

Recovering from COVID-19: the key issues

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1 Introduction

This document has been written to summarise and supplement existing guidance on recovery from disasters¹ and pandemics² in the unique context of COVID-19 and to incorporate wider learning and experience from the team who produced it. It outlines the key issues and details the approach to recovery we believe is needed³.

2 What is recovery?

- Recovery is defined as the process of *rebuilding, restoring and rehabilitating* society following an emergency, but it is more than simply the replacement of what has been destroyed and the rehabilitation of those affected.
- *Recovery is a process* – and is gradual. The pace of recovery will depend on the residual impact of the pandemic, ongoing demands, backlogs, staff and organisational fatigue, and continuing supply difficulties. Therefore, a gradual return to a 'new' normality is to be expected in the short- and long-term.
- Recovery *aims to generate positive outcomes* to address the fragilities and opportunities that the emergency has exposed.
- Recovery *offers a wide range of opportunities* at all levels from national government to individuals and communities – environmental / cultural / technological / 'community' / partnership working / public health & healthy living.
- Achieving this 'new normality' is *a complex social and developmental process* rather than just a remedial process.

2.1 Why recovery from COVID-19 is different

- *The scale is different.* The intangible and transferable damage to health, economies and social structures are on a global scale which has been rarely accounted for in current emergency preparedness plans, often focused on natural disasters.
- *The effects are different.* Recovery can include actions to reinstate the built environment that has been damaged or restore material objects that individuals, communities and organisations have lost, and this will form a critical component of recovery efforts for covid-19. Governments and a host of private firms, from banks to insurance companies, are cooperating to develop ways by which businesses and people can re-establish themselves economically. But recovery needs also to address the so-called 'immaterial', but

¹ <https://www.gov.uk/guidance/emergency-response-and-recovery> and specifically chapter 5 of [Emergency Response and Recovery \(updated October 2013\)](#)

² https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/213717/dh_131040.pdf

³ <https://www.alliancembs.manchester.ac.uk/news/how-can-society-recover-from-covid-19/>

no less significant, changes: families across the world rocked by the loss of loved ones, entire populations have been evacuated suddenly from the routines and relationships that collectively form their everyday, normal life. Isolation and the sudden lack of social integration will reverberate on many, if not all, people's mental health and wellbeing.

- *The length of time is different.* Other emergencies in the past have impacted across various elements of infrastructure, bringing transport networks to a standstill, causing the closure of various welfare institutions, producing incredible strain on healthcare and causing major disruption to economies. But with COVID-19 we're seeing a total shutdown of many of these services for an amount of time that is unprecedented.
- *The knock-on effects are vast.* The impact on one area of society realm produces knock-on effects on another. For example, the closure of non-essential workplaces has produced new levels of burden on Wi-Fi infrastructure. The magnitude of the impacts of COVID-19 are indicators of the nature and the scale of the required change during recovery
- *The impacts are not yet clear.* We cannot yet predict the impact of the pandemic virus, which may re-emerge in future waves, and which will again require organisations to regroup and respond, despite calls for future scenario modelling.
- *It will overlap with response.* There may not be a clear separation between response and recovery as there is for natural disasters, given the scale and nature of the challenge. Both response and recovery require multi-agency working however, and learning from response is important in recovery.
- *It will require agility and flexibility.* Recovery will be facilitated and enabled by decisions on the lifting of social and economic restrictions which may be sequenced differently dependent upon sector, geography or 'vulnerability'. There will be a need to assess the impacts of COVID-19, adapt to the resulting changes, and then stabilise a new normal.

2.2 Key groups involved in recovery

Recovery planning and activity is at a range of levels:

- a) **National government and the associated departments:**
 - For example, they will facilitate economic recovery, national infrastructure, policy and legislative changes to drive short, medium to longer term recovery.
 - Specific departments (e.g. Health and Social Care) will lead on restoring services and dealing with issues such as exacerbation of illnesses and the backlog of 'normal' treatments as well as hidden abuses during the response such as domestic, drug and child abuse
- b) **Regional and local partnerships:**
 - For example, existing mechanisms e.g. Local Resilience Forums will support the restoration of essential services across the partnership level
 - Partnerships with organisations and communities developed during the response can be important in recovery
- c) **Individual organisations:**
 - For example, these will be influenced by national policy and legislation but will face specific sector and local challenges
 - Third sector organisations may face specific challenges

d) **People and communities:**

- For example, the groundswell of local initiatives to provide support during this pandemic could be developed for wider social good

2.3 Starting recovery

- Planning for recovery needs to start during response and will have short and long-term aspects to it. Many UK Local Authorities (LAs) are now starting this planning process but the challenges of COVID-19 make this difficult and we have provided these consideration to support this process.
- Lessons from previous emergencies and crises indicate that recovery must start early and can lead to a better future even though it may not seem appropriate or possible to discuss strategic recovery during the response phase.

3 The challenges of recovery

3.1 Compared to response

- Experience has shown that the recovery phase and the structures, processes and relationships that underpin it are *harder to get right than the response phase*.
- Recovery should be done *'with'* the community not *'to'* the community⁴. Provision of recovery support is to assist affected communities towards management of their own recovery, with communities having different needs and priorities.
- Recovery usually takes years rather than months to complete as it seeks to address the enduring human, physical, environmental, and economic consequences of emergencies.

3.2 Common aspects of recovery

- Learning from previous disaster recovery⁵ shows that there are common aspects of recovery:
 - to experience a sense of camaraderie, unity and optimism in the early stages
 - for recovery to be a long, protracted journey
 - for people to have a hard time along the way
 - for ongoing stress to make it challenging to retain optimism, tolerance, the ability to problem solve and empathise
 - for the majority of people and communities to *'recover'* but also to grow from the experience.
- Recovery therefore offers a wide range of opportunities at all levels from national government to individuals and communities – environmental / cultural / technological / *'community'* / partnership working / public health & healthy living which need consideration.

⁴ [Emergency Response and Recovery \(updated October 2013\)](#), chapter 5

⁵ https://www.preparecenter.org/sites/default/files/leading_in_disaster_recovery_a_companion_through_the_chaos.pdf

3.3 Leadership

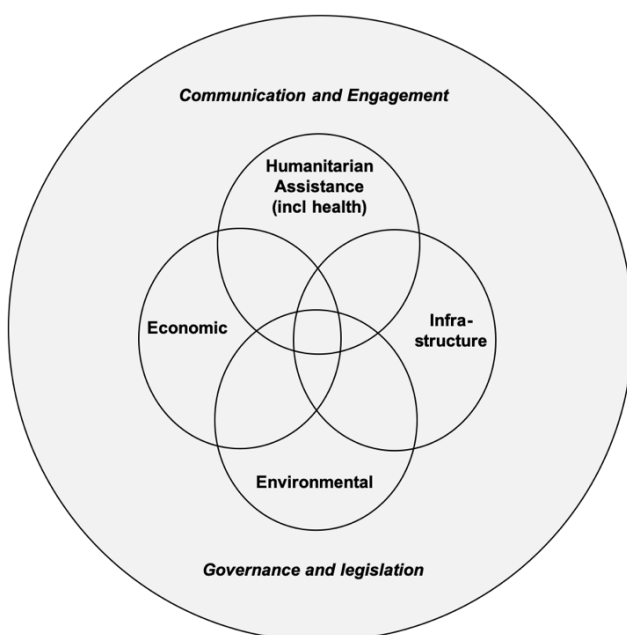
Leadership in recovery is different from response although remaining challenging and requiring flexibility. Key differences⁶:

- **Uncertainty:** *“You have to try to imagine the future when you are in an environment that is uncertain and rapidly changing. You have to make important decisions with limited evidence and do it with confidence.”*
- **Scale:** *“The size and complexity of what needs to be done can be overwhelming. Every aspect of life changes”*
- **Time:** *“Decisiveness and the ability to make good decisions quickly. Part of that is making everyone feel included in the process. It’s a balancing act between those things”*
- **Psychology:** *“Impacted populations work differently. Chronic stress negatively impacts relationships, problem-solving, creative thinking, ability to take on information... As people get worn down, trust, cohesion and niceties can be lost”*
- **Endurance:** *“This is not a marathon, this is not a sprint, this is not a relay. It’s every horrible endurance event that you can imagine all rolled into one”*

4 What do we need to consider in recovery?

4.1 The key issues

Using generic categories to capture the key issues has been shown to be useful in recovery, enabling all issues to be identified and plans to be aligned across sectors and groups. The framework of humanitarian assistance, economic, infrastructure and environmental, supported by key enablers, covers all the key issues.



Examples of issues⁷ in each category:

- **Humanitarian Assistance (including health);** physical impacts (including individuals’ health, housing, financial needs); psychological impacts; volunteers
- **Economic;** reopening businesses; retail, leisure, hospitality
- **Infrastructure;** restoring daily life (educational establishments, welfare services, transport system, waste management); digital infrastructure and cyber security; Supply Chain Management and logistics
- **Environmental;** green spaces - accommodating social distancing

Enablers:

- **Communication and engagement;** connectivity between health and wider system; use of media; community engagement; public reassurance regarding health and social care concerns and the capability/capacity of the health and social care system.
- **Governance and legislation;** emergency legislation and the transition into recovery, use of existing governance mechanisms

⁶ https://www.preparecenter.org/sites/default/files/leading_in_disaster_recovery_a_companion_through_the_chaos.pdf

⁷ This is not a comprehensive list – examples provided to illustrate the scope of each category

4.2 National guidance

There is national guidance (Cabinet Office⁸) for recovery which focuses on structures and process and will be followed by Local Resilience Forums as part of their usual process.

4.3 What is happening elsewhere

Across the world cities and countries affected by COVID-19 are starting to put their plans in places for recovery. As this is a fast-changing situation, it isn't possible yet to identify generic key lessons from their approaches but we are providing regular updates by email which you can sign up to receive [here](#).

5 What should we do?

5.1 Short-term

5.1.1 Identify a strategic lead and appropriate governance

- to begin to develop partnership objectives for recovery
- supported by an appropriate group within the current governance structure

5.1.2 Identify the key stakeholders

Many of these stakeholders will already be involved in the response effort in some way and so existing structures may be helpful here in identifying the key groups.

- **Governments:** those who will develop and enact national guidance and legislation which the whole country will be expected to follow. This will also include the provision of economic assistance in a range of forms.
- **Organisations:** responding agencies, advising agencies, those whose services are or will be affected as a result of the emergency

For COVID this is already vast and, in the UK, includes ... NHS Foundation Trusts; Community Health Trusts; Mental Health; Clinical Commissioning Groups; Public Health; Voluntary Sector; Community Groups; Local Authority Social Care; Drug and Alcohol Wellbeing Service; Local Authority Wellbeing Teams; information governance; coroner's representatives; funeral directors; transport providers, schools, police and many others

- **Individuals and communities:** *"There will not be one person untouched in some way, either physically, socially, economically or psychologically from this emergency".*

5.1.3 Carry out impact assessments

- This might be developed from your existing structures/cells and capture issues from existing data. Existing approaches to impact assessment can be used
- It may include equality impact assessments to identify the potential disproportionate effect of the pandemic on some communities and individuals

5.1.4 Make plans

These will include plans for:

⁸ <https://www.gov.uk/guidance/emergency-response-and-recovery>

- restoration of services
- dealing with residual impacts: 'exit strategies' where relevant, staff and organisational fatigue, ongoing supply difficulties
- dealing with the backlog of 'normal' activity which was suspended during the pandemic
- dealing with things hidden during the pandemic but now emerging: domestic abuse, child protection, drugs misuse, mental health issues
- longer term recovery

5.2 Longer-term

- Higher level macro strategic issues – *e.g.* economic regeneration are most likely to be driven by government but there will be local issues and needs to be planned and addressed as part of this.
- At this stage identification of the long-term issues may be all that is required.