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# The Manchester Briefing COVID-19

## International lessons for local and national government recovery and renewal

### What is 'The Manchester Briefing on COVID-19'?

The Manchester Briefing on COVID-19 is aimed at those who plan and implement recovery from COVID-19, including government emergency planners and resilience officers.

We bring together international lessons and examples which may prompt your thinking on the recovery from COVID-19, as well as other information from a range of sources and a focus on one key topic. The lessons are taken from websites (e.g. UN, WHO), documents (e.g. from researchers and governments), webinars (e.g. those facilitated by WEF, GCRN), and other things we find.

We aim to report what others have done without making any judgement on the effectiveness of the approaches or recommending any specific approach.

### This week we have provided information on our webinar series and three briefings:

## Visit our new webpage 'Recovery, Renewal, Resilience from COVID-19'

**Contribute your knowledge** to the briefing (via a 30-minute interview) by contacting duncan.shaw-2@manchester.ac.uk

**We also produce a blog series** which you can access here along with other news about our team and our work.

**Join the conversation**
#RecoveryRenewal  #Covid19Recovery

**Previous briefings.** If this is the first briefing you have received and you'd like to access more, they can be found here.

>>>>>>>>  Please register at ambs.ac.uk/covidrecovery to receive future briefings  <<<<<<<<

# Recovery, Renewal, Resilience: The Manchester Webinar Series

Over the coming months, our team, in collaboration with partners, will be running a series of webinars that will explore recovery and renewal from COVID-19. The webinars will mark key dates, discuss the themes emerging and developing through our project and report on key findings, good practice and global learning. Register for our upcoming and watch our most recent webinars:

## Upcoming Webinars

### 29/04/2021, 5pm BST: Recovering from COVID-19

This event is aimed at students and others who are interested in hearing how academic research can have a real world impact through the application of tools, theories and social science

Register: https://tinyurl.com/2mtd2wa9

## Past webinars

### 25/03/2021: One year of COVID-19: Delivering a Green and Just Recovery

Jointly organised by Resilience Cities Network and the World Bank, co-hosted by The University of Manchester, this webinar reflects on the lessons learned since the pandemic struck

Watch: https://tinyurl.com/2jw4cjz9

### 26/03/2021: Recovery and renewal from COVID-19: A year of The Manchester Briefing

One year since the launch of The Manchester Briefing, this event explores and collates the key lessons and themes that have emerged from around the globe during the COVID-19 pandemic

Watch: https://tinyurl.com/25ftp6hw

### 07/04/2021: Communities: The new local resilience capability

This webinar asks whether community resilience can be a local and national resilience capability, and explores different models of community action from the US, Chile and the UK to illustrate how this might be achieved

Watch: https://tinyurl.com/7evyj475

Briefing A:

# Considerations for a post-pandemic paradigm for public leadership

**Written by Dr Stephen Brookes, Honorary Associate Professor in Public Leadership, University of Manchester and Umer Khan, Chief Superintendent, Greater Manchester Police, UK**

Key learning points for a post-pandemic paradigm:

- Public leaders need to change their mind-sets and behaviours, in order to secure the trust and legitimacy necessary to address the consequences of COVID-19 and retain high esteem
- Building community capacity and capability will be critical, and requires an inclusive approach based on empathy, empowerment and enablement
- Relational leadership is valuable. Firstly, it enables a holistic risk assessment which is informed by community intelligence as well as by formal evidence. Secondly, it helps build public support for recovery, renewal and resilience strategies
- A public value approach which 'counts what counts rather than what can be counted' can enhance a managerial focus on goals

## Introduction

Public leadership is a form of collective leadership which seeks to produce value for the public. Leaders from a range of public-serving institutions develop a shared vision to guide improvements in economic and social well-being within a complex and changing environment[1] . Leaders also contribute to public value when they manage risk and build community capability and capacity, particularly at a time of crisis.

The contribution of community resilience to COVID-19 response was highlighted in The Manchester Briefing (Issue 30): how this has developed, challenges that remain, and the opportunity for renewal of community resilience as a local and national resilience capability. To realise this opportunity, public trust and confidence in the leadership of statutory organisations will be critical, along with embedding a new mind-set in the broader constitution of public leadership - making the case for a reframed relational public leadership approach that balances public and individual interests, not just for the pandemic, but for the future too. Relational

leadership places people and the community at the heart of public leadership. This approach is relevant at all levels of public leadership; from formal leaders globally, nationally and locally, through to those who make a difference as front-line leaders.

The first section of this briefing will propose a public value approach for recovery and renewal from the pandemic, based on observations of public leadership during COVID-19 response. The second section will highlight the partnerships that will be required to support the public leadership of recovery and renewal, by exploring the role of local community policing and 'consequentialist leadership' - an adaptive leadership approach to managing events which have produced negative outcomes, generally of a significant and immediate nature.

## Observations and learning from public leadership during COVID-19 response

Trust and confidence in public leadership is crucial. Historically, very few health or societal events have developed at the pace or scale of COVID-19. Underestimating the threat appeared to delay the response of some countries, with profound consequences for the world. Workers across the frontline in all agencies need to be educated with clear, consistent messages about risks and how to address them, in order to give certainty, build trust, and prevent resistance to necessary public safety restrictions and enforcement actions.

National political leaders in Germany, Norway and New Zealand have been praised for their clear and transparent framing. The leadership styles of these leaders, balanced empathy with evidence, built public support for response, early recovery and renewal goals, and strategies to achieve those goals:

- Swift action, transparent and empathetic[2] communications by Germany's Angela Merkel, "confronting the brutal facts"[3] that 60% to 70% of the population could become infected, had an early impact and boosted her popularity
- In Norway, Prime Minister Erna Solberg also adopted strict lockdown measures and significant testing. This built trust across the population and kept death rates low[4]
- New Zealand Prime Minister Jacinda Ardern aimed to bring COVID-19 incidence to zero[5] through non-pharmaceutical interventions and border closures. Subsequently, the country

1 Brookes and Grint 2010: 1, The New Public Leadership Challenge: an introduction, in Brookes and Grint (eds)(2010) The New Public Leadership Challenge: Macmillan, Basingstoke.

2 Kottasová, (2020) How Angela Merkel went from lame duck to global leader on coronavirus. *CNN World*, 7 May 2020.

3 Collins, J. C. (2001) Good to great: why some companies make the leap-- and others don't. London: Random House Business.

4 Godin, M. (2020) *Erna Solberg on How Norway Is Reopening With Cautious Optimism: 'We Know Where the Risk Points Are'* [Online]. California: Time USA. Available: https://time.com/5868670/erna-solberg-on-how-norway-is-reopening-with-cautious-optimism-we-know-where-the-risk-points-are/ [Accessed 21 January 2021].

5 Robert, A. (2020) Lessons from New Zealand's COVID-19 outbreak response. The Lancet Public Health, 5(11), e569-e570.

celebrated the New Year as Covid-free[6]

A lesson we can learn from the actions of Merkel, Solberg, and Ardern is to Identify where the key risk points are. Ardern additionally addressed risks associated with community resilience by "standing with them" rather than preaching[7]. She demonstrated empathetic leadership, which:

- draws on the characteristics of 'stewardship', or 'servant' leadership, a holistic leadership approach which emphasises the importance of relationships that support the development and empowerment of followers. This has been shown to be related to positive public outcomes;[8]
- emphasises a willingness to understand and appreciate alternative perspectives;[9]
- can assist in balancing public values (social, economic and environmental goals)[10] through improved social engagement and citizen participation, for which trust and legitimacy are critical

## Building public leadership through public value for recovery and renewal

The outcome of public leadership is public value. This public value consists of three components - social value, political value and economic value. The pandemic's political and economic challenges are evident, but social value is also relevant. Public value emphasises building trust and legitimacy as overall goals, but empowering communities is equally important. Empowering communities to achieve resilience requires their inclusion in the development and the delivery of recovery strategies and renewal initiatives, including in decision-making processes.

Social value requires corporate responsibility and supporting individual responsibility. Public services are accountable to individuals, who have the right to information and freedom of choice, but also the responsibility of using that information and choice wisely[11]. Corporate responsibility at social and environmental levels concerns the broader goal, "simply, of contributing to the well-being of the communities and society they affect and on which they depend"[12]. The importance of social and personal responsibility, supported by health education, health promotion, and encouragement has long been recognised[13]. Covid-19 is testing both corporate responsibility in terms of the impact that companies have in supporting their employees at this testing time, and personal responsibility with communities playing their part in sacrificing individual freedoms in the public interest of preventing the virus's spread.

Public value puts the public interest at the core, moving the focus from individual interest. There is a need to "count what counts and not what can be counted"[14], although this is often more difficult to measure. Her Majesty's Treasury (HMT) now acknowledge that some outcomes are hard to define and measure, such as defences' overall goal of 'peace and stability'[15]. Similar difficulties of evaluation apply to community resilience, recovery and renewal. HMT seek to test how public bodies plan to improve participation and change user/client behaviour. It also aims to convince taxpayers of the value being delivered by spending and by engaging service users[16].

A revised multi-level public value framework for national policy through to front-line leadership could act as a catalyst for a post pandemic paradigm with different leadership mind-sets and behaviours. We note that:

- Community engagement to identify needs and expectations, and build trust and confidence, will be essential to balancing social, economic and environmental goals
- Proactive engagement and empowerment of communities may increase ownership of the problem and encourage individuals and communities to take responsibility for health promotion and prevention
- Collective leadership can fulfil this multi-faceted aim of engaging citizens and users and in demonstrating the value of public leadership and its mechanisms

## The role of local community policing and consequentialist leadership

Empathic leadership can be demonstrated at the front line by encouraging constructive citizen and user engagement. Enablement and empowerment will be essential in taking forward a collective leadership approach. Communities need capability to recover and renew; they also need the opportunity and power to influence decisions for building back better.

Attention to the front line and preventative activities can be informed by considering the examples of primary health care (PHC) and policing. Although it is acknowledged that PHC could play a more substantial role in health promotion and behavioural change[17], PHC has generally been well regarded, particularly during the vaccination rollout. The police role and image have however been more difficult to manage:

- The government introduced unprecedented public health

6  Goodfellow, M. (2021) *New Zealand rings in 2021 with Covid-free celebrations* [Online]. London: LBC. Available: https://www.lbc.co.uk/news/countries-start-see-new-year-celebrations-across-globe/ [Accessed 21 January 2021]

7  Friedman, U. (2020) New Zealand's Prime Minister May Be the Most Effective Leader on the Planet. *The Atlantic* [Online], (April 19, 2020). Available: https://www.theatlantic.com/politics/archive/2020/04/jacinda-Ardernrn-new-zealand-leadership-coronavirus/610237/ [Accessed 18 December 2020].

8  Eva, N., Robin, M., Sendjaya, S., Van Dierendonck, D. & Liden, R. C. 2019. Servant Leadership: A systematic review and call for future research. The Leadership Quarterly, 30, 111-132.

9  Daskal, L. 2016. *Why The Empathetic Leader Is the Best Leader* [Online]. Available: https://www.lollydaskal.com/leadership/whats-empathy-got-leadership/ [Accessed 18 December 2020].

10  Moore, M. H. (1995) *Creating public value: strategic management in government.* Cambridge, Mass. ; London: Harvard University Press.

11  Nunes, R., Brandão, C. & Rego, G. (2011) Public Accountability and Sunshine Healthcare Regulation. *Health Care Analysis*, 19(4), 352-364

12  Kasturi Rangan, V., Chase, L. & Karim, S. (2015) The Truth About CSR. *Harvard Business Review*, (January–February 2015)

13  Wikler, D. (2002) Personal and Social Responsibility for Health. *Ethics & International Affairs*, 16(2)

14  McKee, M (2004). "Not everything that counts can be counted; not everything that can be counted counts," British Medical Journal, Vol. 328.

15  HMSO. (2019) The Public Value Framework: with supplementary guidance. LONDON: HM Treasury, P.5

16  HMSO, ibid: p.55

17  EHMA Executive Workshop – Value-based Primary Care, Zoom, 15th February, 2021.

regulations that "reach into our everyday lives" with potential offenders emerging out of "large numbers of otherwise law-abiding people who were willing to bend or flout the rules"[18]

- At the height of the first lockdown, one survey found that ~25% of UK adults did not adhere to the rules for restricted movement and ~75% were not adhering to the social isolation rules[19]
- A more recent poll suggests that 78% of UK adults claimed to follow the government's rules[20]
- Of more concern, it is suggested that a parallel society is emerging, which is "not entirely secret but carefully organised so [as] not to come to the attention of the authorities"[21]

Herein lies the dilemma for the policing of the regulations and the impact on the image of the police. Police leaders introduced a policy to achieve balance focused on '4Es' – engage, explain, encourage and, ultimately, enforce. Much scrutiny has been applied to examining if the response is proportionate whilst still vigorous and equitable. Concerns have emerged about the zealous use of fixed penalties for 'picnics in the park' and the use of drones for surveillance[22].

The image of policing is a critical antecedent of the trust and confidence which are essential constituents of perceived public value outcomes. Policing involves a very delicate balance in protecting civil liberties and protecting the public, as these examples highlight. The police image can be fragile and often requires a recovery approach that we label 'consequential leadership' - an adaptive leadership approach to consequence management. This arose in the immediate aftermath of the Manchester Arena attack on Tuesday 22nd May 2017. The principles align with similar approaches influenced by the need to lead at a time of crisis in the immediate aftermath of 9/11[23].

This tragic event proved a unique and challenging situation for Greater Manchester to respond to and recover from. The attack resulted in a critical need to provide community reassurance and cohesion. The community leadership response was delivered via a combination of strategy and tactics centred on multi-agency work through a community hub[24]. Examples include:

- Collaborative work between Greater Manchester Police and other partners such as the City Council, businesses and the vulnerable communities of Greater Manchester
- Community resilience responses were required to tackle immediate consequences including protests, community anger and an exponential (~600%) increase in hate crime
- Tackling negative community impact, in order to maintain and develop community cohesion
- Impact on vulnerable groups – the police engaged with the Muslim community as a whole and in particular the Libyan community, who perceived the police action as targeting

them. Additionally, the Jewish community, who often become secondary targets in any rise in hate crime. This assisted in reframing the issue in their eyes

The hub inevitably encountered various challenges, consideration of which can help inform recovery and renewal from the pandemic. The challenges centred on the lack of an existing Community Engagement Strategy. However, actions were quickly taken to resolve this, and a clear communication strategy was formulated, centred on community recovery, engagement and cohesion. Tensions were apparent between partnership members, for example disagreement around the key reassurance messages and the chain of decision making within agencies. Ultimately however (and in a relatively short time scale given the immediacy required), the hub coalesced around the #WeStandTogether campaign. The approach aimed to enable and empower communities, building on a sense of good will, energy and positivity that were already present. The hub prioritised support to vulnerable communities to enable them to play their part in uniting the grieving city.

The circumstances of, and response to, the pandemic and the Arena attack differ significantly. However, both need to manage the consequential impact on the community as a whole, and the image of the police in balancing personal freedom and the greater good. The police have played a key role in responding to the vulnerability that has emerged from the pandemic:

- Community leadership has been exceptional in joint working between the police, primary care and community leaders. For example, the creation of Humanitarian Assistance Hubs to provide essential support (food/medicine) for the most vulnerable, was coordinated by health and policing through the hub, working closely with community and faith leaders
- In a concerted drive to prevent violence across the city region, the Greater Manchester Violence Reduction Unit was established. This brings together partners from health, police, criminal justice, education, youth justice and the Voluntary, Community and Social Enterprise (VCSE) sector. The [Greater Manchester Serious Violence Action Plan](#) was launched in June 2020, using a community-led approach, with families and communities integrally involved alongside public health, education and policing
- Greater Manchester Police (GMP) and GM Clinical Commissioning Groups also work collaboratively. There is a dedicated Mental Health Practitioner in the GMP Control Room to provide triage support, advice and early intervention in incidents where Mental Health Section136 is under consideration. This ensures that person-centred decisions are made, based on threat, harm and risk aligned to the needs of the person in crises. This initiative aims to address the increase of vulnerable people who present with mental health conditions, a cause of concern for policing for some time[25].

18 http://www.police-foundation.org.uk/2020/10/long-read-policing-the-pandemic-public-attitudes-to-police-visibility-enforcement-and-fairness/

19 Smith, L.E., Amlot, R., Lambert, H., Oliver, I., Robin, C., Yardley, L. and Rubin, G.J. (2020) Factors associated with adherence to self-isolation and lockdown measures in the UK; a cross-sectional survey. https://www.sciencedirect.com/science/article/pii/S003335062030319X

20 https://www.economist.com/britain/2021/02/13/a-secret-world-of-illicit-fun

21 Ibid.

22 Dodd , V. (2021) *Drones used by police to monitor political protests in England* [Online]. London: Guardian Newspaper. Available: https://www.theguardian.com/uk-news/2021/feb/14/drones-police-england-monitor-political-protests-blm-extinction-rebellion [Accessed 2021].

23 Pier, M. & Palau, K. (2012) *Consequential Leadership: 15 Leaders Fighting for Our Cities, Our Poor, Our Youth and Our Culture.* Downers grove, IL: IVP Books

24 One author, Khan, was directly responsible for setting up the community hub and taking a key role in community leadership in rebuilding confidence and protecting the image of policing. The co-author Brookes, is able to reflect on similar challenges to the police image as a result of policing public order in the 1980s, which he was also directly involved in and which had a similar need for consequential leadership.

25 N8 Policing Innovation Forum, November 2018, Lancaster. https://www.n8research.org.uk/npcc-leads-policing-mental-health-is-at-crisis-point/

Post the pandemic, significant increases in demand on policing have emerged, with a 43% increase in vulnerability incidents. In terms of volume, these now represent a greater proportion of demand than acquisitive crime[26]

The preventative response has been commendable. A major incident was declared, and consequentialist leadership followed on a massive scale, supported by strategic level leadership. Support to vulnerable people (such as those shielding) was provided through joint working between health (primary care), local (and regional) authorities and the police. This exemplary preventative response and the priority given to resilience has not been at the forefront of media attention, but should not be ignored or forgotten.

## Conclusion

The pandemic has brought tragic consequences, but it also holds promise for learning and a better future. Putting the public interest at the heart of a widened conception of public leadership will be essential for recovery and renewal. Redefining social value as part of a more comprehensive public value outcome for public leadership provides an opportunity for recovering, rebuilding, and renewing community resilience. This can be achieved through collective community leadership, in which front-line leaders, deliverers and community recipients come together to reimagine leadership at the community level. Building on existing networks, community leaders can take part in purposeful community forums or focus groups, to assist in public health education.

The benefits accruing from the joint working of public sector need to (1) be made more public, and (2) represent a foundation for the future. Significant advancements have been made. In an unprecedented situation, collaborative partnership working has been operationalised with great speed and efficiency, facilitated in part by harnessing technology in new, innovative ways to support communication and agile working.

Consequential leadership will always be required at a time of crisis. Just as recovering from the pandemic is not only a role for the health sector, efforts to rebuild communities through consequential leadership should not be limited to just one agency. PHC and policing share a passion for the local population. Such shared passion can be repurposed post the pandemic in creating a genuinely collective public leadership paradigm. We need to create the conditions to enable this to happen. Remembering the leadership practices of national leaders, first and foremost is to be clear in framing not just the problem, but also the policies in response and what is required to recover and renew. Sharing knowledge is critical. The space needs to be created to enable and empower local leaders to work seamlessly across both public health and the policing response based on a public value framework for public leadership.

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26  Reference from Umer Khan (author) who presented a paper to the Greater Manchester Health and Social Care Board.

# Briefing B:
# Lessons you may find helpful from across the world

We provide the lessons under six categories, with sub-categories for ease of reference. We have selected lessons that are of specific interest to the process of recovery and renewal although many also relate to the response phase, and the likely overlap between response, recovery, and renewal.

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| Humanitarian Assistance | Actions |
| --- | --- |

**Impact on:**
*Vulnerable people*

India:
https://tinyurl.com/yuxtvbz9

The Lancet:
https://tinyurl.com/hffyrstz

**Consider rethinking 'vulnerability' in the era of COVID-19.** Vulnerable groups of people are those that are disproportionately exposed to a risk. This can change dynamically and it is not a simple process of dividing populations into two groups of 'vulnerable' and 'not vulnerable'. Amid the pandemic, vulnerable groups have emerged from a diversity of communities. They are not only older people, those with ill health or disabilities, or homeless persons, but also people from a range of socioeconomic groups who might 'struggle to cope financially, mentally or physically' with crises precipitated by the pandemic. Consider:

- If the definitions and categories we use to identify vulnerable people, and consider their needs, adequately represents their lived experiences - whether their vulnerability existed prior to COVID-19, has been exacerbated by it, or has been newly created by it?
- Identify the people behind the 'vulnerable' label – who are they, where are they, and why are they vulnerable? - to increase our understanding of the person and the conditions or environment (root causes) that may be making them vulnerable to certain risks
- If there are different levels/spectrums of vulnerability, do we need to organise vulnerability with respect to different forms of risk (e.g. immediate risk to life, risk to mental health, social/financial security, geographic location)?
- Assessing those who may have been defined as vulnerable prior to COVID-19 and the conditions associated with this vulnerability, those who have become newly vulnerable as a direct result of COVID-19, and what factors lead to these people/groups becoming vulnerable
- The risk of under-supporting those who face severe risk if we rely only on our previous (to COVID-19) assumptions or understanding of vulnerability
- Whether re-defining vulnerability may support more effective recovery and renewal strategies e.g. classifying vulnerable groups according to risk levels/spectrums, creating vulnerability indexes and identifying the root cause of each
- Recovery strategies should aim to provide transactional aid to alleviate the negative effects of vulnerability exacerbated or caused by the pandemic
- Renewal initiatives should address the root cause of vulnerabilities through transformational initiatives that aim to prevent people from becoming vulnerable

**Humanitarian Assistance** **Actions**

**Impact on:**
*Vulnerable people*

| Humanitarian Assistance | Actions |
| --- | --- |

**Impact on:**
*Health and well-being*

Italy:
https://tinyurl.com/3653h7dx

India:
https://tinyurl.com/2ymn3xrw

UK:
Safety and Resilience Manager

**Consider initiatives that offer people places of remembrance following COVID-19.**
Memorialisation and remembrance will be an essential component of recovery, as discussed in TMB Issue 29. Online memorial services, a website and a dedicated memorial space were three of the opportunities discussed in this recent Issue. An increasing number of activities to memorialise are taking place, including;

- In Italy, a community created a small garden with a quince tree and a sculpture which has been inscribed with the words "Resilienza" (Resilience), "Comunitá" (Community) and "Ripartenza" (Restart), to remember those who have died from COVID-19
- In India, the City of Cerritos placed lights on to trees and sculptures in public gardens to honour each member of the community who has lost their lives due to the pandemic
- In the UK, 'Barnsley's COVID Memorial', will commemorate the lives lost and recognise the key workers who have worked tirelessly throughout the pandemic with a sculpture designed by a local artist and sculptor. Local school children have been invited to create drawings of key workers that will be incorporated into the plaque on the sculpture, along with photographic studies and portraits of key workers
- In Brazil, community members, civic society groups and organisations working to tackle climate change have collaborated to launch a tree-planting, wildlife conservation and restoration drive, which will honour those who have lost their lives, thank frontline workers, and support environmental restoration efforts across Brazil
- In the UK, Itchen Valley Remembrance – "Togetherness space", a concept modelled on a peace garden, incorporates natural and sustainable materials (e.g. willow, hazel and existing hardwood on the site) and tree planting. There will also be socially distanced benches in a formation that ensures people still feel connected
- NHS UK have secured funding to create a national oral history collection of COVID-19 which will capture the impacts of the pandemics on lives and communities

To ensure memorialisation activities are appropriate and reflect the community, consider:

- Where the memorial will be located, to ensure all members of the community will have access to the space
- Bring community members together to generate ideas for memorialisation and co-produce the plans
- Collaborate with partners that specialise in supporting those who have been affected by bereavement
- Whether the memorial will be dedicated to lives lost, those who have been otherwise affected by the pandemic, and/or those who have helped in the response to the crisis

| Economic | Actions |
|---|---|
| **Impact on:**<br>*Economic Strategy*<br><br>USA:<br>https://tinyurl.com/yhvjrv4d<br><br>UK:<br>https://tinyurl.com/ryahdan7<br>https://tinyurl.com/5vsujac7 | **Consider how to support ethnic minority-owned businesses to recover and renew.** Ethnic minority-owned businesses play a vital role in the UK economy, the FSB reported that 'ethnic minority businesses (EMBs) contributed £25 billion to the UK economy in 2018'. The entrepreneurial characteristics of diverse communities will be crucial for economic recovery. The impacts of the pandemic on EMBs is significant, as they account for a large number of businesses within the sectors closed during national lockdowns (retail, health and social care and hospitality). Consider:<br><br>• Invite ethnic minority business owners to discuss how best local government can support and facilitate entrepreneurship and growth post-COVID<br><br>• Targeted support programmes for ethnic minority-owned organisations and businesses that provide advice and support for applying for financial assistance, IT and tech support so that they are equipped with the skills and tools needed to recover and renew<br><br>• Create an 'inclusive matrix of support, including grants, wage subsidy and micro-loans for small ethnic minority-owned organisations, start-ups and new businesses'. Those businesses that may not have qualified for government financial support schemes introduced during the pandemic<br><br>• Go beyond the restricted lens of the 'Business Rate System' and broaden the understanding of how local economies function. This can be done by including 'all sectors, including homeworkers, night time economy, responses to local transport needs and the retail sector, to provide a comprehensive picture of local businesses and economic activity'. Use this to introduce support systems that promote sector diversity, good practice in sustainability, growth and cooperation in economic recovery |

| Infrastructure; Economic; Governance and legislation | Actions |
|---|---|

**Impact on:**

*Workforce; Economic strategy; Legislation; Planning for recovery; Renewal*

Republic of Ireland: https://tinyurl.com/svacph2a

**Consider rural infrastructure development priorities for recovery and renewal.** COVID-19 has presented Ireland with an opportunity to balance regional and rural development. The government has responded with an ambitious five year policy which addresses both the challenges facing rural areas following the pandemic and the transformational opportunities that the pandemic presents for rural economies and communities. This lesson offers an overview of the key priorities set out in the policy, examples of the measures that will be taken to achieve these priorities and the sustainable development goals (SDGs) linked to the measures:

*Optimising digital connectivity:*

- Investment in the delivery of the 'National Broadband Plan' to accelerate the delivery of connectivity in rural areas (SDG 8; 9; 10)
- Implement a 'National Remote Work Strategy' through the creation of 400 remote working hubs (e.g. providing financial support to local authorities to convert vacant buildings/utilize rural pubs as work spaces during the day) to support the retention of skilled people in rural areas (SDG 3; 8; 13)

*Supporting employment and careers in rural areas:*

- Design and implement nine new 'Regional Enterprise Plans' to support and promote the development of enterprise and job growth in the regions (SDG 8)
- Providing support and assistance for the diversification of rural economics into new markets and sectors by capitalising on high speed broadband and new technologies (SDG 8; 9)

*Revitalising rural towns and villages:*

- Prioritise short-term recovery rural development programmes and strategies to support rural towns to recover from the impacts of the pandemic (SDG 9; 11)
- Implement a collaborative 'Town Centre First' renewal initiative to put town centres at the core of decision making (e.g. provide and resource dedicated local authority staff to support town centre renewal) (SDG 11)
- Engage with 'Approved Housing Bodies' who are responsible for housing for older people to develop and deliver accommodation in town centres that is more suitable for those with reduced mobility (SDG 11)

*Enhancing participation, leadership and resilience in rural communities:*

- Design and deliver a range of recovery and renewal programmes to support communities, voluntary organisations, social enterprises and charities to build resilience and increase their positive impact in the aftermath of COVID-19 (SDG 3; 10; 11)
- Implementation of a 'National Volunteering Strategy' to support community-based volunteers and voluntary organisations (e.g. by streamlining grant applications for volunteer groups) and establish a permanent 'Volunteer Reserve' in local communities who can be called upon and deployed by the community, voluntary organisations and local authorities during emergencies (SDG 11; 17)

*Enhancing public services in rural areas:*

- Review and update Rural Housing Guidelines for planning authorities, to tackle rural housing in a broader rural development and settlement context (SDG 11)
- Introduce a new 'Policing and Community Safety Bill' to redefine the functions of policing bodies to include community safety (SDG 16)

*Supporting the sustainability of Agriculture, the Marine and Forestry:*

- Provide support and assistance to local authorities to expand the number of farmer's markets, farm shops and support the formation of 'community-owned markets' in all towns, promoting local farmers, growers and food producers (SDG 2; 3; 12; 15; 17)

| Environment; Infrastructure | Actions |
|---|---|
| **Impact on:**<br>*Urban planning*<br><br>USA, Resilient Cities Network (RCN) and World Bank:<br>https://tinyurl.com/4n36s98z | **Consider investment in climate-ready infrastructure that is equitable and produces green jobs.**<br>Yesterday, RCN launched Houston Mayor Sylvester Turner's R-Cities Board Chair's Agenda for "climate-ready infrastructure that is equitable and produces green jobs". This agenda expands RCN's commitment to support cities across the world in a resilient recovery. The preliminary actions for advancing this agenda include; '**Assessing** R-Cities work across the network that advances this agenda; **Engaging** with existing communities of practice, programmes, and partners to share and exchange knowledge around this agenda; and **Mobilizing** resources to deliver place-based projects in multiple cities that advance the agenda'. This initiative will support resilience in cities in multiple ways, including:<br><br>• Call for de-siloing investments in resilience to create climate-ready infrastructure that is equitable and creates green jobs<br>• Amplify the co-benefits of city transitions to net zero greenhouse gas emissions<br>• Demonstrate how interconnected services, that support communities and economies, can withstand the disruptions of an uncertain future with climate-ready infrastructure<br>• Demonstrate how climate-ready infrastructure embraces innovation and the interdependencies of resilient city systems, that are critical to equitable outcomes for people<br><br>Watch the latest Cities on the Frontline Speaker Series #07 Earth Day which launches this agenda at https://tinyurl.com/3t7t6cz6 |

| Communication | Actions |
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| **Impact on:**<br>*Targeted communications*<br><br>Sri Lanka, South Africa, Uganda, Dominican Republic, Nigeria:<br>https://tinyurl.com/d5dttdc6<br>(p.35-38) | **Consider a review of risk communications to improve disaster management response at pace.** Effective risk communication is central to public health risk management, so that people can make informed decisions and take the correct actions to 'prevent, mitigate and recover from emergencies'. It enables real-time access to, and exchange of, reliable information. However, the sheer scale and pace of COVID-19 led to an uncoordinated overload of sometimes inconsistent information, so people were unsure about the severity of risk, and therefore behaved according to their individual perception. There has also been a surge of misinformation throughout the pandemic, which has undermined national and local health responses globally. Consider:<br><br>• A review of risk communication strategies employed during the pandemic, to identify what worked and what could be improved for future emergencies<br>• Build risk communication capacity by appointing dedicated risk communicators at national and local levels, to maintain consistency in communications and develop a sense of familiarity among the public, which can build trust<br>• Identify the stakeholders in disseminating risk information (e.g. media) and assess the strength of the relationships with stakeholders. Identify how collaboration and coordination can be enhanced so that the information disseminated is 'timely, accurate and transparent'<br>• Tailor risk communications to the specific risk and needs of diverse communities<br>• Engage with the community to co-develop risk communication support structures and establish accountability of community members for required behavioural change<br>• Use social media to track (through data analytics) and counter misinformation, and develop a narrative of solidarity through crisis (UN Sri Lanka)<br>• Establish a central risk management coordination platform that consolidates risk information and forecasts other potential risks (e.g. concurrent emergencies such as severe flooding). This can enhance capacities and capabilities to provide strategic interventions, and minimize further social and economic impacts (Dominican Republic)<br>• Acknowledge and communicate uncertainty in clear and unambiguous language to avoid misinterpretation, e.g. use scientific evidence to estimate the likelihood of COVID-19 case resurgence as precisely as possible, and avoid language such as 'probably/possibly'<br>• Regularly gauge and monitor the public perception of risk, through surveys and consultations with public bodies such as police, to inform timely action to prevent lax or panicked behaviour<br>• Evaluate and update risk communications regularly to account for developments (e.g. vaccination) |

| Governance and legislation | Actions |
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| **Impact on:**<br>*Planning for recovery*<br><br>Dominica, Indonesia, UNDP:<br>https://tinyurl.com/3n2e9yfh<br><br>Views from the frontline (VFL):<br>https://tinyurl.com/trw6pcf5 | **Consider how to facilitate community participation in recovery, renewal and resilience building activities.** Recovery and renewal strategies require community co-production to be influenced by the knowledge, skills and experience of communities. Participation depends on a number of factors. VFL find that time and convenience are crucial when it comes to community participation in recovery, renewal and resilience plans and actions. Measures to facilitate community participation should address the needs of all community members, so as to ensure accessibility, and not reinforce inequalities. Consider whether:<br><br>- Local planning and government meetings, forums and workshops are conveniently located and accessible:<br>  o Select locations and venues that facilitate access for all members of the community. Consider access constraints affecting disadvantaged groups, which may be physical, geographic, economic, or faith related.  E.g. provide online access, transport, refreshments, accessibility for people with disabilities<br>  o Select venues/online forums where different groups within the community already congregate (e.g. different religious groups, women)<br>- The timing of activities fits with the commitments of the community members who will be participating. For example, work schedules, household responsibilities, school timetables of children and parents (particularly women), farmers' seasonal calendars<br>  o Carefully consider people's time, and seek feedback from the community on times that are suitable<br>  o Draw on appropriate local volunteers to offer childcare where physical meetings are held<br>- Socio-cultural issues which might prevent some people from participating have been considered:<br>  o Identify potential barriers related to language, literacy levels, ethnicity, gender discrimination, etc.<br>  o Provide expert facilitation and translation services, or organize separate meetings with women, people with disabilities, specific ethnic minorities and other groups to facilitate their participation<br>- Report back to participants on the outcome of their community participation and how thinking/ planning has changed as a result of their contribution |

| Governance and legislation | Actions |
|---|---|
| **Impact on:**<br>*Social renewal*<br><br>UK:<br>https://tinyurl.com/wpkdd99c | **Consider the principles of social renewal from COVID-19.** In Scotland, the government's Social Renewal Advisory Board has proposed ways that transformational renewal can deliver lasting change post-COVID. The board published a report in January 2021 titled 'If not now, when?' which recognises the inequalities that have been exposed by the pandemic, and the civic response which emerged. The report presents 'Calls to Action' to tackle these inequalities and further galvanise the social action that is instrumental. Consider the principles offered by the report with regard to three key aspects of renewal:<br><br>*1. Money and work:* the need to support low income communities and tackle the structural inequalities in 'homes and across society' (e.g. unpaid care predominantly offered by women), including those disproportionately impacted by the health, economic and social impacts of the pandemic.  The report calls for:<br><br>• A '**Minimum Income Guarantee**'. All incomes should 'meet a minimum income standard through a combination of paid work and/or social security'. This provides payments based on a person's circumstances, accounting for differing 'needs and costs associated with disability, childcare and housing'<br><br>• A '**person-centred approach to money, financial education and help**'. Addressing individual debt through temporary payment moratoriums, improved financial education and support, particularly for those in ethnic minority groups who may not seek financial advice<br><br>• A '**new social contract on Fair Work**'. Partnerships between government, public sector and employers to deliver greater levels of financial security for workers through focusing on inclusive and targeted employment programmes<br><br>*2. People, Rights and Advancing Equality:* the need for all people to have adequate housing, food and access to services and information, including migrants and refugees.  The report advises:<br><br>• '**Make the prevention and ending of homelessness a national priority for the next parliamentary term**'. Tackle the gaps in financial housing support and make adequate housing a human right for all people in Scotland<br><br>• '**Increase access to nutritious, culturally appropriate and affordable food**'. Invest in local food partnerships to build greater local food resilience<br><br>• **Tackle the digital divide**. End digital exclusion by placing a duty of responsibility on public bodies to enable digital access<br><br>*3. Communities and Collective Endeavour:* focused on empowering people, communities and frontline teams to drive new ways of working which started to emerge during the pandemic, and develop new arrangements for local governance:<br><br>• **Co-producing policies and programmes** with the public through citizen participation in design and delivery, and supporting the inclusion of a wider portion of society<br><br>• '**Values-based leadership**' to empower frontline teams to deliver flexible services based on community needs and priorities<br><br>• '**People, communities and places, building on strengths and assets**' to share responsibility and ownership with communities to build local resilience capabilities |

## Briefing C:
# Lessons from Fukushima for recovery

Last month, Japan's Nuclear Energy Agency (NEA) marked ten years since the Great East Japan Earthquake (GEJE), and the subsequent tsunami that devastated the region and caused a nuclear accident at the Fukushima Daiichi Nuclear Power Plant[1]. Post-accident analysis verified that radiation from the accident at the power plant has not had any direct impacts on human health. However, the evacuation of hundreds of thousands of people living in surrounding areas resulted in premature deaths, due to issues such as lack of access to healthcare or medicines, and stress-related problems[2]. COVID-19 is like Fukushima, in that it presents both policy makers and the general public with a range of multi-dimensional challenges that need to be addressed through recovery and renewal processes. We explore three lessons from Fukushima recovery that can support and prompt thinking for recovery from COVID-19:

## Preparedness and disaster management plans

Like COVID-19, the GEJE exposed fragilities in the planning for complex and extraordinary disasters, which were addressed by reformulating disaster management plans at national and local levels in Japan. Consider the following lessons and activities to recover and renew disaster management planning in the light of COVID-19:

- Review and revise disaster management plans at both national and local level to ensure plans are kept up to date:
  - o Integrate lessons learned during the pandemic to inform new disaster management planning, legislation and policies - add a new section to disaster management plans that covers the management of pandemics
  - o Focus on the following issues: coordination of administrative and operational functionalities; preventative measures, such as education, safety drills, and issuing and transmitting of information and warnings; evacuation and rescue activities, and primary goods supply and distribution in emergency situations; and overall coordination of reconstruction and restoring livelihoods during the recovery phase[3]

## Engaging local stakeholders

'Resilience is strengthened when it is shared'[4]. Establishing strong communication and collaboration - between communities and local medical staff, between central government and municipalities, and with experts - was found to build awareness amongst local residents about exposure risks to radiation, and how to reduce those risks in the future[5]. Stakeholder engagement is critical in the management of future outbreaks, recovery of preparedness for future crises, and recovery from the impacts of COVID-19. Consider:

- Authentic stakeholder engagement means meaningful, creative and impactful interactions with people and communities, and the co-production of recovery and renewal strategies[6]:
  - o Recognise community voice, influence, and measurable local impact as part of recovery activities
  - o Actively involve community members in recovery conversations and meetings, to bring together a range of knowledge, skills, abilities and perspectives
  - o Build on collaborative relationships and integration initiatives that have been developed through the pandemic in local areas. Conduct a review to identify areas where these established relationships and initiatives offer opportunity for creative and impactful engagement in recovery[7]
- Effective participation requires leaders to utilise a range of models of engagement that[8]:
  - o Encourage community participation (e.g. joint planning groups)
  - o Develop interactive and partnership working, by providing the community with access to expertise, advice and training (e.g. disaster risk planning)
  - o Facilitate community mobilisation and empowerment, by establishing partnerships with voluntary organisations and community groups, and initiating community development programmes[9]

## Recognising the impacts on mental health

Fear of exposure to radiation, plus the evacuation itself, created significant psychological distress for those who experienced the events of Fukushima. These have some similarities to the psychological effects of COVID-19: risk to health due to exposure to the virus, isolation from family, friends and critical social

1  https://www.preventionweb.net/news/view/76401

2  NEA, OECD (2021) *Fukushima Daiichi nuclear power plant accident, ten years on*. https://www.preventionweb.net/publications/view/76402?&a=email&utm_source=pw_email

3  https://openknowledge.worldbank.org/handle/10986/18864

4  https://www.worldbank.org/en/news/feature/2021/03/11/learning-from-megadisasters-a-decade-of-lessons-from-the-great-east-japan-earthquake-drmhubtokyo

5  Hayano, R. S. (2015) 'Engaging with local stakeholders: some lessons from Fukushima for recovery', *Annals of the ICRP*, 44(1_suppl), pp. 144–152. doi: 10.1177/0146645315572291.

6  Boyle, D and Harris, M. (2009). The Challenge of Co-Production: How equal partnerships between professionals and the public are crucial to improving public services. https://neweconomics.org/uploads/files/312ac8ce93a00d5973_3im6i6t0e.pdf

7  https://www.atsdr.cdc.gov/communityengagement/pce_models.html

8  https://www.good-governance.org.uk/wp-content/uploads/2020/04/COVID-19-blog-07-04-20.pdf

9  http://www.oneeastmidlands.org.uk/node/1546

support networks, and the uncertain economic conditions caused by the pandemic[10]. COVID-19 has shown how significantly social and economic determinants influence mental health. Our mental health is heavily reliant on a variety of factors such as the quality of our relationships, employment, education, and access to food, income and housing[11]. COVID-19 presents key challenges, but also an opportunity to rethink our approach to mental health and implement structural changes in mental health support so as to address the aftermath. Multifaceted-support and societal recovery progress has been found to help address the impacts of the Fukushima disaster on people's mental health[12]. Mental Health Europe offer guidance to recovery and renewal of mental health support[13]:

- Establish comprehensive long-term strategies that aim to mitigate the consequences of the crisis, co-producing these strategies with service users and the organisations that represent them
- The promotion of 'basic social rights', together with targeted investment in economic protection, such as 'universal basic income, income protection schemes, loan guarantees, rent protection' and booster packages (e.g. recovery/renewal loans, business support and advice, targeted employment programmes)
- Invest in mental health literacy about the social determinants of mental health, and how 'experiencing distress is a normal reaction' in the exceptional circumstances of the pandemic. This will help tackle stigma and discrimination, and further strengthen the 'sense of community and solidarity' that has emerged throughout the pandemic
- 'Promote cross-sectoral collaboration and more integrated social and health care, including investments in peer support'
- Facilitate and support community-based services that 'respect the will and preferences of users, in line with the UN Convention on the Rights of Persons with Disabilities. Involve people with lived experience in the design, implementation and monitoring of these services'

10  https://bmcpsychiatry.biomedcentral.com/articles/10.1186/s12888-021-03109-1

11  https://www.mhe-sme.org/position-paper-mental-health-in-the-aftermath-of-covid-19/

12  https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6265751/

13  Ibid.