COVID-19 Crisis: Lessons for Recovery

What can we learn from existing research on the long-term aspects of disaster risk and recovery?

Roger Few  
Vasudha Chhotray  
Mark Tebboth  
Johanna Forster

Carole White  
Teresa Armijos  
Clare Shelton

School of International Development,  
University of East Anglia, UK

The British Academy  
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Below: Following floods in Chennai, the resettlement of poorer residents created new forms of social vulnerability (photo: Recovery with Dignity project)
Introduction

The impacts of COVID-19 have reached across the globe, directly affecting millions of people and intensifying existing development challenges in many countries. But, while in many places the pandemic has brought a level of societal disruption seldom experienced before, in others the situation has broad parallels with the losses and disruptions experienced in recent major disasters. Every crisis is different, of course, and this one is certainly like no other contemporary event. Nevertheless, it would be unwise not to recognise the lessons that can be gained from other disaster and post-disaster contexts. In this brief document, we highlight key insights from research on other crisis situations that we hope can inform recovery from the impacts of COVID-19 as well as management of responses to future pandemics.

Our main concern in this document is how to manage the long-term implications of the pandemic in lower and middle-income countries (LMICs), because of the combination of more widespread poverty and structurally weaker support capacity within many of those countries. However, the lessons are by no means restricted to those contexts.

Central in our arguments is the importance of supporting people to recover their livelihoods and wellbeing, equitably and sustainably. As in all disasters, there are much greater numbers of people affected by the crisis than physically harmed by the hazard (in this case a biological hazard - the outbreak of a virus). And, as in all disasters, these impacts do not fall evenly. Hence, the lessons we report on are oriented to the needs and concerns of those most vulnerable to long-term impacts, as shaped by differential exposure to hazards and barriers to recovery associated with poverty, marginalisation and exclusion. The aim is to promote longer-term, integrated thinking and planning, to create pathways out of the pandemic that more effectively support recovery.

In the following pages, we have brought together eight inter-related lessons from our research work in Latin America, the Caribbean, East Africa and South Asia, which we have organised into four main sections: Managing a prolonged crisis; Planning for complexity; Establishing priorities for recovery; and Building capacities. Each lesson is illustrated with a short example from one of our case studies.
Managing a prolonged crisis

COVID-19 is a long-duration hazard event, and the transition out of the crisis will likely take even longer. Experiences from other disasters and disaster risk settings underline the importance of taking a long-term view even when the direct impacts of the hazard are still occurring. The situation will be constantly changing and it does not make sense to wait for things to ‘stabilise’ before taking steps toward recovery. We highlight here two key lessons.

**Lesson 1: Vulnerability is not static during the progression of a long-duration hazard ‘event’**

- COVID-19 has parallels with other long-duration or slow-onset hazards such as prolonged volcanic activity, periods of drought, and biological infestations, as well as other epidemics. The hazard is one that develops and is sustained through an extended period of time, before diminishing to a level that is no longer a major direct threat.

- During the progression of a drawn-out emergency situation such as this, the parameters of risk – exposure to a hazard and vulnerability to its multiple impacts - are not ‘frozen’. Everything is in flux - people’s losses and needs, their knowledge, attitudes and practices, as well as the varying levels of threat posed by the hazard itself.

- One key effect of this dynamic can be increasing precarity of livelihoods. The prolonged disruption created by a long-duration emergency can generate new forms of economic vulnerability, sometimes in social groups not normally associated with unstable incomes. We can see this occurring across the globe, as the implications of COVID-19 lockdowns are generating huge knock-on impacts on poverty, hunger and ill-health.

- Moreover, livelihood precarity itself leads people to return to practices, or undertake new practices, that heighten their exposure to the direct effects of the hazard. This is one key reason why preventive behaviour is bound to change during a long epidemiological emergency, and for some social groups this is not merely them becoming ‘complacent’, but a dynamic driven by livelihood needs and the weighing up of one risk against another.

**Implication for COVID-19:**
Monitor how vulnerability to the pandemic’s effects is shifting and how that might increase ‘risky’ behaviour, and recognise the need for wider livelihood support as a holistic approach to reducing vulnerability.
Lesson 2: Crisis response tends to be immediate and short-term and does not encompass long-term recovery planning

Example 2: Crisis response and disaster risk reduction (Odisha, India)
The coastal Indian state of Odisha suffers regular cyclones from the Bay of Bengal. In 1999, a super-cyclone with wind speeds of 260km/hour and a storm surge that travelled up to 20km inland killed more than 10,000 people, and there were devastating losses to livelihoods. Relief efforts were inadequate and chaotic, and the state struggled to cope with the scale of the crisis. In the years since, the Odisha government has gone on to set up an elaborate crisis response and disaster risk reduction apparatus. It relies predominantly upon a strategy of early warnings and the establishment of multipurpose cyclone shelters. In subsequent cyclones there have been few losses of lives, but there is still a major deficit of attention to impacts on livelihoods and support for recovery. Poor coastal populations are struggling to keep their farming livelihoods going, are taking up new and economically risky livelihoods like aquaculture without support or regulation, and are being pushed into higher levels of vulnerability.

- There is an entrenched tendency amongst governments and aid agencies to regard hazards as singular events with clear start and end dates. This tends to arise from a deeply embedded project mentality that determines fund flows, reporting structures, and ultimately, governance. In the case of disasters however, such mentality translates into a risk reduction strategy that focuses only on the tip of the problem, while disregarding longer-term challenges. There is a real danger that this could happen with COVID-19 as governments everywhere are showing fatigue at the seemingly endless crisis.

- Many have argued that the different aspects of managing disaster risk and its impacts should not be seen as segmented and sequential. This is even more imperative in a long-duration hazard event when the blurring of emergency responses and getting livelihoods and wellbeing back together is inevitable. Peoples’ lives have to go on even as the hazard threat surrounds them, as is clear with the current COVID-19 situation. But in many cases (as in this example from Odisha), recovery planning does not even come under the radar of disaster risk reduction.

- An integral aspect of this tendency is to zero down on the identifiable threat or factor that is driving the crisis and focus on tackling that hazard. Promoting this idea produces more muscular management approaches, and legitimises the curtailment of dissent and democratic freedoms, but does not help the creation of a well-formulated and well-evidenced recovery strategy over time.

- For the COVID-19 situation, as with different types of emergencies, the hazard must be seen as a trigger with long-term effects that interact with many other unfolding problems. Anticipating these now, and supporting people to shape their responses in an equitable and resilient manner, should be at the heart of a recovery strategy.

Implication for COVID-19:
A forward-thinking approach to dealing with the multiple and unfolding drivers and effects of the crisis is needed, where we are not waiting for a finite ‘end’ before ‘transitioning’ to recovery.
Planning for complexity

Recovery from a disaster or other crisis will almost never take a simple, linear path – it will seldom simply be a matter of reproducing what was there before – nor should it necessarily be. Recovery is a process that is complicated, interacting with other dynamics in society, socially differentiated and riven with uncertainty. Such considerations make planning for (and, ultimately realising) recovery inherently difficult, but we cannot ‘wish’ those complexities away. Unless complexity is acknowledged and factored into recovery strategies there is even more chance that poor decisions will exacerbate poverty and marginalisation, and fail to equip populations with the abilities to recover from future crises.

Lesson 3: Recognise and plan for interacting threats and issues that compound over time and influence the course of long-term recovery

- Both crisis and recovery are inseparable from, and interact with, other issues and dynamics that contribute to vulnerability.
- In this example from Ethiopia, it is clear that managing the long-term implications of any disaster and making efforts to strengthen future resilience are unlikely to be successful unless other factors beyond the hazard itself can be taken into consideration.
- When a major crisis such as COVID-19 occurs, it does not nullify pre-existing problems, such as food insecurity, disempowerment or gender-based violence: these persist and may become exacerbated in its aftermath. The disruptions it creates may also give rise to new forms of stress, quite distinct from the nature of the hazard itself. The impacts of decisions made during crises such as incurring debt to provide food for the family can continue to ripple through a person’s life long after the event has finished.
- Effectively managing the long-term repercussions of the COVID-19 pandemic will require understanding of situations of ongoing risk in which the need for recovery does not recede but becomes entangled with pre-existing, new and more immediate concerns.

Example 3: Recognising the complexity that underpins ‘discrete’ crisis events (Ethiopia)

In the drylands of Ethiopia, concerns about water scarcity are an ever-present and a key priority for government, civil society, and society at large. From 2015-2019 many parts of the Horn of Africa, including Ethiopia, experienced recurrent droughts or periods of prolonged rainfall deficits. Response to the drought focused on basic provision of water and food to affected populations. However, research undertaken during the drought showed that its implications were impossible to disentangle from other key drivers of change taking place, such as changes in land use and access to water sources, the increasing enclosure of land, and the spread of invasive plants. More recently, these ongoing issues are being compounded further by the current severe locust invasion across the region which is further impeding efforts to ensure the wellbeing of large proportions of the population. Isolating the impacts of water scarcity from these ongoing societal and environmental dynamics is very difficult and obscures efforts to address underlying vulnerabilities that make drought impacts so devastating.

Implication for COVID-19:
Planning of recovery needs to consider how other issues and dynamics in society will shape the effectiveness of efforts to address problems created by the pandemic.
Lesson 4: Expect a socially uneven process and work to reduce inequities in people’s trajectories of recovery

Example 4: Social differentiation in the long-term impacts of disasters (Montserrat)

The Caribbean island of Montserrat made headline news in the 1990s when its long-quiet volcano, Soufriere Hills, brought devastation to the main, southern part of the island, destroying its capital and forcing the mass evacuation of most of the population. Much has been written about the overall crisis and its management, but there has been little direct focus on how the aftermath of the evacuations and the disruptions that played out for many years more became socially differentiated. A retrospective analysis undertaken in 2013 examined how the most vulnerable during and after the major eruptive phase tended to be those social groups who came into the crisis with lower incomes, fewer economic assets and limited social networks, which constrained their options to rebuild livelihoods in the north of the island or relocate independently to places overseas. But it also indicated how continuing eruptive events and the decisions and actions taken by organisations managing the crisis over evacuation, resettlement, rehabilitation and assisted migration accentuated the ways in which these differences became manifest over time. Everyone on the island was deeply affected by the eruptions, but the long-term implications were inherently uneven.

- By looking at past disasters we can trace how their implications play out across different social groups over time. By implications, we mean the longer-term environmental, demographic, economic, social, psychosocial and other wellbeing impacts associated with emergency events. Not everyone recovers in the same way; and some may become more marginalised through the recovery process.

- In historical research in the Caribbean, South America and India we have seen how patterns of inequality can become reproduced and deepened over time through the passage of disasters, and in Dominica we have traced this process repeating but also evolving through multiple disasters across the colonial and post-colonial periods.

- Reinforcing pre-existing differences, but also sometimes reconfiguring them (through, for example, drawing additional groups into poverty), these inevitably have a strong hand in shaping differential trajectories of people’s recovery. We may even witness reversals in equity gains recently made, such as retrenched inequalities in gender roles and access to employment opportunities.

- It is important also to recognise that poorer social groups are often more susceptible to downstream impacts that emerge well after the hazard event has subsided, such as those noted in Lesson 3. Some of these downstream impacts may be associated with decisions taken when managing the emergency phase, and this is already widely recognised in the discussions both around disease control and livelihood support needs in the case of COVID-19.

Implication for COVID-19:
Recognise that poverty and marginalisation not only prolong recovery but increase susceptibility to downstream livelihood impacts; ensure as much as possible that disease control and recovery decisions do not entrench inequities still further.
Establishing priorities for recovery

Recovery has many facets, and, for organisations engaging in the process, the choice of what to focus on and how is an inherently subjective one. Actions, interventions, policies and political dynamics in the aftermath of crisis events shape the prospects for recovery and define who benefits. Research work has underlined the importance of how, by whom and for what purposes events, processes and experiences of crisis and response are framed and communicated in the post-emergency phase. It is important to retain this critical perspective to recognise how priorities might need to change to better support recovery.

Lesson 5: Recognise that recovery agendas and actions are shaped by power and politics which can lead to poorly designed and incorrectly targeted interventions

- Ideas of recovery are socially differentiated with different stakeholders having different conceptions about what recovery should entail. As processes to define and identify recovery interventions are overlain on pre-existing matrices of power, those who are typically excluded or marginalised will find it harder to make their vision of recovery matter. The attendant risk is that recovery interventions will reflect and be captured by elites.

- Disaster risk managers use seemingly neutral and technocratic language to justify and bound their interventions. However, the processes that shape recovery are backed by powerful political interests and narratives.

- In this example from India we can see how a post-disaster situation created conditions whereby resettlement actions that served different political agendas became possible, with major negative repercussions for the relocated population.

- As we move from response to recovery with the current pandemic it is important to be watchful and recognise how seemingly benign interventions can reinforce exclusionary practices.

Example 5: Relocating poorer residents from inner-city (Chennai)

In November and December 2015, Tamil Nadu was affected by extreme rains and flooding, with the capital city, Chennai, being one of the worst affected areas in the state. Following the floods, the priorities of the Tamil Nadu government focused on housing. Thousands of poorer households were relocated from areas in the centre of Chennai deemed to be ‘at risk’ from flooding to new settlements on the outskirts of the city. These ‘at risk’ areas within the city were then repurposed for business infrastructure and development. Interviews with resettled households highlighted how these decisions have created new vulnerabilities for them. Access to their livelihoods, which are located in the centre of the city, is much harder now because of the distance and cost of transport, and the provision of services in these new locations is worse. The interviewees felt that their priorities for recovery had been sidelined through relocation. Recovery priorities instead became ‘captured’ by elite interests (in this case prioritising city centre development) and failed to provide the appropriate type and level of support for those who are most in need.

Implication for COVID-19:

It is crucial to retain critical awareness of how the design and implementation of recovery actions can be shaped by interest groups, especially if the priorities of the poor and marginalised are to be met.
Lesson 6: The tendency to focus on specific forms of actions in recovery support can undermine recovery and overlook key needs

- In the aftermath of disasters, governments typically prioritise infrastructure and the economy (e.g. rebuilding roads and buildings and reviving economic sectors). To a large extent this is driven by a focus on macro-level indicators rather than micro-scale factors, closer to lived experiences and livelihoods.

- In the concentration on such sectors of intervention, support for other needs tends to be overlooked. Equally important to rebuild are the social networks and community ties, fundamental for recovery, that contribute to community cohesion and support, and help people re-establish or create new livelihoods. Simple actions can go a long way: for instance, rebuilding a community sport field or spiritual centre, and restoring online communication.

- As the example from Dominica shows, psychosocial support is one key example of a neglected sector. Recognition of its importance is increasing, but support for individuals who have experienced extreme loss and upheaval in their lives is still rarely prioritised following disasters. Investing in mental health is a central part of long-term recovery, which at its heart requires people to feel stable, safe and hopeful for the future.

- The implications of the COVID-19 pandemic are as multi-faceted as any major disaster, extending far beyond the direct impacts from the disease. It is important that macro-level indicators do not dominate how recovery support is prioritised, and to recognise the need to assess and support non-material aspects. These will vary from context to context.

Example 6: Prioritising individual and community wellbeing for disaster risk recovery (Dominica)

Dominica was severely impacted by Tropical Storm Erika (2015) and then again by category 5 Hurricane Maria (2017), which destroyed over 90% of the country’s infrastructure – some of which had only just been rebuilt. With many communities left homeless or requiring permanent relocation, recovery efforts and investments have focused on rebuilding physical structures (roads, housing and other essential infrastructure) that people need to pursue recovery within their homes and communities. However, this does not address people’s personal recovery from trauma; and support for this is typically neglected. Dominicans emphasised the importance of good relationships and strong community spirit as central to wellbeing, bolstering resilience and recovery following these traumatic events. While community resilience is part of the national discourse, many have suffered mental health issues, hindering capacity to rebuild lives. A local council worker told us “my mind, my mental state isn’t the same anymore. I’m scared, of everything now”. Two years on, this is clear in the persisting social problems including long-term unemployment, abandoned farms, homelessness and substance misuse.

Implication for COVID-19:
A holistic approach that recognises how the COVID-19 pandemic impacts not only livelihoods, but social support networks and mental health, is vital to prevent creating more vulnerability.
Strengthening capacities

Recognising the lessons highlighted in the previous sections can help the process of planning a recovery from the pandemic so that it follows more equitable and sustainable paths. Though no crisis is the same, there are nevertheless principles that can be applied across them, and this application can be fostered through attention to capacity development for recovery. Indeed, we maintain that capacities to recover can be strengthened before, as well as during and after disasters, and this applies equally to recovery from pandemics.

Lesson 7: Work on recovery does not have to be solely reactive

- In their disaster management plans and guidelines, the focus of many governments still tends to be on the effectiveness of emergency response, despite the shifting emphasis in international forums toward more holistic disaster risk reduction.

- Though relief and recovery are commonly linked administratively, disaster agencies seldom take up a broader and more proactive process of strategic planning for recovery. There is perhaps often an expectation that disaster recovery will follow ‘normal’ processes of development. As a result, strategic thinking about recovery tends to fall between the cracks of disconnected departmental structures.

- The result is little anticipation of the particular long-term risks and problems that emergency situations create, especially those faced by poorer groups that cannot readily replace lost assets especially if they face recurrent hazards.

- Gains are being made globally in disaster preparedness, but typically this is geared to evacuation, rescue, and emergency provisions. We see no fundamental reason why some degree of strategic recovery planning, and the capacities to do so, could not also be put in place, as the example from Mozambique shows. This principle is just as important in planning and anticipation for epidemiological hazards like COVID-19 as it is for physical hazards.

Implication for COVID-19:

Actively plan and build capacity for recovery, now and for future pandemics, drawing positive lessons from countries and contexts where strategic planning mechanisms have aided pandemic management and recovery.
Lesson 8: Recognising and supporting grassroots recovery capacities

- Across the world there has been a growing movement to support communities in how they manage hazards and disaster risk in their environment. This recognises both the potential that exists at grassroots level to take charge of aspects of risk management, but also the lived reality that it is communities affected by disaster, not aid agencies, who must do most of the work to cope with the impacts.

- Yet, again, we see that this support tends to focus mostly on alerts, evacuation, shelter, first aid and relief measures for the immediate emergency phase. Generally, little attention is given to strengthening capacities for people to work together for more effective recovery. But those recent programmes that have been targeting self-recovery efforts following major disasters are showing that the potential is clear.

- Our example from research in Colombia underlines the inherent capacities that many groups who have coped with lifelong hardships possess. It also indicates how a creative, facilitative and flexible approach to community engagement might open opportunities both to support vulnerable groups and strengthen the capacities of both government and communities to work together toward more effective, equitable and sustainable recovery from crises.

- Given the magnitude and complexity of the crisis surrounding COVID-19, it seems that it is practically and ethically important to enable communities to drive their own recovery process during and after a pandemic, to open spaces of dialogue and listen to people’s priorities and concerns. Communities are not just recipients of aid, they are agents of change: they hold important knowledge and capacities that need to be recognised in order to achieve long term recovery from any form of crisis.

Implication for COVID-19:
Encourage agency at grassroots level now, and in anticipation of future pandemics, to help communities plan, implement and gain support for their processes of recovery; consider how creative approaches to engagement can facilitate this capacity strengthening.
Conclusion

There is a tendency to see the COVID-19 crisis as something new and unique, yet there exist parallels with disaster situations that regularly occur across the world, and from which we have much to learn. Recovery from any disaster has to be conceived beyond narrow, short-term fixes focussed on the most immediate, tangible aspects – and all the more so in crises that are as prolonged and ramifying in their effects as this pandemic. The pandemic has a lethal virus at its centre, and a robust public health response to that hazard is, of course, crucial. But, as in any disaster, the implications of its presence touch on many more dimensions of society than disease risk alone, taking new and sometimes unanticipated turns as they ripple across space and through time.

These implications are fundamentally different for different social groups. Evidence shows that, in any form of disaster, certain people and populations will be impacted more severely and for longer periods of time than others. It should be a priority to identify these groups and ensure that measures are targeted to help them. It is generally accepted now within disaster risk reduction circles that people’s level of vulnerability to disaster impacts is pre-conditioned by...
social inequalities, and this is writ large in how the impacts of COVID-19 and the associated public health measures are playing out worldwide. What may be less obvious is that, more often than not, these underlying social structures become reinforced through the emergency and recovery processes. Moreover, structural changes that were thought to have reduced inequality prior to a disaster event, such as shifts in gender and race relations, can reveal their fragility in the crucible of the crisis event.

In the long-drawn recovery period, there will be the tendency to justify interventions that favour particular vested interests, but these must be critically scrutinised to ensure they continue to serve the wider public interest instead. As the COVID-19 pandemic and its aftermath unfold, we need to simultaneously think through impacts of any interventions on different groups across temporal and spatial scales and be cautious with how a narrowly defined problem can lead to a narrowly focused solution with unintended consequences.

These are tall orders for governance, and there is no blueprint for equitable and sustainable recovery to counteract the political constraints it will inevitably face. But, a commitment to make recovery more effective for those who need it most requires, at the very least, that careful thought goes into planning recovery processes through analysis of differential impacts and anticipation of the dynamics ahead. This requires a readiness to seek conversations between different actors – especially those whose recovery prospects seem most constrained. It requires a flexibility and creativity in how to approach dialogues to level out otherwise hierarchical relations, and a recognition that being vulnerable does not in any sense mean lacking agency or lacking a legitimate voice in shaping the way forward. Finally, this is a situation that most countries are facing and reacting to simultaneously, some with greater experience of disasters and epidemics than others. It is vital to learn from other contexts – and a key role for social science can be in galvanising this interaction.
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Further reading


