

Globalisation: Rethinking Development in the Context of the Pandemic

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Abstract

The stark reality of human existence with a predictable 90 per cent of most reported cases emerging from these showcases of development, urbanisation, and industrialisation — our cities and towns tell us something that we cannot ignore. The cities took the brunt and revelled as the epicentres of the pandemic and a public health disaster, with the lockdowns remaining prolonged, severe, and even punitive in many cities of the world. We discuss here, the impacts of unprecedented crisis as we continue to rely on a globalised economy, and gaze at the helplessness with which the state handles our lives and appears to compromise our destinies through in a market full of uneven players. COVID-19 first hit the global power centres, the developed nations, and the business capitals in developing countries. Excited holidaymakers cruising passenger returnees from Ruby Princess began infecting others and those others infected capital cities like Sydney and Melbourne, Australia. It is intriguing and highly disturbing that how responsibility for a disease that travelled across borders with passports and through commercial airlines came to be laid at the poor of Mumbai's slums or Brazil's favelas. It is really the well-off and the powerful who seem to rule the roost in cities. The density of populations in urban habitats and the intensity of local and global interconnectivity have made these urban habitats clearly more vulnerable to the spread of the virus. Be it the social housing that is vertical for low-income earners in Melbourne or the urban sprawls of Dharavi, Mumbai; evidence suggests that density *per se* correlated to higher virus transmission.

Keywords: Globalisation; COVID-19; Urban Sprawls; Inequalities; Urbanisation

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Introduction

Urban areas were the epicentre of the COVID-19 pandemic, accounting for 90 per cent of all reported cases and many of whom died as a result. Cities responded aggressively to the crisis, with several of them experiencing stressed health systems, inadequate water and sanitation services, and a slew of other difficulties and shortages. According to United Nations Secretary-General António Guterres in 2020, this pandemic exposed nearly 25 per cent of the world's population who live in poorer urban areas amidst deep-rooted inequalities (United Nations, 2020a) to the virus. Physical separation is impossible in our cities and towns, as well as in the public transportation systems that appear to operate in these cities. The COVID-19 pandemic has turned our abundance into a source of vulnerability. In London, the tube is used by three million people. In Melbourne, approximately 1.5 million people use public transportation, while in Mumbai, about 7.5 million people use public transportation. What happens to the concept of social distance This social distance is currently an unwelcome and expensive characteristic of urban environments, and it is likely to remain so in the future.

In this article, we define and explore the influences that globalisation and urbanisation have had on COVID-19. Following this, we provide a critical view of those impacts and question the rethinking of these ways of being. We then discuss the challenges that migration and high-density housing has had on managing the health impacts of the pandemic. We then place COVID-19 within the centre of urbanisation and explore transit connectivity and migration trends. Finally, we critique the culture of individualism and the way that COVID-19 protections have brought forth a collectivist way of being to look.

COVID-19 Impacts

Residents of cities from lower socioeconomic strata, older age groups, people with disabilities, and various refugee and immigrant communities

are concentrated in large numbers in urban areas. The majority of those who died and were the most severely affected by the pandemic belonged to these groups, highlighting the growing inequalities that exist in all of our societies and globalised economies. The debates surrounding the pandemic on opening national and state borders, instituting extreme measures in social distancing and quarantine, and how to keep the local economy alive are all raising questions about the efficacy of a globalised economy and the race to urbanise geographical space at the expense of possible promotion of more local and sustainable development, all of which are central to the debate. As a result of our revisiting the current development mantra, we have come up with some plausible rethinking ideas.

In the wake of the COVID-19-induced pandemic, which has already caused widespread devastation around the world, including \$8.5 trillion in economic damage over the next two years and affecting 213 countries, there have been 36,361,054 confirmed cases of infection, with 1,056,186 deaths recorded as of 10 October 2020, according to the Center for Disease Control and Prevention (CDC) (United Nations, 2020b; Worldometer, 2020). Figures 1a and 1b provide an overview of the fatalities of COVID-19 cases (Worldometer, 2020).

Australia's geographic positioning on the world map and its considerable land mass with fewer people when compared to the US and UK are some of the factors slowing down the spread of COVID-19 in the country (O'Sullivan et al., 2020). Approximately 220 countries and territories had been confirmed to be affected by the coronavirus disease (COVID-19) as of April 2022, according to the WHO. The virus has infected approximately 620 million people worldwide, resulting in a total of 6.5 million deaths by October 2022.

The countries with the most significant number of infected people are the United States, India, Brazil, and Russia, where the numbers are in the millions. The former President Trump declared

that the United States is “not built to shut up to the doctors, they would say let's shut down the entire world” (Pulla, 2020 p.1).

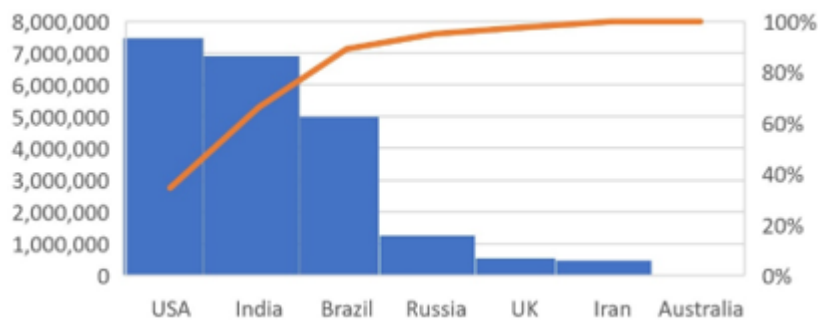


Figure 1a: Countries that seem to have taken a Big Toll
Source: Authors Created from Worldometer data 2020.

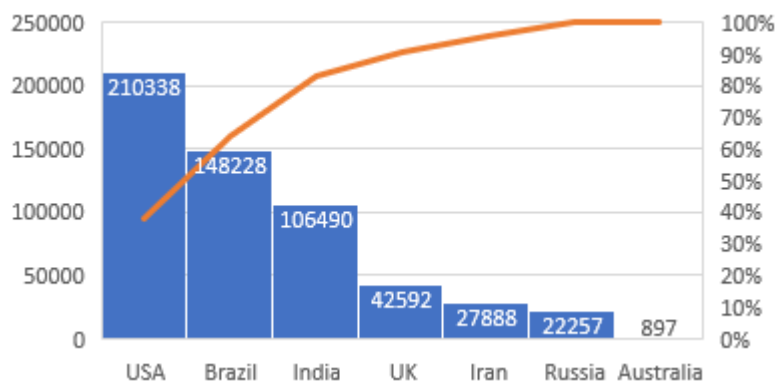


Figure 1b: Death Toll of some select countries
Source: Authors Created from Worldometer Data 2020

Revisiting Urbanisation

The core activities at the heart of transformation across the world today are interconnectedness, mobility and the exchange of services and goods. These three have determined the pliable characteristic of globalisation and urbanisation. In this paper, the authors have critically deliberated upon the adverse impacts of development discourse fostering globalisation and urbanisation as a necessary and inevitable process and outcome for growth and development. We argue to rethink and revisit the mantra of globalised economy, urbanisation and prosperity in the wake of the humanitarian crisis fuelled by a virus-caused pandemic worldwide.

Globalised World and the Spread of the COVID-19 Virus

Globalisation is characterised by the interconnectedness of people across national boundaries, through continuous growth,

movement of human and economic capital, the interconnectedness of financial markets, consumerism and a distinct multi-cultural influence. It has opened up international borders, creating interdependence amongst countries and what might be seen as a global village. The world has been shrinking through transnational migration, with humans settling in other parts of the world (see, International Organization for Migration (2020). Any occurrence of an event in one part of the world influences the other parts of the world by impacting first its neighbouring countries and then gradually affecting the others in the adjoining regions. Who would have thought that established wildlife markets in the crowded urban centres of Wuhan in China would become an epicentre of risk for spreading viruses from animals to human communities? The gradual spreading to other parts of the world is an example of how food supply chains associated with big cities can be one of the risk factors for producing a pandemic.

Pandemics caused by viruses such as SARS and COVID-19 have proven that the world has turned into a 'Global risk society'. Alongside the modernisation, prosperity and free flow of goods and commodities, fear of losing lives as a result of natural calamities, wars, terror attacks, and contagious diseases is also a characteristic of the social, political and economic life of the globalised world.

The Mantra of Interconnectedness

The fast growth and exchange of information and communication technologies have also impacted the global sphere through a competitive market economy. The interconnectedness in technological advancements and transportation has been instrumental in the free flow of harmful technologies giving rise to terror attacks, global health risks through the transmission of diseases from human to human, and causing environmental disasters through unstoppable consumerist behaviour. Tuncer (2020) builds on the explanation of Wassily Kandinsky article He further hypothesises that the dangers society is facing only increase and quicken due to its very nature of interconnected transmission. The transportation of technology and other goods across countries and around the globe are likely to have added to the spread of COVID-19 across borders and closed state lines.

The economic progression of developed economies at the expense of underdeveloped economies through the rise in a disparity between the rich and poor and the separation of social and cultural life through branded clothes and food chains is yet another facet of this mantra of globalisation. Neoliberal policies and the market economy are built to maximise profit and investors' interests. We see that these have now even commodified clean water, air, health and education systems and made the products of demand rather than a universal need. Thus, these trends increasingly focus on individual profit rather than the common good, causing a greater divide between the rich and poor. This model has ignored the threat of the loss of human lives and extinction of humanity whilst keeping businesses alive for the investors. A true

face of a greedy economy that relies on profit-making has become evident in instances where people must pay huge amounts of money to save their life from COVID-19 once hospitalised. Several countries have extended their public healthcare coverage to those impacted by the virus, but in some developing countries, a co-payment up to 100 dollars had to be shelled out by people affected by COVID-19 to cover the costs of the test.

Right to emergency treatment, denial of treatment, extracting money for hospital admission and tripling the cost of treatment showed the insensitivity to human suffering by the privatised health care system, which is obviously the result of liberalisation of health and leaving the health of citizens to market forces. Those already disadvantaged by poverty are worst off — people with disabilities, migrants and refugees, women and children, and the elderly. Without money and power, people are unable to receive the medical care they need. In addition, 54 nations have implemented export curbs on medical supplies and equipment needed to fight against COVID-19 (Global Trade Report, 2020). This means many people who need it most will be deprived, whilst others retain their resources. In other situations, companies would have sold their stock internationally at significantly increased prices to make huge profits, but instead, they were not able to. This brings us to the question: should health matters shift back to the governments? It also challenges the reliance on a globalised economy rather than focusing on local developments. Transportation systems everyday are moving goods thousands of kilometres around the world that could have been made or grown next door without globalisation.

The COVID-19 pandemic has changed the world stage of capitalists who themselves are now gripped in fear of economic death, with trillions of dollars deficit in the world economy, a falling Volatility Index, and unemployment rising to an unprecedented growth rate. It has also highlighted the universalist character of fear engulfing both rich and poor, where both elites and poor are worried about financial losses at a

different scale — with the elite fearful of substantial economic losses and the poor worried of how they will keep a roof over their head. The virus has proven that it does not discriminate between the elite and those in poverty and people in power and without power. It has, however, exposed rising inequalities amongst those least and most privileged.

Density and Habitat

The stark reality of having an abode in densely populated cities has come to the attention of demographers and geographers. Urban areas defined by dense populations and proximal human interactions have been argued to aid the spread of the deadly virus, causing ill health and mass deaths. An analysis of the spread of the virus undertaken by economic geographers points out that metropolitan megaregions are most likely to be affected by community transmission of the disease. This is due to the early exposure to the virus at a point when the public health system could not respond due to the uncertainty of the effectiveness of treatment and preventative measures (Adler et al., 2020). The factors conducive to the spread of the virus such as SARS or COVID-19 have been described as 'the globalised nature of modern interactions. These are linked to transport networks, either by the fastest rail network or airports, with evidence suggesting that these were highly likely to have brought the virus into the community, and then cars or buses spreading it throughout China and Hongkong (Adler et al., 2020). The transportation of goods across cities only adds to this spread further.

The large metropolitan cities such as New York, Delhi and Mumbai have created spaces where it is impossible not to bump into each other in large crowds while in transit, either on roads or in transportation. The virus that originated in the metropolitan city of Wuhan spread widely and quickly to other parts of the world through connectivity to other big cities, infecting both developed and developing nations (Boterman, 2020). Population density in cities such as New York City, Mumbai and Nairobi shows clear links to the destruction caused by COVID-19. The high

death toll recorded in London, Madrid, New York and Mumbai paints the picture of the virus as an urban problem (Connolly et al., 2020; Boterman, 2020). There are, however, examples of densely populated cities that were well managed, such as Hong Kong, Seoul and Singapore. However, within large cities, there have been virus clusters and places occupied by the poor, living in squalor conditions with many generations in one house, having shared facilities and narrow roads; these are the people at most risk of transmission. This risk is aggravated due to pre-existing health conditions, poor sanitation, and environmental hazards such as pollution and waste dump, causing poorer health status to many living in these surroundings (McFarlane, 2020).

Evidence from The Netherlands shows that the most densely populated Randstad provinces of Utrecht and North- and South Holland, where about 8 million people inhabit generally did not stand out with a high number of COVID-19 cases by mid-April 2020 (Boterman, 2020). The data analysis indicated that instead, the countryside of the Eastern side of Brabant and the northern parts of Limburg were epicentres. This analysis of data revealed that larger cities of The Netherlands were less affected by the pandemic as compared to more rural parts of the country. Even the population density and age groups were not significantly correlated with the high number of cases; however, 90% of the area of The Netherlands is indeed urbanised with transit connectivity (Boterman, 2020). Along with transit connectivity, events and festivities taking place in large gatherings in major cities is another factor linked to the spread of disease. Large gatherings of approximately 1000 persons in a mosque in Delhi and India, a Mardi-Gras event in Bayous, US, and Chinese New Year festivities in China and Taiwan fuelled the spread of COVID-19 in these communities.

The neo-classical perspective on migration promotes the reallocation of labour within or outside national borders for balanced growth. As a result, we have seen unprecedented growth in global migration of 276.1 million people living in places other than their birthplace (International Organization for Migration, 2020). However, the

development approach is also linked to the psychological ill health, stress and challenges experienced by the migratory population (de Haas, 2010). The COVID-19 pandemic exposed the dark side of this developmental approach where millions of migrant populations became trapped in cities within national and international spaces and experienced extreme agony, frustration, stress and ill health without familial and community support. This also affirms that family ties and community support is eventually weakened with migration flows (de Haas, 2010). Desperation to return home and to the village became so important from the perspective of many migrants and their families. Unable to return home or reunite with family due to the interstate and national border closures have fuelled this misery experienced by migrants. It also highlights the culture of dependency amongst migrant families and the increased poverty that is now occurring from the loss of jobs, with people being unable to support themselves or send money back to family and who are also able to return home to save on money.

Changes are taking place in the living and work conditions, where physical distancing has become the norm. It opens the debate to reverse the process of development that has focused on urbanised areas and international spaces with centralised political, health and social infrastructures, a concentration of industries, and small and big corporate businesses. The COVID-19 pandemic has exposed the vulnerabilities of traditional face-to-face networks of communication in cities. People are now moving away from offices and prefer to work from home to safeguard themselves and their families. Business hubs and once vibrant shopping precincts have been emptied until the virus is contained. However, the interdependency of trade, goods and services across nations is continuing. At the same time, humans are required to maintain strict physical and social distancing to prevent the spread of the virus, goods and services without local stocks needed to flow across the borders with human handling. If more goods were produced locally, this would reduce the need for transportation

across country borders and provide a more localised and sustainable economy.

COVID-19 has also shown that the imposed travel restrictions and the reduction in typical human activities, such as the production of goods, have impacted carbon emissions. For example, in China, a drop of 25% in carbon emissions has been reported since the implementation of lockdowns. Similar reports were received from Italy and India, with satellite images showing drastic improvements in the reduction of air pollutants making the air notably more breathable (Null and Smith, 2020). This, in turn, is likely to have positive global health impacts.

Structures and Institutions

COVID-19 has also brought the world to its knees where every person, including politicians and industrialists, is fearing death, the loss of loved ones or anticipating a debilitating life ahead. Societal structures and institutions are constantly changing and adapting to new norms set up by people to serve their purpose. The family institution is an old structure that has provided protection, safety, generational continuity, a sense of belonging, identity and entertainment to immediate and extended family members. Post-COVID-19, the existing family structure and its functioning are likely to change drastically. Italy, Brazil, India and Indigenous cultures that value large families residing under one roof or in close physical vicinity have witnessed family members dying and being infected due to close physical proximity. The impact of COVID-19 on people's health has been exacerbated not just by having symptoms of the disease but also due to fears of catching the infection, which is negatively impacting upon mental and social well-being. There has also been a rise in domestic violence cases (Women's Safety NSW, 2020) and an increase in alcohol intake, with alcohol intake rising by 20% in this period (O' Sullivan, 2020).

The social and economic impact of the spread of COVID-19 and associated restrictions has been profound on both developed and developing economies. The pandemic has exposed social inequalities in the forms of poverty, poor access

to health and hygiene, and living space. Thus, it is as much a sociological problem as it relates to globalisation and urbanisation issues. COVID-19 has presented more challenges to the underprivileged and marginalised sections of society, with the social contexts where people live and work making them more vulnerable to infection. Places like prisons, food processing units, densely populated apartment buildings, and aged care facilities were most affected due to people living and working in close proximity to each other. For example, people living in small, congested houses and those daily living earners such as domestic servants going house to house, hawkers and labourers on the street had greater chances of infection.

Discussion and Conclusions

Consumerism, a hallmark of both modernity and capitalism, is often at the centre of an urban way of life. People who live in urban areas are more likely to amass commodities and then get rid of them once they are no longer needed or are unable to consume them than their rural counterparts. Because of this, there will be direct effects on the availability of food. People wanted to stock up on foods to store for long periods of time in anticipation of quarantine periods or of local stock running out due to distribution issues. Long queues were observed in grocery stores everywhere at the beginning of the pandemic, with people wanting to stock up on foods to store for long periods of time. On the other hand, the masses of people who showed up did not care about the fair allocation of resources or the requirements of the group as a whole. One way in which we have witnessed an increase in individualistic tendencies, even within communal cultures, is illustrated by the following example: Everyone appears to be concerned about their own well-being as well as the well-being of their family members. This has led to irresponsible social behaviours, such as people not wishing to wear masks and maintaining social separation, both of which are recommended by health officials to prevent the spread of the infection. People in less developed economies, such as Brazil and India, have been talking about exercising their individual rights

and are prepared to ignore health warnings and measures. Examples of protests and non-compliance with state orders have come from both the most developed economies, such as the United States, the United Kingdom, and Australia, as well as from less developed economies, such as Brazil and India. These examples can be found in all of these countries. Some people are in favour of the restrictions that have been imposed to save humanity, while others argue that it has been an infringement of their human rights to live an unrestricted life. The people have conflicting opinions regarding the restrictions that have been imposed by the authorities of the government, politicians, and health professionals.

There is now apathy for collective values and compassion for each other that has emerged. People who are concerned about the health of their community are more likely to be prepared to keep a safe distance from others, to wear masks when appropriate, and to take the other precautions that are recommended when they are in public settings. It is imperative that the philosophy of collectivism be fostered in order to combat the individualist inclinations that exist today.

As we set out to manage the humanitarian impact of the COVID-19 pandemic, one of the goals that we have in mind while writing this article is to stimulate a reassessment of these two concepts—globalization of the economy and urbanisation. We stated that there is a necessity to shift attention away from the individualistic inclinations that have become the norm and instead return it to the local and community level. This would put communities in a position to recover and assure a stronger level of management during any future pandemics.

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Author Contribution Statement

Venkat Pulla conceived the abstract and structure of the article. A select review of the literature interspersed in the article provided by Kalpana Goel formed the basis for further discussions that shaped the paper's scholarly debate. The paper was finalised jointly by the two authors.

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