

# Who Cares When the Ground Shakes? “Standing By” Uncertain Urban Futures Through Configurations of Care

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## Abstract

In this article, I elaborate on how different urban actors strive to create *certainty* while living in anticipation of a major destructive earthquake. Turning to the category of *standby* mode, I study attempts to stabilize uncertain futures beyond professionalized practices of preparedness. Instead, I include a broader range of actors in the analysis of waiting for catastrophe and avoid a binary of activity/passivity in anticipation of disaster. I approach everyday life in Almaty, Kazakhstan, a city prone to potentially dangerous earthquakes, as a form of standby, or an ongoing state of waiting for a destructive earthquake, while living through smaller, non-destructive yet tangible ones that occur once every few years and trigger broad public discussion. One such earthquake, which struck on January 23, 2024, is the main case I study in this article, focusing on the forms of organizing anticipation before the earthquake, during, and after it. In doing so, I question the opposition between state institutions and local residents, widely presented in disaster studies, and suggest focusing on the interdependencies among the actors involved in disaster anticipation and on how they jointly shape (in)security through relations of care. I introduce the concept of *configurations of care* and demonstrate that anticipating a disaster is a dynamic process of redistributing care, in which the actors involved situationally shift their roles and intensity of engagement, forming different configurations and thereby transforming the mode of waiting. Drawing on interviews with urban planners, preparedness experts, and residents, I demonstrate how an earthquake (or lack thereof) transforms configurations of care in waiting for uncertain futures of Almaty.

## Keywords

care; earthquake; future; preparedness; standby

## 1. Introduction

During the night between January 22 and 23, an earthquake measuring 6.7 on the Richter scale struck 200 km from Almaty, Kazakhstan. In the homes of Almaty residents, chandeliers swayed, furniture shook, and dishes clattered in cupboards. Frightened people rushed into the freezing streets. Several people even jumped out of windows and were injured.

While the earthquake caused no infrastructural damage, it “spawned a wave of memes” as residents tried to “recover when being scared, with laughter afterwards” (Inf. A). Irina, a native of Almaty, shared her favorite meme referencing a scene from the series *The Boy’s Word* (*Slovo Patsana*, a Russian TV series that premiered in 2023), where a group of street hooligans is waiting for a fight with another group and is being scolded by their leader while standing on a frosty street: “I’m looking at you, you’re not prepared!” In the picture Irina shared, this quote was written over a photo taken on the night of the earthquake in Almaty. It resembled the scene described: In the courtyard, among the other people, a man in a hat and a winter coat, but without any pants and shoes, stood on the snow, completely frozen yet scared to go back home.

Unlike the residents, the city administration (*akimat*) and emergency services did not classify the event as an emergency. Seismological services recorded a magnitude of 5, below the threshold (5.5) for mandated response. Yet in residents’ eyes, local authorities were also “not prepared”—not just for this incident, but for future destructive earthquakes. The meme’s joking critique of the city as “not prepared” for an earthquake thus raises broader questions: What does it mean to “be prepared” and what exactly does one need to “be prepared” for? Who should “prepare” the city and how? And what role does the “absent transformer” (Deville, 2021)—an earthquake similar to the one in Almaty on January 23—play in this “preparedness”?

Built on tectonic faults, Almaty is highly vulnerable to seismic events, and future earthquakes could reach magnitudes of 9–10. Earthquakes are disasters of the built environment, as the vast majority of casualties and victims are caused not by tremors, but by the collapse of buildings and infrastructure (Angell, 2014). A major earthquake could result in up to 8,000 casualties and 17,000 buildings destroyed (Amey et al., 2021), yet it is almost impossible to accurately predict the location, magnitude, or timing of such events (Tapia-Hernández et al., 2019). Earthquakes represent an inevitable, uncontrollable, and unpredictable uncertainty for the people of Almaty: “Whether you are preparing or not, you still cannot foresee everything” (Inf. B).

Uncertainty, which is deeply embedded in everyday life, is one of the key characteristics associated with the perception of the future of cities (Amin, 2013). Professionals—state agencies, NGOs, experts—attempt to manage it by transforming it into calculable risk or preparedness technologies (Lakoff, 2007; O’Malley, 2012; Samimian-Darash & Rabinow, 2015). Other actors—particularly urban residents—are often seen as passive or irrational actors in risk frameworks (Gugg, 2019; Reddy, 2023) despite playing a crucial role in disaster response (Chamlee-Wright & Storr, 2011; Twigg & Mosel, 2017). Their knowledge, which emerges from everyday contexts, is dismissed in favor of expert knowledge (Tironi & Rodríguez-Giralt, 2017). Yet urban dwellers and communities play no less a role in imagining the future than other actors (Zheltnina, 2023), and their ways of living alongside earthquakes are important for understanding how a city prepares for disaster.

In this article, I follow those scholars (Reddy, 2023; Samimian-Darash & Rabinow, 2015) who move away, first, from the risk frameworks and, second, from expert work on “preparedness,” and propose focusing instead

on how different urban actors strive to create *certainty*. I employ the concept of *standby* mode (Kemmer et al., 2021), which expands the analysis beyond professionalized preparedness and avoids equating inactivity with passivity, or preparedness solely with visible mobilization. I approach everyday life in Almaty—where small, almost imperceptible earthquakes occur throughout the year, and non-destructive yet tangible ones that trigger broad public discussion happen once every few years—as a local form of standby, looking at how waiting was organized before the earthquake on January 23, during, and after it. Thus, in this article, I address the question of how waiting for a destructive earthquake that could occur at any moment is organized, and how a minor earthquake transforms this waiting.

Although many texts focus on the relationships between different actors in the preparedness process, in this article, I move away from the common opposition between residents and the state (and its expert institutions) and focus on the interdependencies of different actors involved in anticipating disaster and their joint efforts to shape (in)security. To explore it, I introduce the concept of *configurations of care*, building on an assemblage approach and understanding of care as a situated relational practice (Mol, 2008; E. R. Power, 2019). This allows for an examination of how different actors are included in—or remain excluded from—networks of distributed responsibility for the urban future. In this context, I consider anticipating disaster a dynamic redistribution of care, in which actors continuously move between different care-related roles and levels of engagement, thereby reshaping the mode of waiting.

This study is based on 18 semi-structured face-to-face interviews conducted in Almaty in November 2024 (in Russian). Informants were purposively selected to reflect diverse experiences related to earthquake preparedness; they included experts in construction and urban planning ( $n = 6$ ), volunteers ( $n = 3$ ), civic activists ( $n = 2$ ), journalists ( $n = 3$ ), and residents not professionally involved in the field ( $n = 4$ ). All interviews were transcribed and analyzed using qualitative thematic coding. In addition, the study analyzes regulatory documents on seismic safety and urban planning in Kazakhstan, as well as 32 national and local media publications on earthquake preparedness, particularly the January 23 earthquake. These materials were examined through qualitative content analysis to identify key actors and framings of responsibility and preparedness.

Based on these materials, I analyze how an earthquake without destruction still triggered a transformation of politics and practices of waiting for a potential disaster. By opening up new questions about who and how takes care of or does care-giving or care-receiving, and what is cared for or about (Tronto, 2020), I examine how disaster—or the absence of one—becomes a focal point for reassembling the city (Angell, 2014) and reimagining urban futures (Anderson, 2010).

## 2. From Preparedness to Standing By the Disaster: Active Inactivity of Anticipating the Future

Words such as “preparedness,” “resilience,” “risk management,” and “security” play a significant role in contemporary discourse on urban futures. This vocabulary reflects the fact that urban policymakers accept the uncertainty of the future as an integral part of modern urban life (Amin, 2013) and look for ways to transform an uncertain future into manageable and controllable phenomena (O’Malley, 2012; Samimian-Darash & Rabinow, 2015).

When the calculation of risks is impossible or limited—as in the case of some natural phenomena, including earthquakes—urban administrations resort to the technology of preparedness (Lakoff, 2007), which includes scenario planning, various simulations, and training exercises. Preparedness assumes that the disaster is not preventable and its possibility is built into the design of the system itself (M. Power, 2010)—or into the urban materiality (Angell, 2014). Preparedness technology suggests shaping a negative image of the future to shift attention from the threat itself to the vulnerabilities of confronting it (Lakoff, 2007), thus influencing the future (Collier et al., 2004).

The aforementioned meme “you’re not prepared!” refers directly to the concept of preparedness, but at the same time questions the ability of this concept to be sensitive to the analysis of what has happened in Almaty. As researchers note, the concept of preparedness assumes that key roles in planning, assessment, and action are assigned to state-related institutions (Lakoff, 2007), which shape the concept of preparedness and organize it through standardization mechanisms (Deville et al., 2014) that rely on expert knowledge (Barnett, 2012; Lakoff & Klinenberg, 2010). The state of “being prepared” is based on very specific infrastructure indicators that experts consider important for reducing vulnerability, while other aspects—including public perception of danger—remain outside the political discourse on the future in the face of disaster (Lakoff, 2007). The mocking statement of being “not prepared,” made at a time when an emergency had not been declared by experts but was considered to exist by urban dwellers ready to act, highlights the need to talk not only about emergency professionals and authorities, but also about broader publics, their understanding of the future, and their (in)ability to create certainty in situations where they live alongside a potential disaster.

Preparedness also implies developing systems of responsibility attribution (M. Power, 2010), which are centered on state institutions and place other actors—particularly urban residents, both as a collective entity and as individual actors—into an ambiguous position. While they are considered rational enough to be held responsible for the potential consequences of disasters through insurance instruments (Lakoff, 2007), their political significance is reduced to that of passive recipients of protection organized according to experts’ visions (Barnett, 2012). Residents are required to share the experts’ vision and demonstrate awareness (Gugg, 2019), while diversity of experiences of dealing with uncertainty is hardly relevant in the face of the judgments of “objective” experts (Jasanoff, 2010), who gain power because they possess knowledge, accreditation, and a “neutral” status that conceals the hierarchies and power inherent in knowledge production (Barnett, 2012). Politicians and experts often accuse people of failing to recognize risks and therefore behaving irrationally, or of overestimating risks and being prone to dramatization (Gugg, 2019; Jasanoff, 2010).

The perception of people’s passivity stems from the aforementioned dominance of the concept of preparedness, which renders invisible the practices of waiting for a disaster beyond those of experts. Contrary to this framing, “common” people often play a significant role in disaster preparedness and response (Chamlee-Wright & Storr, 2011; Cheshire, 2015; Twigg & Mosel, 2017). By interacting with urban infrastructure and the physical environment, they build preparedness alongside state institutions (Deville et al., 2014) while remaining in a waiting mode rooted in their everyday lives (Deville, 2021).

As an alternative to analyze waiting, characterized by not always rational or well-designed strategies, passive vigilance, and blurred boundaries of participation and responsibility, I will refer to the concept of *standby* (Deville, 2021; Kemmer et al., 2021). This concept rethinks the logic of action beyond technocratic

goal-oriented practice and captures social, material, and affective forms of life in a state of waiting for some event, including natural disasters (Deville, 2021). This mode of “active inactivity” requires (and generates) energy, resources, and relationships and can be transformed at any moment into action. Standby thus shifts the focus from the extraordinary to the everyday nature of possible earthquakes and analyzes how socio-material worlds are organized in the presence and absence of disaster.

Since the standby concept is equally attentive to the practices of emergency professionals (Deville, 2021) and to residents shaping their own futures (Kemmer & Simone, 2021), I find it a productive tool for analyzing urban life under the shadow of a potential disaster in Almaty. Drawing on this concept allows for moving beyond the dichotomy of activity and passivity, including a wider range of actors in the analysis, and avoiding the interpretation of the January 23 earthquake as a singular catastrophic event. Instead, I will consider it part of a broader process of preparing for greater destruction in a potential future.

### 3. Care-Full Standing By

Although research on disaster preparedness and response highlights the importance of local residents, its authors often draw a clear boundary between state institutions/emergency services and local residents, contrasting state actions with local community interests. These works argue that state-led, technocratic preparedness logics often reinforce vulnerabilities and cause responsabilization (Barmina et al., 2025; Cheshire, 2015; Gagné, 2019; Imperiale & Vanclay, 2021; Welsh, 2014). This research demonstrates that local knowledge can be more effective than expert knowledge on preparedness (Gaillard & Mercer, 2013), and that grassroots networks enable more effective action than state agencies (Chamlee-Wright & Storr, 2011; Cheshire, 2015; Twigg & Mosel, 2017). In such papers, city residents articulate political demands by openly opposing authorities over preparedness measures (Imperiale & Vanclay, 2021) or substitute for state functions when they are neglected (Tironi & Rodríguez-Giralt, 2017).

The standby concept follows a similar logic: Papers that draw on it describe a pronounced opposition between the state and local residents. The state appears as a source of instability and a perpetrator of political violence (Müller, 2021), making empty promises (Kemmer & Simone, 2021). As a result, the authors show how actors without institutional power succeed in “outwaiting and outwitting” powerful actors (Kemmer & Simone, 2021, p. 13; Müller, 2021).

I find such a dichotomy limiting when dealing with the complex phenomenon of disaster anticipation. As other studies have shown, disasters create situations in which actors do not necessarily oppose one another but may, in specific contexts, combine different logics: They may conflict, cooperate, act autonomously, or complement one another (Büscher et al., 2017; Carrero et al., 2019). In this article, I aim to approach the anticipation of a catastrophe from another angle—not as a confrontation between “strong” and “weak” publics (Fraser, 1990), but as a state of interdependence among actors awaiting a disaster. To do this, I turn to the concept of care, making it a central analytical lens for understanding disaster anticipation in Almaty.

The choice of care is not accidental. On the one hand, disaster studies refer to the concept to demonstrate solidarity among local residents (Tironi & Rodríguez-Giralt, 2017) or to define the paternalism performed by governmental bodies and international NGOs (Barnett, 2012). On the other hand, the authors of the standby concept explicitly refer to care (Kemmer et al., 2021), emphasizing the concept’s capacity to capture

“forms of improvised, and situational practice that are opposed to standards and rigid protocols” (Mol et al., 2010).

Indeed, the two concepts—standby and care—intersect in important ways. Both reveal ways of practicing endurance in times of crisis (Kemmer et al., 2021; Tironi & Rodríguez-Giralt, 2017), highlighting the importance of invisible work and interdependencies. Standby refers to a specific type of connections between elements: They are “loose bonds” that are not severed but are also not fully active and remain invisible at first glance (Kemmer et al., 2021). Care shares a focus on relations and pays close attention to invisible work (Mattern, 2018) and invisible relationships, including those unfolding across significant geographical distances (Milligan & Wiles, 2010). These aspects of care resonate with how the notion of standby focuses on what initially appears to be an “absent” element (Kemmer et al., 2021), and open possibilities for understanding this “absence” differently.

However, the concept of care can also significantly enrich standby, revealing the geometries of power that emerge in the context of anticipating disaster beyond the opposition between the state and local residents. It allows for a more detailed and nuanced understanding of complex relations among different actors involved in waiting. Care reveals the inequalities embedded in social structures and is directly linked to exploitation, domination, and the uneven distribution of burden among different intersectional categories of people (Puig de la Bellacasa, 2017; Tronto, 2020). This means it raises questions about who cares for whom and to what extent: which systems require what kind of maintenance, and who cares for those who maintain them (Mattern, 2018). At its core, care is rooted not in dyadic or individualistic relations (Tronto, 2020) but in interdependencies (Lawson, 2007; Puig de la Bellacasa, 2017; Tronto, 2013). These interdependencies involve varying degrees of intensity and engagement—from *caring about*, meaning recognizing a matter of concern, to *taking care of*, meaning assuming responsibility for someone’s need, and up to the direct work of *care-giving* (Tronto, 2020). In this way, care is not a linear, one-directional activity but a dynamic distribution of interchangeable roles between *care-giver* and *care-receiver* (Tronto, 2020), where the efforts of both sides are necessary for an act of caring to occur (Tronto, 2013). Care thus challenges the dichotomy of activity versus dependence (E. R. Power, 2019) and allows attentiveness to complexly organized power, shifting roles, positions, and involvements.

Thus, the optics of care develop the standby concept further. Care supports its already-articulated move away from the simplified image of “powerless waiting-for” (Kemmer et al., 2021) and from the dichotomy of activity/passivity. At the same time, it visibilizes the power relations embedded in preparedness as a tool for governing life and vulnerability—precisely the direction in which the creators of the standby concept propose developing it (Kemmer et al., 2021). Care is sensitive to how power and agency of active-inactivity are distributed, extending beyond discussions of dependence on authorities, resistance to them, or the creation of autonomous alternatives.

#### 4. Configurations of Care

To analyze the organization of the standby mode, in this article, I propose the concept of *configurations of care* and trace how these configurations emerge and change around a matter of collective concern: the earthquake in Almaty. Care as a configuration resonates with the concept of “caring-with” (Tronto, 2013), describing “the co-constitution of caring and the distribution of (un)caring agencies that shape the capacity

for care” (E. R. Power, 2019, p. 2). Configurations of care build on the idea of assemblage thinking (Anderson & McFarlane, 2011) and on the understanding of care as a relational and situational practice, manifested in a diversity of socio-technical networks of interdependence (Mol, 2008; Puig de la Bellacasa, 2017; Vogel, 2021). Care in such configurations represents a “distributed and relationally afforded mode of ‘doing good’” (Vogel, 2021, p. 3)—a mode in which relations between different elements, including nonhuman ones (Buser & Boyer, 2021; Kullman, 2014; E. R. Power & Williams, 2020), work collaboratively toward creating a favorable future under specific circumstances.

The concept of configurations of care adapts the understanding of care as an assemblage (E. R. Power, 2019) to a specific temporal condition—the “active waiting” for a future earthquake—showing how care relations constitute anticipation. While E. R. Power (2019) asks the question, “What makes care possible?”—that is, how various elements come together in an assemblage to create (or limit) the very possibility for or capacity of people to care for themselves and others—I take this line of inquiry further, examining how this capacity is organized and reorganized in a mode of disaster anticipation. Within a configuration of care, actors may shift their involvement in caring: They may *care about*, recognizing the need for care and the risks associated with the future; *take care of*, assuming responsibility for others’ needs and determining how to respond to them; perform *care-giving*, carrying out the direct work of meeting those needs; and, finally, be *care-receivers*, allowing themselves to be regarded as those who require care (Tronto, 2020). Situationally constructing certain objects as dangerous (Douglas & Wildavsky, 1982), the actors may define which care-related roles and forms of care to reduce vulnerability are acceptable and feasible under specific conditions. Thus, configurations of care consider not only the distribution of responsibility (who is included in an act of care?), but also how participants—by changing their understanding of (un)safe, by joining or withdrawing, and by shifting their modes of engagement—transform the mode of waiting.

Thus, the concept of configurations of care analyzes how the standby mode is organized and reorganized, diversifying its states and demonstrating its heterogeneity. Configurations of care help move beyond a paternalistic understanding of preparedness, making visible the inclusion of diverse actors in the networks formed around the earthquake as a matter of concern, and showing how situational “care collectives” (Alam & Houston, 2020) are formed. The concept is sensitive to complex power relations beyond the dichotomy of state and residents and is able to show the interdependencies and collaborative efforts of different actors in achieving care and safety. Ultimately, this notion allows us to see how, through “the actors and relations bound up in any act of care” (E. R. Power, 2019, p. 2), the mode of active waiting for a future earthquake becomes possible and undergoes transformations.

## 5. Before the Earthquake

One of the preparedness directions in Almaty focuses on immediate earthquake response. This is regulated by a set of documents (Ministry of Internal Affairs’ Committee for Emergency Situations, 2015; Republic of Kazakhstan, 2014) specifying the bodies involved in disaster management (including the president, the Ministry of Internal Affairs’ Committee for Emergency Situations, the city administration, local rescue teams, and civil volunteer associations), their authority, responsibilities, and resources. These documents include instructions for action before, during, and after a disaster and outline training exercises—an attempt at “relevance-making” (Deville, 2021) to sustain a link between preparedness and potential disasters.

Another direction addresses urban planning and construction control to prevent destruction and casualties. Over the last 20 years, construction norms have become stricter and now follow international standards (European Macro-Seismic Scale, EMS-98; Inf. C). In tectonic fault zones marked on city maps, special regulations apply (Ministry of Investment and Development's Committee on Construction and Utilities, 2017). The state-led KazRICA (Kazakh Research and Design Institute of Construction and Architecture) monitors the seismic safety of constructions by installing seismic stations on 14 city buildings (Inf. C). The city also strengthens social infrastructure and runs a housing program, which involves demolishing old Soviet buildings and replacing them with high-rise, earthquake-resistant ones.

This overview represents a model of preparedness in which the state considers itself as the central actor *taking care of* the city, organizing it through local administrations, rescue teams, monitoring institutions, school teachers, and others. As for "common" residents, the state's preparedness plan assigns them the role of relatively passive *care-receivers*. They are expected to follow official guidance to prepare for emergencies, but "in practice, when the [training] siren goes off, of course, no one does anything" (Inf. A). They unauthorizedly remodel their privatized apartments, creating potential threats to seismic safety: "In the 1990s–2000s, no one cared—if someone wanted, they turned the living room into a kitchen, or vice versa. These remodelings affected the building's ability to withstand [seismic] loads" (Inf. C). Thus, the state's *care-taking* role, which proposes expertise in safe housing and offers training activities, turns out not to be in demand among residents—they do not assume the role of *care-receiver*, and care is not enacted as intended. At the same time, no other role is envisioned for urban residents within this configuration. For example, residents are not envisioned as responsible actors through mechanisms like home insurance. Most housing is privately owned, but there is no insurance market to insure "the walls and the building itself" (Inf. I), only the apartment, so if the building is destroyed, "it becomes a direct burden on the state" (Inf. I).

The configuration of care that emerges instead of the one described above assigns a much more active role to urban actors besides the state or city administration. These include, first, experts who do not work in the state-led seismic construction institute. The key concern they raise is the unregulated development boom in the post-Soviet years and the construction of high-rise buildings (over 15 floors) near tectonic fault lines. Architect Alexander, with 30 years of experience, states that earthquake safety requirements conflict with urban development policies focused on densification that seek "to free developers as much as possible from any restrictions" (Inf. F). To resolve this contradiction, the city administration, developers, and KazRICA establish special "technical conditions"—workarounds that enable construction in more dangerous and previously undeveloped areas and allow for loose control over buildings' capacity to withstand an earthquake, since "every [regulation] is relaxed to the extreme" (Inf. F). Another issue discussed is the potential obstacles to emergency vehicle access in the city and the feasibility of evacuation, since the designated earthquake gathering areas in Soviet-era courtyards have been taken over by infill developments (Inf. A, F, G).

Such critical narratives by experts and urban activists are also supported by private developers: One company hired a Japanese engineer to design low-rise buildings (Japanese expertise is highly valued in Almaty); others use a very costly machine to shake a newly constructed high-rise building and simulate a magnitude-9 earthquake. Some office building owners practice regular evacuation drills for office workers since "it's a huge responsibility, there are so many people [working here]" (Inf. A). Developers must persuade apartment buyers and office residents that they indeed *take care of* their safety (Inf. C, F).

Experts and private companies thus integrate themselves into configurations of care and demonstrate that they, too, *care about* potential futures and *take care of* safe life and work in the city. Their care is expressed by highlighting the “fragility” and unreliability of existing state-led measures—and by proving that they can take responsibility alongside the state. Activists *care about*, too, but also strive to “repair” the state’s efficiency at *taking care of*, urging stronger state engagement or escalation to higher-level institutions: “We identify all these [vulnerabilities], explain, prove them. It goes upward [to the president], and at the top level, the issue is resolved” (Inf. G).

However, even this intention creates another important effect: When experts “start writing something [about earthquake risks], everyone starts worrying again” (Inf. A). By embedding themselves in care configurations and demonstrating local authorities’ “weakness,” these actors push residents to *care about* rather than only be *care-receivers*. As a result, residents are highly skeptical about the state’s ability to take responsibility for their safety. Despite stricter norms, many still view Soviet buildings as safer, products of a more “caring” state, while new high-rises are described as “future mass graves” (Inf. E).

For care to be realized, the efforts of both sides—*care-giver* and *care-receiver*—are required (E. R. Power, 2019). Yet during periods without small tangible earthquakes, residents often reject the *care-receiver* role—the state-designed configuration of care does not function as intended. At the same time, experts, activists, and other public actors encourage residents to engage with the configuration of care in a more active role by *caring about* the potential danger posed by buildings in the city.

## 6. During the Earthquake

Did an emergency situation occur on the night of January 23, 2024? On one hand, there were tangible tremors that made people “jump together with the sofa” (Inf. D) and frightened even long-time residents of the city, who had grown accustomed to small earthquakes. On the other hand, local guidelines set the emergency threshold at magnitude 5.5, and this quake was rated at 5.0. As a result, it was not classified as an emergency. Emergency services followed strict algorithms, and “very often people don’t understand how the [emergency service] staff operate” or why apparent inaction has internal logic within rescue practice (Inf. H). The sirens did not sound—again, due to the threshold. Specialists argued that 5.0 cannot damage buildings or threaten lives, so “there’s no need for it, and it would only cause even more panic” (Inf. H).

When the tremors forced people out into the streets, they were more ready than ever to assume the role of *care-receivers*: to follow instructions and to feel that their lives were being kept safe. However, the emergency services initially did not transform the *taking care of* role into *care-giving* as they did not consider the situation dangerous. This caused even greater fear and disappointment among residents, who did not know what to do on a cold night. A few hours later, city authorities responded by quickly organizing an emergency headquarters, reporting on the situation, opening safe gathering points in schools, and finally sending belated SMS alerts about the danger. According to my informants, residents considered this “productivity theatre” that had nothing in common with “proper” *care-giving*, and were even more deeply irritated and disappointed.

In what one informant called a “sub-emergency” (Inf. H), alternative care configurations emerged. First, there was a shift in roles: Residents became *care-givers* for their families and neighbors. A mass “self-evacuation”

(Inf. D) took place: Many chose not to return home but instead got in cars or drove to the outskirts or to relatives, considering their low-rise houses safer (Inf. A). The city turned into one huge traffic jam.

Some informants labeled this as “panic,” criticizing the self-centered logic where “everyone only thinks about their own [interest]” (Inf. J). Placing this critique in the broader context of the city’s development policy—which promotes automobilization in a material environment that cannot accommodate excessive car usage—it becomes clear that configurations of care, centered around individual actors caring for themselves and their families, come into conflict both with the state’s infrastructural policy and with its claim to dominance as the main *care-giver* that failed to justify residents’ trust. Informants voiced fear that “if something truly catastrophic happens, no one will be able to go anywhere. Because...the whole city [will] just [get] stuck in these cars....Ambulances, fire trucks, cranes, all that heavy equipment won’t be able to pass anywhere” (Inf.-A).

Second, volunteer networks—independent of official emergency services—stepped in. Having prior experience with crises, they contributed significantly to the work of safe gathering points in several city schools opened by the municipalities to accommodate people overnight. Volunteers quickly formed a headquarters (Inf. H), set up a hotline, and took on the role of *care-givers* by “welcoming people, explaining things, offering food, drinks, and warm blankets if they ran out in just their underwear, so to speak” (Inf. B). While only active in some parts of the city, these initiatives were effective in caring for those who were “afraid to stay at home” (Inf. K).

The tremors on the night of January 23 caused no destruction or casualties but transformed the configurations of care: Residents were ready to enter into a care relationship with the state, but instead became *care-receivers* from volunteer organizations and, in turn, transformed into *care-givers* for themselves and their loved ones. This configuration worked in the moment, but it deepened concerns about the state’s ability to act as a *care-giver* not only in immediate response to a threat, but also in terms of *taking care of* planning urban infrastructures.

## 7. After the Earthquake

The day after the earthquake, state institutions began reasserting their position as the main actors in charge. The president’s statements, widely cited in the media, clearly demonstrated the state’s primary role in preparedness and response: Even residents’ lack of emergency kits and knowledge of how to behave was framed as a failure on the part of local officials (“Tokayev raskritikoval,” 2024). Following this logic, the city administration became more active, visibly *taking care of* residents: installing informational boards about evacuation points at every building entrance, organizing citywide drills (“Okolo 600 tysyach,” 2024), providing schools with shelter tents, strengthening the alarm system, and launching weekly alert checks. The new measures complemented those initiated before the earthquake, such as centralizing expertise in construction and building approval processes (Inf. F) and in the inspection and certification of residential construction (“Boleye 13 tys,” 2024). Residents remain skeptical, describing these efforts as having merely “made some noise” (Inf. K) or representing “grotesque, caricature-like initiatives, with no consistency” (Inf. A).

Experts strengthened their place within the configuration of care after the earthquake. They not only continued their critique of the existing preparedness system and co-produced the built environment as a matter of concern, but also “calm[ed] everyone down” (Inf. K), performing as *care-givers*. Activists exposing

construction violations perceived the earthquake as an opportunity to make visible the fragility of the local administration's *taking care of* role: "It actually worked to our advantage" (Inf. G). Their goal was not to oppose the state, but to strengthen the configuration of care by involving the presidential administration. However, they neither took on the *care-receiving* role nor believed others had to do so. Instead, they encouraged residents to take greater responsibility for their own housing choices: "The main problem of our ordinary people is that they're convinced their housing complexes are well built—that since construction was permitted, it must be safe. They can't grasp the scale of this potentially corrupt system" (Inf. G).

In this discourse, still carrying the memory of the recent earthquake, residents began *taking care of* their future by assembling personal emergency kits, downloading fault zone maps, installing mobile earthquake alert apps, and developing personal housing strategies. Some friends and relatives of my informants moved out of Almaty (Inf. B) or began to question their living conditions—"It's really scary to live in high-rises, especially on the top floor" (Inf. B). They now consult architect acquaintances before buying or renting apartments (Inf. A), and some "consider selling [apartments in a new high-rise]" (Inf. G), believing that when it comes to Soviet-era buildings, "the state was in control [of construction], and such a building could easily withstand a 9-magnitude quake" (Inf. E).

At the same time, residents do not reject the state as *taking care of* them or as a potential *care-giver*. They demonstrate an active willingness to receive care properly—for example, by learning expected behaviors during earthquakes and the logistics of evacuation. People frequently contact KazRICA for remodeling consultations, assigning responsibility for safety to professionals affiliated with the state, while simultaneously demonstrating their own *taking care of* neighbors' safety (Inf. C). Volunteer organizations perceive a public demand to be *care-receivers* beyond the formal algorithms developed by the state, and therefore they also prepare their own resources so that when "people start acting [as care-receivers], volunteers [can] step in to ensure their safety—hand out tea, little pastries, warm things" (Inf. H).

The earthquake became a point of reassembly for care configurations by transforming the roles of the urban actors. Yet more than anything, it brought the residents' role into focus. A common sentiment—that "people still need to approach this issue more responsibly" (Inf. B)—reflects the demand for urban dwellers to take on multiple roles: as *care-receivers* who follow instructions; as citizens who *care about* their built environment by raising awareness; as individuals who *take care of* their own safety through housing choices; and as *care-givers* in civic initiatives. This last role is especially emphasized by volunteers, who regret that, unlike in other cities, "where the population itself observes and prepares," in Almaty, "people practically don't want to do anything [for preparedness]" (Inf. B).

## 8. Earthquake as an (Absent) Transformer

Earthquake preparedness relies on imaginations of the future that are "disciplined and conditioned by an awareness of the past" (Jasanoff, 2010). The "before" of earthquakes incorporates global experience, and every tremor in Almaty offers an opportunity to rethink preparedness for a larger, potentially destructive earthquake. Small but physically perceptible earthquakes "keep you on your toes" (Inf. A), constantly forcing configurations of care to reorganize and strengthen while raising questions about roles and responsibilities. They undoubtedly transform the organization of waiting, yet the *absence* of earthquakes also acts as a transformer of care configurations.

Informants described the post-earthquake state in terms of closure—“So how did it all end?” (Inf. A); “Everyone sighed and gasped, and the day was over” (Inf. I). This framing suggests preparedness reorganization was seen as complete. Yet precisely at this perceived moment of “ending,” a new transformation arose—one tied to *the absence* of earthquakes. Gradually, people exhaled: “We’ve survived—we’ll live a little longer” (Inf. A). Configurations of care began to gravitate back toward how they were organized “before.” Residents gradually dropped out of care configurations—“People panicked, slept it off, and went back to normal life; they’re no longer interested in this issue” (Inf. B)—leaving the central caring roles to professionals, the city administration, and the seemingly reliable Soviet housing legacy. The alerts whose absence once provoked public outrage have now become part of the city’s background noise, barely noticed. High-rise residents have returned to their apartments. City administration campaigns have faded into bureaucratic reports and disappeared from the public sphere because no one *cares about* them anymore.

Still, the temporally deferred configuration of care will never fully repeat the “before” state. During the next tangible earthquake in Almaty, on March 4, 2024, “people were more organized and reacted the way they were supposed to react” (Inf. A). State institutions also acted faster to perform *care-giving*—creating emergency headquarters, opening gathering points, and communicating with residents more efficiently. This event marked a new phase of standby mode, as it triggered a reconfiguration of care and raised questions about the capacity of certain urban actors—this time, kindergartens and schools—to act as reliable care actors.

## 9. Conclusion

In this article, I explored how the everyday experience of waiting for a potentially destructive earthquake is organized in Almaty and examined the phases before, during, and after the moderate but tangible earthquake of January 2024. In this way, I seek to contribute to understanding how preparedness changes over time (Deville et al., 2014). Unlike texts that treat an earthquake as an event that radically reshapes everyday realities or as a rupture in urban life (Temenos, 2025), in this article I consider it a “crisis ordinary” (Berlant, 2011) and examine the process of waiting for disaster.

Drawing on the notion of *standby* (Kemmer et al., 2021), I offered an alternative to examining preparedness solely as a practice of professionals: I paid equal attention to the preparedness practices carried out by state and emergency professionals and to the everyday practices of residents that may appear as inactivity or passivity. I also questioned the opposition between the state institution and local residents, which is often emphasized in the literature on disaster anticipation. Instead, I suggested focusing on the interdependencies among the actors involved in anticipating disaster and on how they jointly shape (in)security through relations of care.

To specify how disaster anticipation is organized and to understand the role of a small but tangible earthquake therein, I proposed the category of *configurations of care*. This concept develops the understanding of the city as a fragile assemblage (Angell, 2014) and allows us to see who and how seeks to make it more stable and adaptable to chronic uncertainty. Based on the idea of care as an assemblage (E. R. Power, 2019), the concept of care configurations reveals the (re)distribution of care among different actors before, during, and after the moderate but tangible earthquake. Thus, in this article, I argue that anticipating disaster is a dynamic process of (re)distributing care, in which the actors involved situationally

shift between care-related roles (care-giving, care-receiving, taking care of, caring about) and vary their intensity of engagement, forming different configurations and thereby transforming the mode of waiting.

Empirically, I trace the shifts in configurations of care associated with the January 23, 2024, earthquake in Almaty. Before it, responsibility for preparedness rested primarily on professionals affiliated with the state—they were expected to *take care of* potential earthquakes. City residents were assigned the role of *care-receivers*—a role they accepted reluctantly. At the same time, experts and activists were part of the configuration of care by *caring about* preparedness and sought to orient residents toward taking on such a role as well, framing the earthquake as a matter of concern, a political issue requiring a more responsible role from the state.

In the absence of noticeable earthquakes, preparedness appears as routine—a state in which there is “the risk of becoming trapped in an endless present” (Deville, 2021, p. 1). The future—in its potentially catastrophic form—bursts into the city’s everyday life as a magnitude-5 earthquake, one that does not destroy buildings or infrastructure but makes people run out into the streets. This time, residents wanted to perform the role of *care-receivers*, yet the expert understanding of preparedness, which deemed no reaction necessary, clashed with residents’ emotional experiences and their need for *care-giving*. The inability to mobilize and to transform *taking care of* into actual *care-giving* practices led to what Deville et al. (2014) describe as the “breakdown of preparedness”—the erosion of the state as a materially responsible force for survival. As a result, practices of *care-giving* for close ones came to the forefront. These were uncoordinated and potentially harmful to the collective good, since—as with hastily leaving the city and creating traffic jams—they took place within a material environment produced by the state that expected people to remain *care-receivers* and not take responsibility for their own safety.

After the earthquake, the reorganization of care configurations continues. The state attempts to restore its role as the main actor that *takes care of*, while activists and volunteers simultaneously undermine and support it—mobilizing the Presidential Administration to oversee preparedness, or substituting for emergency services where they are needed but not present as *care-givers* according to official protocols. Residents, in turn, seek to integrate into these configurations both as *care-receivers* from volunteers and the state and as autonomous actors capable of *taking care of* themselves by reorganizing their everyday routines and creating safer domestic environments.

A tangible earthquake forces configurations of care to reassemble rapidly. Yet the absence of an earthquake also acts as a transformer, albeit a less visible one: Gradually, care configurations tend to shift toward a configuration in which the main roles are assigned to emergency professionals and state institutions. Residents gradually withdraw from *taking care of*, though they still *care about* from time to time. The configurations, however, never repeat what is already reconfigured, and the standby mode continues to evolve—moving through new phases of activation and dormancy.

Both the earthquake that “keeps you on your toes” and its absence equally transform how responsibility is distributed within anticipation. A tangible earthquake requires a quick transformation of state services from *taking care of* into *care-giving*, which failed in the case discussed and introduced volunteers and residents as *care-giving* actors. The absence weakens *caring about* and makes *taking care of* less responsible. Considering these transformations through the concept of configurations of care makes it possible to see not only the

politics of responsibility and blame after disasters (Angell, 2014), but also how the constant re-adjustment and learning to exist within uncertainty is organized in a situation where its elimination is impossible.

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### Supplementary Material

Supplementary material for this article is available online in the format provided by the author (unedited).

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