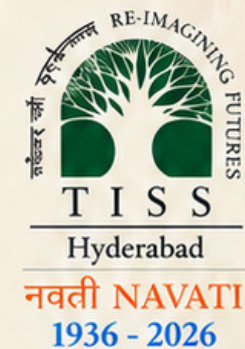


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GOVERNING DEATH,
RE-SPECIFYING AGENCY
*State, Market, and Civil Society
in India*

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Governing Death, Re-specifying Agency

State, Market, and Civil Society in India

Aseem Prakash ^{*}, Ipsita Sapra ^{**} and Khusboo Srivastava ^{***}

Abstract

Despite sustained efforts to move beyond determinism and voluntarism, the structure–agency debate continues to rely on analytically thinned conceptions of both structure and agency. This article re-specifies the debate by foregrounding how agency is constituted through encounters with power across the state, market, and civil society. It argues that structure is best understood not as a coherent or unified system but as institutionally differentiated and conjunctural, while agency is reconceptualised as situated navigation across intersecting regimes of authority, allocation, and care. To capture these dynamics, the article develops a Relational Institutional Mediation of Agency (RIMA) framework that conceptualises structure as differentiated across state, market, and civil society, and agency as relational, stratified, and temporally situated. Drawing on an analysis of death governance during the COVID-19 pandemic in India, the paper shows that institutional overdetermination generates dissonance rather than coherence, collapsing some registers of agency while redistributing action into moral, temporal, and ethical forms. By treating death and mourning as analytically generative sites, the article demonstrates how agency is reformatted under conditions of institutional power. It makes three contributions: first, it challenges the emancipatory bias in dominant theories of agency by showing that agency under crisis often takes reparative and stabilising forms; second, it extends relational and temporal approaches by demonstrating that temporality itself becomes an object of governance; and third, it repositions death as a central site for analysing how institutional power reshapes the conditions of action.

Keywords: Agency; State–market–civil society; Institutional intersection; Institutional power; Structure–agency debate; Temporality; Moral labour; Pandemic governance

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I. Introduction

The relationship between structure and agency has long occupied a central place in social theory. Early structuralist traditions reduced actors to carriers of systemic logics, while interpretive approaches foregrounded meaning-making and intentionality. Classical formulations variously emphasised systemic integration,¹ structural determination,² or interpretive rationality.³ Later theorists sought to transcend this dichotomy through relational accounts of structuration, morphogenesis, and practice.⁴

Despite these advances, a critical gap persists. Structure continues to be treated as analytically coherent and insufficiently grounded in institutionally differentiated forms of power. Agency, in turn, is often implicitly aligned with resistance, reflexive choice, or strategic action, leaving aside other modalities through which actors engage with constraint. What remains under-theorised is how actors encounter and navigate power across intersecting institutional domains, particularly in moments of crisis when authority, coercion, morality, and commodification converge.

This paper addresses this gap by arguing that agency is constituted through how actors encounter and navigate power across multiple institutional sites. Rather than approaching structure as an abstract or unified system, it conceptualises it as institutionally differentiated and conjunctural. Agency, correspondingly, is understood not as autonomous choice but as situated navigation shaped by unequal access to material, social, and symbolic resources.

The governance of death during the COVID-19 pandemic in India provides a critical empirical site for examining these dynamics. Far from being an exceptional case, it serves as a theoretical stress-test for dominant formulations of structure and agency.⁵ In this context, actors encountered overlapping regimes of state authority, market allocation, and civil society care, often operating through distinct and conflicting logics. These intersections did not produce coherence; rather, they generated institutional dissonance that reconfigured the conditions under which agency could be exercised.

¹ T. Parsons, *The Social System* (New York: Free Press, 1951).

² L. Althusser, *Lenin and Philosophy and Other Essays* (New York: Monthly Review Press, 1971).

³ M. Weber, *Economy and Society* (Berkeley: University of California Press, 1978).

⁴ A. Giddens, *The Constitution of Society* (Cambridge: Polity Press, 1984); M. S. Archer, *Realist Social Theory: The Morphogenetic Approach* (Cambridge: Cambridge University Press, 1995); P. Bourdieu, *The Logic of Practice* (Stanford, CA: Stanford University Press, 1990).

⁵ V. Das, *Life and Words: Violence and the Descent into the Ordinary* (Berkeley: University of California Press, 2007); M. Foucault, *The Birth of Biopolitics* (New York: Palgrave Macmillan, 2008); G. Agamben, *State of Exception* (Chicago: University of Chicago Press, 2005).

To capture these dynamics, the paper develops a Relational Institutional Mediation of Agency (RIMA) framework. This framework conceptualises structure as relational, differentiated, and conjunctural, and agency as unevenly distributed, temporally situated, and institutionally mediated. It shifts analytical attention from whether actors are free or constrained to how agency is reorganised across domains, registers, and temporalities.

The argument unfolds across four sections. Section II revisits the structure–agency debate, demonstrating how existing approaches underplay institutional differentiation and intersection. Section III develops the RIMA framework, outlining its core propositions. Section IV draws on an analysis of death, grief, and mourning during COVID-19 to examine how agency is constrained, displaced, and reworked under institutional overdetermination—defined here as the condition in which multiple institutional regimes simultaneously impose incompatible logics, producing dissonance rather than coherent constraint. The concluding section reflects on the theoretical implications of these findings and advances three contributions.

First, the paper challenges the emancipatory bias in dominant theories of agency by showing that, under conditions of institutional overdetermination, agency often takes reparative and stabilising forms rather than oppositional ones. Second, it extends relational and temporal approaches by demonstrating that temporality itself becomes an object of governance, with agency reconstituted through practices of temporal repair. Third, it repositions death as a central analytical site for the study of structure and agency, where institutional power is most condensed and agency most sequentially reconfigured.

II. Reframing Structure: From Abstract Constraint to Institutional Power

This section examines how treating structure as institutionally differentiated power clarifies the uneven ways in which agency is exercised, constrained, and reworked across intersecting domains during crises. To situate this approach, it is useful to briefly revisit how structure has conventionally been conceptualised in classical sociological theory.

Structure as Institutional Power

In classical sociology, structure is often treated as a relatively coherent system—norms, rules, or social relations—that constrains and enables action.⁶ While analytically productive, this abstraction

⁶ É. Durkheim, *The Rules of Sociological Method* (New York: Free Press, 1982); Parsons, *Social System*.

obscures how structure is unevenly distributed, institutionally embodied, and differentially experienced.⁷ Structuration theory marked a decisive move beyond determinism by conceptualising structure as both the medium and outcome of social practices.⁸ Yet even here, structure tends to appear as a relatively unified backdrop, insufficiently attentive to institutional plurality and asymmetries of power.⁹

The pandemic renders this limitation visible. Individuals did not encounter “structure” abstractly but through concrete institutional sites: hospitals enforcing triage, health departments issuing shifting advisories, police regulating mobility, markets pricing access to care, crematoria governed by regulation, digital platforms mediating information, and religious institutions negotiating ritual suspension.¹⁰ These sites operated through distinct and often conflicting logics—biomedical rationality, bureaucratic accountability, market valuation, moral obligation, and affective care.

What constrained agency, therefore, was not structure per se but the collision of institutional imperatives. Structure appears not as coherence but as institutional dissonance, requiring reconceptualisation as relational, differentiated, and conjunctural power.

Agency as Situated Navigation

If structure is institutionally differentiated, agency must be reconceptualised as situated capacity rather than abstract autonomy. Morphogenetic approaches emphasise analytical separation between structure and agency to examine reflexivity over time,¹¹ but they often assume relatively stable structural contexts. Pandemic governance destabilised this assumption, as conditions shifted rapidly and unpredictably, compelling actors to navigate overlapping regimes of authority.¹²

Relational sociology is therefore indispensable. Agency is conditioned by an actor’s position across

⁷ W. H. Sewell Jr., “A Theory of Structure: Duality, Agency, and Transformation”, *American Journal of Sociology* 98, no. 1 (1992): 1–29; M. Mann, *The Sources of Social Power*, vol. 1 (Cambridge: Cambridge University Press, 1986).

⁸ Giddens, *Constitution of Society*.

⁹ Archer, *Realist Social Theory*; N. Mouzelis, *Modern and Postmodern Social Theorizing* (Cambridge: Cambridge University Press, 2012).

¹⁰ C. Bamba, J. Lynch, and K. E. Smith, “The Unequal Pandemic: COVID-19 and Health Inequalities”, *Journal of Epidemiology and Community Health* 74, no. 11 (2020): 964–68; L. E. Selman et al., “Risk Factors Associated with Poorer Experiences of End-of-Life Care and Challenges in Early Bereavement”, *Palliative Medicine* 36, no. 4 (2022): 717–29.

¹¹ Archer, *Realist Social Theory*; M. S. Archer, *Structure, Agency and the Internal Conversation* (Cambridge: Cambridge University Press, 2003).

¹² M. Lipsky, *Street-Level Bureaucracy* (New York: Russell Sage Foundation, 2010); V. Das and D. Poole, eds., *Anthropology in the Margins of the State* (Santa Fe, NM: School of American Research Press, 2004).

multiple fields and by access to economic, social, cultural, and symbolic capital.¹³ However, while Bourdieu's field theory treats each field as relatively autonomous, pandemic governance produced a condition in which field logics collapsed into the same institutional encounter—what this article terms institutional intersection. During the pandemic, agency at the intersection of state, market, and civil society was sharply stratified across three forms of institutional power.

The state exercised authoritative power through regulation, classification, and sanction, determining access to hospitals, the handling of bodies, and the recognition of death.¹⁴ This sovereign function—who may live and who must die¹⁵—was not concentrated but dispersed across institutional sites, intensifying opacity. This authority did not operate in isolation but was entangled with market allocative power, which converted scarcity into price and selectively restored choice for those with economic capital while deepening exclusion for others.¹⁶ Civil society, in turn, exercised normative and affective power through care, solidarity, and symbolic repair, often absorbing the moral fallout of state and market failures.¹⁷

Each form of power conditioned agency differently, and their intersection remains insufficiently theorised. Actors' capacity to act depended on their ability to mobilise capital: economic capital to secure care, social capital to access networks, cultural capital to navigate bureaucracy, and symbolic capital to claim legitimacy. Agency thus emerges as relational and unevenly distributed.¹⁸

Civil Society and Care

Classical political theory casts civil society as a counterweight to state domination and a site of contestation.¹⁹ The pandemic complicates this expectation. Civil society actors—volunteers, religious organisations, neighbourhood groups—were highly active, yet their action was largely ameliorative rather than oppositional, directed toward mitigating suffering rather than confronting institu-

¹³ P. Bourdieu, "The Forms of Capital", in *Handbook of Theory and Research for the Sociology of Education*, ed. J. Richardson (New York: Greenwood, 1986), 241–58; Bourdieu, *Logic of Practice*.

¹⁴ Weber, *Economy and Society*; Mann, *Sources of Social Power*.

¹⁵ A. Mbembe, "Necropolitics", *Public Culture* 15, no. 1 (2003): 11–40.

¹⁶ K. Polanyi, *The Great Transformation* (Boston: Beacon Press, 1944); M. Fourcade, "Cents and Sensibility", *American Journal of Sociology* 116, no. 6 (2011): 1721–77.

¹⁷ R. D. Putnam, *Bowling Alone* (New York: Simon and Schuster, 2000); J. C. Alexander, *The Civil Sphere* (Oxford: Oxford University Press, 2006).

¹⁸ Bourdieu, *Logic of Practice*; M. Emirbayer and A. Mische, "What Is Agency?", *American Journal of Sociology* 103, no. 4 (1998): 962–1023.

¹⁹ A. de Tocqueville, *Democracy in America*, trans. H. C. Mansfield and D. Winthrop (Chicago: University of Chicago Press, 2000); J. L. Cohen and A. Arato, *Civil Society and Political Theory* (Cambridge, MA: MIT Press, 1992); A. Gramsci, *Selections from the Prison Notebooks* (New York: International Publishers, 1971).

tional failure.

Rather than contesting authority, civil society often absorbed the moral and affective consequences of state incapacity and market exclusion. This reveals a theoretical blind spot: dominant agency–structure debates privilege resistance and strategic action, marginalising forms of agency expressed through care, ethical labour, and solidarity.²⁰ Under crisis conditions, civil society may function less as a site of contestation and more as a moral buffer: by absorbing the material and affective consequences of state and market failure, civic actors relieve institutions of accountability pressures, stabilising legitimacy even while exposing its limits.²¹ Frameworks that treat civil society as inherently oppositional therefore require revision.

Temporality and Agency

Temporal-relational theories highlight how agency is oriented toward past, present, and future.²² This is especially salient in contexts of death and mourning, where agency is tied to ritual continuity, moral obligation, and collective memory.²³

Pandemic governance disrupted these orientations: rituals were suspended, choices constrained by protocol, and futures deferred or foreclosed.²⁴ The state justified these disruptions through public-health rationality, markets commodified urgency, and civil society attempted partial temporal repair through symbolic and affective practices.

Agency thus appeared less as resistance and more as temporal repair—efforts to restore dignity, continuity, and meaning amid institutional temporal collapse.²⁵ Existing theories recognise temporal orientation but do not account for conditions where institutional power actively dismantles it.

²⁰ J. C. Tronto, *Moral Boundaries: A Political Argument for an Ethic of Care* (New York: Routledge, 1993); S. Sevenhuijsen, “The Place of Care: The Relevance of the Feminist Ethic of Care for Social Policy”, *Feminist Theory* 4, no. 2 (2003): 179–97.

²¹ Alexander, *Civil Sphere*.

²² Emirbayer and Mische, “What Is Agency?”.

²³ R. Hertz, *Death and the Right Hand* (London: Routledge, 1960); T. Walter, “A New Model of Grief: Bereavement and Biography”, *Mortality* 1, no. 1 (1996): 7–25.

²⁴ V. Das, “Facing Covid-19: My Land of Neither Hope nor Despair”, *American Ethnologist* website, 2020, accessed 6 April 2026, <https://americanethnologist.org/online-content/collections/covid-19-and-student-focused-concerns-threats-and-possibilities/facing-covid-19-my-land-of-neither-hope-nor-despair/>; L. Bear et al., *A Good Death during the COVID-19 Pandemic* (London: LSE Anthropology, 2021), https://researchonline.lse.ac.uk/id/eprint/104143/4/GoodDeath_Report_FINAL.pdf.

²⁵ R. A. Neimeyer, *Meaning Reconstruction and the Experience of Loss* (Washington, DC: American Psychological Association, 2001); P. C. Rosenblatt, “Grief across Cultures: A Review and Research Agenda”, in *Handbook of Bereavement Research and Practice: Advances in Theory and Intervention*, ed. M. S. Stroebe et al. (Washington, DC: American Psychological Association, 2008), 207–22.

What is required is a framework that treats temporality not only as a dimension of agency but as a terrain of governance—which is what the RIMA framework, developed in the next section, is designed to do.

Theoretical Gap: Institutional Intersection

These dynamics converge on a conceptual gap in the structure–agency debate: the failure to theorise how power operates through intersecting institutional domains. What is required is not incremental refinement but a reconceptualisation of the mediating layer between structure and agency—namely, institutional intersection itself.

III. Theoretical Intervention: Beyond Dualism, Duality, and Hegemony

This framework intervenes in the structure–agency debate by moving beyond three influential approaches.

Morphogenetic approaches rightly insist on analytically distinguishing structure and agency to preserve space for reflexivity and social change.²⁶ However, they cannot account for conditions in which actors confront not a singular structural context but multiple, intersecting institutional regimes whose logics shift in real time. When structure is plural and contradictory, the reflexive inner conversation described by morphogenesis loses stable ground—navigational agency collapses not through lack of reflexivity but through institutional overdetermination. RIMA addresses this by treating institutional intersection, rather than a singular structural context, as the terrain within which agency unfolds.

Structurationist approaches emphasise that structure is both medium and outcome of practice, avoiding earlier determinism.²⁷ Yet by treating structure as a relatively unified set of rules and resources, they under-theorise how power is unevenly distributed across distinct institutional sites with conflicting logics. During pandemic governance, the rules governing hospital triage, market access, and ritual practice were not variations within a single structure but products of distinct institutional authorities with different forms of power, accountability mechanisms, and relationships to actors. RIMA addresses this by treating power as relationally differentiated rather than structurally unified.

²⁶ Archer, *Realist Social Theory*.

²⁷ Giddens, *Constitution of Society*.

Neo-Gramscian approaches identify civil society as a terrain of consent-building and potential counter-hegemony.²⁸ However, they privilege contestation as the primary register of civic action, overlooking how, under crisis conditions, civil society may function as a moral and affective buffer that stabilises institutional legitimacy through care rather than resistance.²⁹ When care becomes the dominant modality, civic action produces ambivalent political effects—simultaneously revealing institutional failure and absorbing its consequences. RIMA addresses this by distinguishing analytically between care and contestation and treating both as significant registers of agency.

Framework: Relational Institutional Mediation of Agency

Building on this intervention, the paper presents the Relational Institutional Mediation of Agency (RIMA) framework through four interrelated propositions.

Proposition 1: Agency is experienced in relation to institutions. Actors do not encounter structure as an abstract system but engage with specific institutional settings—hospitals, regulatory bodies, markets, and civic organisations—each operating under distinct logics and forms of authority.³⁰ This foundational claim anchors the framework.

Proposition 2: Because institutional encounters occur simultaneously, power is relational and overlapping rather than one-dimensional. Coercive, economic, and normative powers intersect and often clash in specific contexts, producing institutional dissonance that shapes what actors can do, know, and claim.³¹ Power is uneven across domains, and its effects depend on how these domains interact at particular moments.

Proposition 3: Agency is stratified and unequal. The capacity to navigate institutional intersections depends on access to economic, social, cultural, and symbolic capital.³² Actors do not experience institutional pressures uniformly; their ability to respond is itself structured by prior positions. Agency thus appears as uneven navigation rather than abstract autonomy.

Proposition 4: When institutional power disrupts temporality—by delaying rituals, compressing decision-making, or foreclosing futures—agency does not disappear. It is reconstituted through

²⁸ Gramsci, *Prison Notebooks*.

²⁹ Alexander, *Civil Sphere*.

³⁰ J. S. Migdal, *State in Society: Studying How States and Societies Transform and Constitute One Another* (Cambridge: Cambridge University Press, 2001).

³¹ Mann, *Sources of Social Power*; B. Jessop, *The State: Past, Present, Future* (Cambridge: Polity Press, 2015).

³² Bourdieu, “Forms of Capital”.

symbolic, affective, and restorative practices.³³ This proposition extends the previous three by showing that agency endures under constraint not primarily through resistance but through temporal repair, moral effort, and ethical perseverance.

From Framework to Empirical Analysis

By centring institutional intersection, RIMA shifts the analytical question from whether actors are free or constrained to how agency is redistributed across domains, registers, and temporalities. The empirical analysis uses pandemic material not merely to apply this framework but to refine it, examining how agency is revoked, negotiated, and reclaimed at institutional junctions where death renders power most visible and agency most fragile—yet never entirely absent.³⁴

IV. Agency under Overdetermined Structures: Institutional Intersection, Ambiguous Loss, and the Moral Labour of Care

Drawn from lived experiences of bereaved families, this section operationalises the Relational Institutional Mediation of Agency framework by examining how death, grief, and mourning were navigated during the COVID-19 pandemic at the intersection of state authority, market allocation, and civil society care. Institutional overdetermination did not produce coherence but generated institutional dissonance, as actors were subjected to intersecting and often contradictory regimes of authority. Rather than treating deaths as biomedical events or grief as individual response, the section advances three propositions: first, agency was institutionally encountered through organisational interfaces; second, agency was displaced and redistributed across domains—from decision-making to moral judgement, ritual authority to symbolic improvisation, and political claim-making to intimate labour; third, where institutional recognition failed, agency persisted as ethical and temporal labour oriented toward dignity, continuity, and memory.

Data and Method

The empirical analysis draws on 36 in-depth interviews with individuals who experienced bereavement during the COVID-19 pandemic, conducted over a nine-month period through a mix of online and in-person interactions. Respondents were identified through networks of family and extended social contacts, enabling access to diverse lived experiences of loss. These materials are

³³ Emirbayer and Mische, “What Is Agency?”.

³⁴ Das, *Life and Words*; Mbembe, “Necropolitics”.

treated not as transparent expressions of individual emotion but as situated narratives shaped by institutional encounters and power asymmetries. Interviews are analysed relationally to trace how actors navigated overlapping regimes of state authority, market access, and civic support under constraint. Digital narratives are examined as public articulations of private loss, capturing experiences of ambiguous loss, ritual disruption, and moral injury. Together, these sources illuminate how agency is revoked, stratified, and partially reconstituted at institutional intersections.³⁵

The analysis proceeds cumulatively. The first subsection examines how institutional overdetermination produced opacity and collapsed navigational agency. The second shows how anger emerged as a diagnostic register translating institutional failure into moral claims. The third turns to civil society, demonstrating how care functioned as a buffer that absorbed grievance without contestation. The fourth analyses disruptions to ritual temporality and emergent forms of temporal repair. The final subsection examines mourning and memory as sites of moral labour where agency reappears as ethical persistence. Interviews, digital narratives, and media accounts are treated as analytical sites through which institutional power, temporal rupture, and moral labour become visible. While grounded in Indian experience, the analysis is situated within international scholarship to develop a generalisable account of agency under institutional overdetermination.

Institutional Opacity, Overdetermination, and the Collapse of Navigational Agency

Pandemic governance produced institutional overdetermination in which regulatory imperatives—public health surveillance, infection control, triage, documentation, and crisis management—converged to generate opacity. Agency was constrained not by singular authority but by the collision of biomedical rationality, bureaucratic procedure, and emergency governance.³⁶

Research shows such opacity is structurally produced: institutions oriented toward risk minimisation and efficiency generate procedural communication and diffuse accountability.³⁷ Pandemic hospitals thus became high-discretion, low-transparency environments where authority operated through routinisation, rendering families peripheral.³⁸ Hospitals became closed systems governed by triage and infection-control regimes, where communication was reduced to brief updates and

³⁵ Emirbayer and Mische, “What Is Agency?”; Das, *Life and Words*.

³⁶ Foucault, *Birth of Biopolitics*; Mann, *Sources of Social Power*.

³⁷ D. Vaughan, *The Challenger Launch Decision* (Chicago: University of Chicago Press, 1997); C. Perrow, *Normal Accidents* (Princeton, NJ: Princeton University Press, 1999).

³⁸ Lipsky, *Street-Level Bureaucracy*.

relational interaction subordinated to efficiency.³⁹ Comparable studies from Europe report similar configurations, with hospitals experienced as sealed bureaucratic environments.⁴⁰

In India, hybrid healthcare governance intensified this opacity. Families encountered both state protocols and market-mediated access to care, where scarcity was converted into differential access without corresponding transparency.⁴¹ This convergence of regulation and valuation produced contradictory expectations and compounded navigational difficulty.

As Mona (45, entrepreneur, Bangalore) recounts:

“...After my mother was admitted, we almost lost all contact with her. There would be one brief call from the hospital in the evening and that’s it... We felt so helpless about this. What if she wanted to tell us something? And then one day, it was all over and there was nothing for us to do...”

Following death, she was allowed only a fleeting glimpse:

“...I so wanted to touch her, take her soft hands in mine and cry... The zipper of her body bag was opened for a few seconds... then they took her away...”

These narratives capture the collapse of agency as navigational capacity—the ability to orient, interpret, and intervene meaningfully.⁴² Under such conditions, agency shifts from decision-making to sense-making.⁴³ Families became passive recipients of fragmented information within systems prioritising throughput over relational care, producing a paradox of hyper-regulation and under-delivery.⁴⁴

Bereavement research shows that restricted involvement in end-of-life care increases risks of complicated grief, indicating that such outcomes are institutionally produced.⁴⁵ Institutional opacity thus structured not only death but its experience and remembrance.

³⁹ Bamba, Lynch, and Smith, “Unequal Pandemic”; Selman et al., “Risk Factors”.

⁴⁰ N. Cotterell and D. Collingridge Moore, “The Impact of the COVID-19 Pandemic on End-of-Life Care in LTCFs in England: A Qualitative Study of LTCF Staff Experiences”, *Palliative Care and Social Practice* (2026); Selman et al., “Risk Factors”.

⁴¹ A. Prakash and H. Borker, “Pandemic Precarity: Life, Livelihood, and Death in the Time of the Pandemic”, *Economic and Political Weekly* 57, no. 5 (2022): 40–45.

⁴² Emirbayer and Mische, “What Is Agency?”.

⁴³ S. R. Whyte, *Questioning Misfortune* (Cambridge: Cambridge University Press, 1997); H. Vigh, “Motion Squared”, *Anthropological Theory* 9, no. 4 (2009): 419–38.

⁴⁴ M. Foucault, “Governmentality”, in *The Foucault Effect*, ed. G. Burchell, C. Gordon, and P. Miller (Chicago: University of Chicago Press, 1991), 87–104; Das, “Facing Covid-19”.

⁴⁵ M. Stroebe and H. Schut, “Bereavement in the Time of COVID-19”, *Omega* 82, no. 3 (2020): 500–522.

Opacity extended beyond hospitals. In a widely reported case in Hyderabad, India, a woman claimed her husband—declared dead and cremated—was alive. Despite official records, the family disputed the account.⁴⁶ Such cases illustrate how bureaucratic processes generate ontological uncertainty.⁴⁷ When death becomes administratively unstable, families are denied both agency and certainty, undermining the conditions necessary for mourning. This extends Proposition 1: institutional encounter here destabilises not just agency but the ontological ground upon which grief depends.

This is not merely administrative failure but navigational collapse: actors cannot orient themselves in relation to a loss they cannot verify. When bureaucratic processes destabilise even the fact of death, grief itself is suspended. Bureaucratic power thus undermines not only agency but its foundational conditions.

These experiences resonate with scholarship on ambiguous loss, where uncertainty prevents closure.⁴⁸ In the pandemic, such ambiguity was institutionally generated through restricted access, mediated communication, and opaque decision-making. Comparative research shows similar patterns globally, where death becomes administratively managed and socially obscured.⁴⁹

Sara (32, private-sector executive, Mumbai) illustrates this as moral injury:

“My husband pleaded to be discharged... ‘If I see you once, I will feel better,’ he kept saying... All my requests were turned down. To what effect? Could they save him? They just added to our misery.”

Here, agency is foreclosed through institutional impermeability: families cannot act because access is denied. Anger emerges as a diagnostic signal of institutional failure.⁵⁰ Research on moral

⁴⁶ “Woman Claims Her COVID-19 Positive Husband Is Missing, Hospital Says Man Cremated”, *Hindustan Times*, 21 May 2020, <https://www.hindustantimes.com/india-news/woman-claims-her-covid-19-positive-husband-is-missing-hospital-says-man-cremated/story-IuZ18u1ytva4bE8Zn84oRM.html>.

⁴⁷ A. Gupta, *Red Tape: Bureaucracy, Structural Violence, and Poverty in India* (Durham, NC: Duke University Press, 2012); M. S. Hull, *Government of Paper: The Materiality of Bureaucracy in Urban Pakistan* (Berkeley: University of California Press, 2012).

⁴⁸ P. Boss, *Ambiguous Loss: Learning to Live with Unresolved Grief* (Cambridge, MA: Harvard University Press, 1999); P. Boss, *Loss, Trauma, and Resilience* (New York: W.W. Norton, 2009).

⁴⁹ A. Kleinman et al., *Deep China: The Moral Life of the Person* (Berkeley: University of California Press, 2011); S. Abramowitz, *Epidemics (Especially Ebola)* (Durham, NC: Duke University Press, 2017); Selman et al., “Risk Factors”.

⁵⁰ M. S. Cerney and S. L. Buskirk, “Anger in Bereavement”, *Journal of Psychosocial Oncology* 9, no. 3 (1991): 29–44; A. Kleinman, *What Really Matters: Living a Moral Life amidst Uncertainty and Danger* (Oxford: Oxford University Press, 2008).

injury shows how such failures violate expectations of care and dignity.⁵¹ Comparative studies similarly show that inability to act produces durable feelings of injustice, highlighting how agency is constrained structurally rather than individually.⁵²

Across contexts, these accounts show how institutional protocols transformed death into administratively managed disappearance, intensifying ambiguity and redirecting grief into anger toward institutions.⁵³ Institutional opacity thus revoked agency by denying informational access, decision-making capacity, and narrative coherence.⁵⁴

The next section examines how this constrained navigation gives rise to moral accusation, as anger becomes one of the few remaining registers through which agency is expressed.

Anger as Relational Diagnosis: State Failure, Market Logics, and Moral Injury

Anger is often framed in grief literature as a psychological stage.⁵⁵ This section reconceptualises it as a relational diagnosis of institutional failure emerging at the intersection of state incapacity and market opportunism. Anchored in the idea that agency operates through navigation rather than autonomy, anger articulates the limits of navigability under crisis.⁵⁶ Rather than emotional excess, it becomes a situated evaluative judgement—an affective expression of breached obligations and denied moral expectations.⁵⁷

Pandemic deaths in India were frequently attributed not only to the virus but to systemic breakdowns—oxygen shortages, hospital incapacity, delayed admissions, and drug inaccessibility.⁵⁸ Families interpreted these deaths as preventable, redirecting blame toward institutions rather than fate. This shift is sociologically significant, transforming grief into moral and political critique.⁵⁹

Lalita (38, private-sector executive, Chennai) said:

⁵¹ B. T. Litz et al., “Moral Injury and Moral Repair in War Veterans: A Preliminary Model and Intervention Strategy”, *Clinical Psychology Review* 29, no. 8 (2009): 695–706; A. Čartolovni et al., “Moral Injury in Healthcare Professionals: A Scoping Review and Discussion”, *Nursing Ethics* 28, no. 5 (2021): 590–602.

⁵² Archer, *Realist Social Theory*; Mouzelis, *Modern and Postmodern Social Theorizing*.

⁵³ G. Agamben, *Homo Sacer: Sovereign Power and Bare Life* (Stanford, CA: Stanford University Press, 1998); Das, “Facing Covid-19”.

⁵⁴ Migdal, *State in Society*; Jessop, *State*.

⁵⁵ Cerney and Buskirk, “Anger in Bereavement”.

⁵⁶ Emirbayer and Mische, “What Is Agency?”.

⁵⁷ Alexander, *Civil Sphere*.

⁵⁸ Bambra, Lynch, and Smith, “Unequal Pandemic”.

⁵⁹ Das, *Life and Words*.

“...First the hospital asked us to organise medicines, then they asked us to get oxygen. What is the point of admitting to a hospital when the families have to run around arranging everything themselves...”

Chanchal (32, teacher, Delhi) added:

“...From having to wait for updates on the health of my mother while she was admitted to the painful wait of five long days before her body was handed over to me, all in the name of ‘COVID protocol’—since when is care and grief illegal and bound by herculean red tapism..?”

These narratives echo global findings where anger in pandemic bereavement was directed primarily at institutions, revealing grief as morally and politically oriented.⁶⁰ Anger thus functioned as moral reasoning—diagnosing institutional collapse and articulating injustice. In contexts where formal grievance mechanisms were inaccessible, it became a substitute form of agency, enabling families to assign responsibility and resist institutional silence.⁶¹

Market institutions intensified this injury. Despite regulation, private actors converted scarcity into profit,⁶² eroding trust. Surya (20, student, Delhi) recounts:

“Remdesivir costs Rs 2,500... it was getting sold for Rs 50,000... Is there no control? Why didn’t anyone say or do anything?”

Rashmi (26, researcher, Delhi) narrated:

“...I had to actually fly down from Delhi to Hyderabad to get Remdesivir, because that was cheaper than the cost at which it was being black marketed in Delhi. What could one do, there was no time to waste in complaining. We were just left to fend for ourselves...”

Rashmi’s experience shows how access to resources—money, mobility, and time—restored limited navigational capacity while shifting responsibility onto individuals. Those without such resources were excluded altogether. Media reports corroborate these dynamics, including cases of hospital-linked black marketing.

Azma (50, homemaker, Hyderabad) added:

⁶⁰ Selman et al., “Risk Factors”.

⁶¹ Emirbayer and Mische, “What Is Agency?”.

⁶² Prakash and Borker, “Pandemic Precarity”; Polanyi, *Great Transformation*.

“...COVID19 was not only about the emotional breakdown, it was also about the financial backbone of families breaking. We came to a point, where we understood that the toll was not just emotional but also financial. It will take us decades to recover from the financial strain, considering the huge amount of money we spent on disbursing the bills...”

The burden was even more acute for Rajat (20, student, Delhi):

“...My father succumbed to the virus. But our agony did not even stop there. The hospital asked us to vacate at the earliest. I could find neither an ambulance nor a crematorium. I had no option but to take his body in the car and move from crematorium to crematorium, all the while frantic calls to friends and family, to find if anyone knew of a spot in any crematorium where I could give my father a dignified rest. Some friends told me about some professional agencies that could help, but they charged so exorbitantly that it was beyond our means to afford...”

For Nalini (50, self-employed entrepreneur, Lucknow), market access altered this experience:

“After my father’s passing, I was too shattered to think. Someone told me about a cremation service that could arrange the final rites. I paid them 50,000 rupees and they arranged everything, from finding a spot at the crematorium to the ritual related requirements including a priest for the last rites.”

The contrast between Rajat and Nalini illustrates how economic capital reshaped agency under crisis. Nalini’s ability to pay enabled navigation through institutional bottlenecks, while Rajat bore their full force. Scarcity thus redistributed control: those with resources gained mobility and choice, while others faced intensified constraint.⁶³

Comparative analyses of private health systems during COVID-19 show similar dynamics, where market allocation produced price gouging and unequal access, especially in contexts of weak public provisioning.⁶⁴ These patterns reveal how allocative and authoritative power intersected to stratify agency under crisis governance.⁶⁵

Anger thus emerges as a moral response to institutional dissonance, aligned with the concept of moral injury—distress produced by perceived betrayal by institutions responsible for care.⁶⁶ Rather

⁶³ Mann, *Sources of Social Power*; Bourdieu, “Forms of Capital”.

⁶⁴ G. Williams, “COVID-19 and Private Healthcare”, *Global Public Health* 15, no. 12 (2020): 1779–88.

⁶⁵ Mann, *Sources of Social Power*.

⁶⁶ Kleinman, *What Really Matters*; Litz et al., “Moral Injury and Moral Repair”.

than an excess emotion, it indexes the unequal distribution of navigational capacity, marking the point where institutional failure becomes morally legible.

If anger functioned as a diagnostic and accusatory response, the next section examines what followed when such claims encountered limited avenues for redress—namely, a shift from contestation to care.

Civil Society as Moral Buffer: Care without Contestation

Classical theory imagines civil society as counter-hegemonic—a terrain where state power is contested.⁶⁷ During the pandemic, however, it functioned primarily as a site of care rather than contestation, absorbing institutional failure without transforming accountability structures.⁶⁸ This reflects not passivity but a reorientation toward ethical and affective labour under crisis.

In India, volunteers, informal collectives, neighbourhood groups, and religious organisations provided food, oxygen, transport, information, and funeral assistance when formal institutions were overwhelmed. Ethnographic and policy accounts show that much of this work was undertaken by informal networks relying on trust, moral obligation, and improvisation.⁶⁹

Yet these efforts remained fragmented and temporally bounded, limiting their capacity to generate sustained political pressure. Civil society prioritised mitigation over confrontation, relief over rights. Feminist scholarship helps explain this: care under crisis is organised as moral necessity rather than political demand, rendering it indispensable yet politically muted.⁷⁰ Civil society thus alleviated suffering without acquiring authority to reshape its structural causes.

Gurvinder (32, businessman, Gurugram) recounted:

“...Oxygen was in such short supply. We came to know that a gurudwara was organising oxygen langar (free distribution). We drove with my mother from one corner of the city to another. While it provided some temporary relief, it was not something we could do everyday. I wish there was more coordinated effort so that we could get something closer home. After all, there are so many charitable organisations in the city....”

⁶⁷ Gramsci, *Prison Notebooks*; N. Chandhok, *State and Civil Society: Explorations in Political Theory* (New Delhi: Sage, 2010).

⁶⁸ Alexander, *Civil Sphere*.

⁶⁹ A. Rai Chowdhury et al., *Impact of COVID-19 and Lockdowns on Domestic Workers: First Report* (Rajasthan Mahila Kaamgaar Union and Indian Institute for Human Settlements, 2020), https://iihs.co.in/knowledge-gateway/wp-content/uploads/2020/10/RMKU-IIHS-Covid-19-impact-study_OCT.pdf.

⁷⁰ Toronto, *Moral Boundaries*; Sevenhuijsen, “Place of Care”.

Gurvinder's remark—"I wish there was more coordinated effort..."—signals more than logistical frustration. It gestures toward unmet expectations from civic and state institutions yet lacks an avenue for articulation or response. The oxygen langar provided relief but not accountability, illustrating the distinction between civil society as moral buffer and as political force.

Comparable patterns appear globally. Studies of mutual aid during COVID-19 show that civic mobilisation expanded but rarely translated into sustained institutional challenge.⁷¹ Instead, it complemented or substituted state provision, stabilising rather than transforming governance.⁷²

Civil society thus operates as a moral buffer, converting structural injustice into care work. While preserving dignity and repairing social bonds, it simultaneously deflects accountability from state and market institutions. Care stabilised legitimacy even as it exposed institutional limits, performing moral repair without enabling structural redress.⁷³

Ishita (47, academic, Hyderabad) added:

"We as a concerned group of citizens, came together and tried to help in whatever ways possible. While during the first wave, we organized bus transports for safe transit along with food and shelter for the migrants, during the second wave, we felt rather helpless. The crisis was too large and beyond us."

Ishita's comparison reveals the limits of civic capacity. While the first wave allowed partial compensation for institutional gaps, the second exceeded civil society's ability to respond. Care thus emerges as a temporary and resource-dependent response rather than a stable substitute for institutional function.

Care alone could not restore what institutional failure disrupted: the temporal and ritual infrastructures through which death is socially processed and moral continuity sustained.

Temporal Rupture, Ambiguous Loss, and the Suspension of Ritual Agency

Temporality is central to agency, shaping orientations to past, present, and future.⁷⁴ Pandemic governance disrupted all three simultaneously—ritual continuity, decision-making, and future-

⁷¹ G. Mao et al., "What Have We Learned about COVID-19 Volunteering in the UK? A Rapid Review of the Literature", *BMC Public Health* 21, no. 1 (2021): 1–15; L. Tiratelli and S. Kaye, *Communities vs. Coronavirus* (London: New Local Government Network, 2020).

⁷² K. Tierney, *The Social Roots of Risk* (Stanford, CA: Stanford University Press, 2014); Abramowitz, *Epidemics (Especially Ebola)*.

⁷³ Alexander, *Civil Sphere*.

⁷⁴ Emirbayer and Mische, "What Is Agency?"

oriented mourning.⁷⁵ Agency became fragile not because action ceased, but because the temporal coordinates enabling meaningful action were suspended.

Ritual disruption suspended what this article terms commuted agency—the capacity of the living to discharge relational obligations for the deceased through ritual acts, oriented toward moral continuity rather than strategic transformation.

Shaheen (34, executive, Mumbai) recounts:

“...We were not allowed to give the bath to the body... The body was just wrapped in a plastic body bag and we were asked to bury him like that....”

Commuted agency refers to the mourner’s capacity to discharge obligations for the deceased—through ritual acts such as bathing the body or performing last rites. When institutional protocols prohibited these acts, they revoked not just behaviour but relational obligation. Ritual suspension thus represents an expropriation of agency, severing continuity between life, death, and remembrance.

Anthropological scholarship shows funerary practices as constitutive acts through which moral obligations are fulfilled.⁷⁶ Their suspension denied symbolic closure, producing guilt and disenfranchised grief.⁷⁷

Sreeja (26, student, Calcutta) narrated:

“...When my mother passed away, all I got was one short glimpse as the zipper of her body bag was opened, lasting barely a few seconds. On her passing, I was just told that I have to hand over the body to the authorities for ‘safe disposal’. And all I could think about was, what would my mother be feeling, am I being a good daughter, will I ever be able to make up for this. Even after all this while, I often feel pangs of guilt. I have consulted therapists, but this sense of guilt is now an irrevocable, inalienable part of my life....”

Public-health protocols transformed ritual time into administrative time, compressing or bypassing transitional moments.⁷⁸ Death became a managed risk event rather than a moral passage.

⁷⁵ Bear et al., *Good Death*; Das, “Facing Covid-19”.

⁷⁶ Hertz, *Death and the Right Hand*; P. Metcalf and R. Huntington, *Celebrations of Death* (Cambridge: Cambridge University Press, 1991).

⁷⁷ Boss, *Ambiguous Loss*; Rosenblatt, “Grief across Cultures”.

⁷⁸ Das, “Facing Covid-19”; Bear et al., *Good Death*.

Yet agency persisted through improvisation. Families developed alternative practices—digital funerals, deferred memorials, symbolic acts—to restore continuity. Akash (30, engineer, Bengaluru) organised a live-streamed funeral.

Shaina (40, professional, London) reflected:

“...With restrictions on travel, sitting in my home in sorrow and despair, I could only watch my Amma’s funeral through the laptop. It has been the most helpless moment of my life, to see my beloved mother’s pyre, with a priest, while I sat in pajamas across oceans, wondering what has life and death come to...”

Digital mourning enabled presence but remained structurally inadequate, sustaining relational continuity without fulfilling embodied obligations.

Anjali (27, dentist, Bhubaneswar) described another form of temporal repair:

“...My papa loved food, and simple yet soulful dalma rice remained his favorite. Ironically, it was also the last meal he took, before the virus struck him. Since then, whenever I miss him, I cook dalma rice, and distribute it to everyone I find. Over the months, I also shared it on the internet. Little did I know then, that food could bind strangers, and help them share their pain of losing their loved ones, both suddenly and unexpectedly. Since I started posting my father’s favorite recipes online, thousands have shared and followed the same....”

Here, agency operates through temporal repair: linking past memory, present practice, and future community. Such practices exemplify commuted agency, sustaining the presence of the dead through everyday acts.

These patterns echo global findings where improvised rituals—digital, culinary, commemorative—reconstituted meaning under constraint.⁷⁹ Agency thus re-emerges not through resistance but through symbolic labour that restores continuity.

Mourning, Memory, and the Moral Labour of Continuity

Mourning is a social and moral process through which loss is recognised and obligations to the dead fulfilled.⁸⁰ Pandemic restrictions privatised grief, disrupted collective rituals, and intensified

⁷⁹ T. Walter, “What Death Means Now”, *Mortality* 25, no. 3 (2020): 251–69; Selman et al., “Risk Factors”.

⁸⁰ É. Durkheim, *The Elementary Forms of Religious Life*, trans. Carol Cosman, ed. Mark S. Cladis (Oxford: Oxford University Press, 2008); B. Malinowski, *Magic, Science and Religion* (Garden City, NY: Doubleday, 1954).

guilt.⁸¹

Surya (20, student, Delhi) reflects:

“...The shock was so big and our abilities so restricted that we could not even mourn as we would have found peace in...”

Grief scholarship shows that mourning depends on recognition, accompaniment, and shared temporal pacing.⁸² When these are withdrawn, grief becomes prolonged and morally burdened.

The concept of continuing bonds highlights how relationships with the dead persist through memory and practice.⁸³ Families preserved agency through objects and everyday acts of remembrance. Clothing, in particular, carries embodied memory, enabling sensory proximity and sustaining relational continuity.⁸⁴ Such practices represent commuted agency in intimate form—acting for the dead through preservation and care.

Kriti (31, lawyer, Delhi) noted:

“With so little physical intimacy and support, the mourning has been harder and longer.”

Prolonged grief thus reflects social conditions rather than individual deficiency.⁸⁵

Digital platforms emerged as alternative sites of collective remembrance:

“We’re all orphans now—this wave took everyone’s parents.” (Twitter user, 2021)

“Sharing Dad’s old travel photos here keeps him alive in this virtual shrine.” (Facebook user, 2021)

These posts perform distinct functions: one transforms private loss into collective condition, the other sustains ongoing care through memorial practice. Together, they illustrate digital mourning as both public claim-making and private ethical persistence. Comparative research shows that such

⁸¹ C. R. Mayland et al., “Supporting Adults Bereaved through COVID-19: A Rapid Review of the Impact of Previous Pandemics on Grief and Bereavement”, *Journal of Pain and Symptom Management* 60, no. 2 (2020): e33–e39.

⁸² T. Walter, *On Bereavement* (Buckingham: Open University Press, 1999); Rosenblatt, “Grief across Cultures”.

⁸³ D. Klass, P. Silverman, and S. Nickman, eds., *Continuing Bonds: New Understandings of Grief* (Washington, DC: Taylor and Francis, 1996); Walter, *On Bereavement*.

⁸⁴ E. Hallam and J. Hockey, *Death, Memory and Material Culture* (London: Routledge, 2001).

⁸⁵ Mayland et al., “Supporting Adults Bereaved”; Stroebe and Schut, “Bereavement in the Time of COVID-19”.

practices create provisional publics of grief, enabling recognition and continuity despite physical absence.⁸⁶

These practices constitute moral labour—sustained efforts to preserve dignity, meaning, and relational continuity amid institutional neglect.⁸⁷ Often invisible and unequally distributed, this labour is central to social repair.⁸⁸ Mourning thus reveals agency as ethical persistence rather than resistance: sustaining bonds and obligations when institutions fail to recognise loss.

Across institutional opacity, anger, care, ritual disruption, and mourning, this analysis shows that agency during the pandemic was revoked, stratified, and partially reconstituted through institutional intersections.

Summary of Empirical Contributions

This section demonstrates that agency under pandemic conditions cannot be understood through binaries of presence and absence, resistance and compliance, or autonomy and constraint. Instead, agency appears as relationally displaced, institutionally mediated, and morally reformatted. Across hospitals, markets, civil society, and ritual regimes, agency was neither extinguished nor uniformly constrained; it was revoked in some registers, re-stratified in others, and partially reconstituted through ethical and temporal labour.

The analysis makes three contributions to the structure–agency debate.

First, it shows that institutional overdetermination produces not clarity but opacity, collapsing navigational agency by confronting actors with intersecting and conflicting regimes of authority. This corresponds to Proposition 1 of the RIMA framework—that agency is institutionally encountered—and extends it by showing that institutional encounter under overdetermined conditions produces navigational collapse rather than structured navigation.

Second, it demonstrates that when formal channels of action are foreclosed, agency reappears as diagnostic affect—anger functioning as a moral evaluation of institutional failure rather than a purely emotional response. This corresponds to Proposition 2—that power is relational and intersecting—and extends it by showing that when intersecting powers foreclose formal agency, affect becomes a

⁸⁶ T. Walter et al., “Does the Internet Change How We Die and Mourn? Overview and Analysis”, *Omega* 64, no. 4 (2011): 275–302; K. Giaxoglou, “Entextualising Mourning on Facebook: Stories of Grief as Acts of Sharing”, *New Review of Hypermedia and Multimedia* 21, no. 1–2 (2015): 87–105.

⁸⁷ Kleinman, *What Really Matters*; Das, *Life and Words*.

⁸⁸ Tronto, *Moral Boundaries*.

substitute register through which actors exercise evaluative and moral capacity.

Third, it reveals that care, ritual improvisation, and mourning operate as forms of moral labour that sustain dignity and continuity while simultaneously stabilising institutional legitimacy in the absence of accountability. This corresponds to Propositions 3 and 4—that agency is stratified and temporally reconstituted—and extends them by showing that temporal repair and moral labour are not merely individual coping strategies but structurally produced responses to institutional failure whose political effects are ambivalent, simultaneously stabilising and exposing the limits of institutional legitimacy.

In doing so, the section challenges dominant theoretical accounts that equate agency primarily with resistance, voice, or strategic action. Instead, it foregrounds ethical persistence, temporal repair, and relational maintenance as central—yet under-theorised—modalities of agency under crisis conditions. Death emerges here as a critical analytical site where institutional power is most visible and agency most constrained, yet also most morally consequential.

The next section builds on these empirical findings to refine the *Relational Institutional Mediation of Agency* framework itself. Drawing on the patterns identified here, it theorises institutional intersection as a missing analytical layer in structure–agency debates and elaborates how navigational, moral, temporal, and ethical forms of agency can be systematically incorporated into social theory beyond the pandemic context.

V. Conclusion: Institutional Intersection and the Re-specification of Agency

This article has argued that the enduring structure–agency debate requires re-specification, not resolution. While decades of theoretical work have productively displaced determinism and voluntarism, dominant frameworks continue to operate with an analytically thinned conception of structure and a normatively overburdened conception of agency. Structure is too often treated as coherent or singular; agency, in turn, is implicitly equated with resistance, reflexive choice, or strategic action. The COVID-19 pandemic, examined here through the governance of death, exposes the limits of these assumptions and provides an opportunity to rethink how agency is encountered and exercised under conditions of institutional overdetermination.

The central theoretical move of this article is to foreground institutional intersection as a missing analytical layer in structure–agency debates. Rather than encountering “structure” as a unified system or rule-set, actors confront multiple institutional regimes—state, market, and civil society—

whose logics converge, collide, and shift in real time. Power, in this view, is neither monolithic nor diffuse but relationally differentiated across coercive, allocative, and normative domains. Agency, correspondingly, cannot be understood as an attribute of actors alone; it is produced, constrained, displaced, and reformatted through these institutional encounters.

The empirical analysis demonstrates that institutional overdetermination does not simply intensify constraint; it reorganises the conditions under which agency becomes possible and intelligible. Navigational agency collapses not because actors lack reflexivity or intent, but because opacity, procedural impermeability, and temporal compression foreclose orientation itself. When action and access are denied, agency reappears in altered registers: as moral diagnosis rather than decision-making, as care rather than contestation, as temporal repair rather than resistance, and as ethical persistence rather than voice. These are not marginal or compensatory forms of agency; they are structurally produced responses to the ways institutional power operates under crisis conditions.

This reconceptualisation has three implications for social theory. First, it challenges the tendency—shared by structurationist, morphogenetic, and neo-Gramscian traditions alike—to privilege agency that is future-oriented, oppositional, or transformative. The analysis shows that under conditions of institutional intersection, agency is frequently backward-looking, reparative, and stabilising. Ethical labour, care work, and mourning do not merely coexist with power; they mediate its effects, often stabilising institutional legitimacy even as they reveal institutional failure. This complicates normative assumptions about agency as inherently emancipatory and calls for greater analytical attention to its ambivalent political effects. This ambivalence is captured most precisely by the concept of commuted agency developed in the empirical analysis: the capacity of the living to act on behalf of the dead, discharging moral obligations through practices of memory, care, and ritual. Commuted agency is not resistance, not strategic action, and not reflexive choice—yet it is unmistakably agency, exercised under the most constrained conditions and oriented toward the most fundamental of relational obligations. Its incorporation into social theory requires expanding what counts as agency beyond the normative preference for oppositional or emancipatory action.

Second, the article extends relational and temporal theories of agency by demonstrating that temporality itself becomes an object of governance. When institutional power disrupts ritual time, compresses decision-making horizons, and forecloses futures, agency is reconstituted through efforts to repair temporal continuity. Such practices—symbolic improvisation, deferred ritual, memory

work—are not reducible to meaning-making alone; they are structured responses to temporal dislocation produced by institutional authority. Incorporating temporal repair into theories of agency broadens the analytical vocabulary available for understanding action under conditions of uncertainty and loss.

Third, the article repositions death as a central, rather than peripheral, site for theorising structure and agency. Death reveals institutional power in its most condensed form, where bureaucratic classification, market valuation, moral obligation, and sovereign authority converge. It is precisely in these moments—where agency appears most fragile—that its reconfiguration becomes most visible. Treating death and mourning as analytically marginal has obscured how deeply institutional arrangements shape moral experience, ethical action, and social continuity.

The Relational Institutional Mediation of Agency framework advanced here does not seek to replace existing theories of structure and agency. Instead, it offers a way to integrate insights from relational sociology, political economy, and the anthropology of ethics into a more institutionally grounded account of action. By centring institutional intersection, it shifts attention from whether actors are free or constrained to how agency is redistributed across domains, registers, and temporalities.

Beyond the pandemic, the argument has wider relevance. As states increasingly govern through hybrid institutional arrangements and crises become recurrent, agency is likely to appear less as resistance and more as navigation, care, and ethical persistence. The contribution of this article is not to resolve the structure–agency problem but to relocate it—from abstract debates about constraint and autonomy to empirically grounded analyses of how institutional power reorganises the conditions under which agency operates—and to expand what counts as agency. Care, mourning, temporal repair, commuted agency, and ethical persistence are theoretically central modalities through which power is lived, negotiated, and endured. Recognising them as such changes the terms on which the structure–agency debate has been conducted, and opens it to the full range of ways in which human actors sustain dignity, meaning, and relational obligation under conditions that institutional power has made deeply, and often deliberately, difficult.

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