





# **CONVERGE COVID-19 Working Groups for Public Health and Social Sciences Research**

### **Research Agenda-Setting Paper**

This paper was written to help advance convergence-oriented research in the hazards and disaster field. It highlights areas where additional research could contribute new knowledge to the response to and recovery from the pandemic and other disasters yet to come. Questions about the research topics and ethical and methodological issues highlighted here should be directed to the authors who contributed to this paper.

### Working Group Name:

Living the Pandemic Life on the Margins of Society: Voices from the Field

# **Working Group Description:**

You and I make the ordinary. Recipes, maxims, working truths fashioned from our lived experiences render our everyday worlds knowable. COVID-19 shredded the quotidian, making the everyday unobtrusive, obtrusive, the articulated, disarticulated, the understood, misunderstood, leaving us in a world we can no longer navigate with a knowing confidence. We are brought face-to-face with that simple query Montaigne posed a millennium ago, "How to live?" Answers to this question will vary, in part, depending on a group's material and social standing. In recognition of this reality, our Working Group will gather stories from three diverse populations laboring to answer Montaigne's elemental question. While varied in important ways, the groups share one elemental life circumstance: each lives on the margins of our market, race fixated society. Specifically, we follow one cohort of Latinos and Latinas, two cohorts of African-Americans, and two cohorts of Native Americans. When the histories of this pandemic are written, their voices must be heard.

#### **Priority Research Topics and Specific Research Questions:**

Priority Research Topics		Potential Research Questions
1.	Identifying the Risks of COVID- 19	<ul> <li>In thinking about COVID-19, what scares or worries you the most? Why?</li> <li>Who in your community is most at risk from this pandemic?</li> <li>Who in your family is most at risk from COVID-19?</li> <li>Does your employment put you or your family at risk for COVID-19? How so?</li> <li>When you think about your community, are there particular places you avoid to protect yourself or those you care about from the coronavirus?</li> </ul>
2.	Living the Pandemic Life	<ul> <li>How has this pandemic changed your everyday routines and habits?</li> <li>What do you find most helpful in your efforts to cope with this pandemic?</li> <li>What are the challenges you face as you act to adapt to COVID-19?</li> <li>Where are you getting most of your information about this pandemic? Who do you trust to tell the truth?</li> </ul>





		• Many traditions, weekly church services, funerals, and community events and celebrations had to change because of the pandemic. Have your religious or community traditions been impacted? How so?
3.	Class, Race, and Ethnic Inequalities	<ul> <li>Would you say this pandemic has changed your family's financial well-being?</li> <li>Has COVID-19 impacted your children's education?</li> <li>Has the pandemic altered your education or employment in any way?</li> <li>Race has become a national topic, once again. In your opinion, do race and ethnicity play a role in this pandemic? How? Why?</li> <li>Do you and your family have access to health care? Are you satisfied with the health care you are receiving?</li> <li>In your opinion, is this pandemic interfering with the delivery of quality health care? Why?/Why not?</li> </ul>
4.	COVID-19 Linked to Other Community Issues	<ul> <li>Communities face an array of issues, from severe weather events to inept local, state, and national politics. When you think about this pandemic do you connect it to other troubles and worries your community faces?</li> <li>From your vantage point, what would you say is your community's most troubling problem at the moment?</li> <li>Would you say you are optimistic or pessimistic that your community can effectively manage both this pandemic and the other problems it faces?</li> </ul>
5.	Impacts on the Future, Collective and Personal	<ul> <li>How do you imagine this pandemic affecting you and your community in the next month or two?</li> <li>Now thinking further ahead, what concerns do you have about COVID-19 six months or a year from now?</li> <li>Imagine for a moment that the pandemic is over. Do you think this historic disease will have changed you? How? Why? Why not?</li> <li>Will this pandemic change your family in any way? How? Why? Why not?</li> <li>Thinking into the future, will COVID-19 change your community? How? Why? Why not?</li> </ul>
6.	Psychological Health and Well- Being of Response Workers and the Public in a Hurricane- Pandemic	<ul> <li>What are the critical stressors during the evacuation and sheltering process that may threaten staff, volunteers, and clients' psychological health and well-being?</li> <li>What stressors (chronic and acute) in the evacuation and sheltering process are introduced or exacerbated due to COVID-19?</li> <li>How can shelter staff balance the need to protect their and others' psychological health during a compound hurricane-pandemic threat with necessarily limited time and resources?</li> <li>What are the high-impact, low-cost resources that can be provided to shelter staff, volunteers, and clients to promote psychological health and well-being given the limitations of the shelter environment?</li> <li>What psychological theories and interventions can be rapidly deployed to minimize threats to psychological health during and/or following a hurricane-pandemic event?</li> </ul>

# **Ethical / Methodological Considerations:**

In ordinary times, field research with marginalized communities requires a reflexive ethical focus. These are not ordinary times. We seek an understanding of how groups who live at or below the poverty line, who face racial or ethnic discrimination day-in and day-out, are coping with and making sense of COVID-19. This crisis requires us to be particularly respectful and accommodating. We will take into consideration both the pandemic and the ongoing worries and troubles that beset these populations. Research in the middle of a disaster is often based on knowledge extraction; a team goes into a community, interviews, perhaps counts a few things, and leaves. Our approach eschews this model. We intend to communicate to each person we speak with that her or his voice is critical. The message to each participant will be clear: "I am here to learn. What can you teach me?" We have contacted key people in each community who will assist us in identifying individuals to participate in the study. We created an interview protocol; it will be modified to reflect the historical and cultural uniqueness of each group. The identities of the people interviewed will be protected and the research process transparent. We will deliberately affirm in each interview the value of the person's words to the success of this project.

## **Related Research Experience and Representative Publications:**

#### **Professor Pam Jenkins**

I have worked on several projects focused on disasters using a qualitative approach that privileged the voices of those living through mayhem. Following Hurricane Katrina, I interviewed a diverse group of residents in senior centers, first responders, survivors of domestic violence, members of African-American congregations, non-profit personnel, and residents of two New Orleans neighborhoods. <u>Representative Publication</u>: with Brenda Phillips. Fall 2008. "When Catastrophe Strikes Battered Women: Domestic Violence in the Context of Disaster." *National Women's Studies Journal* Special Issue on Katrina, 20(3): 49-68.

### **Professor Art Murphy**

I have conducted ethnographic research with Spanish speaking populations in the United States since 1971. In Mexico I worked in Oaxaca Guadalajara, Merida, and Hermosillo and with migrant families in the south east. Most recently I conducted research in the State of Sonora, Mexico.

<u>Representative Publication</u>: "Posttraumatic Stress Disorder Symptom Network Structures: A Comparison Between Men and Women." 2000. *Journal of Traumatic Stress*, 33(1), 96-105.

#### **Professor Steve Kroll-Smith**

I conducted a 7-month field study in Centralia, Pennsylvania, a town ravaged by an underground mine fire. In writing *Bodies in Protest*, I conducted over 65 qualitative interviews with people who self-identified as environmentally ill. I participated in close to 70 interviews with people living in two New Orleans neighborhoods during and after Hurricane Katrina.

<u>Representative Publication</u>: *Left to Chance: Hurricane Katrina and the Story of Two New Orleans'* Neighborhoods. 2015. Austin, TX: University of Texas Press.

# **Professor George Lord**

I have served on faculty in Sociology and Public Administration at several universities and as an administrator (Department Chair and Dean) prior to leaving my academic career and joining the Mayor's Innovation and Delivery Team in Memphis from 2013-2017 before retiring. I have done research utilizing both quantitative and qualitative methods in the areas of education, economic development, poverty, and youth development.

<u>Representative Publication</u>: "Shelby County Early Childhood Development, 2008." The Urban Child Institute: Memphis, TN.

# **Professor David Shane Lowry**

I have a background in local and global health issues. As a faculty member of the Chicago Medical School, I worked on the intersection of medicine and medical humanities. I have also worked on human rights and racial justice topics. As a member of the Lumbee Tribe of North Carolina, I have worked on Indigenous rights issues.

<u>Representative Publication:</u> "RedPilling: A Professional Reflects on White Racial Privilege and Drug Policy in American Healthcare".2014. *Journal of Ethnicity in Substance Abuse* 17(2).

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