

GLOBAL DISCOURSE AND LOCAL COPING AND HOPING DURING THE COVID-19 PANDEMIC

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The COVID-19 pandemic touches every corner of the globe with unprecedented effects and implications. This special issue gathers knowledge, insight, experiences, and learnings about the profound impacts of the COVID-19 virus on communities from 12 countries. It presents six carefully selected manuscripts that reflect the ongoing conversation in our field about how the needs of the world's most vulnerable populations can be served by the field's values and paradigms. The reader will learn about collective symbolic coping, crisis management, barriers to and facilitators of supports and resources, mobilization of local networks of care, social toxicity and social possibility, coping strategies, affective impacts of confinement, the development of relationships between different social actors, the engagement of refugees and refugee-led organizations on the front lines of COVID-19, and even the buffering effects of gardening against the psychological impacts of isolation. Despite the grim reality of COVID-19, a thread of resilience, empowerment, and sense of community emerges loud and clear, and each manuscript is written with that same spirit and core tenet of community psychology that has always been our guiding light. During one of the most trying times of our lifetime, the need for a strong sense of community and mutual support will be a critical, if not determining, factor in how we continue to cope with this pandemic. It is our hope that this issue will inspire hope and reinforce the tools and competencies of community psychology to bring about positive enduring change within individual, family, peer, and community systems.

Keywords: COVID-19, community psychology, resilience, social support, vulnerable populations

1. COVID-19 pandemic & Community Psychology

The Coronavirus disease 2019 (COVID-19) pandemic is a global health crisis that presents novel challenges and opportunities for medical science research, public health communications and strategies, and community psychology in its theories, research, and practice of sense of community (Chavis & Newbrough, 1986), prevention and promotion (Cowen, 1977), empowerment (Rappaport, 1981), well-being (Arcidiacono & Di Martino, 2016), and social justice (Munger et al., 2016; Gokani & Walsh, 2017). It is true that over the first quarter of 2021 the pandemic news has been enormously positive in some countries, particularly compared to one year ago, and at the same time other countries are asking individuals to self-isolate at home while many

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businesses are not allowed to operate. Challenges of understanding the transmission and treatment of the disease are being addressed and some significant ones are in the process of being resolved such as the development and distribution of vaccines and testing vaccines for children. Significant progress has been made in having sufficient protective clothing for healthcare workers as well as masks and hand cleaner for the general population.

Despite meaningful progress, these achievements vary by country as well as within countries. While a primary effect of the Coronavirus causes disease, a year after the pandemic was declared on March 11, 2020, many secondary effects locally and globally are negatively impacting individuals, communities, societies, and nations, such as increased use of alcohol and drugs, violence in the home, food and housing insecurity, and unemployment. Challenges to communities are not new phenomena to the broad field of community psychology with a rich international history of work for, with, and by marginalized and disenfranchised communities (Montero et al., 2007) while responding with research adapted to diverse contexts (Trickett, 2009; Trickett, 2019). From this global perspective, community psychology provides a firm foundation from which to add research knowledge on issues related to the COVID-19 pandemic and that is the focus of this special issue.

As we are living through the COVID-19 pandemic, three pressing problems persist: (1) a lack of trust in research sciences; (2) the loss of social contact beyond with individuals living in the same household; (3) the need for changing individual behaviors.

Skepticism about who is counting what, when, and why has entered into debates about how to prevent the spread of the virus to save lives while also struggling with how to maintain social relationships without sharing physical space. These issues have been researched in the past particularly with the human immunodeficiency virus/acquired immunodeficiency syndrome (HIV/AIDS) pandemic. Attempts to change behavior with information alone have been unsuccessful. Research testing the Information Motivation Behavioral Skills (IMB) framework (Fisher & Fisher, 2000) has found that information alone did not predict changes in sexual health behaviours among women attending university in Canada (Fullerton et al., 2013) as well as men and women who were university students in Ethiopia (Gemeda et al., 2017). Motivation and behavioral skills are a critical part of changing what people do that will decrease risks for contracting HIV (Fisher, 2011). Although behaviors as a means for transmission are different between HIV/AIDS and COVID-19, there are similarities between both viral diseases and there is much to learn from the response to the HIV/AIDS pandemic, particularly as it relates to African countries, vulnerable communities, community approaches to coping and reducing transmission, and cooperation among nations (Olufadewa et al., 2021).

Understanding the similarities and differences between the HIV and Coronavirus pandemics informs our interventions for individuals and communities. Both the pandemics have infected and killed millions of people, but the timelines are very different. From the start of the HIV pandemic in 1981 through the end of 2019, 75.7 million people were infected, and 32.7 million died from AIDS-related illnesses (UNAIDS, 2020). Viewed during one year, 2019 (the most recent statistics available), the number of new HIV infections and AIDS-related deaths was 1.7 million and 690,000, respectively. The Coronavirus has 118 million cases and 2.6 million COVID-related deaths as of March 10, 2021 (Dong et al., 2020 created the online interactive dashboard that is updated hourly and is hosted at Johns Hopkins University & Medical Center Coronavirus Resource Center, 2021). For decades, a person with HIV had the virus living within the body, and the threat of spreading the virus was always present through specific types of one-to-one contact. Today, treatments exist that can make the virus undetectable and non-transmittable; notably, access to

treatments remains unequal, which has already been identified as a problem with the COVID-19 vaccine (Bhutto, 2021). The Coronavirus has spread much more quickly and widely than HIV causing a global emergency. On an optimistic note, 100% of persons infected with the Coronavirus in mild and severe cases develop antibodies within 15 days (Illanes-Álvarez et al., 2021), no longer causing a threat to community spread. The world is still at risk for the continued spread of infections threatening our well-being not only physically but also psychologically, socially, and economically.

To address the multitude of primary and secondary effects of a health pandemic, researchers and practitioners collectively have expertise with several types of scientific methods and the critical role played by ontologies, epistemologies, and methodologies while always attending to being systematic, rigorous and credible. In the late 1990s the field of community psychology began applying the field's expertise in prevention to the HIV pandemic (Hobfoll, 1998). Subsequent studies used theories and research from the field to slow the spread of the virus and to improve quality of life. A few examples include a case study in South Africa of documenting how focusing on the context is a mechanism for an effective community-level response (Campbell et al., 2007), a study in the U.S. that used evidence-based prevention science for the diffusion of behavioral interventions (Dworkin et al., 2008), and research examining depression among those living in disadvantaged context living with HIV/AIDS or supporting someone with it (Knowlton et al., 2009). These studies from a pandemic that pre-date the COVID-19 pandemic illustrate the relevance of the field of community psychology contributing significantly to reducing the spread of a virus and improving the mental health and well-being of those coping with virus-related disease, illness, and death of loved ones. Beyond studies specific to the context of the virus that causes AIDS, the field of community psychology has been responsive to how emergency situations and disasters impact health and well-being at both individual and community-level factors. Examples include studies of how earthquakes, tsunamis (Furukawa et al., 2015), and wildfires (Felix & Afifi, 2015) affect psychosocial stress and social support, as well as what the mechanisms are for community resilience and optimism after devastating floods (Madsen & O'Mullan, 2016). The field of community psychology is well prepared to quickly respond to the need for community-based research.

1.1 Call for community responses to the COVID-19 pandemic

In the histories of community psychology there has always been a mandate to conduct research for, with, and by communities impacted, particularly those facing adversity, and arguably there has never been a more critical and global event than the COVID-19 pandemic that imposes an immediate need for community- and evidence-based research. This special issue presents research findings, as well as high-quality research designs and methods, that provide a pathway for addressing future research questions within and across multiple countries, informing the community interventions and policy solutions to positively impact mental health and wellbeing globally.

For readers viewing this manuscript in 2021 or 2022, the timing of the call for papers for this issue of the journal *Community Psychology in Global Perspective* needs no introduction so these next few phrases and quoted passage from the Director-General of the World Health Organization (WHO) are for posterity. The Coronavirus outbreak in Wuhan, China during December, 2019 had a sudden increase in cases and became an epidemic (Centers for Disease Control and Prevention, 2020). On March 11, 2020, Dr. Tedros Adhanom Ghebreyesus, the Director-General of the WHO

reported that worldwide 118,000 people were infected with the Coronavirus and 4,291 (3.7%) had died from COVID-19-related disease across 114 countries, so the WHO declared the epidemic had become a pandemic and that this decision was not made lightly. A portion of the opening remarks from Dr. Ghebreyesus at the now historic media briefing illustrate many areas of overlap with researchers and practitioners working from theories and strategies used within the field of community psychology.

We are grateful for the measures being taken in Iran, Italy and the Republic of Korea to slow the virus and control their epidemics. We know that these measures are taking a heavy toll on societies and economies, just as they did in China. All countries must strike a fine balance between protecting health, minimizing economic and social disruption, and respecting human rights. WHO's mandate is public health. But we're working with many partners across all sectors to mitigate the social and economic consequences of this pandemic. This is not just a public health crisis, it is a crisis that will touch every sector – so every sector and every individual must be involved in the fight. I have said from the beginning that countries must take a whole-of-government, whole-of-society approach, built around a comprehensive strategy to prevent infections, save lives and minimize impact. Let me summarize it in four key areas. First, prepare and be ready. Second, detect, protect and treat. Third, reduce transmission. Fourth, innovate and learn. I remind all countries that we are calling on you to activate and scale up your emergency response mechanisms; Communicate with your people about the risks and how they can protect themselves – this is everybody's business; Find, isolate, test and treat every case and trace every contact; Ready your hospitals; Protect and train your health workers. And let's all look out for each other, because we need each other. There's been so much attention on one word. Let me give you some other words that matter much more, and that are much more actionable. Prevention. Preparedness. Public health. Political leadership. And most of all, people. We're in this together, to do the right things with calm and protect the citizens of the world. It's doable. I thank you. (WHO Director-General's opening remarks at the media briefing on COVID-19 - 11 March 2020)

The alignment from the needs identified by the WHO and what community psychologists do is illustrated in the following activities as reported by the Society for Community Research and Action, one of the many professional associations in the field around the world.

[Community psychologists] engage in action-oriented research . . . to better understand the multiple influences of the social environment on health and wellness [and] build collaborative relationships with community members, groups, and organizations to solve social problems. . . [they also] consult with and provide tools to organizations to build capacity to address social problems [as well as] analyze government, civic life, and workplace settings in order to understand and improve fair and diverse participation. . . fight oppression, work to reduce social inequalities, and work with marginalized people toward their empowerment. (Society for Community Research and Action, n.d.)

With a global pandemic declared, and direct personal and professional experience with it, the editor-in-chief of the journal *Community Psychology in Global Perspective*, initiated an invitation to 33 colleagues, including the Journal's editorial board members, to serve as special edition editors for a 2021 thematic issue on "Community responses to COVID19 pandemic" noting that "we are facing a unique situation all around the world, and many of us are doing research or serving as community psychologists to help people cope with the pandemic" (Terri Mannarini, personal communication, April 15, 2020). As an editorial board member, the first author of this introduction recognized the importance and need for the journal. She invited two colleagues to be co-editors and they accepted. Collectively, their education in community psychology combined with current practices in international public policy, counselling, and Indigenous Affairs Canada motivated them to co-edit this special issue with the guidance and assistance of the editor-in-chief and her team.

Our call follows: *The COVID-19 pandemic is impacting children, families, communities, organizations, institutions and governments worldwide. Community psychology's action research, practices, and theories are no doubt being mobilized in various context-specific approaches. The journal Community Psychology in Global Perspective invites you to submit manuscripts related directly to the pandemic.* We specified that potential topics of interest include (but are not limited to): Individual and community responses to the pandemic: Help and solidarity; Community resilience and sense of community in the face of global emergencies; Psychosocial impacts of the pandemic (including mental health and substance use); Sense making processes and social representations of COVID-19 in private/public discourse; Cultural differences in responses to the COVID-19 crisis; Social justice and disparities before and after the pandemic; Social relationships and social networks in times of social distancing; Connecting community with state and non-state resources to address public health and economic issues; Adverse consequences of school closures (psychosocial impacts, interrupted learning, deprived opportunities for growth and development, challenges of distance learning, gaps in childcare, impact on dropout rates); Society and institutional matters such as nursing homes, prisons, and youth living under the care of child protective services; Addressing violence in the home during quarantine (domestic and child violence); and Mitigating the overload of health resources.

We note that many of us who contributed to this journal as authors, reviewers, editors, and editing support staff are privileged to be earning an income and working remotely. At the same time, the changes linked to COVID-19 in our work and home settings made our progress slower than expected. We thank the authors, reviewers, and our co-editors and support team for extending timelines, patience, and understanding with grace during the development of this special issue that is a historical snapshot of community psychology research during the first year of the COVID-19 pandemic.

2. Global discourse and local actions: Coping and hoping

A health pandemic is a situation when communicating within and across borders and all demographics is imperative. The advancement of technology, particularly the Internet, has eased dissemination exponentially compared to communication avenues in previous epidemics and pandemics, and it has also brought challenges. One of the obstacles has been for governments and public health actors to determine the most effective modes of reaching the general public be it on government websites, social media platforms, or news sources. Despite the potential of social

platforms to provide a source for a broad catchment, a study of eight municipalities in Italy that used Facebook (admittedly for the first time) reached 5.2% to 22.7% of inhabitants (Mori et al., 2020). In addition to the difficulty of contacting a large percentage of the population, there is a need to attend to social groupings such as vulnerable peoples and those not using digital technologies as well as with the flow of credible and false content. Even reputable sources such as the World Health Organization have been found to have inconsistencies in reaching the elderly population (Fernández-Díaz et al., 2020). In addition to the state and non-state actors such as non-governmental organizations, civil society also contributes to the public discourse that affect the trajectory of the pandemic that impacts individual, local and global health, economic and social wellbeing.

Community Psychology in Global Perspective is devoted to understanding human interactions in community settings around the world. In this issue, findings from six studies representing research conducted within a total of 12 countries from the onset of the pandemic through December, 2020 reveal the impact of COVID-19 on public discourse, coping, and resilience with the support of local networks as well as through gardening and making music: Argentina, Brazil, Canada, Indonesia, Italy, Malta, Mexico, Philippines, Romania, South Africa, Spain, the United States of America. For a somber perspective, the rate of COVID-19 related deaths in the countries represented in this special issue is illustrated in Figure 1, using the United Kingdom as a point of reference which as of March 12, 2021 was fourth highest in the world with 1,869 total deaths per million based on 2019 population figures after Czechia (2120), Belgium (1948), and Slovenia (1876) (Statista.com, 2021) which is not included in Figure 1.

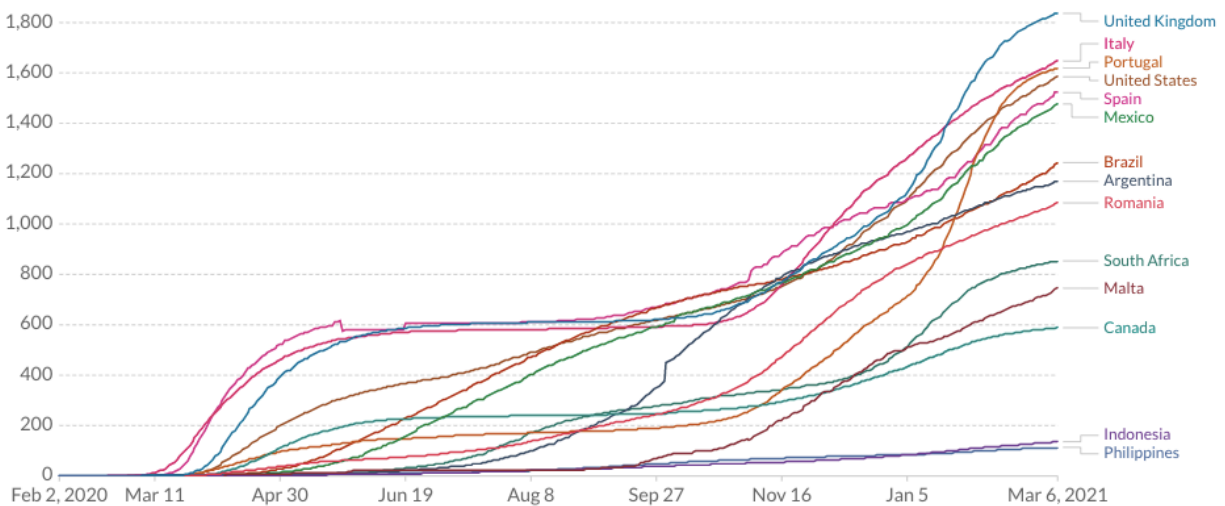


Figure 1. Cumulative confirmed COVID-19 deaths per million people (Ritchie et al., 2021)

To begin this special issue, researchers report on an examination of public discourse in ten countries during the first wave of the COVID-19 pandemic. From a theoretical framework of social representations and with the goal of understanding collective symbolic coping, they analyzed and interpreted communications from a wide variety of public sources with an approach that questioned the stage process in which awareness is the first step before information may diverge or converge and subsequently be normalized. They explored both the processes and content with

an overarching research question to determine if discourses diverged and were polemical. Given the search for differences, having a diverse sampling strategy was critical. The research was conducted by in-country teams across the following five geo-political regions: Europe, North America, Latino America, Asia, and Africa. The findings provide strong evidence for the critical role that public communications plays in crisis management that will avoid stigmatizing outgroups and bolstering of conspiracy theories across many nations. Although findings from their study document negative impacts, the use of public sources can be mobilized for the public good such as was the case study exploring how networking of actors and assets strengthens the social support fabric in South Africa presented in the next article in this issue.

The second article is a case study of a local network of care serving disadvantaged communities in the Strand, Western Cape, South Africa. The study examines how the network was built and sustained to address issues of health, safety, and social justice pre-COVID and how that impacted the support the communities had during the first year of the pandemic. The network was comprised of 69 locally active organizations such as government health service agencies, non-governmental organizations, and faith-based programs. Framing the case study in Community Coalition Action Theory (CCAT) the implicit method used was reflecting on the development of relationships among the social actors and service providers in the network. With this framework, mass media sources and network records such as annual reports and reflections on an interactive workshop were analyzed. The focus was on the barriers and facilitators of how the network supports community resilience and social justice. Findings from this case have implications for restoration of health and well-being through the process of a network engaged in community building.

Next, one of the countries with the highest rates of community spread and COVID-19-related deaths is Italy (1,678 per million, according to Statista, 2021). The third article in this issue provides global insight into the impacts of the pandemic within a population of university students in Italy, notably the first country to be heavily impacted by COVID-19 after China. Given the emotional impacts of the pandemic, these authors sought to examine the emotional responses, coping strategies, and resilience of undergraduate students living in varying levels of contagion. Using a grounded theory approach, qualitative data collected through an online survey format were analyzed and communicated many complex emotions and reactions across the geographic levels of contagion. The article describes the affective impacts of confinement due to the COVID-19 emergency, and highlights how context influences individual wellbeing.

The fourth study, also concerned with understanding coping in the context of a pandemic, was conducted in the Philippines. This research explored the phenomenon of home gardening that increased during the various quarantines instated at the community and general levels. Seeing that a new term specific to Filipinos (*plantito/tita*) was being used on social media platforms to describe someone who enjoys nurturing plants, from a theoretical framework of understanding values, beliefs, and norms, the researchers explored connections between this activity and psychological outcomes. In an online survey with open-ended questions, they learned from more than 100 participants, mostly women, the meaning of the word and how individuals who associated with it discovered their interest and motivations for it. The further connections made to coping during the pandemic and how gardening relieves stress and anxiety as well as improves mood are illustrated in participants' words. This study provides evidence for home gardening as an activity to counter depression and contribute to aesthetics and urban sustainability as well as providing an alternate source of food. It is an uplifting example of coping and hoping during a pandemic.

Crises often exert the harshest punishment on vulnerable populations, in many cases worsening already unjust conditions (Aaviksoo & Kiiivte, 2014; Kantamneni, 2020; Ompad et al., 2007). In

the fifth paper, the authors take a “side-by-side” approach as they couch social toxicity (i.e., the structural and cultural conditions that result in trauma and inequity) and social possibility (i.e., mutual aid) between opportunities for cohesion and collectivism in America. True to the values of community psychology, the authors instruct on the importance of context, writing under the umbrella of both a neoliberalism regime and a global pandemic. Their central thesis is that the strict neoliberal focus on individual responsibility and privatization, in conjunction with the emergence of COVID-19, exacerbated the inequities of those who are undocumented and those who are unhoused. This paper uses photovoice to document through visual means the ways in which the complex context of the United States at the beginning of COVID-19 shaped the lives and realities of immigrant and unhoused communities. Despite tremendous disruption brought on by COVID-19, an opportunity emerged for community psychologists to think globally and collectively about how to reorganize communities, particularly through mutual aid work. By earmarking mutual aid as an approach for increasing solidarity and directly providing supports to oppressed populations through alternative structures, this study can inform an innovative framework for advancing the principles of community psychology.

The sixth and last publication in this special issue presents a case study from Lisbon, Portugal. The authors employ multimedia to explore the ways in which disparities and structural issues within the asylum system in Lisbon were amplified during the pandemic and document first-hand experiences of the challenges faced by asylum seekers and refugee-led organizations during COVID-19. Perhaps not surprisingly, their stories reveal an exacerbation of longstanding issues such as access to employment and health care, race-based discrimination, and lack of information. Nevertheless, this study also inspires hope by highlighting instances of solidarity and activism, both new and pre-existing. Most noteworthy is the substantive engagement of refugees and refugee-led organizations on the front lines amidst the crisis and their contributions through, for example, providing cultural mediation and material assistance. The authors use this finding to urge a more holistic perspective on asylum policies that fosters greater involvement of these populations in government planning and intervention. By amplifying these voices, this study provides a counter-narrative to the dominant institutional one and advocates that governments strengthen participation of all of civil society in planning, policy, and intervention.

3. Future directions and conclusion: From despair to hope

The global health crisis of the COVID-19 pandemic will no doubt become a milestone and perhaps a turning point in community psychology research because the field is inextricably linked with diverse and ecological contexts (Trickett, 2009; Trickett, 2019). As illustrated in this special issue, research programs are being adapted to address the context of COVID-19. We invite future researchers to study how communities are responding to the pandemic and secondary effects. For example, what other novel challenges and opportunities may expand existing bodies of knowledge on sense of community, prevention and promotion, empowerment, and social justice? We know from post-disaster recovery from hurricanes that community interventions and resources will need to be mobilized to support schools and neighborhoods (Felix et al., 2013) as these settings interact and cope with the yet unknown effects of living with the pandemic. A decade or more into the future, when the time comes to look back and examine how the COVID-19 pandemic changed the field of community psychology, approaching it with pluralistic inquiry (Kelly & Chang, 2008) will continue to be important.

Community psychology in North America and elsewhere arguably has roots developing out of and reacting to clinical and counselling psychology which have had a long history of focusing on the individual, rather than the sociocultural, as the source of human pathology and dysfunction. Community psychology steadfastly resists individualism, spotlighting instead the various social, cultural, political, and economic processes that bear on individual wellbeing. Given the research findings presented in this issue conducted within current social and political climates, locally and globally, it seems the time is ripe for a comprehensive framework that addresses how these specialities can join forces in the service of human liberation and empowerment. This call is not novel (e.g., Tucker & Herman, 2007), and some progress has been made in this direction. Future special editions of the community psychology journals may want to advance a call for papers that address the following questions: How can we widen our peripheral vision around the topic of mental health and bring into view a broader ecological lens? Can we invite into the therapy room topics such as systemic racism, human rights violations, poverty, disability, social justice, and other structures of oppression and ask them to stay for a while? How can we mobilize family, school, and community resources to support individuals in need? Is there a way to traverse beyond the aspirational and make the conflicted space between community and counselling psychology less conflicted? Our hope is that future editions of *Community Psychology in Global Perspective* will lead the charge of embracing multiple paradigms that seek to bridge the forever in-between space between the persistent need for individual therapeutic and community interventions.

Community psychologists will take up the charge of the need for adopting research in progress as well as future research to consider the impact of COVID-19. One of the limitations of this special issue is that many countries and issues are not represented. For example, future issues may focus on countries hardest hit by COVID-19 in terms of loss of lives. As of March 6, 2021, 10 of the 15 countries with the highest cumulative per capita death rates since January 1, 2020 are not represented in this issue. A list of the countries most impacted by death follows, according to the COVID-19 Data Repository by the Center for Systems Science and Engineering (CSSE) at Johns Hopkins University, with deaths per million people noted in parentheses: San Marino (2,239.38), which is a country within the Italian state with an estimated population of 33,000; Czechia (2,013.08); Belgium (1,918.96); Slovenia (1,870.19); United Kingdom (1,836.23); Montenegro (2,686.14); Italy (1,646.96); Hungary (1,631.93); Portugal (1,619.35); Bosnia and Herzegovina (1,593.51); United States (1,584.16); North Macedonia (1,528.77); Bulgaria (1,524.51); Spain (1,521.51); and Mexico (1,476.41). One of the strengths of this special issue is that it represents a range of countries including 5 of the 15 countries with the highest number of deaths (as well as the geo-political regions of Europe, North America, Latino America, Asia, and Africa).

Despite the impressive coverage of issues in multiple countries, this issue, like every special issue, has limitations. The primary limitation of this issue was working within the first-year of the COVID-19 pandemic. Most everyone is more stressed than usual because of efforts (individual, familial, organizational, and governmental) to contain the COVID-19. Notwithstanding, this special issue is published at a time of hope. The rate of vaccination is up and new virus cases and deaths are down. The research reported within contributes to a shift from despair to hope as it met novel challenges and opportunities. Nonetheless, much more research is needed on the impact of the COVID-19 pandemic on communities. It is not an easy time in the world and we hope that this special issue uplifts and inspires researchers and practitioners working from community psychology in global perspective.

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