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Struggles for Care Infrastructures in Serbia: The Pandemic, Dispossessed Care, and Housing

Ana Vilenica, Vladimir Mentus & Irena Ristić *

Abstract: »Kämpfe um Care-Infrastrukturen in Serbien: Pandemie, Wohnen und Sorge-Enteignung«. The COVID-19 pandemic added a new layer of consequences to a care crisis that was already harsh in “post-socialist” Serbia. This paper examines the failures of the care infrastructure in Serbia during the pandemic and the resulting intensification of temporary networks of care. We look at housing as a key care infrastructure in the pandemic and discuss how care thrives across the urban space. To conceptualise how housing is sustained as a care infrastructure in the post-Yugoslav context, we introduce the notion of infra-commoning. We discuss how infra-commoning generates dynamic social and economic reproduction patterns that are the foundation of social organisation. Finally, we analyse anti-eviction struggles as an infra-commoning practice and explain how collective efforts of solidarity, mutual aid, and self-care are thwarted and rendered legally impossible.

Keywords: Housing, care, infrastructure, commoning, COVID-19, Serbia, pandemic.

1. Introduction

The COVID-19 pandemic drew historically unprecedented attention to a global care crisis, including the consequences of underfunded health and social care outcomes around the world. In “post-socialist” Serbia, this added a new layer of consequences to an already severe situation, whereby the effects of the virus and the measures to contain it were unequally distributed. Stay-at-home orders meant that housing became the locus of people’s differentiated abilities to protect themselves and others. Nevertheless, evictions continued after the initial state of emergency ended, demonstrating the subordination of human life to the protection of private property. However, this

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untimely dispossession was not left unanswered. People mobilised to protect their homes and the homes of others as an essential material condition of care, life-making, and the preservation of life, as well as to provide the means for basic social reproduction and health care, in the absence of appropriate pandemic measures. Despite state attempts to criminalise solidarity, they partially closed the gaps created by the pandemic by creating temporary care networks.

By bringing together the political economies of housing and care with participatory research methods (given that all three authors participated in the anti-eviction movement), we provide a relational account of struggles against both the care crisis and against evictions in the context of a pandemic. We draw on an approach that considers housing as a care infrastructure. As Hitzeroth and Boano (2021, 83-6) explain, this creates an affirmative way to rethink effective resistance to violence and understand how care thrives across urban areas. Our research is based on three types of material. First, we draw on national and international legislation; reports produced and published by international, state, and civil sector organisations; existing academic research on country-specific situations in the care sector and housing; and quantitative cross-sectional data collected within various international surveys. Second, we use the data from the European Union Statistics on Income and Living Conditions (EU-SILC) and European Social Survey, both from 2018, which we subjected to statistical analyses. Third, we base our analysis on our participant observations of anti-eviction struggles in Serbia, mostly the cities of Belgrade, Novi Sad, and Subotica between 2017 to 2021, with a focus on the period of the ongoing pandemic.

In this article, we analyse the societal pressure placed on Serbia's care infrastructure in a situation where it had already been weakened by neoliberal austerity and where successive governments prioritised the private accumulation of wealth over addressing a growing crisis of care and public health. We begin with a discussion of our conceptual framework, bringing the concepts of care and infrastructure together and introducing the notion of infra-commoning. We show how existing crises have been exacerbated by the COVID-19 pandemic and how the effects thereof are unevenly distributed. We posit housing as an essential infrastructure of care in light of rapid privatisation and financialisation, leading to increased levels of eviction, the residualisation of social housing, and the absence of adequate social care for the urban poor, especially racialised minorities. We examine the temporary networks of care that have emerged in the recent struggles for the right to housing and look at how the Serbian state prevents and even criminalises the self-organisation of mutual aid and care that aims to go beyond mere charity. In conclusion, we argue for the need to recognise housing as a form of common infrastructure because of its significance for allowing people to care for both themselves and others.

2. Infra-Commoning: Housing as Care Infrastructure

In order to analyse the effects of the COVID-19 pandemic on the ongoing care crisis in Serbia, we bring the concepts of care and infrastructure together. In the wake of the pandemic, it seems that understandings of what constitutes “infrastructure” are being redefined. This is reflected in the recent pledges made by the current US president to invest in care (Duffy 2021). Beyond roads, water, and sewage systems, the understanding of what constitutes infrastructure is being expanded to include the domains of care and social reproduction: health care, childcare, education, and care for the elderly and for people with disabilities. This expansion implies an acknowledgment that care is essential and should be considered a public good requiring financial investment (Heneau and Himmelweit 2020). Although the reasons for this shift seem to be driven by the need to sustain lives, it is also promoted as a condition for the continued accumulation of capital. In the context of the pandemic, the responsibility for care has been offloaded to individuals, as several contributions to this HSR Forum emphasise. Nonetheless, there may well be an awareness emerging that care cannot be left to individual responsibility alone.

Households are the central locus of everyday care and social reproduction. Thus, housing represents an infrastructure of care, or a “a hub of care practices and relations” that keep humans alive (Power and Mee 2019, 484). Drawing on Power and Mee (2019), we characterise housing as an infrastructure of care, in order to move analyses of housing away from policy research alone and towards an understanding of the relationship between housing and the dynamic social and economic reproduction patterns that are the foundation of social organisation. In this sense, housing is conceived as a socio-material assemblage that is constitutive of care. As a care infrastructure, housing organises social life, informing values and reproducing social inequalities. This dynamic system changes over time and orders care opportunities across three domains: the materialities of housing, markets, and governance. The relevance of housing for care became particularly evident in the pandemic, when the Serbian government introduced measures that changed patterns of social life and confined people to their homes (assuming they had one). Hence, the home became a locus of work for non-essential workers as well as a facility for childcare, healthcare, and care for the elderly, while access to existing networks and facilities of social reproduction and health care became simultaneously limited.

Although housing was recognised by the Serbian government as essential in a pandemic, people continued to be evicted from their homes due to complex reasons that arose from the legacies of “transition,” including privatisation, restitution and fraud, financialisation, a lack of adequate social housing,

the squatting on land and housing, and legislation that prioritises the right to private property over the right to a home (Vilenica and Petković 2020, 9-13). Nevertheless, the deeply un-caring acts that continue to push people into hyper-precarity have been met by resistance. Baker (2020) conceptualises evictions as a distributed system of binding and unbinding people to a world in movement, which establishes the foundations for action. He sees evictions not only as the constant and continuous work of dispossession but also as sites of resistance and commoning. Infrastructures always produce their negations, Baker claims, and these negations bear their own logic. Although evictions produce suffering and loss, the eviction system can also become grounds to create and recreate anti-eviction commons.

Building on the argument that anti-eviction struggles produce commons, we use the term “infra-commoning” to explain how commoning occurs in anti-eviction struggles. During the COVID-19 pandemic, the scope of such practices of commoning has been broadened to include struggles to rewire broken care networks between institutions, households, and individuals. The verb “commoning” implies a shift from a reified understanding of commons as entities to a processual understanding of commoning that encompasses specialities, resistance, relations, knowledge, and everyday experience (Trikliniotis, Parsanoglou, and Tsianos 2015, 1040). Allan (2020) describes how new forms of commons emerge in a situation of generalised precarity through acts of caring that underline interdependence and reciprocity as fundamental components of the social world. We propose that the lens of commoning makes visible the care infrastructures that emerge in anti-eviction struggles.

The process of infra-commoning includes anti-eviction solidarity as care work, as well as the everyday labours of self-care that tenants engage in as part of the resistance.¹ Following Santos (2020, 126), we define solidarity as “the willingness of actors to contribute private resources – time, money, and energy – to the collective ends of a group.” This encompasses interstitial political work (campaigning, organising protests, and political education), networking, legal campaigns, mutual aid, and direct action. On the other hand, the acts of self-care that tenants engage in constitute both a private and a public repertoire of everyday actions such as acts of survival, solidarity, reciprocity and collaboration, and actions against evictions. In anti-eviction struggles, acts of care arise from caring relations towards oneself, others, and the entire world. They include “everything that we do to maintain, continue, and repair our ‘world’ so that we can live in it as well as possible” (Tronto 1993, 102), as discussed in the introduction to this HSR Forum (Dowling 2021a). Infra-commoning produces temporary care networks between material infrastructures

¹ The notion of tenant will be used here to denote everyone who does not own property or control their housing situation (LA Tenants Union, undated). See: <https://latenantsunion.org/en/> (Accessed November 19, 2021).

and people that are fragile to the dynamics of mobilisation. When confronted with an eviction, tenants and their allies may well act to take care of themselves by engaging in acts of solidarity or even civil disobedience against private companies, public institutions, and laws that are perceived to be unjust. However, such efforts, which could be considered part of a non-institutional care infrastructure, are repressed and criminalised through particular administrative and legal mechanisms.

3. Pandemic Measures and Their Effects

Understanding Serbia's response to the pandemic requires contextualising the country within the political economy of its transition from a socialist to a semi-peripheral capitalist economy (see Vilenica, Katerini, and Filipović-Hrast 2021). Serbia can be described as belonging to the Global East. Encompassing the “post-socialist” societies in Eastern Europe, the term refers to a distinct experience in the interstice between the Global North and the Global South (Müller 2018). The Global East's dependence on the Global North manifests partially in disadvantageous commercial treaties, financial extraction, and the deepening state and household debt.

While the 1990s in Serbia were characterised by hyperinflation, deindustrialisation, and the de facto collapse of the social security system, subsequent reforms have adhered to the dominant neoliberal approach of structural adjustment as advocated by institutions such as the World Bank and International Monetary Fund (Stubbs and Zrinščak 2019, 288-91). Structural adjustment was further entrenched when Serbia became a candidate for accession to the European Union in 2012 (European Commission 2020). In order to attract capital investment to the region, national and local governments enacted labour market deregulations and welfare state retrenchment. In Serbia too – as in the UK and Greece and described by Beverley Skeggs (2021) and Maria Markantonatou (2021) respectively in this HSR Forum – in response to the 2008 Global Financial Crisis, further austerity measures were enacted, including cuts to social benefits and health care. This increased the burden on informal familial care networks and private household expenditure. In sum, social protection is sparse, and the health care system faces fundamental challenges with regard to access, quality, and sustainability. Public opinion surveys reflect a high level of dissatisfaction, making the country's welfare state as it previously existed a “transition loser” (Perišić 2016).

Following the recommendations of medical professionals, the Serbian government declared a state of emergency in March 2020 and introduced a severely restrictive lockdown in Europe. Measures included self-isolation at

home and border and airport closures.² People were prevented from leaving their homes for up to four days (and older citizens for up to five weeks continuously).³ There were also restrictions to free movement within the country. Furthermore, access to public spaces was restricted, and the use of public transport was limited to necessities like food delivery. At the same time, the prime minister promised to balance the measures with the protection of the Serbian economy, its health care workers, and the physical and mental health of the general population (Government of Serbia 2021). Government financial support included direct aid to small and medium enterprises, as well as to large companies, as an extension of its guarantee scheme to maintain liquidity in the private sector. Additionally, the government provided a one-off payment of 12,000 RSD (€100) to all adult citizens in May 2020, 7,200 RSD (€60) the following year, with an additional 7,200 RSD (€60) for unemployed persons and 3,600 RSD (€30) for those retired.

Many hospitals had to prioritise COVID-19 patients, which created a parallel health crisis for people with other health issues (UNDP 2020, 20). Two new hospitals dedicated exclusively to COVID-19 were opened, yet they were soon over capacity. After COVID-19 vaccines became available, the Serbian government shifted its focus to mass immunisation. By the end of May 2021, two million of the country's seven million people were fully vaccinated, with a further 4.5 million people partially vaccinated. The vast majority of vaccines were imported from China, by far exceeding the vaccines imported from the US, Russia, and the UK, and so did the preferences by the citizens when choosing vaccines for themselves (Ćurčić and Tomić 2021). This strategy (and the billions of Dinars spent) catapulted Serbia to the top ranks in terms of the speed and scope of immunisation: according to One World in Data (2021), Serbia ranked fifth in the world in February 2021 and eighth in April 2021. However, vaccination has since slowed down in the absence of a clear strategy and due to growing levels of distrust in the population (Minić 2021).

Before COVID-19, Serbia was already characterised by high levels of health inequalities, which increased during the pandemic (Popović et al. 2017). Vulnerable populations faced systemic difficulties with regard to access to health services, including people with disabilities, the Roma population, houseless people and residents of care homes, the elderly, people without health insurance or pensions, people with chronic illnesses, migrants and asylum seekers, single-parent households, residents of geographically remote areas, and prisoners (UNDP 2020, 21). Indeed, many of Serbia's assistance measures failed to consider the needs of these groups sufficiently. Moreover, there was no recourse for adapting existing federal legislation, which could have

² Except for transport crews and persons with special permits; cargo and mail transport, search and rescue operations, and humanitarian and emergency medical transport flights.

³ This meant that those living in informal settlements with no access to water were risking fines every day (Trifković 2020).

enabled greater financial assistance for the most disadvantaged members of society (most notably Provision 110 under the Law on the Social Protection). Because social protection falls under federal jurisdiction, municipalities could not directly expand their immediate support for citizens (ibid.). These difficulties encompass both a lack of financial resources at the level of central government and inadequate feedback about the support required at the local level. For example, there were reports that home care services, which are locally funded, were suspended during the state of emergency (UNDP 2020, 59). Unlike neighbouring countries, Serbia lacks the legal mechanisms to ensure the effective expansion of benefits or the number of beneficiaries for poverty-targeted programs that would protect its most vulnerable (especially at the local level).

Hence, with the onset of the COVID-19 pandemic, social protection coverage deteriorated or ceased completely in most municipalities. This was partly due to a lack of capacity to identify and assist those most in need. In Serbia, as in the other country contexts discussed in this HSR Forum, already precarious populations have been put under further pressure and intersectional inequalities have been further entrenched. Women were more likely to experience difficulties accessing assistance (UN Women 2020), while older citizens were unable to access non-pandemic-related health services, which led to higher out-of-pocket expenses for medication and private health services (Todorović 2020, 20). Furthermore, 70% of informal workers (most of whom are female) saw their financial situation deteriorate, with nearly two-thirds unable to buy sufficient food. Yet, this group was rarely entitled to formal assistance (Bradaš, Reljanović, and Ivan 2020, 39-44).

An already diminished healthcare infrastructure in Serbia was faced with an insufficient capacity to test, isolate, treat, and trace those who had or might have contracted COVID-19 (UNDP 2020, 9). Meanwhile, healthcare staff shortages, a lack of protective equipment and inadequate testing protocols at healthcare institutions led to high mortality rates among health professionals, especially doctors, compared to other countries in the region and across Europe (Pantović 2021). Data from the Serbian Trade Union of Doctors and Pharmacists (SLFS 2021) shows 118 health workers died in the first 13 months of the pandemic, representing a rate ten times higher than other countries in the region. By contrast, during the first 11 months of the pandemic, 33 health workers died in Albania, 2 in Croatia, and none in Slovenia (Anđelković 2021).

A recent survey conducted by the European Bank for Reconstruction and Development (Bennett 2020) showed that almost one fifth of the Serbian population had to reduce food purchases, almost one third had to forgo visits to the doctor, one in six people had to delay utility payments, one in five defaulted on loans, and one in eight had to borrow money from a friend or relative. The burden has been disproportionately borne by those with lower levels of education and income: not only did they lose their jobs due to the

precarious conditions of employment, but they also already had inadequate access to healthcare and experienced a greater incidence of compromised health. Consequently, these groups had more exposure to COVID-19 while lacking the means to protect themselves from it (Neilson 2021, 201).

As Serbia's elections were approaching in June for all jurisdictions, it was essential for the regime to be seen as successful in managing the pandemic and capable of conducting elections in the middle of a pandemic. As later was found, the government has systematically manipulated the reported number of COVID-19 infections and deaths, reporting numbers lower than the actual count (Jovanović 2021). The officials even recognised this manipulation (Marković and Tomić 2020). Inconsistent and contradictory information and measures provoked dissatisfaction and anger from the population, many of whom had already lost trust in the authorities (Jovanović 2020, 27). After the elections, the number of new infections appeared to rise sharply immediately, and re-elected authorities blamed "irresponsible citizens" for the sudden spread of the disease (ibid., 28). Only two weeks after the elections, a new lockdown was announced, and the largest mass protests in 20 years erupted across the country, which were violently repressed and criminalised. Nevertheless, the government was forced to withdraw its decision and has not since introduced any further lockdowns, regardless of the pandemic situation.

While these protests were initially directed at lockdown measures, they soon shifted to a broader concern with authoritarianism in Serbia and lasted for about a month. According to Freedom House (2020), a non-profit NGO that produces research and reports related to democracy, political rights and civil liberties, Serbia lost its status as a democratic country for the first time in 20 years. Additionally, protests took place against misinformation concerning COVID-19 infection and mortality rates throughout the rest of the year. Different occupational groups organised protests against measures they considered repressive and nonsensical and included healthcare professionals protesting inadequacies in the health sector. The protests in Serbia did not result from a revolt against the curbing of civil liberties, as in other European countries. Rather, they arose in response to the government's misinformation and mismanagement of the pandemic. Both the social composition and the political demands of the protesters were relatively heterogeneous and did not correspond to a particular right- or left-wing ideology.

4. Housing and Welfare in "Post-Socialist" Serbia

The specifics of housing in Serbia today can only be understood with reference to continuities and breaks with the former Yugoslavian regime. In Yugoslavia, housing was considered a fundamental right of its workers. Housing stock was made up of (tolerated) individual properties, nationalised and

socially-owned housing based on the specifically Yugoslavian regime of social property implemented after the Second World War. Social property meant it did not have an owner. It was used by Yugoslav workers (as opposed to a private or public entity ownership). The overall aim was to ensure equal access to material and immaterial care infrastructures and improve living conditions. After 1965, workers paid a percentage of their income into a housing fund to access housing, which was managed by their place of employment. Across Yugoslavia, only less than a quarter of workers were actually able to access apartments (Archer 2016, 59). And while these policies were partially successful (Krstić 2018, 149), new inequalities emerged as a result of the contradictions of self-management in Yugoslavia. These contradictions included the introduction of market relations and austerity measures in the wake of the 1980s global economic crisis, the preferential housing allocation to party bureaucrats and technocrats, as well as those with higher education (Archer 2016), and the gradual decline in construction alongside the concomitant intensification of urbanisation.

Over the last 30 years, housing in larger Serbian cities has become space for accelerating social exclusion and care inequalities. The privatisation of socially owned housing was enabled through the transfer of ownership to the state, and occupants were given a chance to buy their homes at low prices, turning Serbia into a country of homeowners. The homeownership rate in Serbia is above 87% (Statistical Office of the Republic of Serbia 2017). Due to the mass privatisation of socially owned flats, home ownership became the most important material condition for survival and a kind of asset-based welfare. At the same time, anyone unable to buy their home as well as a new generation of young people were turned into “losers of transition.”⁴ Disqualified from the right to buy were also people living in apartments under restitution to pre-WWII owners or in worker accommodation considered only a temporary solution in Yugoslavia. Temporary workers’ accommodation has also been privatised together with other assets belonging to companies in “transition.”

The Serbian government pursued dual priorities: Individual bank loans for homeownership among the lower-middle class and particular groups of public servants who could not afford market-rate prices were subsidised and there was limited provision of social housing for vulnerable groups (see Vilenica, Škobić, and Pantović, forthcoming). As of 2011, this process had reduced the social housing stock in Serbia to less than 0.9 percent of its 2.4 million inhabited units (Vuksanović-Macura 2017, 70). In some respects, the

⁴ The housing status of young people in Serbia indicates a high degree of economic dependence on their families; most young people either live at home with their parents, have inherited an apartment or have received financial assistance from their parents. A smaller number have their own funds, while an almost negligible number rely on state transfers (Tomanović and Stanojević 2012, 274; 2015, 23).

described reorganisation of housing is more akin to punishment than care. Examples of this include erecting extremely small metal containers (14m²) to house racialised poor populations or burdening social housing tenants with unaffordable bills that push them into debt and subsequent eviction (Vilenica 2019). Serbia's housing policies frequently subordinate and discipline those in need of public care rather than provide them with care.

The lack of social housing and adequate social policy means that a number of people are squatting empty properties and constructing shacks on occupied land. There is no available data on the number of people who may have tried to solve their housing needs in such a way or who may be sleeping rough. However, a study by Bobić (2014) showed that in 2011, 18,290 individuals were registered houseless, and this category included people living in inadequate shelters. Between 2013 and 2016, the share of renters was relatively stable at 18 to 19% of the total population (Statista 2021). At the same time, the country's poorly regulated and mostly grey rental housing market makes it difficult to obtain accurate data. Housing in Serbia is currently characterised by an overreliance on the private market and money laundering, which makes housing unaffordable for most (Zeković, Petovar, and Nor-Hisham 2020). In Serbia, more than 80% of housing is bought with cash, while only 20% of buyers took out a loan in the last quarter of 2020 (Republic Geodetic Authority 2021). According to Global Initiative Against Transnational Organised Criminal (GI-TOC), the pairing of these developments with the fast growth of real estate prices compared to other countries in the region clarifies how Serbia has become a regional centre for money laundering (Kemp, Amerhauser, and Scatturo 2021).

The combination of multiple housing crises and high urban housing costs have led to overcrowding, where multiple families and multiple-generation family members share relatively small residential spaces. According to Eurostat (2019) data, more than half of the Serbian population live in overcrowded conditions, while the EU-SILC (2018) data show that housing expenditure is a severe burden for more than 70% of the Serbian population. Moreover, the 2018 European Social Survey data indicate that the average number of household members in Serbia is 3.5, among the highest in Europe. Sharing a small amount of space may be necessary for economic survival, but it became a hotbed of risk during the COVID-19 pandemic, given the increased likelihood of acquiring, transmitting, and reinfection with the virus. What is more, hospitals prioritised COVID-19 patients, meaning that people with chronic or other unexpected health issues were left to their own devices in their homes. Inadequate housing conditions sometimes contributed to avoidable medical complications and even premature death during the pandemic (Eurofound 2016, 65).

As in other countries, lockdown measures meant that the home became the central place of care and social reproduction in the face of office, school, and

daycare closures, placing additional stress and strain on Serbia's population. Moreover, the loss of income due to unemployment in the pandemic directly affected people's abilities to cover their housing and associated living costs (whether utility bills, rent, or mortgages). In Serbia none of the temporary protections for renters issued in other countries were applied, such as rent freezes or subsidies (cf. Kholodilin 2020, 2-5). Nonetheless, the country introduced two housing-related measures during the March 2020 lockdown. First, the National Bank of Serbia authorised a three-month moratorium on mortgage payments, while the Ministry of Justice issued a recommendation to the Chamber of Public Bailiffs to introduce a moratorium on evictions for the duration of the state of emergency. Indeed, these measures were lifted when the state of emergency ended (Vilenica et al. 2021).

5. Evictions in Serbia

Increased evictions in Serbia were propelled by a series of legal changes leading back to 2011, which included the privatisation of eviction procedures. These changes established public bailiffs as a purported solution to what was perceived as the poor enforcement of court verdicts. This reform was adopted after the European Union pressured Serbia to improve the judicial efficiency of courts as a precondition for accession to the EU. The process was supported by organisations such as the German Organisation for International Cooperation and implemented with the support of USAID, who oversee the purported modernisation of Serbia (Ujdehag et al. 2014; USAID 2018). The bailiffs work offices that operate as private companies with an interest in collecting a debt as profit. Because they have the authority to decide how debt will be repaid, the bailiffs, in some cases, choose to sell people's apartments even for relatively small debts. There have been cases where apartments have been auctioned at prices far below the market rate to other bailiffs, their relatives, or people close to them (Protić 2019, 39). To prevent cartelisation, amendments to the Law on Enforcement and Security Interest were introduced in 2016, prohibiting bailiff office employees from buying property at such auctions. The introduction of bailiffs has been publicly promoted by representatives of institutions as an opportunity for workers to whom former employees owe arrears of wages to finally collect what belongs to them. However, since bailiff services are expensive, they are unaffordable to members of the impoverished middle-class, to working-class people, the unemployed, or the urban poor.

As already described above, evictions arise from disputes over property restitutions and the privatisation of socialist companies, including cases of squatting as well as debt and fraud (Vilenica and Petković 2020). Fraudulent activities carried out by investors have led to instances in which people

become so-called “third persons” in a legal dispute. Third persons bought their flats, they pay taxes and bills, but they have to move out because investors sold their apartment to two or more people that now want their property back or the investor has mortgaged their apartment without their knowledge and now the creditor wants to collect the debt by entering the possession of their only home. In addition, there are a significant number of cases where properties are auctioned to pay for arrears in mortgage repayments or to pay off household and other kinds of debt. Moreover, despite the ongoing pandemic, the Ministry of Justice announced that courts would transfer to bailiffs one million cases of “historical debts” that have accumulated in the last 20 years, which are primarily unpaid utilities. These changes are envisaged by the amendments to the Law on Enforcement and Security. More evictions are occurring as a result of the economic crisis because people have to take on increasing amounts of debt while their homes are their only source of private collateral. In the social housing sector, rent arrears and debt incurred due to non-payment of utility bills have led to a rise in attempts of evictions (Vilenica 2019). Yet, rent arrears in the private rental market are not on the list of known eviction cases as these evictions are performed informally due to the mostly grey rental market.

An individual’s total assets are considered collateral in Serbian debt disputes. Serbia is one of the poorest countries in Europe – almost a quarter of the population live on the brink of poverty (Eurostat 2018). Often the only assets that can be seized are the properties that were privatised in the 1990s. Although annual eviction data is unavailable, 3,736 real estate seizures were carried out in 2017 alone according to the data provided by the Public Bailiffs Chamber, and more than 3,000 families were evicted from their apartments between 2010 and 2017. At the beginning of 2019, bailiffs were tasked with enforcing more than 300,000 individual cases of debt (Petrović 2019). The Serbian state has no legal obligation to protect the evicted. In sum, evictions are practices that destroy care infrastructures, and in Serbia, evictions have entrenched the housing crisis.

6. Anti-Eviction Struggles in the Wake of the Pandemic

During the COVID-19 pandemic, anti-eviction infra-commoning gained a new urgency. Over the last 20 years, a prolific housing and the right to the city movement has emerged in Serbia (Vilenica 2017). There has, in fact, been a rise in media reporting of resistance to evictions over the last four years (Rujević 2020). However, what is particularly significant for the COVID-19 context is the increased determination with which people are willing to protect their homes and, with that, their livelihoods and lives. Building on previous experiences of organising for housing and the city issues in 2017 and bringing

together a multiplicity of activist organisations and individuals, an anti-eviction movement has emerged in Serbia with a main focus on Belgrade, Novi Sad, and Subotica. Using direct action, the aim has been to prevent evictions, or at least halt them, while legal and political negotiations are ongoing while also putting pressure on decision-makers through protest campaigns. Other forms of support include helping people access legal aid and the means of social reproduction, such as food, medicines, clothes, portable heaters, and money for rent, bills, and fines, as well as emotional support.

During the moratorium on evictions in March 2020, the “no one hungry, no one thirsty, no one without a roof” campaign was launched (Vilenica et al. 2021, 117) and included the organisation of mutual aid for people in quarantine or the houseless. The campaign raised over one million RSD (nearly €10,000) in donations and provided food, hygiene products, and medication to more than a thousand people. This assistance was initially delivered to families who had previously been involved in anti-eviction struggles but demand soon expanded to others who approached the campaign because they were struggling to survive under quarantine. A grassroots *social headquarters* was established to contrast with the Serbian Government’s Emergency Economy and Health Headquarters. The political demand was for the Serbian government to ensure basic needs for all, including housing, medical care, and utilities. Three mutual aid solidarity kitchens were established from within the movement in Belgrade, Novi Sad, and Subotica and remain active today.

As the number of COVID-19 cases and deaths rose in the second half of 2020, evictions and auctions became a common occurrence in Serbia. Anti-eviction activists were successful in delaying some auctions by demanding that COVID-19 measures be respected and by enforcing transparency through a live recording from the evictions (and auctions also). Even in the pandemic, as participant observation showed, bailiffs and the police did not refrain from using excessive force to evict people. In response, activists provided emotional support for families in distress and supported them with finding alternative accommodation. On one occasion, activists discovered a single man with third-degree burns in inadequate housing conditions who had been released from the hospital because the focus was on freeing up capacities to treat COVID-19 patients. Without access to adequate care, the man’s wounds became infected, and it required significant efforts by the activists to get this man readmitted to the hospital.

In one case where a number of families were facing eviction, tenants organised “estate watches” to prevent surprise attacks on their homes. Others collected information about planned evictions from friends and acquaintances who had connections to the police or to bailiffs. Tenants used methods like blocking their doors with furniture. In most extreme cases, however, tenants were so desperate that even suicide seemed like the only option for them in case of eviction.

These commoning practices created a temporary alternative care infrastructure that helped people in precarious conditions who had lost their sources of income due to the lockdown and were struggling to keep a roof over their heads. These practices constitute what we term “infra-commoning” because they combine struggles for housing with struggles to maintain social reproduction and provide care. In this sense, anti-eviction solidarity and efforts to protect oneself are forms of politicised care work. Defending homes is not only about defending the bare walls of housing; it is also about sustaining the life within them. This is how anti-eviction struggles and mutual aid intertwine in the pandemic. Building and maintaining a temporary care infrastructure is much more than the spectacle of police confrontation – it is about collectively maintaining health and sustaining networks of care and social reproduction under extreme conditions.

A new challenge emerged after media reports of activists distributing aid alerted registered aid organisations (foundations and NGOs) to their activities. These organisations subsequently asked activists to distribute their aid as volunteers. This led to discussions among the anti-eviction activists: They did not want to limit their activism to humanitarian assistance but sought to support self-organisation, movement building, and the empowerment of communities. Furthermore, while some activists agreed to distribute the aid offered by foundations and NGOs, they refused to collect personal information and report on people in need. Their practices of infra-commoning thus involved a refusal to participate in mainstream civil society attempts to implement mere “care fixes” (Dowling 2021b, 15) that rely on charity and the work of volunteers.

Infra-commoning often happens in a grey zone of illegality within the care gaps left by failing public institutions (Graziano 2018). Moreover, it can happen that acts of solidarity and care that are aimed at mitigating the crisis situation for people are criminalised (Dadusc and Mudu 2020, 17). This is something that has intensified during the pandemic in Serbia. Even before the pandemic, anti-eviction activists faced threats of arrest or prosecution for participating in solidarity actions. However, given the level of public disapproval on social media, few received criminal sentences. The Serbian police usually avoided direct clashes with protesters during the evictions, especially when there was media coverage. Anti-eviction activists engage solely in non-violent direct action: Maintaining a physical presence on doorsteps, standing passively in front of gates, sitting on entrance steps. The arrests were indeed frightening, but they also increased the visibility of solidarity actions.

Unlike the conspicuous forms of repression used by the police, the private bailiff companies use financial means to thwart anti-eviction infrastructures of care. Fines for resisting eviction (including the associated costs of an attempted eviction) are used to deter and demoralise and often follow debtors. As a result, it is not uncommon for debtors to ask activists to refrain from

supporting them. Tenants facing eviction do not only experience economic and legal threats, but they are also under immense psychological pressure: Both experiencing eviction or living in fear of being evicted can be traumatising, and pressures can be especially severe for households with young children, sick or elderly members, single parents, disabled war veterans, or other vulnerable groups. Because fines are less visible than arrests, they can be more effective since they rely on financial and psychological exhaustion taking its toll: As the legal pressures mount, the motivation for sustained activism decreases.

Building care networks in pandemics by providing basic means of reproduction has also been challenging. Those involved in the self-organised distribution of aid had to leave their homes during curfew. Although resistance to evictions is becoming increasingly visible, the pandemic brings new challenges for expanding support. There is a lot of support among the population in Serbia, but people rarely dare to join the movement and engage in actions themselves. Whether because they face their own pressures in their daily lives or out of fear of potential consequences, many people offer their support from a safe distance: They might share the live stream of an eviction, circulate other kinds of information, or they might donate money. At the same time, the accumulation of care needs within the housing struggles exceeds the existing activists' capacities, and security risks make it increasingly difficult to organise protests and actions or invite people to get involved.

7. Conclusion

Just as low-income countries have experienced the worst impacts of the COVID-19 pandemic (International Development Association 2020), the effects within countries have been unevenly distributed, too, to the detriment of the poorest members of society; Instead of being the ones to receive the most care via state mechanisms, the most disadvantaged were burdened even more. In a situation in which social distancing and stay-at-home orders made access to safe, stable, and affordable housing even more imperative, housing has been one of the most visible realms of anti-social policies. This makes collective acts of solidarity and care more essential than ever, even as such acts are repressed or even criminalised.

The pandemic made it clear that, like in other “post-socialist” countries, much of the Serbian population cannot meet their housing, social reproduction, and healthcare needs via the market without some form of public support. However, there is currently no adequate and affordable care infrastructure available. Evictions reflect the state's deeply un-caring tendency and perpetuate Serbia's housing crisis. The “post-socialist” Serbian welfare state is the victim of domestic and foreign capital accumulation including EU

demands for structural adjustments. Given this situation, it is unsurprising that anti-eviction struggles are on the rise. Thus, collective solidarity, mutual aid, and self-care commoning work show how an alternative temporary care network was established to fill the care gaps opened by the pandemic. These networks arise out of a refusal to accept the notion that human life can become disposable in the name of profit-making.

Infra-commoning in the pandemic does not only prefigure a society premised on a good life for all, but it also has immediate material consequences. Self-organised practices of care and mutual aid like the ones described in this article create temporary solutions, but they also foster more long-term networks that can facilitate changes in public infrastructures by creating an alternative care infrastructure in common. Instead of merely filling the gaps in public provision, such infrastructural commons create their own networks and accumulate knowledge of how to live under these difficult conditions. They also offer concrete policy solutions, in this case, the abolition of private bailiff companies and the legal protection against losing one's only home. The practices of care deployed are not always in the legal domain, and the solutions on offer are not in the interest of the state and capital accumulation – hence why they are often targets of criminalisation.

Understandably, the ongoing care crisis exacerbated by the pandemic cannot be solved by individual empathy alone but requires a transformation of the structural conditions for care. Staying with the problem while simultaneously infra-commoning and pushing for an expanded care economy can help escape short-term fixes to the care crisis. The contribution we make here is to emphasise the urgent need to recognise housing as a common infrastructure that should be organised, managed, and funded collectively precisely because of its significance for caring for both oneself and others.

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Başak Akkan

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