</i> contagion of unpredictability between spheres of activity (work, health, family, etc.)  <i>Collective level :</i> unanticipated climatic or technological disasters; "systemic" crises

A situation can evolve from one type of unpredictability to another. For example, a failure at school can lead to family problems, a dropout and a more or less serious crisis situation (moving from a crossroads type situation - type 1 - to a crisis situation - type 4). Conversely, a situation with unpredictable outcomes (type 3 or 4) can gradually turn into a choice reduced to a few well-defined options (type 1 or 2). This is probably what happens most frequently in situations of uncertainty in Knight's sense: they begin with loosely defined outcomes but then evolve into situations of the first line by narrowing the horizons and abandoning certain options.

### 2.3 Irreversibilities

We can call **irreversibilities** the non-negligible effects of the activity. These are consequences that outlive their causes or, more precisely, configurations of people and resources whose maintenance over time has different causes from those that explain their emergence. Of course, the assessment of whether activities are insignificant or not is relative to the perspective of the observer or persons involved, and the criteria to which they refer, explicitly or implicitly. These irreversibilities are always relative: the elements created are irreversible only insofar as they survive their moment of creation and intervene in subsequent situations. The notion of irreversibility implies, however, that deconstructing what has been constructed, or undoing what has been done, is not the same as returning to the starting point. We can try to make the future resemble the past, but we cannot easily cancel the traces, material or immaterial. These traces allow historians to do their work.

The unpredictability of situations is not necessarily associated with irreversibility. Let us explore the cases of figure drawn by a crossing of these two characteristics of social situations. First of all, we can have predictable situations with no great "significant" consequences, without creating irreversibilities, which corresponds to the first two situations described in the previous section. This is the register of **ordinary activities**. These activities are not without consequences, they maintain social order, make actions predictable, and shorten decision-making processes. They also tend to oppose changes, contributing strongly to certain blockages. Taken together, ordinary activities form an essential fabric of social life. But, considered in isolation, each one generates little irreversibility.

Sometimes, highly unpredictable sequences do not produce significant change. A change has been made possible, but the outcome of the situation is in continuity with the previous situation. A couple almost separated but did not after a period of hesitation. A student was encouraged to go into an undesirable and socially unlikely section, but was able to escape this decision. A job opportunity involving a significant change (in location, duties, occupation) was considered but ultimately passed up. A war or crisis was narrowly averted. Threatened for a time, **the equilibrium was maintained**.

On the other hand, very predictable sequences sometimes lead to strong irreversibilities, **changes of state**. This is true of all the phases of change of status in the life cycle (passage to adulthood, retirement, etc.), which are often marked by rituals that have the effect of marking the irreversibility of the change made. This category also includes all situations of gradual change, which occur through small, predictable adjustments (without a break in the continuity of a series), the accumulation of which ends up producing strong irreversibilities. When there are threshold effects, gradual changes of the routine type lead to more abrupt and significant changes.

Finally, in the fourth case, sequences with a high degree of unpredictability produce significant irreversibilities from the analyst's point of view. Some authors reserve the term "action" for this case of figure [4], others apprehend it through the notion of event [6], others finally use the expression of "turning point" [7, 8]. Like other researchers, I have used the term "**bifurcation**" when these significant effects are associated with a certain level of unpredictability.

### 3 The case of policies used in the covid-19 crisis

The Covid-19 pandemic has created an unprecedented situation in the world, not so much because of the nature of the virus and the pathologies it causes, but because of the reactions the pandemic has provoked in health systems and political circles. Historians have recalled the existence of much less severe but in some respects somewhat comparable pandemics in 1956-1958 and 1968-1969, as well as the SARS epidemic in 2002-2003. The specificity of the 2020 pandemic is obviously its scale and geographical distribution, with all continents affected, the very rapid characterization of the virus and the development of tests, then therapies and vaccines. But above all, this health crisis is characterized by the fact that the public authorities have taken measures that are often unprecedented in order to avoid overloading the health system: travel restrictions, isolation of people carrying the virus, screening (which varies from country to country), and above all, in several countries, variable forms of general lockdown of the population or curfew.

In an "ordinary" situation, the health system deals with pathologies and epidemics (including global ones such as the so-called "seasonal" flu). Its "overflows" into other spheres of activity are essentially in the register of demands relating to public policy. In the case of the 1956-1958 and 1968-1969 pandemics, it took time to understand the nature of the virus and public authorities did not put in place specific measures to slow the spread of the virus and the increase in the number of people hospitalized.

The current pandemic is clearly much more severe in terms of the number of deaths (nearly five million worldwide as of October 26, 2021) and the number of people hospitalized. This severity, together with the relatively early characterization of the virus and the

epidemiological analyses available, and perhaps also the increasing penal threats to the political leaders in charge of managing this type of crisis, have led several governments to adopt important measures to slow down the epidemic in order to limit the overload of the health system.

Measures to control the spread of the virus have had the effect of spilling over the crisis, and the uncertainty associated with it, into other spheres of activity. In France, the lockdown in the spring of 2020 (March 17 - May 10) severely limited travel outside the home for the majority of inhabitants, thus modifying all activities: family life, consumption, associations, work, culture, etc. This radical increase in generality makes it a major event that questions the whole of the social sciences, which have mobilized a lot to observe and analyze it. The first general lockdown was followed by more local measures and a return to a more ordinary regime in many areas: resumption of most economic activities, family gatherings, schools and universities, etc. The number of cases and hospitalized people started to increase rapidly again in September and the health system was once again in difficulty, to the point that governments again took measures to slow down the epidemic. In France, the authorities initially chose to establish a curfew in the most affected large cities, then from October 31 a second general lockdown, more flexible than the previous one, before returning to a curfew. The measures chosen this time aimed to avoid blocking the economic and educational spheres in order to concentrate on leisure and social activities. These measures organized a new, more limited overflow, but still had important effects on many social activities. Subsequently, other curfews and partial lockdowns (April-May 2021) were decided, before the introduction in the summer of 2021 of the health pass, a document certifying that people are vaccinated or have been tested negative less than 72 hours before.

This brief chronology shows the particular temporalities of a health crisis with its accelerations (the "waves" of contamination and the measures they have provoked) and its slowdowns (the "decreases" and "plateaus" of the epidemic curves, the "relaxation" or "loosening" of the constraints decided by the governments). The spillover of the health crisis on all social activities produces cascading uncertainties that disrupt all social temporalities.

The following analysis focuses more specifically on two aspects of the effects of the crisis linked to the Covid-19 pandemic and the measures aimed at containing it. At the level of life courses, the global crisis is combined with changes in professional activities, housing configurations, with the reception of people or changes of residence for lockdowns, postponement of projects. Some people have experienced major changes in their work (loss of jobs, switching to telecommuting, etc.), others have seen their family situation change (pairing up accelerated by the lockdown, or on the contrary separation), and of course people may have been affected in their health. Some projects were suspended or abandoned, while others were accelerated. At the level of social relations, the restriction of face-to-

face encounters has tested the links between people, shaken up forms of sociability and modes of communication. Strong old ties were reactivated in the context of the crisis, other weaker ties that are very present in ordinary situations (work or social relationships, for example) were withdrawn, and others were strengthened through this experience.

## 4 An empirical study of the impact on life courses and interpersonal relationships

The Life in Lockdown (VICO) survey, which began with a first wave of online questionnaires completed between April 14 and May 10, 2020 (responses were made by 16,224 people aged 18 and older, residing in metropolitan France) [9] and a second wave, conducted online from December 17, 2020 to January 26, 2021, to which 3,620 people responded out of the 5,400 who had left their address and given their consent to participate in the rest of the survey. Both surveys included questions about household composition, marital status, living and working conditions before the first lockdown, during the first lockdown, and then at the end of the year. In the second questionnaire, questions were specifically related to the effects of the health crisis on residential, family and professional projects, and their temporalities. The data make it possible to analyze the way in which, according to the respondents, the crisis led them to modify or give up possible projects (getting into a couple, having children, separating, changing jobs, going back to school, changing housing, accessing property, etc.). In addition to the analysis of the quantitative data, I use the answers to the open-ended questions - proposed in the two questionnaires - which allowed people to describe their situation in more detail. As this text is primarily intended for a discussion of the issue of the disruption induced by policies to contain the epidemic, the empirical elements that follow are intended to give a succinct view of the disruption induced by these policies, as more detailed analyses of these data are available elsewhere [10].

### 4.1 A variety of residential situations

The first lockdown (March-May 2020) led many people to change their housing. In the VICO survey, the proportion of these people is around 8%, but the sample contains biases (over-representation of women, young people and those with higher education). By correcting for these biases and taking into account the results of other surveys, we can estimate this proportion at 5 to 6%. If we take into account people who have taken in others and those who have seen a member of the household leave (for professional reasons, confinement with vulnerable relatives, reunification of a couple whose members usually reside with their families, etc.), it is between 10% and 15% of French adults who have experienced lockdown configurations different from their usual home.

The people who changed their housing for the first lockdown were mostly young people: in the VICO survey, 69.8% of them were between 18 and 30 years old. Most of them were students living alone in cramped quarters and returning to their families. While in the majority of cases, this return to family life seemed to go well, it also sometimes created tensions. Some comments express this particular situation very well: *"Having to return to live with your parents with your sister, because you no longer have an income due to the cancellation of an internship, is not a profitable situation, generates huge tensions between all members of our family."* (female, 23 years old, changed housing to join her parents and sister - previously she was in a roommate with 2 other people). In general, youth who changed housing for lockdown had an even harder time maintaining relationships with friends than others and more often saw their family ties strengthen but also deteriorate more often than other persons their age. After the first lockdown ended, youth returned to residences independent of their family's, and most of those who had changed housing for the lockdown did not repeat the experience. But, as discussed below, the effects of the first lockdown and the conditions under which it occurred had lasting effects on their personal relationships.

The home confinement of the first lockdown affected many aspects of domestic life, from the division of labor within households (which led to women taking on much of the extra domestic work involved in cessation of eating out and various services related to that aspect of life) to the sometimes difficult sharing of space for those telecommuting to the additional demands of children. There are many works that address all these issues, which I will not develop here. However, I would like to draw attention to the particular situation of people who have been confined alone. For most people, living alone is accompanied by more outdoor activities than for people of the same age and by a more intense sociability with friends. The constraints of the lockdown and other movement restrictions led many people to feel painfully lonely, as one respondent put it: *"Just to say that the most burdensome thing for me is really the loneliness. I'm lucky enough to have a cat, but I haven't had physical contact with a human in almost a month and a half. Meeting with cashiers or the cleaning lady, talking with colleagues while telecommuting, video conferencing, and making many, many long phone calls are not enough to fulfill my need for human contact."* (woman, 37 years old, journalist, alone, mentions losses of contacts - neighbors, colleagues).

Generally dedicated to the family and intimate sphere, the place of residence became for the duration of the lockdown, and sometimes remained so afterwards, a place of work, studies, school accompaniment, coordination of associative actions. Massively during the first lockdown, then in a less marked and more varied way afterwards, the place of residence was the concrete place of the rise in generality of the social changes induced by the crisis.

## 4.2 Changes in employment status and income

The Spring 2020 lockdown has changed the working conditions of a great many people. Many have had to suspend or greatly reduce their activities (partial or technical unemployment, closure of businesses or services), others have had to work in a different way, with modified schedules or remotely. In the VICO survey, in which highly educated are over-represented, 46.4% of those employed were fully telecommuting during the lockdown. Other studies give lower estimates (21%) [11], others give a proportion of 30%, in any case much higher than the proportion of people teleworking before the crisis. Obviously, telework is not equally accessible to all occupational groups and its eventual continuation as well. At the time of writing, it is not yet known how this proportion will evolve, but most experts agree that it will not return to the pre-crisis low which was estimated at less than 5% [12].

In summary, 45.3% of VICO survey respondents have not experienced any change in their workload or working hours (excluding telecommuting), 47.5% have experienced a reduction in their workload (partial or total unemployment, closure of businesses or services) and 7.2% have experienced changes in working hours without a reduction in workload (increased working hours, especially in the health sector, shift work, etc). Those who reduced their work volume were more likely to experience a drop in income, while those who experienced changes without a reduction were more likely to experience a deterioration in their working conditions.

## 4.3 Projects turned upside down

The long-term nature of the crisis and its repercussions on people's economic, family and residential situations can also affect people's plans and time horizons for changing housing.

In our second survey, we asked about changes in housing plans (starting, accelerating, delaying or abandoning a purchase or rental project), family plans (becoming a couple, separating, having a child, etc.) and work plans (changing jobs or positions). Of those who responded, 32.6% answered positively to at least one of these questions.

Adjustments in housing plans may be directly related to changes in personal and professional life or to future changes, more or less anticipated. For example, the proportion of people who say they have postponed or given up on a housing project is 12% of those who have seen their income decrease significantly, whereas it is 6.9% for all the people who answered our questions. The small self-employed are particularly numerous to find themselves in this case.

The crisis is also disrupting family plans and, in a related way, housing plans. It has given the opportunity to non cohabiting couples to try living in the same dwelling. Moving in with the other person, which is a stage in the conjugal process, was accelerated by the introduction of lockdown. But people's ability to adapt to the new constraints linked to the crisis in order to move

on is unequal depending on their family situation and the resources they have to adapt housing to their new situation. Laura, 34, and her husband, both executives, sold their three-room apartment in the Paris suburbs between the two lockdowns to buy a house. While they were planning to move in the near future to adjust the space to the growing family, the experience of the first lockdown prompted them to move sooner than expected: *"Living in an apartment with a young child was hard to bear during the first lockdown. Needed space with the arrival of our second child."*

As the health crisis takes hold over time, people experience changes in their situations in the three spheres of housing, family and work. Their lives are profoundly altered over a relatively short period of time, without necessarily anticipating or even considering the changes they experience. This interpenetration of spheres of activity, which affects a minority of respondents (1.6% of those who answered the three questions), reveals situations of vulnerability reinforced by the crisis. Workers, employees and the "small self-employed" (craftsmen, shopkeepers, farmers) are over-represented: the proportion of people reporting changes in plans in all three areas at the same time reaches 2.8% for these categories. More exposed to the reversibility of situations, their stability is based on a fragile balance, which forces them to readjust their projects in depth to adapt them to their new situation.

## 4.4 Personal relationships put to the test

One of the objectives of the VICO survey was to study the effects of the crisis on interpersonal relationships. The first wave of the survey (April 14 - May 10) included a series of questions on relationships, which allowed us to make an initial analysis of the test that the lockdown has put on this aspect of social life.

The effect of the constraints on interactions and gatherings was most marked among the youngest participants, who were single or in a recent relationship, without children, and who were very involved in socializing with friends. They were not able to maintain certain ties, but created others, especially online. For those who returned to their parents' homes for the first lockdown, many of whom were students, the newfound cohabitation with the previous generation sometimes strengthened ties and sometimes created tensions. Maintaining friendships was more difficult in this situation.

For those in employment, the relational logic varied greatly according to the work situation on the one hand, with the particular case of those who had to work longer or staggered hours, and the family and lockdown configuration on the other hand, with the particular difficulties experienced by those confined alone.

The older people had their relationships less disrupted by the situation, which appeared to be less of a rupture for them than for their younger counterparts, even if some people living alone experienced increased, even unbearable, loneliness.

In this particular situation, people turned primarily to family or close friends, concerned about their health and

well-being, supporting them emotionally, sometimes providing material and practical assistance, and receiving the same support in return. We find here a classic result of studies on personal relationships [13], which is that, in emergency or crisis situations, people rely primarily on "strong" ties with people they trust, with those close to them. However, weaker ties (colleagues, neighbors, associations) were also put to the test, sometimes strengthened, sometimes degraded. A sorting out took place, perhaps lasting. New ties were created, often with neighbors, as digital technology was a lesser source of new relationships, including for young people, even though they used it much more than respondents in other age groups.

Differences related to level of education or profession are found where sociologists expect them to be, given what we know about variations in personal networks along these dimensions. It is difficult to know at this stage of the analysis whether lockdown has reinforced or reduced differences in personal networks. If the less educated were less affected in their weak ties, they were as much affected as the more educated in their strong ties, and the relationships that were damaged or lost sight of were more irreversible.

During the first lockdown, women were more involved in maintaining their social ties, whether they were close family members or weaker ties (neighbors, acquaintances). In a context where part of the work relationships were withdrawn, it was women who, as is the case in ordinary situations, but even more intensively in this unprecedented situation, were the most involved in maintaining other types of ties, particularly in the area of social support. They contributed more than men to maintaining interpersonal relationships.

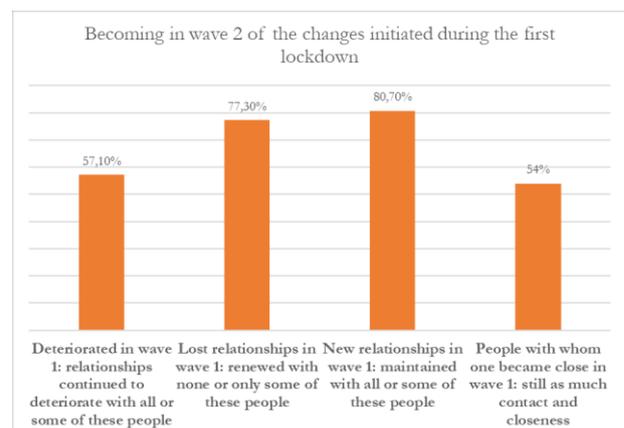
People who are locked down alone have more often than others experienced difficulty in maintaining a social life, to the point of feeling the isolation or solitude as burdensome and in some cases unbearable. Solitary confinement was a particular experience for all age groups, but it did not translate in the same way into interpersonal relationships. For young people, this situation was an opportunity to renew friendships, sometimes in a positive way, whereas in the other age groups it more often led to experiences of loneliness, which are mentioned in the quotations in the sections devoted to people locked down alone.

Wave 2 of our survey shows that, on the whole, the period concerned (17 December - 26 January) appears to be a sort of settling into an ordinary crisis situation compared to the first lockdown: many single people who had been locked down in the spring with other people have returned to the previous situation, contacts with family and friends seem to have gone from a crisis logic, with increased solicitation of relatives, to a logic of return to a constrained ordinary, the settling into a long-term situation. This ordinary situation is indeed very particular, with the constraints being strongly felt in all the responses.

As far as relationships are concerned, eight or nine months after the wave 1 responses, many of the changes expressed during the lockdown are considered to be still relevant: a good part of the relationships that were

deteriorated, lost sight of, new or strengthened during the first lockdown have remained in the same state or have pursued the same dynamics (Graph 1). In other words, after the shock of the first lockdown, social relationships remain disrupted, even damaged, and continue to deteriorate in a more continuous and progressive manner.

**Figure 1.** Lasting effects of lockdown relational changes



Field: respondents in wave 2 (3,620) who cited deteriorated (488), lost (1,352) or new (753) relationships for the first three bars, 1,1243 relationships cited in wave 1 by respondents in wave 2 for the last bar.  
 Interpretation: 57.1% of respondents who mentioned deteriorated relationships in wave 1 say that at least some of these relationships have continued to deteriorate.

The initial lockdown thus probably initiated a reconfiguration of personal networks that continues as the crisis lengthens. The crisis will eventually end, activities will resume or be replaced by others, and the contexts for creating and maintaining relationships will be reconfigured again. But it is likely that personal networks will retain traces of this period through the renewal of relationships that took place.

## 5 Conclusion: accept the disorder to avoid irreversibility

The crisis is not yet over, and the data collected by the various social science surveys are far from being fully analyzed. I have used some of the results of the VICO survey and others to reflect on the link between predictability, irreversibility and disorder.

By overwhelming the health care system, the pandemic brought to light the threat of a very large number of deaths (potentially several tens of millions on a global scale) and even more cases of serious after-effects, which appeared as serious irreversibilities for the populations concerned. Faced with this risk, which could be formalized and evaluated (the second type of unpredictability mentioned above) but whose consequences were considered unacceptable, governments decided to take measures to limit travel and collective activities, which in fact increased the generality of the process, the health problem also becoming an economic, educational, cultural, family, and social problem in a word. While health problems

have economic, educational and cultural aspects, they rarely involve such rapid and massive changes in these different areas of social life. The measures intended to limit the effects of the pandemic have in fact introduced disruptions, a disorder, in many spheres of activity. A bit like a medicine intended to fight a pathology has side effects, the social therapy put in place to curb the pandemic has side effects in various spheres of activity, effects that need to be studied. The first results of social science surveys conducted since the beginning of the crisis indicate an increase in certain inequalities (notably between people of different professions and between men and women for periods of lockdown in particular). They also show that it is young adults who have been most affected by the measures limiting travel and collective activities, both in their studies or professional integration and in their personal networks. Generally speaking, it seems that networks will retain traces of this period.

It is, of course, still too early to draw lessons from this health crisis, but social science surveys show the need to monitor the medium-term social effects of the disorder it has caused.

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