THE SOCIETAL IMPACTS OF COVID-19

A Transnational Perspective

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PREFACE

The COVID-19 Pandemic, started in China and has since spread all over the world in a short time, deeply affecting all countries.. Most countries have declared a partial or complete lockdown to limit the spread of the virus. A significant portion of employees have been unable to work in traditional ways and have had to adapt to what has become known as the “new normal”. In essence we have gone beyond the norms we used to know and have had to contruct new ways of living in the times of COVID-19. The way we know how to work and live has changed. Middle and upper classes, whose jobs are suitable for digitalization, started working online. Every extraordinary period has its winners and losers. The winners of the coronavirus pandemic period were mainly hygiene materials manufacturers, gaming companies, electronic commerce, high technology, and pharmaceutical companies etc. On the other hand, economies all over the world have shrunk. The hardest hit in the pandemic have been the areas oftourism, hospitality and entertainment etc. resulting in high rates of unemployment or underemployment within these sectors. Unemployment and existential anxiety have peaked during 2020 with increased fears posed by the new risks associated with becoming infected. With th the loss of loved ones and separation from friends and family. Psycho-social problems have also increased due to the effects of prolonged uncertainty imposed by the pandemic across all facets of everyday life In all life satisfaction has declined across in all social groups with the vulnerable most at risk due to the long lasting effects on the pandemic.

While the virus has impacted on the people from all social stratas, its effects have not been felt evenly. Poverty has deepened in most countries with large rises in unemployment and governments going into more debt to buffer their economies from the effects of the pandemic In addition to higher rates of unemployment, and greater economic uncertainty communication problems have also increased. The poor, the unemployed, those with limited education and some women were more severely affected than others. In this process, the problems experienced by particularly vulnerable groups are more severe than others. The uncertainty created by the pandemic has deeply shaken people’s feelings of trust. Increased existential anxieties about life have weakened people’s analytical thinking skills. There has also been a significant correlation between low trust and people’s beliefs in conspiracy theories. Conspiracy theories have spread more easily in societies with low trust levels. The weaker the sense of trust that binds a society , the more people are likely to adhere to conspiracy theories in that country.

This book, prepared with the contributions of authors from different countries, consists of sixteen chapters in total. The aim of the book is to examine the impact of the COVID-19 pandemic on societies. The first chapter titled “Unprecedented? Pandemic Memory and Responses to COVID-19 in Australia and New Zealand” was written by Claire Brennan and Patrick Hodgson. This chapter examines the common collective amnesia that surrounds pandemics, and compares the level of collective memory of the 1918-1920 influenza pandemic in Australia and New Zealand before the arrival of covid-19. It scrutinizes government statements and actions while preparing for and responding to pandemics, the nurturing of historical knowledge among medical experts, and the actions of groups of citizens. Additionally, the section analyzes the importance of collective memory in designing effective responses to covid-19 in these two countries.

The chapter entitled “Risking a New Underclass: Young Australians, Broken Transitions and the Pandemic” by Glenn Dawes and Kirstie Broadfield, highlights the risks young people face due to their vulnerability to reduced employment and education opportunities as a result of the current recession in Australia. The chapter highlights the negative consequences of long-term unemployment in terms of youth identity construction and mental health concerns, and stresses the need for additional government and community assistance to ensure that young people have new avenues to reach their potential as productive adults. Today, many teenagers in Australia face a different world compared to their parents. The challenges associated with the transition to adulthood are now more problematic and personalized for some teenagers due to the COVID-19 outbreak. It is alleged that the current situation has interrupted the transition to adult status and now threatens to produce a new subclass of youth due to high unemployment, underemployment and negative effects on youth mental health and well-being.

“Coronavirus in Turkey Effects on Daily Life and Change of Habits in Society” is a chapter written by Deniz Ülke Arıboğan and Tuğba Aydın Özturk, which examines the daily life practices of Turkish society during the lockdown period. This research reveals important results in terms of understanding and evaluating the perception of the crisis. Coronavirus, in many parts of the world, including Turkey, has caused a financial crisis particularly among alow-income social groups The concerns of the young participants were not just about lockdown, but more about having financial independence, finding a job, or going to school during the pandemic.

The chapter titled “Staying at Home”: Rhythmanalysis of the Self-quarantine”, written by Güzin Ağca-Varoğlu, aims to establish the experiences with rhythmic phenomena, which explains the effects of the social practices on the everyday life of a female ‘house-academic’ during the self-quarantine. The author examines her autobiographical experiences during the three-month self-quarantine period from Lefebvre’s rhythmanalytical perspective. The author posits that the pandemic has affected our lives at different levels. With the concept of physical distance, daily interactions and our relationship with the social sphere have changed. The house has lost its meaning as the starting and ending point of the daily cycle of urban life. During the lockdown, it has gained a new meaning as the only place of our daily life.

The chapter titled “Psychosocial Effects of the Covid-19 Pandemic” was written by Neşe Çakı, Dino Krupic and Philip Corr. The purpose of this chapter is to address the psychosocial impacts of COVID-19 on society resulting from lifestyle changes such as lockdown, social distancing and social isolation due to wearing a mask, and behavioral changes, including changes in shopping habits. This review argues that new conditions lead to many different negative psychosocial effects, such as anxiety, stress, obsessive behavior, depression, loneliness, stigma, and hoarding, but individuals experience these effects to varying degrees.

The chapter titled “The Sociology of Coronavirus Conspiracies in Turkey: Who Believes and Why?” was authored by Özgür Sayın and Veysel Bozkurt. The purpose of this research, is to document demographic conspiracy beliefs about coronaviruses in Turkey, and also to examine the

determinants of political and religious impacts on society . The research reveals that a significant portion of the society believes in conspiracy theories related to coronavirus. Housewives, young people, women, people living in rural and small towns, the unemployed or less educated have been found to be more likely to believe in coronavirus conspiracies. It has also been found that political identities, religious involvement, and reliance on science are strongly associated with conspiracy affirmations. Those who described themselves as right-wing or more religiously conservative people were more convinced that the conspiracies could be true. Moreover, as expected, there is a negative correlation between trust in science and conspiracy thinking. Those who believe in a coronavirus conspiracy often believe in other conspiracies. In other words, conspiracy belief has been found to be the result of a general mindset.

The chapter titled "Music Industry in Crisis: The Impact of a Novel Coronavirus on Touring Metal Bands, Promoters, and Venues" was written by Kyle J. Messick. This section used evidence from qualitative interviews and public disclosures to draw inferences about the impact of COVID-19 on the music industry, with a particular focus on musicians and their managers, promoters and booking agents. As concerts play a stimulating role for surrounding businesses, it has been demonstrated how the closure of concert venues negatively affects the communities dependent on them. Musicians reported negative emotional and financial consequences as a result of COVID-19, but also reported financial support from metal music fans, making the consequences of the pandemic less severe. The findings of the study reveal that not giving live concerts makes musicians feel incomplete and causes depressive symptoms and anxiety.

The chapter titled "The Arts as Refuge: COVID-19, Crisis, and the Heroes Waiting in the Wings" was written by Ryan Daniel. This chapter explains how the COVID-19 pandemic has i destroyed the industry and workforce; institutions have closed, festivals and events have been canceled, and art production has been severely restricted. As a result millions of artists and art workers around the world are currently unemployed, and many are unable to access government support initiatives designed mainly for traditional business models. In relatively stable times, art often struggles to survive financially. However during the current pandemic, this already fragile industry has become much closer to total collapse. It is argued that art has a strong capacity to provide shelter. The author emphasizes that we need artists, art workers and the art industry more than ever.

The chapter titled "Pandemics and Migration" was written by Erin M. Sorrell and Elizabeth Ferris. This chapter analyzes the relationship between pandemics and migration. It first examines migration and then reviews the effects of the pandemic on both migrants and host communities. Additionally it also analyzes the policy consequences of the two-way relationship between migration and the pandemic. Of particular importance Particularly for this analysis is that international migrants tend to work in sectors at high risk for the virus- such as the service sector, child and elderly care and work related to the hospitality industry.

The chapter titled "Refugee Students during Pandemic time: Key Words for Academic Integration" was written by Anna Fausta Scardigno. The article specifically focuses on the most

relevant words of the focus group discussion with refugee students at Bari University. The article was looking for an answer to the question: How did refugee students react to the cessation of in-person classroom teaching and to the host university's digital-only learning arrangement and online administrative services?

The chapter of this book titled "Migrants and Communication Technologies in Challenging Times; A Double-Edged Sword" was written by Hakan Gülerce and Housein Turner. The purpose of this chapter is to examine the social and psychological effects of the COVID-19 outbreak on refugees. In this study, a literature review and situation analysis method was used to understand the impact of the COVID-19 outbreak on refugees. The research mainly examined the impact of mobile phone and internet addiction on the daily living habits of immigrants during the pandemic period, and focused on education difficulties, digital divisions, loneliness, alienation and other psycho-social factors that affect migrants and refugees in particular. Studies show that smartphones are very important for Syrian refugees. Smartphones are used to connect with relatives and loved ones abroad at a much more affordable rate than making a traditional phone call. The unifying power of smartphones allows refugees to connect with each other, share news and memories, and access vital public service information.

The chapter titled "The Impact of Covid-19 on Crime" was written by Ruken Macit. The author contends that crime rates and trends have changed dramatically in many countries after the COVID-19 outbreak. As the COVID-19 pandemic developed as a global health, human and economic crisis, criminals found new opportunities. Within the framework of COVID-19, while measures were taken, including the call for "stay at home", many types of crime (theft, murder, migrant smuggling) decreased, while some (cyber-crime, domestic violence) increased.

The section titled "Family in the Covid-19 Pandemic: Family Ties and Communication Problems" was written by Ünal Şentürk and Veysel Bozkurt. The purpose of this chapter is to examine the effects of the COVID-19 outbreak on family relationships. The authors seek answers to the following questions: i) To what extent have family ties strengthened? and ii) To what extent have communication problems within the family increased? Fify-five (55%) of the respondents stated that family ties were strengthened during the quarantine period. On the other hand, 17% stated that communication problems between family members increased. While the lockdown brought members of middle and high-income families closer together, the unemployed and the poor faced greater economic problems. This reflected negatively on family relationships among some disadvantaged groups. Most of those who said that domestic communication problems increased were the poor, unemployed and young people. Especially those who were unable to continue their work online faced greater economic and social problems during the time of lockdown.

The chapter titled "Pandemic and Social Vulnerability: The Case of the Philippines" was written by Ericson H. Peñalba. This article discusses how the COVID-19 pandemic crisis disproportionately affected certain segments of the population, and led to conditions that create new vulnerabilities or exacerbate those that already exist. In the aftermath of the pandemic,

children, women, the elderly, the disabled and low-income families faced much greater problems in the Philippines. The unprecedented crisis caused by the COVID-19 outbreak has made certain segments of the population more vulnerable.

The last part of the book titled “Global health status in the COVID-19 pandemic duration: Home quarantine, obesity, psychological behavior” was written by Hakan Çelebi, Tolga Bahadır, İsmail Şimşek, Şevket Tulun, Gülden Gök, Melayib Bilgin. This chapter focuses on the indirect positive / negative effects of COVID-19 on the environment and people, and in particular psychological factors and obesity.

We hope that this book will contribute to understanding the social impacts of the COVID-19 pandemic, which deeply affects the life, ways of working and mental health of all humanity. There have always been pandemics in history; and these led to massive casualties and social problems. Despite all the advances in science and technology, humanity has been caught off guard for the COVID-19 pandemic. The coronavirus has infected and killed millions of people around the world. Many more people have lost their jobs while poverty, anxiety and depression has increased across the globe. There may be new pandemics in the future. Our wish is that humanity will be more prepared for future pandemics and this book will raise awareness on the social problems caused by events.

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CHAPTER 1

UNPRECEDENTED? PANDEMIC MEMORY AND RESPONSES TO COVID-19 IN AUSTRALIA AND NEW ZEALAND

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ABSTRACT

The 1918-1920 global influenza pandemic and the global coronavirus pandemic which began in 2019 are separated by almost exactly a century, but in Australia and New Zealand there have been eerie similarities in the way they have unfolded, and in the responses used to combat them. Despite these similarities, early in the covid-19 crisis the virus and its impacts were widely described as 'unprecedented'. This chapter explores the common collective amnesia that surrounds pandemics, and compares the level of collective memory of the 1918-1920 influenza pandemic in Australia and New Zealand before the arrival of covid-19. It examines government statements and actions while preparing for and responding to pandemics, the nurturing of historical knowledge among medical experts, and the actions of groups of citizens. Additionally, this chapter analyzes the significance of collective memory in devising effective responses to covid-19 in these two countries. In neither country has history been allowed to repeat itself exactly, but in New Zealand, action has been taken in the present with the intention of avoiding a reoccurrence of the events of the past.

Keywords: Covid-19, 1918-1920 influenza pandemic, disaster memory, Australia, New Zealand

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1. Introduction

In Australia and New Zealand by late March 2020 covid-19 had been recognized as a significant threat to health, and public behaviour started to change as restrictions began to be imposed. At that time, the term 'unprecedented' was regularly used to describe the unfolding crisis: those using it included the Australian Broadcasting Corporation, (Spears, 2020) and the New Zealand Prime Minister, as reported in the nation's largest newspaper ("Coronavirus: Everyone travelling to NZ from overseas to self-isolate", 2020). However, the Australian and New Zealand experiences of covid-19 were not without precedent. Restrictions on public gatherings, and even border closures, had been enacted just over a century earlier in response to a global pandemic caused by another viral disease. And, writing in July 2020 as the global pandemic rolls on and Australia faces a new wave of infections emerging from the city of Melbourne, much current coverage of the pandemic incorporates some reference to experiences with influenza a century earlier, while publicly-discussed fears about what might lie ahead now draw on historical knowledge. However, the 1918-1920 influenza pandemic has few memorials, its history was ignored in the early stages of the covid-19 outbreak, and the recent increase in its notoriety raises questions about how pandemics are perceived and remembered. How was it possible for the history of pandemic disease to slip from collective memory before the arrival of covid-19? And, in the few places where that memory survived, how has that memory informed and directed responses to the current crisis?

The 1918-1920 and 2020-ongoing pandemics involve different viruses, but their observed effects are similar. The basic reproductive rate of covid-19 (2.5) and the 1918-1920 pandemic influenza (2.0) are both high, indicating that both viruses are easily transmitted. The viruses are also similar in causing mostly mild illness (Petersen et al, 2020). These two factors interact to create high death tolls. While most people infected with either virus experience only mild symptoms, the large numbers of people infected lead to a significant number of total deaths. The most obvious difference between the two viruses is in their age-mortality patterns. The virus that caused the 1918-1920 pandemic exacted a heavy toll on young adults (although it also killed very young children and the elderly), covid-19 has a more normal mortality pattern, and most of its victims are elderly (Shanks, 2020). While covid-19 has a longer incubation period than the 1918-1920 influenza (making it easier for early isolation and quarantine to prevent transmission (Petersen et al, 2020)), the speed and volume of international travel has greatly increased in the last 100 years, meaning both viruses have led to global pandemics. As occurred in 1918, Australia and New Zealand were relatively late to experience the unfolding global pandemic. As a result, governments in each country were able to react to the virus with knowledge of its impacts elsewhere.

2. The 1918-1920 Influenza Pandemic

During the last quarter of the twentieth century historians paid attention to the 1918-1920 influenza pandemic, exploring its significance as an historical event of global proportions. That pandemic is widely held to have originated in the United States of America (Hodgson, 2017), although a Chinese origin has also been suggested (Humphries, 2014), and at this distance in time no definitive origin can be identified (Oxford, 2018). Wherever it originated, the virus was carried to the battlefields of Europe and from there it spread around the world. The first wave of influenza circumnavigated the globe within six months, and a second wave, with significantly enhanced virulence, spread using the same networks (Hodgson, 2017). The scale of the event was aptly described by Major George Soper in May 1919: "The pandemic which has just swept round the earth has been without precedent. There have been more deadly epidemics, but they have been more circumscribed; there, have been epidemics almost as widespread, but they have been less deadly. Floods, famines, earthquakes and volcanic eruptions have all written their stories in terms of human destruction almost too terrible for comprehension, yet never before had there been a catastrophe at once so sudden, so devastating and so universal" (p.501).

Population mobility played a significant role in facilitating the transmission of the influenza pandemic. Helped by its advent during the closing stages of World War I, the virus moved between continents as soldiers filled liners and cargo ships to overflowing in order to get home at the end of the war. It then spread within countries, travelling by railway and coastal shipping (Oxford, 2003). The virus arrived in New Zealand in 1918, where it spread widely quickly. Its arrival in Australia was delayed by the elementary public health measures undertaken by authorities there. However, not all cases were identified before arrival, and by the end of January 1919 the pandemic influenza had penetrated Australian maritime quarantine and spread through the country. In both New Zealand and Australia, influenza arrived through international ports, reached other metropolitan areas and towns by ship and rail, and infiltrated more remote communities as people travelled by car, bicycle, horse and cart, and foot (Hodgson, 2017, pp.186-227).

In both New Zealand and Australia, a mild flu-like illness was present from the middle of 1918. In October and November, the far more lethal second wave of influenza spread through New Zealand killing at least 8000 people. From New Zealand it spread into the Pacific where it exacted a heavy toll, including killing one fifth of the population of Western Samoa (Shanks et al, 2018, p.323). In Australia, the virus reached different states at different times. Victoria

suffered first, and the disease assumed epidemic proportions there for a period of eight weeks, from the end of January until the middle of March 1919. Influenza reached New South Wales soon after its arrival in Victoria, but only reached epidemic proportions in mid-March 1919. New South Wales then experienced a second epidemic from 28 May to 25 August 1919. In the space of twenty weeks, at least 5,885 people in New South Wales died of the disease. In the end, the official influenza death toll in New South Wales was 6,387, although the actual toll was undoubtedly greater (Director-General Public Health, New South Wales, 1920, pp.141-142). The influenza was in South Australia by April 1919, and Queensland diagnosed its first official case on 2 May 1919. However, this timing is suspect: Queensland's first case was a wardsmaid at the Kangaroo Point Military Hospital, a Commonwealth facility in Brisbane, and 'suspicious' cases of influenza, well away from Brisbane, had previously been reported to the Commissioner of Public Health. Almost instantaneous outbreak of the epidemic across the state suggests the virus could have been seeded and diffused throughout Queensland over several months before the epidemic exploded, and local outbreaks continued to occur in Queensland into 1920. The influenza pandemic reached every state of Australia, arriving in Western Australia in June 1919 and in Tasmania in August 1919 (Hodsgon, 2017; Shanks et al, 2018).

The exact extent of the 1918-1920 pandemic's morbidity and mortality rate in New Zealand and Australia will never be known. In many towns and even in capital cities, there were breakdowns in the official recording process. Even allowing for this, large numbers of cases simply went unreported–through ignorance, lack of communication, or people being just too busy surviving to worry about anything else. Doctors were too busy attending to the sick to report any but the most serious cases. The New South Wales Deputy Director-General of Public Health later estimated that in the Sydney alone 290,000 people or over 36% of the population contracted the disease in a more or less virulent form (Director-General Public Health, New South Wales, 1920, p.141). Populations whose immune systems had experienced few variants of the influenza virus were overwhelmed. This was true for indigenous Americans, Pacific Islanders, Aboriginal Australians and sub-Saharan Africans. In Australia, Aboriginal people suffered disproportionately, and a recent estimate suggests at least one third of influenza deaths in the state of Queensland were of Aboriginal people, despite Aboriginal people making up only a small proportion of the state's population. The full toll cannot be accurately calculated as Aboriginal people were largely absent from census data at the time (Shanks et al, 2018, p.326). In New Zealand deaths were similarly differentiated by ethnicity: Pakeha (New Zealanders of European descent) suffered a death rate of 5.8 per 1000 people, Māori suffered a rate seven times higher (Rice, 2003, p. 74).

3. Disaster Memory (or Disaster Amnesia)

Despite the high mortality rate, the 1918-1920 flu pandemic has few memorials. In New Zealand there are only seven publicly accessible memorials that refer to multiple deaths or the deaths of health workers resulting from the crisis. In contrast, other types of disasters (including rail disasters and wars) are far better represented relative to the number of people who died as a result (Wilson et al, 2017). In Australia, the situation is even more pronounced: despite its larger population there are only five public memorials relating to the 1918-1920 pandemic listed on an extensive, private, web-based database of monuments. In contrast, that database records eleven monuments associated with HIV/AIDS, four commemorating the 1840 arrival of the Glen Huntly, a fever-afflicted migrant ship, and many commemorating disasters including industrial accidents and wars (https://www.monumentaustralia.org.au/). As in New Zealand, some private memorials to influenza victims exist within cemeteries, but while gravestones mark individual influenza deaths, often even they do not record that death's association with the influenza pandemic (Hobbins, 2019).

Lack of memorialization of such a significant pandemic might seem strange, but while disasters are compelling and consuming at the time they occur (particularly to those caught up in them), historians have noted the swiftness with which collective memory of disasters fades, and the speed with which disastrous events are consigned to the 'dead past' (Lloyd et al, 2020). In Australia, such 'unprecedented' (and often unmemorialized and unremembered) disasters tend to be environmental, and include bushfires, droughts, and floods (Griffiths, 2009; McKinnon, 2019; Wilhite, 2012). In Australia in 2019 the word 'unprecedented' was widely used to describe both flood and fire. Its use to describe the Townsville flood of that year went unchallenged, although its application to the extreme bushfire events that occurred in the southeast of the continent (and that continued into 2020) was contentious because of its suggestion of changing climate conditions (Townsville City Council, 2019; Morton et al., 2019). Writing of the response to a catastrophic bushfire in Victoria in 2009, historian Tom Griffiths noted the significance of the term 'unprecedented' in rejecting the on-going ability of natural disasters to complicate human lives: "Black Saturday, we quickly reassured ourselves, was 'unique', 'unprecedented', 'unnatural'—and it was a 'disaster'. We must never let it happen again! Culture can—and will—triumph over nature" (2012, p.53). Thus the use of the descriptor 'unprecedented' is an indication of uneasiness with the event being described, and may be an indication that it will not be committed to collective memory.

Accepting that human lives are constrained by the natural world, and by events beyond human control, is difficult. Western societies in particular tend to see disasters as things that happen elsewhere, and as events that can be mitigated with sufficient planning (Lloyd et al, 2020). In 2020, the shock of the global human population being threatened by a highly infectious disease has made many people uncomfortable about human frailty in the face of nature. For some, that realization remains too difficult to accept. Misinformation about covid-19 tends to mark an attempt to cling to a sense of human agency. Its common forms include: a simple refusal to accept that a global catastrophe is unfolding (including the description of covid-19 as a 'scam-demic'), the promotion of items and actions as cures and prophylactics (allowing for human control), and the assertion that the virus has been engineered as a biological weapon (making the pandemic a reflection of human power rather than a natural disaster) (Mian & Khan, 2020).

4. Historians and collective memory

In both New Zealand and Australia, historians have addressed the challenge of maintaining the collective memory of pandemics. Since the 1988 publication of *Black November: The 1918 Influenza Epidemic in New Zealand* Geoffrey Rice has sustained academic analysis of that pandemic in New Zealand, and repeatedly sought to draw both expert and public attention to the menace of future devastating global pandemics. Awareness of New Zealand's role in Samoa's experience of the 1918-1920 influenza pandemic increased in 2002 when Prime Minister Helen Clark apologized for aspects of New Zealand's administration of Western Samoa, including its inadequate response to the risk of influenza arriving in Samoa aboard the *SS Talune* (Clark, 2002). Commentary about the 1918-1920 influenza pandemic and the impact of the *Talune* on the Pacific remains a live topic as New Zealand actively seeks to deal with its colonial past both within New Zealand and more broadly.[1]

However, New Zealand remains the only country to have a national study of influenza deaths based on death certificates (Rice, 2018). In Australia, influenza scholarship does not yet have as dedicated and effective a representative, and historical analysis of the 1918-1920 pandemic remains fragmented. Existing Australian analysis includes Peter Hobbins' and Alison Bashford's work on quarantine, and a variety of studies of the impact of the pandemic on particular regions or groups of people. Patrick Hodgson's 2017 thesis on the 1918-1920

1 In New Zealand the on-going process of Treaty settlement (recognizing and enacting the provisions of the 1840 Treaty of Waitangi), and the effective political voices of Māori and Pasifica populations makes the histories of settler colonialism and of New Zealand's behavior towards its Pacific neighbours matters of regular public debate.

influenza pandemic in Queensland is the most recent and thorough of these. Since the arrival of covid-19 in Australia, Hobbins and Hodgson have become the most visible public faces of historical pandemic scholarship, each speaking on radio, appearing on television, and commenting in print on the similarities between the current and past global pandemics. Hodgson's thesis has been downloaded over 3000 times across 89 countries, in the first six months of 2020. Other historians have also provided informed commentary as the Australian public has rediscovered the 1918-1920 influenza pandemic. In particular, in June 2020 the History Council of New South Wales hosted a seminar series on the Spanish Flu in Australia.

5. Government pandemic plans

Despite collective memory allowing covid-19 to be widely described as 'unprecedented', in some circles past pandemics are well studied and their histories regularly discussed. Internationally, reports produced by government planners and medical professionals regularly reference the 1918-1920 influenza pandemic, as well as more recent pandemics. Both the New Zealand and Australian governments have influenza pandemic plans (one last updated in 2017, the other in 2019). In addition, professional medical journals frequently carry commentary on the risk of global pandemics and display a greater awareness of pandemic history than that in the public sphere.

The New Zealand government's 2017 *New Zealand Influenza Pandemic Plan* begins with an acknowledgement of the work of Rice and its significance in government planning (p.ii, inside cover). It also notes the significance of the 2009 influenza pandemic in promoting pandemic planning by governments. The Australian *Health Management Plan for Pandemic Influenza* demonstrates less historical awareness, although the Ministerial foreword refers to the 2009 influenza pandemic. Indeed, while the Australian report notes the severity of the 1918-1920 influenza pandemic, it dismisses its usefulness in planning for future pandemics. Noting the milder nature of the 2009 influenza pandemic, the report suggests that the 1918-1920 influenza pandemic might represent too dire a worst-case scenario to be valuable. Instead, the plan aims to facilitate a proportionate response to a milder influenza pandemic. Thus, while the Australian report recognizes a historical pandemic precedent for planning purposes, that precedent is the milder influenza pandemic of 2009, rather than that of 1918-1920.

While both New Zealand and Australian government response plans demonstrate an awareness of precedent, different past pandemics are accorded different priorities. Both plans include a list of previous influenza pandemics, and both lists include the pandemics of

1918-9, 1957-8, 1968-9, and 2009-10 (Ministry of Health, 2017, p.5; Australian Government Department of Health, 2019, p. 21). The Australian report also notes the 1997 H5N1 influenza as being of on-going concern, while noting it does not meet the qualifications of a 'pandemic'. In contrast to this awareness of past influenza pandemics among government planners, only the 1918-1920 influenza pandemic has featured in public discussions of pandemic precedents for covid-19 in Australia and New Zealand. The other influenza pandemics of the twentieth century were much less severe, and have likely been absorbed by the annual experience of seasonal influenza. The 1997-ongoing H5N1 influenza is comparable in severity to the 1918-1920 influenza, but as its transmissibility is much lower it has not entered public consciousness to the same degree.

6. Historical Awareness of Government and the Medical Profession

The two government plans may recognize the same historical influenza pandemics, but they differ markedly in their treatment of them. The New Zealand plan differs from the Australian in containing a statement about the impact of the 1918-1920 influenza pandemic on indigenous peoples, recognizing that Māori suffered a death rate five to seven times higher than non-Māori (p.6). In addition, the New Zealand report notes that during the 2009 influenza pandemic Māori and Pacifica suffered higher morbidity rates than the general population, possibly indicating a greater susceptibility to pandemic influenza. As a result, the New Zealand pandemic plan emphasizes the importance of cultural awareness, the need to communicate pandemic measures to all communities, and the fact that Māori face greater impacts than other New Zealanders (p.17). In contrast, the Australian report does not discuss the experiences of 1918-1920 in any detail and does not recognize the Aboriginal experience of 1918-1920 or subsequent pandemics. Instead, its list of groups at risk is exhaustive, beginning with pregnant women, including those suffering from a range of chronic illnesses and disabilities, and only recognizing Aboriginal and Torres Strait Islander peoples before finishing with the very young and the old (p.19). The memory of the 1918-1920 pandemic is barely present. This absence of planning for the needs of Australian indigenous groups is all the more significant as the previous Australian pandemic plan (2010) was criticised for not considering the needs of Aboriginal and Torres Strait Islander people and communities given their greater susceptibility to the 2009 pandemic (Miller & Durrheim, 2010).

Like government health planners, medical professionals have recognized the potential for new pandemics to emerge, and have sought to use the past as a guide when preparing from them. The *British Medical Journal*, the *Medical Journal of Australia*, and the

New Zealand Medical Journal (*NZMJ*), all responded to the 2003 and 2009 influenza pandemics with articles that addressed the prevailing crisis, followed by (as each crisis waned) historical analysis. Most emphasis was placed on the influenza pandemics of the twenty-first century, but assessment of the 1918-1920 influenza pandemic also took place. The *NZMJ* was unusual in the depth of coverage it carried, and in April 2020 that journal demonstrated outstanding historical awareness by publishing an editorial written by Rice that placed responses to covid-19 in the context of the experiences of 1918 (Rice, 2020). Awareness by medical planners of past pandemics is not limited to these journals. The second chapter of an American guide to preparing for influenza pandemics is devoted to the 1918-1920 pandemic (Olson, 2009) and the World Health Organisation's guide to pandemic influenza and appropriate responses mentions the longer history of pandemic disease and notes the 1918-1920 influenza pandemic as a historical precedent (World Health Organization, 2009).

Recognizing precedents is important in staging effective responses. While covid-19 was described as 'unprecedented' in both New Zealand and Australia, both countries were late to experience its arrival, and were able to learn from the experiences of regions already coping with the virus. As a result, the spread of the virus has, to date, been successfully slowed and widespread community transmission avoided. However, some regions closer to the viral epicentre of Wuhan province also escaped early widespread community transmission. South Korea, Taiwan, Hong Kong, Singapore, and Japan are all notable for their proximity to China, dense urban populations, and successful early control of covid-19. In those countries, recent pandemics provided government planners with useful precedents. Memory of the 2003 outbreak of Severe Acute Respiratory Syndrome (SARS) and the 2015 outbreak of Middle East Respiratory Syndrome (MERS) led to a swift response to covid-19, and community cooperation in containing the virus (Zhou, 2020). A similar response prevented the early arrival of covid-19 in Africa, despite close ties to China. Prompted by memory of the 2014 Ebola crisis in West Africa (as well as by experience with Lassa fever, polio, measles, tuberculosis and HIV/AIDS) African Union member states acted swiftly to prevent the arrival of covid-19 with aircraft passengers. Health ministers from across the continent met on 22 February 2020 and developed a joint strategy to respond to the virus (Massinga Loembé et al, 2020). Their actions were successful, in that covid-19 arrived in African countries via Europe rather than directly from China. Even so, it is difficult to assess whether covid-19 has been contained across Africa because of a lack of consistent and widespread testing (Bruce-Lockhart 2020; Makumeno et al, 2020; Massinga Loembé et al., 2020).

Even in 1918, the arrival of epidemic disease in New Zealand and Australia was not without recent precedent. Rice, despite stating that "officials had no precedents or established procedures" (2003, p.76), notes that New Zealand's response drew on an administrator's previous experience of a diphtheria epidemic that had occurred in South Africa during the South African War of 1899-1902 (2003, p.80), and reproduced travel restrictions imposed during a 1913 smallpox epidemic (2003, p.84). In Sydney, and elsewhere in Australia, the influenza pandemic might have escaped clear recall by becoming 'telescoped' with the experience of bubonic plague in 1900, in the same way the 1918 influenza epidemic in Senegal is not recorded in oral or written histories precisely because it was not unprecedented. Instead, in Senegal memory of the influenza pandemic has been conflated with that of bubonic plague epidemics in 1914 and 1917 (Echenberg, 2003). In the present, while collective memory of the 1918-1920 influenza pandemic has been revived, other precedents have not. The polio epidemics that caused widespread devastation, reaching Australia and New Zealand repeatedly before the development of a vaccine in 1956, have relevance when facing a novel coronavirus rather than an influenza pandemic (Johnston, 2018). While the 1918-1920 influenza pandemic left few memorials, polio's only memorials in New Zealand and Australia are in the form of permanent damage done to some survivors and in the memories of family members.

7. Government actions

The reaction to covid-19 has differed from the reaction to the 1918-1920 influenza pandemic, in part due to lingering institutional and collective memory. In contrast to events in 1918, in 2020 New Zealand responded more quickly and more decisively to the threat of a pandemic than did Australia. Unlike in 1919, Australia's federal system did not prove a barrier to concerted actions, with commonwealth and state leaders early in the pandemic generally presenting a united front, with the prime minister as spokesperson. However, within the constitution of Australia the responsibility for public health largely rests with state governments, and as the covid-19 crisis lengthened the states began exerting their influence. While the extent of any particular response or measure continues to vary from state to state depending upon local circumstances, nonetheless the actual measures imposed have been similar.

Whereas in 2020 the commonwealth has generally confined itself to protecting national borders and providing economic relief measures, during the 1918-1920 influenza pandemic the Commonwealth Government made extensive use of its powers under the *Quarantine Act 1908* and the *War Precautions Act 1914* (the dominant federal legislation of the period) and their associated regulations to impose its will in areas that were constitutionally the responsibilities

of state governments. This was particularly resented in Queensland. As a result, over the course of the first half of 1919, the Commonwealth and Queensland Governments contested each other's responses to the pandemic in the Police Court, the High Court and the court of public opinion (Hodgson, 2017).

Despite the different political contexts, many of the pandemic responses of 2020 repeat those of 1918-1920: closure of borders between states, outlawing of large gatherings, encouragement of face mask usage, and governments urging of citizens to support each other in practical ways. But, whereas in 1919 the federal government publicly ridiculed its state counterparts for strictly enforcing land borders closures, in 2020 federal criticism of state measures has been muted, being confined for the most part to where those measures are deemed to have had a detrimental impact on the Australian economy (Hodgson, 2017).

Some responses to covid-19 in New Zealand appear to be conscious efforts to avoid the history of 1918-1920 repeating itself. In 1918 the Australian federal government imposed strict maritime quarantine on 18 October, while New Zealand observed but did not act. The New Zealand administration of Western Samoa allowed the *Talune* to dock there on 7 November 1918, despite sickness on board. The ship then continued to Tonga. Between twenty-two and twenty-five percent of the population of Western Samoa died as a result of that decision, while American Samoa escaped unscathed because of a strict quarantine imposed by the United States authorities (Tahana, 2018). Those island groups connected by Australian steamers were protected by Australian quarantine protocols and escaped relatively lightly, but Tonga's connection to New Zealand meant the death rate there is estimated to have been sixteen percent (Kupu, 2006). In contrast, in 2020 the New Zealand government acted early and decisively to prevent the spread of covid-19 from New Zealand to islands in the Pacific, with the Prime Minister citing New Zealand's responsibilities as a "gateway to the Pacific" (Wade, 2020).

Pandemic responses guided by memory also appear to have occurred independently of government in New Zealand. In contrast to Australia, New Zealand does not have a federal system and has no internal borders to close. However, in New Zealand's Northland region some communities operated local roadblocks to protect their boundaries. While the involvement of prominent Māori politician and activist Hone Harawira lends some credence to suggestions the roadblocks marked an assertion of Māori sovereignty, those operating them cited the severe impact of the 1918-1920 pandemic on Māori communities (Vulnerable Far North community battens down the hatches to ward off coronavirus, 2020; Covid-19 coronavirus: Far North blockade will go ahead, Harawira pledges, 2020). In 1918, Northland Māori had suffered severe mortality from influenza. Collective memory, bolstered by graves and private

monuments, prompted Māori communities in the far north to act to isolate themselves, even before a government-mandated nation-wide lockdown came into effect.

In Australia, Tasmania took advantage of the quarantine potential of being an island, and on 20 March became the first state to close its borders in response to covid-19 (Tasmania to enforce 'toughest border measures in the country' amid coronavirus pandemic, 2020). Some other states quickly followed—South Australia, (Marshall, S., & Wade, S., 2020) the Northern Territory (Roberts, 2020), and Western Australia all closed their borders on 24 March (with a hard border to Western Australia coming into effect on 5 April) (Shepherd, 2020; Hamlyn & Manfield, 2020). Queensland shut its border one day later, on 25 March (Cansdale & staff, 2020). Other than Tasmania, those states that closed their borders are home to remote Aboriginal communities, (National Indigenous Australians Agency, 2016) and restrictions on internal travel within the Northern Territory acknowledged that those communities were particularly at risk from the new disease. In the Northern Territory, the Northern Land Council and Central Land Council (representing traditional landowners) have spoken in support of travel restrictions, as have Anangu Pitjantjatjara Yankunytjatjara traditional owners in South Australia (Hanifie, 2020; Gibson, 2020). However, the discourse around these closures is of recognition of the health challenges those communities face in the present, rather than memory of the heavy toll of the 1918-1920 pandemic that disproportionately killed Aboriginal people. The Federal government's *Pandemic Influenza Plan* refers only to the closure of the Australian national border, not to the ability to close the borders between Australian states, and border closure decisions reflect state concerns. Thus, it was not until 6 July 2020 that New South Wales closed its border with Victoria, severing free movement between Australia's two most populous states for the first time since 1919 (Kaye & Pandey, 2020).

8. Conclusion

While every epidemic is unique, the threat of large-scale morbidity makes them alike in many ways to those living through them. Covid-19 is a novel coronavirus, not a form of influenza, but the public health measures taken to contain it have made it seem, in Australia and New Zealand at least, as though a door has opened between 1919 and 2020. Similar government regulations have been put in place, similar attempts are being made to contain and manage a new disease, the impact on public health systems is of concern, and fears about the impact of the pandemic on the lives of loved ones are familiar. In Australia, there have also been familiar tensions between state and federal governments as the two levels of government seek to engage with their constitutional responsibilities.

The similarities that exist between human experiences of different pandemics make historical precedents significant in planning responses to the present and future. The 1918-1920 influenza pandemic, with its infectiousness and mortality rate, has emerged as an aid in understanding covid-19 and the disease's likely impact on society. Government pandemic plans and articles in medical journals indicate that a higher level of historical awareness has been cultivated in New Zealand than in Australia. In the current crisis, the New Zealand government acted more swiftly and decisively than the Australian federal or state governments. While it would be tempting to suggest that the work of Rice in maintaining collective memory of the 1918-1920 influenza pandemic was an element in this outcome, that cannot be definitively established. However, covid-19 is unlikely to be last pandemic of the twenty-first century, and Australian historians have work to do to ensure the pandemic of 2020 does not join that of 1918-1920 in collective oblivion. Maintaining the collective memory of pandemics will be important when responding to future crises. And collective memory may mobilize groups that have historically suffered more heavily than the general population from pandemic disease, preventing history from repeating itself.

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CHAPTER 2

RISKING A NEW UNDERCLASS: YOUNG AUSTRALIANS, BROKEN TRANSITIONS, AND THE PANDEMIC

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ABSTRACT

From a sociological perspective the period of adolescence has traditionally focused on young people as risk takers as well as being more vulnerable to risks, particularly as they negotiate the transition to adult status. In Australia, many youth are now confronted with a different world from their parents with regards to less certainty about entering the labour market, greater dependence on their families and less opportunity to purchase a home. The challenges associated with transitioning to adulthood are now more problematic and individualized for some young people due to the COVID-19 pandemic. It is argued that the current situation has disrupted the transition to adult status and now threatens to produce a new underclass of youth due to high levels of unemployment, underemployment and negative impacts on young people's mental health and wellbeing. The chapter concludes with a discussion on the challenges for government and community in producing a response to this problem to reduce the risk of a cohort of youth becoming a new underclass in Australian society.

Keywords: Youth, pandemic, mental health, precarious employment, risk

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1. Introduction: Risk in the Time of Covid-19

There is a substantial corpus of literature which has focused on adolescence as a time when young people are more prone to taking risks. For example, there are studies of youth who steal cars and drive at high speeds risking the lives of the occupants as well as innocent bystanders (Dawes, 2002). Other studies have focused on the links between alcohol and drug use with violence perpetrated at other youth. For example, a study by Briscoe and Donnelly (2001), concluded that high levels of cheap wine and full-strength beer was associated with a significant increase in late night assaults among young people.

Conversely, other literature has focused on young people as the victims of risk due to their vulnerable social, economic, or cultural status. Numerous studies on youth homelessness, unemployment and domestic violence highlight that specific cohorts of young people are more prone to encountering higher forms of risk to their health and wellbeing compared to other youth who are protected due to their higher social and economic status.

Some of this research has drawn on the nature of risk and risk taking as theorized by Beck (1992) and Giddens (1991) and provides a framework for increased understanding about how some youth have navigated the new unanticipated risks posed by the current COVID-19 pandemic in Australia. Beck (1992) and Giddens (1991) argue that the world can no longer depend on the rationality of science to provide answers to new problems associated with the effects of industrialisation. As a new and dangerous world emerges, individuals are more concerned with preventing or removing risk from their lives. This is particularly the case during the current pandemic whereby individuals have been forced to self-regulate their social behaviours by self-isolation at home for months and adhering to social distancing measures to avoid contracting the virus.

Therefore, according to Beck, the new risks found in contemporary society may be defined as a "systematic way of dealing with hazards and insecurities induced and introduced by modernisation itself" (1992, p. 21). The very nature of living in the risk society means that individuals must assess and manage new threats in an attempt to protect themselves or remove the risks from their lives altogether.

In Australia, as in other parts of the world, a "new normal" way has emerged whereby individuals have had to adopt new practices and strategies which are required to assess and control risk. Beck argues that as our dependency grows on ways of reducing these risks on an individual level we are at the same time more vulnerable to other macro forces, such as the volatile world share market which has seen Australia slide into its first recession in 29 years.

As the individual loses the traditional markers of security, such as secure employment and social connectedness to other people, Beck argues that they become 'disembedded" and may be of increased risk of alienation from the rest of society, which may in turn impact on their health and wellbeing. At the same time, Beck posits that other individuals may feel a sense of liberation and see new opportunities as they construct new reflexive biographies due to the erosion of traditional societal markers. One pertinent example of this in Australia is the debate about whether people working from home during the pandemic will become a more permanent feature of life due the perceptions that there may be increased productivity due to this new form of work.

However, while some individuals may have the freedom to consume and construct alternative biographies they are at the same time constrained and increasingly dependent on "secondary agencies" that shape their identities through the kinds of interactions they have with institutions such as education, employment and government agencies leading the individual to become "institutionally dependent on individual situations" (Beck, 1992, p. 130). The conditions of doubt that penetrate all social life means that the construction of one's identity therefore becomes a lonely business which is "full of risks which need to be confronted and fought alone" (Bauman, 2001, p. xvii).

However, not all sectors of society are confronted with the same risks. For example, people with full-time employment and who own their own homes can buffer themselves from the potential risks of phenomena such as the pandemic compared to vulnerable social groups, such as the elderly, refugees, and Indigenous people. This has been the case in Australia, where well-educated middle-class people who worked in government jobs were less likely to be affected by the pandemic because wealthy people can buffer themselves from potential risks compared to other vulnerable social groups.

The development of individualised risk society, therefore, has implications for the sectors of society who may not possess social, economic, or political power. "Inequalities in class and risk society can therefore overlap and condition one another, the latter can produce the former" (Beck, 1992, p. 45). Risk, poverty, and class are therefore more likely to coincide producing unequal life outcomes for some groups of individuals.

2. Young People and the New Risks of Permanent Underclass

The processes of individualisation, therefore, means that young people construct their personal biographies as they journey through the multiple transitions to adulthood.

Traditionally, these markers of transition have been characterised by youth successfully achieving economic independence through access to the labour market via higher education or further training. This has allowed youth to live independently of their parents and to eventually enter the housing market. However, over the last decade a high proportion of young people have encountered a non-linear transition to adult status due to the rise of "precarious work" which is characterised by job insecurity, low wages, part-time work, and low levels of awards normally associated with full-time work, such as paid annual leave and annual sick leave entitlements.

Furthermore, other studies have argued that young workers are more vulnerable than other workers during contractions to the labour market as witnessed during recessions (Denny & Churchill, 2016). The Global Financial Crisis of 2008-09 saw unemployment rates increase from 5.3 per cent in 2008 to 10.3 per cent in 2009 for males (aged 20-24 years) and from 5 per cent to 7.6 per cent for young females.

The sudden contraction of the Australian labour market in March 2020 due to the pandemic produced some of the highest unemployment rates encountered since the great depression of the 1930's. For example, the International Monetary Fund on 14 April 2020, predicted a global contraction of 4.2 per cent in 2020 and Australia to encounter a 6.7 per cent overall contraction in the same year (International Monetary Fund, 2020). This translated into over one million people suddenly finding themselves unemployed due to strict social distancing measures and a virtual lock down of the community in early March of 2020. Economists predict that unemployment will reach a record 10 per cent during the June quarter of 2020.

As a response, the Federal Government introduced the Jobkeeper program whereby employers were paid to re-employ some of their workforce during the closure of many businesses affected directly by the lockdown. However, while the Jobkeeper program assisted some employees, casual or temporary workers found they were ineligible to obtain support from the program as observed by Coates, Cowgill, Chen, and Mackey (2020) who stated:

> Casual workers who have been with their employer for less than a year are ineligible for the Jobkeeper payment. This amounts to about 950,000 casual workers, most in the accommodation and food services, retail trade, and health care and social assistance sectors. (p. 39)

However, the economic effects of the pandemic have not affected all people equally. The most 'at risk' adverse groups who are buffeted from the current recession due to the pandemic are more likely to be well-educated permanent male workers who are predominantly employed

in the government sector. These groups are more likely to enjoy job security compared to those working in precarious forms of employment, such as older workers, women, and young people, as reported by Coates et al. (2020):

> We find that about 40 per cent of workers in the lowest income group are likely to be off work during this crisis. This group includes workers who make less than $150 per week in personal income. By contrast, people earning more than $3,000 per week have less than half the risk of losing work. We find that the lower a person's income, the more likely it is that their job is at risk as a result of COVID-19 and the public health response to the virus. (p. 21)

Young people are predominantly found in the areas of most precarious employment, such as the hospitality and retail sectors which have been the most seriously affected during the pandemic.

At the time of writing, the national unemployment rates rose from 6.4 per cent in April to 7.1 per cent in May. Of this, the youth unemployment rates for 15-24 years of age jumped two percentage points over the month to 16.1 per cent. This accounted for 45 per cent of all jobs lost over this period. The exclusion of a large proportion of young people in the workforce due to the pandemic means that many youth have no means of financial support due to their ineligibility to qualify for government assistance, such as the Jobkeeper scheme:

> Young people are more likely to work casually (ie without paid leave entitlements) than any other age group. More than half - 54 per cent - of young people are employed on a casual basis compared with 18 per cent for all other age groups. On top of that, an estimated 26 per cent of young workers are both employed on a casual basis and have been with their current employer fewer than 12 months – making them ineligible for the JobKeeper payment. This compares with just 6.5 per cent for all other age groups. (Birch, 2020, para. 5)

Extrinsic factors, such as geographic location, have compounded the difficulties faced by youth who are looking for work and are living in remote and regional areas of Australia. During the pandemic, many regional towns have suffered major economic downturns with unemployment figures higher than the national average. In some of the regions, youth unemployment has reached levels as high as 29 per cent. Research indicates that young people living in these areas also have lower educational outcomes compared to their peers in larger cities, which means their access to employment is further limited as they compete with older more experienced workers.

Young people in regional areas also face the compounding impact of declining retail, hospitality and manufacturing industries and the reality of 'technology-driven' opportunities are more limited in regional Australia (Productivity Commission, 2019). Low educational

attainment patterns are also correlated with location, further disadvantaging young people in the labour market. Young adults in regional Australia are still twice as likely (28 per cent) to be early school leavers compared with young adults in metropolitan areas (14 per cent).

Overall, youth unemployment rates mask considerable variability across regions. In some regional areas, such as the Queensland Outback region, over 25 per cent of the youth were unemployed before the pandemic. The current economic climate will disproportionately affect regions already facing high youth unemployment rates. This includes remote, rural, and even outer suburban locations. Increasing demand for limited jobs in the wake of the pandemic will make it difficult for young adults to enter the labour market. With limited options for education and employment in regional areas, this may result in migration of youth to urban areas in search of opportunities (Atkins, Callis, Zoe, Flatau, & Kaleveld, 2020).

No one is certain how long the pandemic will continue to impact on our society. However, it is predicted that the longer the virus persists the more impact it will have on vulnerable young people. Some commentators argue that in addition to the current high numbers of youth who have lost their jobs there are additional concerns with regards to younger school leavers who will enter the workforce at the end of 2020. This situation potentially threatens to produce a further disruption of the school-to-work transition and reduce the acquisition of career competencies among these young people (Restubog, Ocampo, & Wang, 2020).

Furthermore, this potentially risks seeing a whole cohort of young people as unemployed and gradually becoming unemployable over time due to their lack of participation in the labour market. Birch (2020) comments that a delayed entry to the workforce during a recession means that many would earn less and experience long terms of underemployment, which would debase their skills and reduce their overall life chances:

> For young people, this means they miss out on building skills and experience during the crucial early stages of their careers. Research published in The Economist shows ‘workers who start looking for a job during a recession earn significantly less than their timelier counterparts’. (Birch, 2020, para. 16)

The situation is further exacerbated due the emergence of new risks for vulnerable unemployed youth who are now more susceptible to exploitation at the hands of unscrupulous employers.

Professor John Howe, a labour law expert from Melbourne, argued that there has been an increase in job advertisements for “volunteers” to work without pay in order to gain experience

in some frontline jobs. Howe stated that, "people are more desperate for opportunities to get work and when that's a possibility linked to paid work down the track… some people will be vulnerable to giving unpaid work a go in the hope that they will get something that is paid later on" ("Chance for Shifty Business", 2020, p. 3).

The disruption of the movement into secure paid work for many young people also means that aside from a lack of financial independence, unemployment has other negative outcomes for the individual. For example, employment is linked to positive identity formation as well as status and gives individuals a structure in their lives. Additionally, interactions with fellow workers increases a sense of social connectedness and belonging and reduces alienation or isolation among people.

Not only is employment a pathway for maintaining positive mental health, but it also facilitates social connections with others. Long-term engagement in employment and building a career are often the key pathways in which young people can initially build skills and active citizenship, as well as navigate pathways for making their contribution to society (Atkins et al., 2020).

By comparison long-term unemployment has been linked with increases in mental health conditions such as depression and anxiety and even suicide. The impacts of mental health on young people and how they threaten their wellbeing is the focus of the discussion in the next section of this chapter.

3. Young People and Mental Health

We have discussed the fact that paid work is essential to sustaining positive mental health, as well as maintaining social connections and we have discussed the precariousness that the COVID-19 pandemic has created for youth in this respect. However, it is not unemployment and precarious employment alone that has contributed to the denigration of youth mental health during this global pandemic. This section discusses the '*position of risk'* of young Australians in relation to the forced self-regulation measures in terms of their mental health and its potential to create a new underclass in Australian society.

Before the COVID-19 pandemic, young people in Australia, and indeed the world, were already dealing with stress factors in their lives, however, the pandemic has seen those stressors intensify (McPhee, 2020). This puts young Australians in a new position of risk, that of experiencing higher levels of mental illness as a result of the enforced self-regulation measures. According to Ziaziaris (2020), COVID-19 had a negative impact on the stress and anxiety levels of one out of six young people surveyed by UNICEF. ReachOut, a free mental

wellbeing internet service for Australians between the ages of 12 to 25, has seen 120,000 more people accessing their services since the social distancing measures commenced; a 50 per cent increase (McPhee, 2020). With the traditional markers of security, such as secure employment and social connectedness, being lost through the COVID-19 pandemic youth are particularly vulnerable to becoming disengaged from society. Young people still at school, particularly those in Year 12, have been hit by a trifecta of additional stressors, which are home schooling, social exclusion, and precarious employment.

Although younger students have also had their education interrupted by the closure of schools and the introduction of home schooling, the impact for those in Year 12 is compounded by final exam stress. A survey of 1,007 teenagers conducted by YouGov Galaxy, which was then followed up with consultations by UNICEF Young Ambassadors, found that 67 per cent expressed concerns that their education was "*being disrupted or held back*" (Baker, 2020, para 7). One student from New South Wales worried about both her exams and her future employment, stating:

> *It's kind of scary to think that after this there may not be kind of like job security moving forward – like being in Year 12 and wondering how the HSC [exams] is going to pan out, and university offers are going to pan out. And then adding onto that fact, there may not even be a workforce to join after all this happens.* (As cited in Ziaziaris, 2020, para 14).

Ashley De Silva, Chief Executive of ReachOut, says this student is not alone with "*seventy-five per cent of young people in their final year…already experiencing worrying levels of study stress and we're not even in the exam period*" (as cited in McPhee, 2020, para 11). Many young people have also found themselves struggling with the loss of the structure and routine that school provides in their day-to-day lives (Teo & Griffiths, 2020). One Year 12 student explained that "*you also don't have that separate world of home and school and so it's all kind of just mixed together*" (as cited in Richards & Skujins, 2020).

A male student from Western Australia reported that he did not think that "*children of high school age are as self-disciplined or have known their own routine of working from home when there's so little people*" (as cited in Ziaziaris, 2020, para 16). Another student from Western Australia also stated similar views, saying "*I definitely became a lot more stressed on a personal level with my ability to carry out work and keep doing online classes and do all the assignments and homework and those sorts of thing on time from home, staying in my bedroom where my desk is*" (as cited in Ziaziaris, 2020, para 9). On top of this, a loss of learning may occur as student mental wellbeing may be impacted by the lack of social connection in an online learning environment (Buckley Flack et al., 2020).

This 'new normal' creates a new category of risk that had not previously been on the radar of many young Australians, that of social exclusion. Social exclusion is now likely to be seen in cohorts of young people where one would not have expected it pre-pandemic, therefore, the impact of school closures on the mental wellbeing of children should not be underestimated. This is particularly true of vulnerable children that are already socially excluded. The Youth for Exchange and Understanding define social exclusion as

> *a process that is rooted in social inequalities, that limits participation of the youths in different areas of social life, such as accessibility for quality education and training, securing adequate employment, suffering from discriminatory practices and attitudes. In other words social exclusion places the youngsters outside the world of the opportunities*. (u.d., p. 2)

Again, this will be experienced most intensely by the Year 12 cohort, but also by those young people entering into their first year of university (Ziaziaris, 2020; Richards & Sjukins, 2020).

Year 12 is seen by many as full of 'rites of passage' that are being missed out on, such as "*the swimming and athletics carnivals, the beach days, the road trips, the school dances and 18th birthday parties—and no-one's sure yet if a graduation ceremony or Year 12 formal will even be possible*" (Bruce, 2020, para 3). Relationships with their peers are essential to the positive mental wellbeing of young people and losing this social connectedness results in increased anxiety and feelings of isolation (Richards & Skujins, 2020). Brian Lee, a UNICEF Australia Young Ambassador, poignantly noted "*In Year 12, the social aspects often get suppressed by study. These events are where the students are able to be social and have a sense of belonging. That's why they are so important*" (Ziaziaris, 2020, para 8-10). While Year 12 students are lamenting the loss of 'lasts' in their school life, university students are lamenting the loss of 'firsts' in university life (Richards & Sujins, 2020).

Young university students in their first year of university are often excited to experience their first lecture, their first meeting of new friends, their first assignment, and even the first exam; however, Harry Wright, a student at Flinders University, states "*I had all my 'firsts' at uni not taken away, but all postponed"* (as cited in Richards & Sujin, 2020, para 1). Not only has Harry missed out on his 'firsts', but he reports that he is finding the shift to online modes of studying difficult, as well as struggling with the social isolation, he says "*I think I'm finding uni harder than its meant to be…in those first two weeks it was a lot easier than it is now"* (as cited in Richards & Sujin, 2020, para 4).

This sentiment is echoed by Charlie Laverty, a 19-year-old student who, until recently, was "*at university, working part-time and spending her free time with friends*" (Gorman, 2020, para 1) and then almost overnight the lockdown came into effect and she found "*her life became pretty unrecognisable*" (Gorman, 2020, para 1). Charlie's classes moved online, her shifts at work were cancelled and her social life was put on hold and the result has been a deterioration in her mental wellbeing. Charlie reports "*last week was very rocky for me. I'm not really sleeping. I have been up until 2:00, 3:00, 4:00am every morning…I have had some issues with mild anxiety and stress before. If things start to go downward, then I can really spiral*" (Gorman, 2020, para 8).

These reports are not surprising to Professor Patrick McGorry, CEO of Orygen, a leading youth mental health service, because, he says, "*75 per cent of mental health disorders appear by age 25*" (as cited in Gorman, 2020, para 10). McGorry warns that due to the COVID-19 pandemic mental health issues will occur in people who had not previously experienced it (Gorman, 2020). Furthermore, he reiterated that pre-pandemic the leading cause of death for young people is suicide and, he says, the impact of the pandemic "*increases the risk of youth suicide*" (Gorman, 2020, para 13). Risk factors already identified for suicide include loss of employment and financial stress, but combined with new stressors of social isolation, concerns for the future and social exclusion the risk of suicide is increased (Gunnell et al., 2020; Baker, 2020).

Indeed, the Australian Medical Association released a statement revealing "*the modelling shows that there may be a 25 per cent increase in suicides, and it is likely that about 30 per cent of those will be among young people*" (Bartone, Hickie, & McGorry, 2020, para 7). This equates to between 750 and 1500 additional suicides to the 3000 plus suicides that occur every year in Australia (Barone et al., 2020). As Bartone et al. (2020) state, "*such a death rate is likely at this stage to overshadow the number of deaths in Australia directly attributable to COVID-19 infection"* (paras 8-10).

4. Conclusion

There is little doubt that the COVID-19 pandemic has impacted on all forms of our social, cultural, and economic lives. For young people, these impacts are greater due to the disruption of the traditional markers which assist them to construct their identities and establish a place in society, such as finding employment or enrolling in further education or training. Furthermore, the breakdown of these transitions means that risk has become an individualised process as posited by Beck, whereby young people must construct their own biographies as they strive to attain adult status by becoming economically independent. However, this transition is often

stifled as young people are now forced to remain at home which will place a greater financial burden on their parents or carers. As young people remain economically dependent on their parents their chances of entering the home market are significantly reduced compared to older Australians.

At this critical juncture society cannot allow young people to confront the new risks alone as a consequence of the pandemic. The research cited in this chapter highlights the risks encountered by young people due their vulnerability in terms of reduced employment and training opportunities as a result of the current recession in Australia. The negative consequences of being long-term unemployed in terms of young people's identity construction and mental health concerns require additional government and community assistance to ensure youth have new pathways in order to develop their reflexive biographies and reach their potential as productive adults.

The Australian Federal government has responded to this urgent situation by overhauling the university sector including an expansion of places as well as offering regional universities increased funding. The federal education minister has also attempted to divert students into courses which he says have direct employment outcomes in order to make graduates "job ready". However, more assistance is required to attract school-leavers into technical and trade-based jobs as well as those working in under-funded areas, such as the arts. An expansion of mental health services throughout the country including rural and remote areas is also required to ensure young people with mental and physical health issues are diagnosed and receive the appropriate assistance. In short, a whole of government and community approach focused on assisting youth to avoid being further disembedded and left behind from the rest of society is required to ensure Australia does not see the emergence of a new underclass who have little hope in terms of their future life chances.

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CHAPTER 3

CORONAVIRUS IN TURKEY EFFECTS ON DAILY LIFE AND CHANGE OF HABITS IN SOCIETY

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ABSTRACT

We live in a world that has become increasingly interconnected and interdependent, and dealing with a pandemic in such an environment is extremely difficult. Systemic vulnerabilities and uncertainties pose a great danger to the ecosystem that we exist within. Turkey as a bridge country that connects continents, civilisations, economic zones and transportation routes carries a high risk of being infected by the global spread of a virus. Soon after the first case was diagnosed in Turkey, starting from April, general curfew was declared in major cities on the weekends and exclusively imposed for people under the age of 20 and over 65 every day for approximately three months.

'Coronavirus in Everyday Life Survey' was conducted among 3,000 people over 18 years old, between April 8 and April 12, aiming to understand how the Turkish society experienced this process, their reaction to the call to 'stay home', their daily life practices (such as sleep patterns, eating habits, and use of social media), and their positive and negative expectations of the near future. The study has prominent consequences for understanding and evaluating the public perception of the crisis in times of the pandemic in Turkey.

Keywords: Coronavirus, Daily Life, Habits, Society

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Introduction

The 21st century began with great expectations as the goals were set at the UN Millennium Summit in September 2000. The Millennium Development Goals were identified as eradicating extreme poverty and hunger, achieving universal primary education; promoting gender equality and empowering women; reducing child mortality; improving maternal health; combating HIV/AIDS, malaria and other diseases; ensuring environmental sustainability; and developing a global partnership for development (United Nations, 2000). However, the first global crisis of the millennium broke out in 2001 with a massive terrorist attack. September 11, 2001 was a day of unprecedented shock and suffering created by a series of al-Qaeda attacks that killed thousands of innocents, caused massive destruction, and had an adverse economic impact on the global scale.

The second global crisis of the century was the great economic recession that occurred between 2007 and 2009. The economic crash that was triggered by a combination of speculative activity in the Western financial markets, focusing particularly on property transactions, metamorphosed to the greatest disaster of the global economic system the world had ever witnessed since 1929. Although the epicentre of the collapse was the US at the beginning, eventually the impact spread around the world to both advanced and developing economies in a very short period of time. The path to global recovery was rugged, and the damage compelled the governments to adapt their policies to the new dynamics of global economy that hardly fits with liberalization strategies.

The third biggest global crisis of the 21st century started with the shocking footage from the city of Wuhan in China in January. On the 31st of December, 2019, Chinese authorities notified the World Health Organization (WHO) of an outbreak of a new disease, which was later named as COVID-19. Although at the beginning it was believed to remain a local problem like SARS that became an epidemic in 2003, it was soon understood that this new disease is the most serious health crisis the world has been facing since the Spanish flu in 1918 (WHO, 2020).

As Covid -19 disease emerged in a very crowded and high-tech city of China that is deeply interconnected with the global system, the speed of the pandemic's spread was extremely high. However, the response was two faced; on one side, hyper-modern, and on the other side, practically medieval. While the scientists were using cutting-edge tools to rapidly sequence the genome of the coronavirus, pass along information about its virulence, and collaborate on possible countermeasures and vaccines, all far quicker than could have been done before,

the only effective responses were to shut down society and economy, close the borders and isolate the ones who were infected (Walsh, 2020).

Contrary to what was hoped, the 21st century came with global political, economic, humanitarian and health crises. The first global crisis radically changed our perception of security, the second one altered our confidence in making money easily, and the third one seems to change how we live, work and relate to each other (Carnelos, 2020). And certainly overall, the economic, social, political and humanitarian cost of the pandemic was the worst of all.

Immediately after the first coronavirus case in Turkey, which was diagnosed in March 2020, all schools including the universities and most of the public spaces, such as mosques, gyms, hairdressers, cafes, and shopping malls were closed, and the measures were gradually expanded to all over the country. President Erdogan asked for a "voluntary quarantine" in which people were required to stay at home except for shopping or basic needs to stem a surge of coronavirus cases. (Toksabay and Gümrükçü, 2020). This call to 'stay home' was of much greater importance, especially in highly populated cities, specifically in Istanbul, as a metropolitan city with a population of 16 million could easily become a Wuhan-like epicentre without strict measures.

While the worldwide spread of the disease urged the governments to take some extra precautionary acts , Turkey joined the club and closed its borders. Airports were closed, travel restrictions were imposed, all national and international flights were cancelled, and people who came from abroad were quarantined for 14 days starting from February. According to a PEW Research Centre Analysis, due to pandemic, at least 91% of the world's population, or 7.1 billion people, lives in countries with restrictions on people arriving from other countries who are neither citizens nor residents, such as tourists, business travellers and new immigrants. Roughly 3 billion people, or 39%, live in countries with borders completely closed (Connor, 2020).

In March, April, and May, people in Turkey began experiencing the negative effects of not only the pandemic, but also the counter-pandemic policies in social, economic, and psychological terms. The implementation of nationwide lockdowns disrupted the daily lives of the general public, and had a profound impact on their social interactions. Therefore, this paper aims to understand the sociological characteristics of this period from the perspective of Turkish society.

Methodology

This study focuses on understanding how daily life has changed with pandemic in Turkey in the first months of Covid- 19 disease. Our basic hypothesis is that the pandemic causes new habits and positive or negative effects on society. We also wanted to make predictions about the new challenges and figure out different dynamics regarding cultural, political and sociological aspects with the results of the analysis. Online survey model and participant observation were used in this quantitative research. Besides, official websites and social media pages of news channels were investigated as an ethnographic field. The questions were prepared in March 2020, online questionnaires were sent to 3,000 people who live in 76 cities from all regions in Turkey between April 8 and 12, and the results were analysed and shared with the public between April 12 and 19. Demographic traits included gender, age, education, income, socio-economic status, family status and occupation. Sample size of the survey is 3000, and the margin of the error is 1,65%. The data of the survey were analysed using SPSS. The methodology was designed as correlational and descriptive research.

The Results of 'Coronavirus and Everyday Life Survey'

The very first question aims to focus on the discourse of 'staying home' and its problematic socio-economic background. When the quarantine began in almost every country and most parts of Turkey, the Turkish Ministry of Health tried to encourage people to stay home with the message "stay at home". As the purpose of this paper is to emphasize the significance of comprehending daily life and its necessities, when Turkish society's economic circumstances are taken into consideration, is it really applicable for everyone to stay home or not?

The first question of the study is "Are you in a situation that requires you to go out regularly?",and 65% of the participants stated that they have to go out due to work, health problems, family care, or general responsibilities. Although the call to stay home focuses on the health of the individuals in society, it seems that economic necessities can be more crucial than possible health issues. For instance, many people made stocks by going to supermarkets or shopping malls, especially during the first days of Covid-19, and this instinctive behaviour is related to the anxiety of society. On the other side, it is worth bearing in mind that being able to stock necessities is mostly about one's socio-economic level.

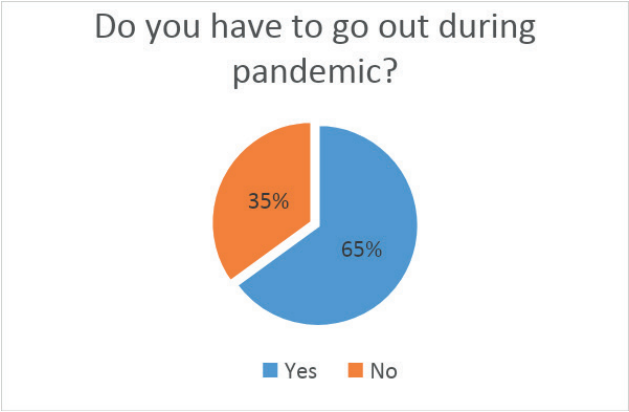

Table 1. Do people have to go out regularly or can they stay home every day?

People are aware of the disease transmission risk, yet still they have to continue working due to the fear of losing their jobs. Valentino- DeVries, Lu and Dances' research was published in The New York Times Magazine, and their data highlighted the difficulties of circumstances when people have different levels of incomes in metropolitan areas of America. It is generally agreed today that the decision of staying at home is a luxury (Valentino- DeVries, Lu, Dances, 2020).

What Has Changed in Our Daily Lives in the Times of Coronavirus?

Approximately 40 questions were asked in the survey to understand the changes in the daily lives of the participants after the coronavirus pandemic. The most prominent topics are changes in eating habits, sleep patterns, daily activities, and use of social media. The research also investigates the level of anxiety, and exactly 60% of the participants indicated they often have fears because of the uncertainty about the future. Besides, the study evaluates the activities we have done during the quarantine days, and what the meaning of 'social distance' was while being stuck inside. Social distance as a term is a controversial word, and even though we keep the distance physically, and we are isolated from each other, social solidarity has been more crucial than ever. As a human being, people need interaction, and they are socially dependent inherently. Thus, they have used social media, teleconferences or group messaging to maintain social infrastructure and their mental health. Lastly, the second part of the paper concentrates more on the positive and negative expectations of the post-corona world in Turkey.

a. The relationship between eating habits, age difference, and socio-economic class

'Days with Coronavirus in Turkey Study' shows that 56% of the participants stated that eating habits changed dramatically during the coronavirus period. This rate is 56% in participants under the age of 25; 60% for the ages between 26 and 35; 62% for the ages between 36 and 45. It is 54% for the ages between 46 and 55, and 33% in the participants over the age of 56. These changes are most commonly manifested as the irregularity of eating times (43%), consumption of more homemade food (36%), and eating more (35%).

Throughout the study, we observed that the participants over 55 years old are more careful about health issues and tried to stick to their usual daily routines. As informed above, people at 65 and over were prohibited from going out for more than three months. People who were 55 and older continued working and going out, but especially people in that age with chronic health issues behaved more carefully as senior adults are at higher risk. Moreover, since retirees in this age group spend more time at home, their daily life practices were not altered as much as those belonging to younger groups.

Sixty percent of the young participants identified that their daily eating patterns have indeed changed. The rates are higher for young people under the age of 25. For example, 49% of young people and students stated that irregularity in their eating times increased, 51% ate more home-cooked meals, and 44% ate more. Students who do not study at a school in their hometowns returned back to family houses right after the announcement of the first pandemic case in Turkey. After the news that schools would be closed for three weeks as of March 16, students formed long queues in bus terminals. This was a matter of concern in the media as it would increase the spread of the disease. When considered from an economic perspective, it was a wise solution for students to stay in family homes during this period. Living alone in a shared house or a dormitory could be challenging for students without support of their families during the quarantine comparatively.

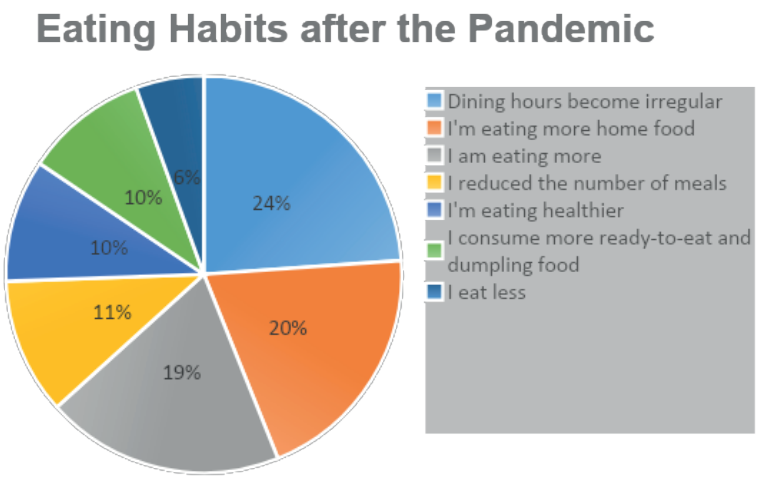

Table 2. Eating Habits after the Pandemic

Table 2 illustrates that some participants decreased the number of meals, ate healthier, ate less, or consumed more dumplings or convenience food. Besides, when the answers are examined in detail, the vast majority of those who claim to eat healthier belong to the middle and upper economic class, while the majority of those eating less belong to the low-income group. As in many parts of the world, including Turkey, coronavirus has caused a financial crisis, and the low-income masses have been affected more drastically. Coronavirus will emerge as a sociological phenomenon that reveals the gap of economic inequalities. Chartres says Covid- 19 hit the poorest people in developing countries, and he asks extensive questions for laying emphasis on the issues of global poorness and pandemic: 'What impact will COVID-19 have on global food and nutrition, and what are the implications for foreign aid budgets?' (Chartres, 2020)

Prior investigations about eating habits in pandemic mention the popularity of making bread as an activity. The consumption of pastries increased by 18% in adults and 30% in young people. Many people preferred to make bread at home for both hygienic reasons and being productive during the lockdown. "In March, searches for bread cooking on Google increased 100 times compared to the previous month while videos containing home bakery recipes on YouTube were viewed by more than 3 million people on YouTube." (McCarron, 2020) In addition, millions of people all over the world shared photos of the bread they baked using various hashtags on social media. Results provided by *Euronews* show that in the third week of the lockdown, flour sales increased by four times in Spain, two times in England, and 140% in France (Cereceda, 2020). The reason for the increase in the production and consumption of

baking goods, especially bread, should be explained not only by hygiene, but also by the effort to relax, to cope with stress, and to continue producing. "Baking bread during isolation is an activity the purposes of which are threefold: providing sustenance; filling newly available leisure time; and offering a way to demonstrate one's skill and activities on social media" (Easterbrook- Smith, 2020).

A survey was conducted with 3,533 people between the ages of 12 and 85 in Italy, 'The perception of weight gain was observed in 48.6% of the population, and 15% of respondents turned to farmers or organic food consumers, purchasing fruits and vegetables' (Renzo and Gualtieri, 2020). According to the research of Heinz Lohmann Foundation in Germany, "18% said that they had been cooking in a healthier way. For 70% of those polled, this meant eating more fresh vegetables and salad than before, and 48% talked of eating more vegetarian dishes. Some 38% said that they had baked more than before." (Deutsche Welle (DW), 2020)

Our research confirms that the time spent with family has increased, and people have eaten more home-cooked meals and snacks during this period. The survey made by BBC across the U.K. reaches a very similar conclusion. 'Changes in young people's eating habits, tracked during the lockdown in England, show both increases in snacking and families eating together' (Coughlan, 2020). According to the surveys provided by *Statistica*, people who live in the U.S.A. have consumed more home-cooked meals (47%), they've eaten less delivery food (28%) and more snacks (27%) (Conway, 2020).

b. Changes in Sleep Patterns and Covid-19

A hashtag with the word of 'can't sleep' has become a trend, and according to Parkview Report, 'insomnia' has been one of the most googled terms throughout the quarantine days, (Devanathan, 2020). Many studies have established a relationship between sleep patterns and coronavirus, and the most significant outcome of this relationship is anxiety. People's sleep patterns have been disrupted because of the changes in their daily routines, inability to cope with uncertainty, decreased physical movement due to lockdown, and eating at irregular hours; therefore, people began to feel tired and unhealthy all the time. Sleep Medicine Expert Devanathan demonstrates people are often asking some questions, such as 'What's going to happen next? What are we going to do? How are we going to deal with it? How's it going to affect our lives in the short and long term?' (Devanathan, 2020).

These concerns complement each other and direct us to figure out the paradox of insomnia after the pandemic. Sixty percent of the participants in our study remarked that their sleep patterns have changed. The highest rate belongs to the unemployed people (81%), employees

on leave (79%), students (75%) and home office workers (65%). People who did not work in this period didn't have to wake up early in the morning as they usually do. They also experience intensive anxiety due to economic ambiguity which is one of the main reasons of insomnia. Similarly, students' sleep patterns have changed as well. They didn't go to school during the pandemic and experienced great uncertainty about their future, but they spent a lot of time watching TV series, and used social media most of the day. Although home office workers woke up at about eight in the morning and started to work early, they indicated that their sleep patterns changed due to high anxiety, heavy workload, and late-night bedtime. Twenty-one percent of home office workers slept at midnight; 11% at 1 am; 13% stated that they slept at 2 am, and 12% at 3 am.

Our research shows average wake-up time was 8 am, and bedtime was midnight before the coronavirus. In the quarantine days, wake-up time was recorded as 8.30 am and bedtime as 1 am. It is a well- known fact that the biggest change occurred in young people. Young people and students woke up at 11 a.m. and slept at 2 a.m. Their concerns were not only about being in lockdown, yet,it is more related to having financial independence, being able to find a job or continuing to school during the pandemic.

According to Xiao and his team, who studied sleep quality in China in January and February 2020, 'levels of anxiety were significantly associated with the levels of stress, which negatively impacted self-efficacy and sleep quality' (Xiao and others, 2020). Xiao and his team tried to assess the relationship between social capital and sleep quality in self-isolated individuals. The data of the survey established that people who have contact with friends, family, co-workers, and organisations felt less anxiety during Covid-19 and had less sleeping disorders. The cause of anxiety is often unpredictable. The news of *Health Magazine* comments that coronavirus anxiety can lead to insomnia (Gillespie, 2020).

c. Daily Activities and Increased Use of Social Media

Millions of people stayed at home, whether mandatorily or willingly due to reasons mentioned above for almost three months. How they spend their time at home during pandemic bears significance for their body and mental health. Seventy-six percent of the participants say that they often spend time with their families. Different studies show that staying at home during the pandemic affects family relationships both positively and negatively. Has the relationship amongst family members affected positively? The study revealed that cooperation at home strengthens family relationships. On the other hand, Turkey also showed an increase in domestic violence against women such as many other countries in quarantine (Mert, 2020).

Since Covid-19 is an infectious disease that has no vaccine yet, people are more sensitive about hygiene. Wearing masks, washing hands frequently and consuming cleansing products such as disinfectants/colognes are the primary measures to prevent the disease from spreading. The second most common activity is house cleaning, and it increases in the age group between 36 and 55, unemployed people and housewives. Fifty-four percent of the participants affirmed that they do house cleaning very often, and 26% claimed to do it occasionally.

The third most common activity is social media usage with an increasing number in 54% of the participants in Turkey. The highest use of social media occurs in young people between the ages of 18 and 25, and adults over 56. Due to social distancing, people have had the need to communicate via social media accounts. According to the *New York Times*, usage of Facebook has increased by 27%, Netflix has increased by 16%, and YouTube by 15.3% (Koeze and Popper, 2020). On the other hand, business, education, and social life had to adapt to online systems instantly. The use of online meeting applications, such as Zoom, Google Hangouts, Skype, WebEx and FaceTime has become widespread across the world. The usage of Zoom increased 30 times in April, with more than 300 million daily users, and the transition from a free version to premium memberships increased three times (Sherman, 2020).

We asked participants how they spend their day, and their answers can be seen in the table below. People in Turkey have focused on family relationships, used social media, watched TV series/movies, cleaned up their homes, and baked. On the contrary, the least common activities were sleeping, reading books, and doing sports.

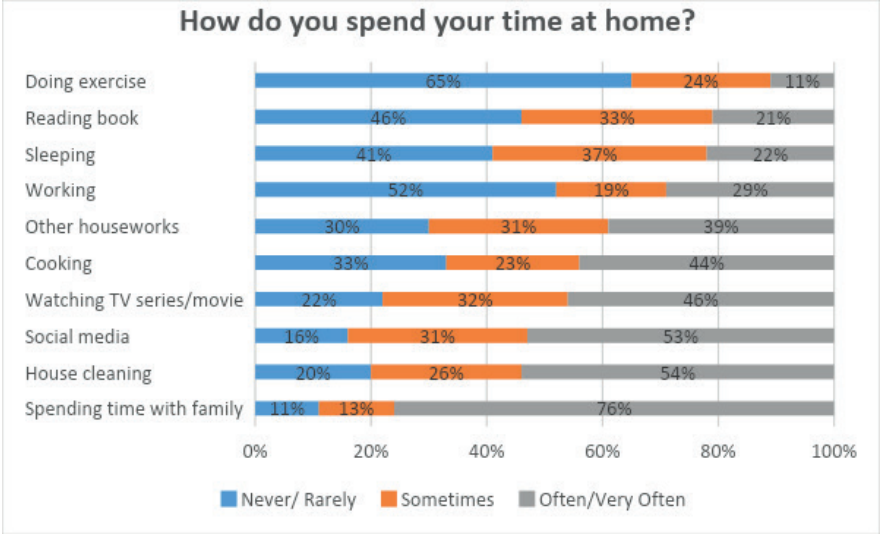

Table 3: How do you spend your time at home?

Young people (high school seniors and university students between the ages of 18 and 25) expressed that most common activities they did were spending time on social media (68%), watching TV series/movies (60%), helping with cleaning and chores (47%), and sleeping (40%). In March, the distance learning model was introduced in partnership with the Ministry of National Education, the Higher Education Council, universities, schools, and various education institutes. However, the rapid transition from face-to-face learning to online learning in addition to the lack of time to prepare the necessary infrastructure has caused some issues of adaptation for both students and teachers. According to our study, 41% of university students said that they participated in online classes, and 29% of them found it efficient. Whereas participation rate is 67%, and efficiency rate is 27% in high school students. The hybrid learning model combining online and traditional classrooms will soon become widespread. This learning model is crucial for especially students from other cities or abroad because of the visa issues and travel restrictions that might occur in the following semesters. Besides, considering the statistical data, efficiency seems to be a problem that universities and other schools should focus on while developing their online learning models.

d. Positive and Negative Expectations about Corona and the Post-Corona World

People from all around the world deeply felt anxiety. Uncertainty, losing jobs, economic crisis and being isolated from family and friends have caused many health problems in societies,which lead this pandemic to become an anxiety wave. The level of anxiety varies according to socio-economic class and level of educational. Sixty-eight percent of the participants with a high level of education feel anxious whereas this ratio is %64 in the level of elementary education and %48 in the level of primary education. Moreover, the number of participants who claim to be anxious is %65 in higher economic class; %58 in middle and %54 in lower economic classes. People with the highest level of anxiety are well-educated home office workers (74%) due to long working hours. Homes that became a place all for working, living, and socializing negatively affected their psychologies.

Scientific studies about the relationship between coronavirus and anxiety are being carried out by universities and various institutions worldwide. Uskudar University Epidemiologic Research Group conducted a survey with 6,318 participants, focusing on phobia and pandemic in Turkey (UU, 2020). The statistics show that uncertainty (50%) is the biggest reason of concern. In this study and that of ours, participants indicated that they feel more grateful for life than before and acknowledged the significance of things they possess. Besides, some of the important results of the corona phobia study include the increased value given to healthcare workers (82%) and the public opinion of government's control over the crisis (46%).

In these social circumstances surrounded with anxiety, understanding the normalisation period and subsequently post-corona world is as crucial as understanding the Coronavirus. Considering different pandemics like SARS and MERS spread in the 2000s, it is easy to see how global health issues will affect every aspect of life. Three thousand people participated in our study and contributed with their positive and negative expectations regarding the aftermath of the epidemic.

Seventy-eight percent of participants think the economy will deteriorate all around the world whereas 58% think that will be the case for Turkey's economy. We can observe the participants' concern on the uncertainties and negative developments in the economy considering the data retrieved. According to the news of *Anar*, "50% reported loss in their income, 36.2% stated increase in expenses, and 14.9% mentioned loss of jobs due to the pandemic." (Dokuz Sekiz News, 2020).

Sixty-five percent of the participants emphasize that public health and psychology will deteriorate during the post-corona period. Numerous reasons, such as social isolation, hygiene, constantly wearing masks, staying away from family and friends and lack of vaccination affect the psychology of society. The rate of people who believe that social isolation and current measures will weaken social relations among people is 34%. Last of all, the other topic participants affirm their negative expectations is politics. Twenty-seven percent of them expect deterioration in world politics whereas this ratio is%22 in Turkey's politics.

Given personal comments of the participants, there are positive expectations in health, climate, nature and spirituality outshine. Seventy-five percent of the respondents say that they have higher awareness of health. In the study, 70% of the participants expect that ties amongst family members will get stronger. This expectation was the highest in low income participants (82%). Some positive expectations about the post-corona world are:

- Global environmental care will increase (61%)
- Consciousness on environmental clean-up in Turkey will increase (46%)
- Healthy eating habits will increase (30%)
- Communication among friends will get stronger (22%)
- Turkey will have positive changes in terms of politics (10%)

Conclusions

Pandemics are large-scale outbreaks of infectious disease that have occurred throughout history and appear to be increasing in frequency in the near future. As the third global crisis of

the 21st century, Covid-19 has a much greater potential to cause devastating social, economic and political damages that may create longstanding and deep scars within the society than the other crises. Although the swift actions against the pandemics imposed by the Turkish governments have been effective so far, still there are a lot of uncertainties and unknowns, which have a negative impact on our daily lives.

Our study shows how the pandemic changed our behavioural routines and spread fear and anxiety among people across the country. According to our research it is evident that the decision to "stay" or "not stay at home" is not a personal choice, but mostly an indicator of people's socio-economic class. As many people have become unemployed during the lockdowns, and the economy was halted for months, economic concerns are becoming more salient. However, the impacts go beyond economic problems, influencing people's well-being, and creating an enormous negative pressure on both their social life and their mental health.

In the absence of a vaccine, the pandemic builds its new normal by transforming our daily lives and forcing people indoors. The survey shows us that more than half of the respondents have changed their eating habits. According to the data there is an increase of homemade recipes, and people used this new opportunity to improve their healthy cooking skills and eating together with the family. In fact, the ones who began to eat less during the pandemic are not on a diet, rather they are less paid workers or jobless people, and they lack money to pay for more food.

Like eating habits, sleeping patterns have also changed. According to the survey, 60% of the respondents confirmed that their optimal wake and sleep times are shifted more than 1 hour later. The adolescents and students are the most affected groups. Having spent more time on social media, house cleaning, watching TV since the outbreak of the pandemic are some other findings. As people have more time to spend at home, housework is more common for all ages. The survey, in general, shows us that the data are very similar with the surveys that were done in other countries. People under the suppression of global crises act in similar behavioural patterns.

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CHAPTER 4

"STAYING AT HOME": A RHYTHMANALYSIS OF SELF-QUARANTINE

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ABSTRACT

The pandemic has caused important transformations in our everyday lives. Home has lost its central feature of being a daily cyclical station, becoming the only place for self-quarantine. At this point, home life intertwined with that of work. This study aims to establish the experiences with rhythmic phenomena, which explains the effect of the social practices on everyday life of a 'house-academic' during self-quarantine. In this regard, I examine my autoethnographic experiences during my three-month self-quarantine period with the rhythmanalytical view of Lefebvre, which allows me to express the effect of practices on everyday lives. I suggest that autoethnographic writing will enable me to give a perspective on my life transformed by Covid-19, based on body, performance, and experience. Home has transformed into a pre-school in the morning and a university in the evening, just contrary to the way of living before the pandemic. It acquired a syncopated rhythmic order, from *arrhythmia* to *eurhythmia*, thus staging the transformation of the spatial experience. In these unprecedented times, guest practices such as homeschooling and distance education, becoming henceforth a part of our lives, have turned everyday life into a stage of new struggles.

Keywords: Autoethnography, Covid-19, Everyday Life, Home, Rhythmanalysis

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1. Introduction

"Staying at home" is a statement that evokes some kind of a pause and interruption in mobilization of everyday life. The most decisive aspect of the home as an opening-closing system is that it constitutes a border between the outside world and us with its doors, windows, curtains, and security. During the pandemic, home meant being protected against the invisible danger from outside. However, the pandemic is not just a danger outside of the house. It threatens our physical health, presence, inner peace, and also everyday activities. The Coronavirus is the new invisible enemy which cannot be inhibited by security systems. Thus, home has found a new expression in this process, especially for those who are in self-quarantine, as a space of escapism. In this sense, home has been defined as a protective space which made it possible for people to be not only physically, but also socially isolated.

The pandemic raised some inequalities within the society, especially through the "staying home" practices. According to Lefebvre (2010b), everyday life is a distinction and intersection zone between social groups (p. 54). Cyclical time and rhythms are completely dominant in everyday life of those under domination (p. 61) and divided unequally. Work-life determined who had the opportunity to stay at home. Moreover, bio-politically categorized people like elderly people and children had to stay at home due to the governmental regulations in Turkey. Thus, in the modern urban setting, different social groups were negatively affected by the pandemic.

The stressful work-life of healthcare professionals (Yarrow & Pagan, 2020); seasonal agricultural workers (Zırh et al., 2020); the discrimination against elderly people (Rahman& Jahan, 2020) and minorities (Pang, 2020); homelessness (Tsai & Wilson, 2020); the domestic violence (Williamson & Lombard & Brooks-Hay, 2020; Kay, 2020) are among the discussed topics in the literature related to pandemics. The studies also provide an insight into how women working-from-home were affected by this period (Alpar, 2020; Ceuterick, 2020). Ceuterick (2020) argues that the pandemic is a crisis of capitalism and patriarchy, which made gender inequalities visible (p. 1). The domestic space is transformed by gendered power relations reproduced by structural inequalities (Massey, 1994; 2000 and Rose, 1993, as cited in Ceuterick, 2020, p.2). The juxtaposition of working life and domestic labour presented the gendered use of domestic space during the pandemic (Ceuterick, 2020, p. 3). Similarly, Alpar (2020) underlines the double burden of women working-from-home during the pandemic. The responsibilities of women in the household include ensuring the education of children, taking care of family members, domestic chores, working-from-home and dealing with the organization of work (p. 182). Bozkurt (2020) also shows that women who work online from

home are more affected than their male counterparts. According to his research, the inability to receive external-paid-support for domestic work in self-quarantine increased the burden of women working online (p. 129).

I emphasize that focusing on lived experiences and practices of women will make it possible to have an insider perspective on power relations and gendered structures of everyday life reproduced by the pandemic. In this regard, various studies were conducted to analyze personal narratives (Boncori, 2020; Büyükbeşe, 2020; Guy & Arthur, 2020; Işıker Bedir, 2020; Sağır, 2020, Topçu & Fišo, 2020; Yaman, 2020). In fact, the researchers who dealt with the pandemic period academically were affected by this process also in their personal lives. The distance education practice of academics, which started with the pandemic, also necessitated the transition of work to the domestic sphere (Ceuterick, 2020). The rhythmic gesture of everyday life gained a new form and differentiated from the pre-pandemic period due to the transformation of work-life. Women academics were also negatively affected by this transformation because of the domestic responsibilities and the lack of support. As a matter of fact, there are debates on the fact that women could publish less than their male counterparts in this period (Viglione, 2020). As a result of the consequences that I faced in my everyday life, I think it is important to establish my lived experiences as a woman in academia in self-quarantine.

Autoethnography allows my personal experiences to turn into an object of rhythmanalysis, and also offers me the opportunity to put my own voice within the research (Bektaş Ata, 2016; Ettorre, 2005; Richard, 2016; Wall, 2006). In this study, based on the Rhythmanalysis of Lefebvre (2004), by the means of autoethnographic writing I problematize the transformation of everyday life and the role of new social practices in this period. Therefore, I focus on my three-month self-quarantine period. In this chapter, I address the following points: first, I explain the methodological perspective of my project, i.e. autoethnography; then I summarize my basic theoretical framework, Lefebvre's views on rhythm and everyday life, and finally, I introduce my personal narrative analytically within the scope of two main guest practices performed during self-quarantine: distance education and homeschooling.

2. Writing Own Experience: Autoethnography

Autoethnography is a qualitative method in which a researcher puts 'self' at the centre of the research. It reveals a multi-layered consciousness linking the personal to the cultural (Ellis & Bochner, 2000, p. 739) and refers to the combination of ethnography (society) and autobiography (self) (Reed-Danahay 1997, p. 2). In this regard, it is basically the ethnography

of personal life, concerning mainly autobiography, which "is a process of recreating, re-viewing and making sense of the biographic past" (Alexander, 1999, p. 309). Therefore, the researcher describes his/her personal experiences and establishes a relationship between the experiences and the social context in which s/he is located. Autoethnography, which is the methodology of expressing self and the "other", considers performance as a critical reflection of culture. Reflexivity of the experience as a specific cultural location includes a social and cultural critique (Alexander, 2005, p. 423). In this way, reflections and understandings are shared with others (Adams, Holman Jones, Ellis, 2015, p. 103). Everyday life performances are an important dimension of ethnography which enables the understanding of social interactions and experiences. In ethnographic research, the researcher problematizes his/her position through the observation of participation (self-reflection) in the field (Brettell, 1997). The dimension of ethnography that leads the observation and experience emerges in autoethnography through the life world of the researcher. An important aspect of autoethnography is that an autoethnographer is both the object and the subject of the analysis by acknowledging 'self' as a part of the society s/he lives in (Denzin, 2014).

On the other hand, autoethnographic writing has its limitations. The character of autoethnography that puts the researcher into the center is criticized for being "fiction" (Wallford, 2004, p. 411) because of the subjective ambiguity of the relationship between researcher and his/her research. In this context, the personal experience may undergo some deviations in autoethnographic writing as researchers' own interpretation of their memory. It is argued that this situation may carry the risk of "excessive comments". The idea that it has a solipsist side that has its roots in the self-reflection character of autoethnography (Ploder & Stadlbauer, 2013, p.381). It is also criticized that it may cause ethical problems as it also means disclosure of the researcher and his/her social environment (Mendez, 2013, p. 282-283; Delamont, 2009, p. 59). In this regard, a self-quarantine experience covering a period of 3 months brought along many psychological struggles. In this period, not leaving home and not socializing outside of digital media required an emotional challenge. Although it is necessary to include individual resistance mechanisms and self-reflexive reactions in the autoethnographic writing, focusing on guest practices as hierarchical privileged regulators of quarantine life made it difficult to mention the psychological processes during the self-quarantine. Furthermore, Delamont (2009) argues that autoethnography "focuses on people on the wrong side" (p. 59). That means, autoethnographers as privileged academics from a particular social milieu, make evaluations from their own perspective by centering their experiences (Ploder & Stadlbauer, 2013, p.382). It is necessary to consider the uniqueness

of the self-quarantine experience when variables, such as the size of the house, the presence of the study room, partner support, and the number of children are taken into account. The researcher's living standards, the specificity of the family structure and the expectations of work-life cannot be generalized to the experiences of all women who have various other conditions. In this context, this study should be considered as a woman's narrative, but it should be underlined that it does not claim to be the voice of all women's groups.

The main reason for the use of autoethnographic writing in this study is to include personal narrative, which enables the expression of social experiences, in the literature of pandemic and to take a look on the effects of this process on micro level. I consider autoethnography, in which the practice of performing culture is the expression of our everyday life, as critical praxis (Alexander, 1999, p. 307). The dual identity of autoethnographer as a "boundary-crosser" helps me to analyze the intertwining feature of the boundaries between the layered nature of the personal and social life (Reed-Danahay, 1997, p. 2). Instead of a methodology that separates my personal life and academic interests, I prefer, as a boundary-crosser, to intersect both by using autoethnographical methodology.

After giving my last lecture on Friday, March 13, I could not return to the campus as a lecturer. The distance education started after the suspension of formal education at the university. Since then, home has become the only site for social practices in the absence of social spaces (campus, school, library, park, cafe, etc.). My self-quarantine was exactly the intertwinement of work-life and personal life under the roof of domestic space. In this sense, I problematize my 3-month self-quarantine experience between 16th March and 14th June 2020.

My aim here is to deal with the rhythmic notion of everyday life during self-quarantine. Hence, in this study I conceptualize the distance education and homeschooling experiences as guest practices. I argue that these practices are performed within gendered time and space. Defining my position as a 'house-academic' (Ağca-Varoğlu, 2020) which refers to the intertwining gendered role of being a 'housewife' (Davis, 1983; Ferguson, 2020) and being an academic enables me to take a look at inequalities in domestic sphere. Being a house-academic is a new performative identity acquired by the academic working-from-home and striving for meeting the situated gendered expectations at home, which are historically, socially and politically constructed. Especially regarding the feminist epistemology debate (Brettell, 1997; Collins, 2003; Haraway, 2003; Harding 2020; Narayan, 2020; Nencel, 2014; Visweswaran, 2003), getting out of the male-dominated conceptions of writing and expressing the situated position of the experience can make it possible to problematize the gendered sense-making processes in everyday life and power relations in knowledge production. Autoethnography,

in this respect, offers an insider look at sense-making, which shows why everyday experience is important and transformative. It reveals how people make sense of their experience and practice (Adams, Holman Jones, Ellis, 2015, p. 27). At this point, autoethnography as a critical perspective allows me to examine the appearance of my everyday life in the pandemic by centering my own voice as a house-academic.

3. Theoretical Framework: Rhythms of Everyday Life

"rhythms – historical, but also everyday,
at the heart of the lived" (Lefebvre, 2004, 87)

In "Rhythmanalysis: Space, Time and Everyday Life" Lefebvre (2004) focuses on the rhythmic aspects of time and space, and suggests the method "Rhythmanalysis" for an understanding of everyday life. Lefebvre (2010b) claims that everyday life is a mixture of fields of work, family and leisure. The analyses of the interaction of those together might be essential to grasp the alienation in modern urban life. Work-life is shaped by particular time and space expectations of capitalist daily routines (p. 60). Quantitative time that penetrated into our social practices with the invention of the clock has become an important measure of everyday life. The time of everydayness, providing "the measure of the time of work" (Lefebvre, 2004, p. 73), determines our daily practices like eating, sleeping, family relationships, and leisure. For this reason, the analysis of everyday life shows the relationship of social time with the processes imposed by the socio-economic organization of product (Lefebvre, 2004, p. 73). According to Lefebvre (2004), the basic rhythms and cycles capture everyday life while the time of clocks (quantified time) imposes monotonous repetitions. However, the use of time has turned into a field of struggle. Natural rhythms change for technological or socio-economic reasons. For example, night, as well as day, has become a component of work-life in the pandemic. Quantified time is divided into fragments uniformly: transportation networks, various forms of work and leisure. Thus, "there is not time to do everything, but every 'doing' has its time." In the hierarchy of these fragments, work is still the reference point in the modern urban setting (p. 74).

Everyday life is a field of exchange, a stage of social rhythms. Rhythm is a tool for the analysis of everyday life that can be evaluated as the dimension of the interaction of localized time and temporalized space (Lefebvre, 2004, p. 89). So, it is important to think of space and time together as they have a dialectic relation. For Lefebvre, people reproduce the space that they live in. Repetitions are important for Lefebvre's rhythmanalysis because he suggests that everyday life is a set of repetitions. Only if a rhythmanalyst aims to understand

these repetitions, is it possible to discover everyday life? But it should not mean that the repetitions introduce "the same". The "difference" always brings out something novel (p. 6). In this context, Lefebvre describes two important factors that determine rhythms. These are "repetition" and "difference". Everyday life is the scene of the surprising differences of monotonous repetitions. There are two groups of repetitions: cyclical repetitions and linear repetitions. The cyclical repetitions come from nature like day and night, seasons etc. Linear repetitions are in social practice, especially work-related human actions. Cyclical repetitions continue for a while and start again naturally. Yet, the dialectical relationship between the cyclical and the linear sometimes causes confusion (p. 90).

Lefebvre (2004) demonstrates within his framework to analyze the rhythm of our experiences in space layered by the needs of modern capitalist urban life. He emphasizes that "everywhere where there is interaction between a place, a time and an expenditure of energy, there is rhythm" (p. 15). There are different categories of rhythms in everyday life like *polyrhythmia*, *eurhythmia*, *arrhythmia* (Lefebvre, 2004, p. 67-68.). The togetherness and combination of diverse rhythms are called *polyrhythmia*, while the polyrhythmic interaction between multiple rhythms without conflict is *eurhythmia* (Evans & Franklin, 2010, p. 177). Lefebvre (2004) emphasizes that the rhythms in the healthy body might be a good example, as multiple rhythms (such as heart rhythm, rhythm of organs) interact in the body and maintain a healthy body system. Besides these rhythms, *arrhythmia* introduces the conflict and incompatibility between multiple rhythms. In *arrhythmia*, synchronization breaks down and changes. This contradiction is, for example, a consequence and a precursor of the disease in the body and it is pathological. The *eurhythmia* of the body is replaced by an *arrhythmia* with this disorder (pp.67-68).

According to Lefebvre (2004), knowledge and experience of the body is the basis of the theory of rhythms (p. 67). In order "to grasp a rhythm it is necessary to have been grasped by it; one must let oneself go, give oneself over, abandon oneself to its duration." (Lefebvre, 2004, p. 27) At this point, the rhythmanalyst starts from his/her own body and then turns to outer rhythms, but s/he also learns them from his/her own body. It means that the body functions as a "metronome" (pp. 19-22). Rhythmanalyst should "'listen' to a house, a street, a town, as an audience listens to a symphony." (p. 22) In this way, s/he understands the interaction patterns of everyday life. Thus, in this study, I try to grasp the juxtaposing rhythms of home and work-life during self-quarantine to understand the contradictions and compromises in the everyday life. Rhythmanalysis gives me a framework in this study regarding the 'guest practices', which turned everydayness into a home-centred feature during the pandemic.

4. An Autoethnography of Staying at Home

"Everydayness lies in practices that weave contexts together;
only practices make it visible." (Sheringham, 2006, 360)

There was a great uncertainty at the beginning of the pandemic. My inability to predict when the unprecedented times would end caused the rhythm of my daily routines to inordinate. At the first step, I was informed that there was a three-week break. It was not possible to adapt to this situation immediately. From the second week on, I started to think about how to manage this crisis. Before the pandemic, I had given my students ethnographic homework where they should describe everyday life interaction in lived space after visiting public spaces, like tea-houses, mosques, cafes etc. However, due to the physical distancing, I had to revise their task and asked them to write an autoethnographic essay in which they would express their experiences regarding the spatial-temporal changes in their everyday lives.

My self-quarantine has started with the suspension of education. Thus, I assumed the same responsibility as my students, and started my autoethnographic research on my self-quarantine experience as a house-academic. Listening to the rhythm of our bodies is very important during this pandemic period. Detection of any arrhythmic condition is vital. It becomes more important whom we met with or which streets we visited. Listening to our body also means listening to the outside world. The easiest way to manage this process was to "stay at home". With the sudden transformation of everyday life, home has become the only place to socialize and it has lost its edge of the daily circle.

According to Goffman (1956), everyday life is a stage of social interactions, like a theatre. In everyday life, actors perform different roles, which are socially defined expectations followed by a person with a given status or social position. Audience expects the actor to perform the role appropriate to his/her social status. While in self-quarantine, it was obligatory to perform my different roles at home. Thus, being a house-academic means an inappropriate intertwining of home and work-life to me. I was to keep on my 'housewife' role while also giving online lectures. This new identity, which is a combination of practices of being a housewife and an academic, was a house-academic identity. In this context, the pandemic is a process where the performances that should take place in different social spaces are performed on the same stage, that is, at home. This situation caused some problems in the differentiation of regions, which are the front region as the performance area of me (the actor) and the back region where I can be like myself and which I aim to keep hidden from the audience (Goffman, 1956, p. 70). With the transition to online education, my work-life incorporated its

own rhythm into my private space, home. The rhythm of the work-life was now interwoven with the rhythm of our home. I was confused between my responsibilities as an academic and my chores as a 'housewife'. For this reason, it was not always easy to properly fulfil the performances expected of my role. To prevent these problems, it was necessary to use various impression control techniques. The suitable stage for the performances that were brought by the changing roles was achieved by using the rooms of the house (kitchen, study room, hall) for different purposes. The temporal schedule is also arranged in such a way that the front (academic) and back stages (house) do not affect each other.

The situation we found ourselves in made it necessary to face the difficulties of home-centred life. Thus, the decisive power of the work-life showed itself in our daily rhythm. According to Lefebvre (2010a), relationships with the family and leisure are the activities that are used in the remaining time from work. He describes this situation as a "vicious circle" in which "we work to earn our leisure, and leisure has only one meaning: to get away from work." (p.46) In self-quarantine, the interwoven spatial-temporal experience made it impossible to stay out of the work-life. The boundaries have become blurred when the professional roles infiltrated into home, i.e. my former non-work area. This situation caused a syncopated appearance in everyday life. Lefebvre (1971) differentiated the time of everyday life in the modern society into three categories: "pledged time (professional work), free time (leisure) and compulsive time (the various demands other than work such as transport, official formalities, etc.)" (p.53). The self-quarantine time-schedules that organized the daily circle became inexplicable and interfered with each other.

Through the homogenization of the space, the rhythm of the "others" also entered my personal life, and the emotional meaning of the home space turned into a semi-rational function. As Lefebvre (2004) argues, the practical and social life finds expression through how the rhythm of the self and the other is determined (p. 99). The new organization of everyday life required to reconsider exchanges, struggles, roles, and responsibilities. Everyday life was interrupted for a while and then it gained its own mediocrity. This period brought a hierarchical construction of social practices, whereby it could be possible to maintain the rhythmic continuity of home-centred private and work-life.

Social practices, which "are made up of rhythms" (Lefebvre, 1991, p. 206), are constitutive elements that reproduce everyday life. Social practices transform spatial-temporal rhythms of nature (p. 117) and also address social interactions, tendencies, and social structure. Our practices reveal the quality of everyday life, namely work-related human actions in quantified fragments (the measure of time). At this point, I categorize these practices into two groups,

which are visible in my experience field as a house-academic. The first of these is domestic practices, and the other is guest practices that draw attention with their specificity to the pandemic period. Domestic practices are like cooking, childcare, cleaning, etc. that I have internalized throughout socialization and reperform in gendered space. As the time passed by, these practices became more difficult to deal with in self-quarantine. Lefebvre (2004) states that it is possible to approach gender by considering the use of time and social rhythms (pp.74-75). In this context, rhythm analysis of self-quarantine can give an idea about the everydayness of white-collar women working-from-home. The 'guest practices' that I conceptualize in this study, are specific to the pandemic period such as homeschooling and distance education. They will disappear from our lives to a great extent with the normalization of the post-pandemic period.

Home, work, and leisure activities were interwoven in the pandemic and presented a layered time-space. However, I suggest that the guest practices served as a regulator of the *arrhythmia* of everyday life at home. Although home is the stage of various guest practices in self-quarantine, I will evaluate two practices that I have classified as 'regulatory guest practices' in this study. The first of these guest practices is homeschooling, and the other is distance education. Their common feature is that they are (or have to be) hierarchically prominent in the rhythmic order of my everyday life. In addition, they contain a solid relation to work-life and include especially a work-related repetition order.

Because of the suspension of school activities all over the country, home turned into a kind of education site. Before the pandemic, the kindergarten was the most important station in the everyday life of my son. During self-quarantine, we had to carry out his education at home to keep his learning process on the track. At the same time, all of my responsibilities as a house-academic (domestic practices and guest practices) were an important part of the daily schedule. The home was the only space of these practices from kindergarten to university. The encounter with these practices caused an '*arrhythmia'*. The daily function of different social rhythms without conflict required to establish '*eurhythmia*'. My son, my students, and I got involved in natural rhythms of our bodies, emotions, and work-related social practices in the cyclical and linear repetitions, which "interfere with one another constantly." (Lefebvre, 2004, p. 8) Before the pandemic, this compliance had been reproduced by repeating the daily cycle through spatial differentiation (home, school, workplace etc.) in *polyrhytmia* of urban rhythms. However, it was now obligatory to reuse home space; reorganize calendars, programs, and to harmonize the practices with our rhythms and also everyday life.

4.1. Homeschooling

This study describes homeschooling as the situation in which children receive education under the guidance of their families at home. Although the pedagogical significance of preschool education is often emphasized, kindergarten is also of great importance for the participation of parents - especially for the emancipation of women - in working life. Kindergarten, which is one of the daily stations of a child, functions as a supporting institution. At this point, it would not be wrong to say that the child's everyday life outside the home is regulated by working life. This means that a child participates in the daily cycle in relation to the parent's 'pledged and compulsive time', which represents work-life according to Lefebvre (1971) and is opposed to 'free time'. In this context, the child is positioned within the modern urban rhythm as an extension of the working parents.

Before the pandemic, I used to take my son to school at 8.30 a.m. every day and pick him up at 5 pm. The children have their own natural rhythms (sleep, hunger etc.), which are 'educated' by social life (Lefebvre, 2004, p. 43) There, in the 'conceived space' (Lefebvre, 1991), my son was with the educators who planned his whole day on his behalf. According to Lefebvre (2004), children mostly reject being altered by rhythms of dressage and disciplining their body in the rhythmic order that requires many years (p. 75). In this sense, the school is a place where the child's discipline and compliance to the quantified pledged use are provided. While Lefebvre emphasizes the importance of repetition in education, he also underlines the role of rhythms in disciplining the body. Certain rhythmic movements and repetitions are important dimensions of the body and mental training (dressage) (pp. 38-46). Thereby, it is possible to grasp the importance of daily routines in school for the modern capitalist urban life. Routine is a predetermined action pattern that is seen during the performance and will perhaps be displayed or played in other situations (Goffman, 1956, p. 8-9). Performing these routines at home during self-quarantine caused a challenge. Because -as mentioned before- school is one of the social spaces not only to discipline the body, but also one of the main elements to organize everyday life.

In self-quarantine, we had to explore homeschooling with my son, which forced us to schedule the whole day. After waking up in the early morning, we went to kitchen to prepare breakfast and started to go through our daily program, which had already been determined by his teachers at school. Hence, we struggled to adapt ourselves to the external social rhythms at home. Homeschooling was one of the most challenging elements of the spatial-temporal transformation and an important dimension of self-quarantine. Home was reproduced through social needs and practices, and some regulations were required in the quantified time. In this

sense, as a house-academic, I was adopting the duties assumed, for example, by the cooks in the kindergarten or at the university. Thus, I was spending more time in the kitchen as a gendered space. Family meetings in the kitchen were a meaningful indicator of the end of the daily cycle before the pandemic. It was the space of reunion time for the whole family. The kitchen was not only a meeting space for dinner after a long day any more. But it also became a space where gender roles were reproduced through compelling circumstances.

Repetitions towards breakfast, homeschooling, and lunch afterwards required the use of the quantified time in a similar way as before the pandemic. At this point, home presented a micro reflection of everyday life centered around the pledged time, free time and compulsive time. Family activities (watching a movie at the cinema, going shopping, travelling at the weekend, meeting with friends) were no longer 'leisure' framed by the work-related boundaries. Family time or leisure was not only in the evenings during weekdays or a day at weekends. It became a part of homeschooling during the week.

New schedules brought by this situation emerged as a difficulty of organizing home life. Our bodies had to keep biological and social time in line with the rhythm of a six-year-old and to realize the repetitions and differences required by that rhythm. After the first month of self-quarantine, we experienced a break with the work-related arrangement of the quantified time. Now the days of the week were the same. In the use of time-space, the needs were determined, not the cyclical repetitions like days or hours. In the pre-pandemic period, arriving to class in the morning session and then ending the lecture in lunchtime was entailing following the daily fragments (quantified organization of work-life). However, the mood of my son during the day, the physical and mental needs of the household, chores at home, or homeschooling practices were decisive for the new organization.

4.2. Distance Education

The day presented fragments that were important for the rhythm of the child's body. In the mornings, the intertwining practices of mine and my son caused *arrhythmia*. After my first week in self-quarantine, I discovered that night served as the most appropriate working-time for being an academic. The use of night for work-life was an important dimension of the transformation of my daily cycle. *Arrhythmia* was also regulated in this way. According to Lefebvre (2004), the night is a cyclical repetition, in which rhythms slow down, and sounds can be captured. Night is the remaining time from work, it is short and alike. It offers a temporality associated with home or leisure. But during self-quarantine what is left from the day was compressed into the night. Night gained a new rhythmic feature where the daily rhythm was not interrupted and flowed without any interruption. Distance education lectures

and academic meetings were the guest practices of the night. Cyclical repetitions (like day and night) were outlined by linear rhythms of the guest practices. Therefore, the formal office hours were changed and transferred to the night.

Distance education during the self-quarantine period had three important sides. One of these sides is the lecturer, that is me, the other is the participants, and the last one is the virtual space, which was my only interaction space with my students. As the exchange of repetitions and differences with the social practices of our lives are very important, the rhythmic harmony of all sides would determine the efficiency of distance education and also quality of this new everyday life practice.

We started our lectures at 9 p.m .due to my circumstances and those of the participants. Our meeting schedule offered a suitable temporality in which the participants, mostly female students, had completed their gendered repetitive daily practices before the session. But after a while, we had to revise our schedule with the arrival of Ramadan, which is the fasting month for Muslims. Due to the intense religious rituals practiced in Ramadan, the rhythm of everyday life turns into a new characteristic. The rhythm slows partially down during the day till *iftar* (fasting break) with sunset and then, the social rhythm gains momentum again. The dialectic of cyclical and linear rhythms becomes visible through religious rituals (*iftar*, *sahur*, *tarawih* prayer etc.) that require the reorganization of everyday life in Ramadan, which is also a cyclical repetition as a sacred month for everyday lived Islam. Thus, social acceptance of the religious rite often alters bureaucratic mind. In this sense, Ramadan fasting affects the speed and usage of "pledged time". Thus, we scheduled our online sessions according to the fasting cycle, which is an important ritual in the lives of my students and then, we started our lectures at night, after the fasting ceremonies ended.

The silence of the night offered a suitable meeting condition for us. But it was also important for me to organize our sessions in accordance with the schedule of the online communication system, which I shared with my colleagues from the department. At this point, the organization of the lectures on virtual space as the third side of distance education was a new practice for me and my students. So, when I had to do one of my online lectures in the afternoon, the participation was very low because of the disharmony between the daily rhythm of the female students and our virtual space sessions. The reason for the limited number of participants in the online lectures was mainly everyday life responsibilities of the students, like taking care of family members and guests, doing household chores, or doing farm work etc. This gendered temporality caused *arrhythmia* in their everyday lives. This situation gives us the opportunity to have an idea of gendered time as well as gendered space.

The fact that the virtual social space, which is determined by planners and schedules, was the only opportunity for social interaction during self-quarantine has brought out different dimensions. In this regard, it could be valid to establish virtual social space as a conceived space. According to Lefebvre (1991), the relation of a person to space includes his/her relation to the body (p. 40). Virtual space disciplines the body and draws the boundaries of our interactions. It is an important example that during the online lectures, we had to stand still to avoid leaving the camera's viewpoint. During these sessions, mental activities accelerated, and physical activities slowed down. The virtual space was chaordic through rhythms of the body and mind. Besides, it became the stage of rhythmic disorders with the interruptions in communication caused by the internet outage. Therefore, some disadvantaged students could not attend the online lectures due to the lack of technological tools. Cyclical repetitions such as seasonal transitions, rain, and wind have also had an effect on our education practice through internet outages. At that point, I argue that the differentiation of space (center and periphery dichotomy) in modern urban planning was rebuilt in virtual space by intersecting inequalities.

5. Conclusion

The pandemic has affected our lives at different levels. With the concept of physical distancing everyday interactions and our relation to social space have changed. Home has lost its meaning as a start and end point of the daily cycle of urban life. It gained a new meaning as the only place in our everyday lives during self- quarantine. Home is described as a space of escapism, which became the only site of both work and family life. In this way we experienced the transition of the work-life into the private space and the boundaries between differentiated time-space and roles concerning performances were now blurred. In this study I examined my 3-month self-quarantine in regard to dealing with the rhythmic aspect of everyday life of Lefebvre (2004). The rhythm as a tool enables to analyze the transformation of everyday temporal structures and social practices (Edensor, 2010). Everyday rhythms emerge at the intersection of social practices in different categories. In this chapter, I defined distance education and homeschooling that got involved into my house-academic life with the pandemic as guest practices.

Distance education being the practice of the night, and homeschooling being the practice of the day organized the home space as guest practices. They regulated rhythmic disruption (*arrhythmia*) occurred at the beginning of self-quarantine. These practices shaped everyday life, and they were spatially organized around the kitchen and the living room (as

the kindergarten) and the study (as the university). Quantified repetitions of time and linear repetitions of our social practices have found their own rhythm in the interaction of time and space. These practices have demonstrated a regulatory power. This exchange is inevitable in everyday life. In this regard, the home space has been reorganized with its work-related meanings, and it has been reproduced with its polyrhythmic features, in which rhythms affect each other (Edensor, 2010, p. 14). Even though it was complicated to have *eurhythmia* at the beginning, the spatial-temporal organization of our practices presented a "syncopated rhythm with polyrhythmic assemblage of everyday life" (Conlon, 2010, p. 14). Guest practices and domestic practices mutually grasp the "dynamic co-existence and impact of the multiple beats" (p. 73) that transform home space during pandemic.

Gender roles came into the question through my experiences as a house-academic in self-quarantine. Motherhood is one of the key dimensions of these practices, which was embodied through homeschooling, and the distance education schedule was rebuilt by gendered time and space and reproduced power relations. Before the suspension of activities at the university, the campus life was offering, especially for my female students, an opportunity to organize their daily routines partly by the means of their educational responsibilities, not patriarchal structures. Due to the lack of campus access, the gendered temporality caused *arrhythmia* in their lives as well as mine.

The rhythm of everyday life, which divides cyclical repetitions into fragments, is disrupted during self-quarantine. The modern people have a technique and ideology of "relaxation" (Lefebvre, 2010a, p. 39). This requires free time out of work and family, away from tension. Leisure should look like a break from everyday life. The boundaries between weekend and workday have become blurry in self-quarantine, especially when one of my distance education classes was on Saturday. That Saturday evening was no longer a special time reserved for a family activity and leisure, yet it became a part of work-life. At this point, the work-centered urban life manifested itself through reorganization of home space. The self-quarantine situation staged the exchange of dualities such as day and night, kitchen and study room. Now, everyday life excludes the world of leisure not only ideologically, but also compulsorily with the effect of the pandemic. My self-quarantine period, when the pledged time and the free time were interwoven, also presented the trialectics of work, family, and leisure. At this point, the home presented a variety of social practices unlike its position in the modern urban life of the pre-pandemic period.

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CHAPTER 5

PYSCHOSOCIAL EFFECTS OF THE COVID-19 PANDEMIC

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ABSTRACT

The Coronavirus Disease (COVID-19) pandemic was declared a global health emergency by the World Health Organization (WHO) in January 2020. As the case in previous pandemics, COVID-19 has had significant adverse social, psychological and economic effects on people across the globe. The purpose of this chapter is to consider the psychosocial impact of COVID-19 on society resulting from lifestyle changes, including social isolation due to lockdown, social distancing, and the wearing of masks, as well as behavioural changes, including alterations in shopping habits, remote working, and distance education. We provide a literature review utilising previous scientific research and various media tools. On the basis of this review, we argue that the new conditions have resulted in many different adverse psychosocial effects, including anxiety, stress, obsessive behaviours, depression, loneliness, stigmatisation, and hoarding, although individuals experience these effects to varying degrees. Implications for their amelioration and directions for future research are outlined.

Keywords: Pandemic, COVID-19, psychosocial, anxiety, depression, mental health

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1. Introduction

The novel Coronavirus Disease (COVID-19) pandemic was first seen in the Chinese city of Wuhan. It was reported to the WHO in December of 2019 who declared a global health emergency in January 2020 (WHO, 2020a) as the virus is highly contagious (Pan, Zhang, & Pan, 2020). When infected, individuals sneeze or cough, and the virus is released into the air in droplets which can directly impact the face of a host. Otherwise, it is transmitted after healthy individuals have touched contaminated surfaces with their hands and then touched their face (especially their eyes, nose, and mouth) before washing their hands (Stankovska, Memedi, & Dimitrovski, 2020). When precautions are not taken or not correctly followed, COVID-19 infections, which may produce asymptomatic cases, increase rapidly. It seems that COVID-19 infectivity takes place 1-2 days before the symptoms begin to appear (Sarı, Hoşbul, & Şahiner, 2020). At the beginning of 2020, the disease began to spread rapidly around the globe. At the time of writing, there were over 138 million cases and over one million of deaths (WHO, 2020b)

Around the globe, measures have been implemented to prevent the spread of COVID-19 (Cirrincione et al., 2020). In Europe, most notably in Italy, Spain, Germany, France, and the UK, not only were the physical facilities of schools, universities, and various public facilities closed to prevent the spread of infection, but also entire cities and regions (and in some cases entire countries) were placed under strict lockdown or curfew (Kwok, Lai, Wei, Wong, & Tang, 2020). Given these circumstances, it is clear that the pandemic has affected individuals and societies not only in terms of health but also lifestyle, education, work, social activities and consumer habits; and it has significantly impacted contact with loved ones including those who are hospitalised and even dying.

From a psychosocial perspective, other important issues affecting people and societies include emerging uncertainty, helplessness, loneliness, anxiety, stress, depression, and stigmatisation - although some positive concepts, such as resilience and altruism, also enter the picture (WHO, 2020c). Adherence to government measures and the maintenance of a positive state of mind among the population affects the spread of the disease (Aslan, 2020). In the light of this information, we decided to review the existing literature on the psychosocial impacts of the COVID-19 pandemic. In the first part of this chapter, we discuss pandemics and precautions. In the second part, we discuss the psychosocial effects of outbreaks more generally. In the last part, we discuss the psychosocial effects of COVID-19 on the general population as well as on people with different demographic characteristics (age, gender, occupation, personality).

2. Pandemics and Precautions

The general definition of a pandemic is an outbreak of a disease that spreads across multiple countries or continents, thus becoming a global phenomenon. According to the definition of the WHO, certain criteria are needed to define a pandemic: (1) the disease is a new virus; (2) it spreads around the world; and (3) most people do not have immunity (WHO, 2010). Throughout history, many pandemics and epidemics have been recorded, including: acute haemorrhagic conjunctivitis (AHC), Human Immunodeficiency Virus (HIV), dengue fever, Severe Acute Respiratory Syndrome (SARS), Middle East Respiratory Syndrome (MERS), and influenza of Spanish (1918) and Asian (1957) (Kilbourne, 2006; Morens, Folkers, & Fauci, 2009).

In order to prevent or curb a rapid spread of infection, many countries have taken a variety of measures encompassing different aspects of life. Such measures involve public health officials, entailing among other initiatives: conducting of tests for the disease, the monitoring of infected individuals and their environments (including quarantine and self-quarantining), and contact tracing. Some other important preventative measures include wearing masks in certain areas, social distancing, the imposition of curfews or lockdowns (including restrictions on certain age or risk groups), and limitations on health services offered at hospitals and clinics. However, many important preventative measures – and arguably, the ones that have impacted people's lives the most – have been implemented outside the realm of healthcare. Measures affecting social and economic life include: special arrangements concerning supermarkets, restaurants, and shopping centres; the closing of entertainment venues, such as cinemas, theatres, and concert halls; the cancellation or postponement of sports events; the halting of religious services and activities; and the substitution of distance/remote learning at schools and universities. There have also been restrictions of transportation, the most extreme of which is the closing of hard borders between countries as well as softer ones between regions within countries – this has been extended to restrictions on movement between cities within countries and on the proscribed use of public transport (ECDC, 2020; Sarı et al., 2020).

3. Psychosocial Impacts of Pandemics

The psychosocial perspective is used primarily to explain the effects of social structures on individual characteristics (Şahan, 2016**)**. As a social concern, pandemics or epidemics affects people not only physically but also psychosocially. It is still too early to say for sure what will be long-term consequences of the COVID-19 pandemic on global mental health. Researchers worldwide are conducting many studies to provide the information necessary

to help overcome the psychological consequences of the pandemics (Holmes et al., 2020). For this purpose, experiences from previous pandemics and epidemics can inform us about the adverse effects the pandemic may have for mental health, stigmatisation, altruism and hoarding, both in short and long term

Mortality rates vary greatly by country. Moreover, at this time, Spanish influenza is the largest known pandemic in human history (Aşkın, Bozkurt, & Zeybek, 2020). According to the results of the study conducted in Saudi Arabia on MERS (Batawi et al., 2019) it is reasonable to assume that mental issues will last a long time after the end of the pandemic. For instance, because of the self-isolation measures during epidemics of MERS in 2015, 7.6% of participants experienced elevated levels of anxiety, and 16.6% felt anger. Four to six months after the self-isolation, 3% remained anxious, and 6.4% felt aggressive (Jeong et al., 2016). In another study conducted in Hong Kong during the SARS epidemic, it was found that individuals' mental health deteriorated, and they felt high levels of helplessness, terror and anxiety. In addition, some of these individuals (16%) had post-traumatic symptoms, and a significant portion (40%) was reported to perceive increased stress in the family or work environment after the pandemic (Aşkın et al., 2020). In addition, stigmatisation is a public health problem that needs to be tackled as an external stressor with the potential to do as much harm as depression and other mental symptoms (Tuncay, Koyuncu, & Özel, 2020).

According to research conducted on health workers during the same epidemic, it was found that they were stigmatised, excluded and rejected in their neighbourhood due to their hospital work, and 9% stated that they were reluctant to return to work or had an idea to quit. In addition, health workers became anxious and felt less able to deal effectively with the problems they encountered. Moreover, according to a study conducted with nurses during the MERS pandemic, high levels of anxiety, decreased endurance, and fear of stigmatisation was found (Aşkın et al., 2020; Pan et al., 2020). Additionally, it has been demonstrated that, in case of perception of a higher risk of the virus, increased symptoms of anxiety and depression are linked to the personality trait of altruism. Specifically, when it comes to health care workers, because perceptions may affect the relation between stressful events and their psychological impact, altruism seems to protect them against the negative impacts of the outbreak (Wu et al., 2009).

One behaviour that is often observed during a pandemic and may represent zero-sum thinking, as opposed to altruism, is hoarding – it can be described as an unnecessary accumulation of consumer products. Hoarding may reflect emotional attachment or impulsiveness, as hoarders usually associate high levels of perceived risk (such as during a

pandemic, natural disaster, or a period of political or economic uncertainty) with the possibility of product deprivation. It may include the fear of being unable to obtain food, medicine, and other essential items, as well as uncertainty regarding the availability of products in the future. As a result, significant shortages have occurred (Kumar & Nayar, 2020; Sobirova, 2020). One example of such hoarding was observed during the Avian Influenza, in which many people purchased large amounts of food, disinfectant, and the antiviral medicine oseltamivir. Another example was during an outbreak of flu in Hong Kong in 1968, in which a shortage of medicines emerged due to the public buying up supplies, along with rioting and looting of restaurants and grocery stores (Taylor, 2019).

4. The Psychosocial Effects of COVID 19

4.1. Mental Health

One of the important social issues is that pandemics affect people psychologically. According to the WHO's Interim Guidance (2020c) on *Mental health and psychosocial support aspects of the COVID-19 response*, there are some specific issues and stressors for this outbreak, such as: uncertainty, helplessness, fear of getting sick and dying (for oneself and/or one's family members); fear of job loss, fear of losing one's livelihood, loss of social contacts and loneliness, anxiety, anger, stress, depression; and the stigmatisation of those who have recovered from the illness or who are thought to have been exposed to it, including frontline health workers and other essential workers. On the other hand, some individuals have experienced positive effects, including the satisfaction derived from helping others and increased resilience (IFRC, 2020). Moreover, the WHO Department of Mental Health and Substance Use made recommendations in order to improve well-being via psychosocial support, targeted at the general population, healthcare workers, team leaders and managers in healthcare facilities, childcare workers, older adults, people with underlying health conditions and those who look after them, and people in isolation (WHO, 2020a).

According to available data, depression, anxiety, and PTSD are the most common psychological responses to the COVID-19 pandemic (Vindegaard & Benros, 2020). Most of the studies have assessed anxiety and depression due to their high comorbidity (Gorman, 1996) – however, at the time of writing this chapter, there are relatively few empirical studies along these lines. Those that exist indicate that pandemics have a robust negative effect on mental health over the globe. For instance, Rajkumar's (2020) review article estimated that from 16 - 28% of participants reported the presence of the symptoms of anxiety and depression during the pandemic.

Depending on the characteristics of samples and from country to country, these estimates vary. For example, a study conducted in the USA reported much higher estimates of depression and anxiety symptoms (Liu, Zhang, Wong, Hyun, & Hahm,2020). More severe signs of depression are found in individuals suspected to be positive on COVID-19 (Nguyen et al., 2020) and health workers (Pappa et al., 2020; Rehman et al., 2020). One in five healthcare workers is experiencing symptoms of anxiety and depression, while around 40% of them have trouble with sleeping. Some studies indicate that females (Sønderskov, Dinesen, Santini, & Østergaard, 2020) and individuals younger than 35 years of age experience more psychological difficulties (Huang & Zhao, 2020). Similar results were obtained in Australia (Stanton et al., 2020), USA (Rosenberg, Luetke, Hensel, Kianersi, & Herbenick, 2020) and Italy (Casagrande, Favieri, Tambelli, & Forte, 2020).

The effects of the pandemic on mental health seem to depend on the age of participants, but these data are still inconclusive. For instance, people older than 65 in Northern Spain reported fewer mental health issues (Gorrochategi, Munitis, Santamaria, & Etxebarria, 2020), even though Spain is one of the most affected countries. On the contrary, the same age population in the UK reported more concerns for their health (Shevlin et al., 2020a). We must await further data to conclude whether these differences are the result of the impact of the culture or the specific circumstances experienced by different countries. In addition to age, pregnant women have an especially stressful time during pandemics (Moyer, Compton, Kaselitz, & Muzik, 2020). According to such studies, it seems that all countries that have employed lockdown will face a higher level of mental health issues because of the lack of social support (evoked by reduced mobility during the lockdown) which serves to increase levels of anxiety and depression (Kong et al., 2020).

The extent of these mental health issues is shown by one of the most extensive studies conducted in the UK regarding the effects of COVID-19 pandemic on mental health. It was reported that roughly 25% of respondents had symptoms of anxiety and above 30% symptoms of depression during the lockdown (Fancourt, Steptoe, & Bu, 2020). As this study was conducted on several occasions, the authors were able to monitor temporal changes in mood over time. Results revealed that trajectories of depression and anxiety indicated a slow recovery a few weeks after the lockdown - the improvement was much more gradual for respondents with a prior history of mental illness. Another two-wave study assessing the changes in depression before and after the quarantine was conducted in Italy on university students (Meda et al., 2020): consistent with the UK study, an increase in scores on the Beck's Depression Inventory was reported.

An additional problem of increased anxiety due to COVID-19 is the rise of somatic symptoms (Shevlin et al., 2020b). For example, many countries are trying to prevent the spread of the coronavirus among healthcare staff. Accordingly, there have been dramatic consequences of the collapse of the health system in Italy and in other countries (e.g., the UK) resulting in many hospitals not being able to provide health care for less critically acute cases, including detection and treatment cancer - it is reported that many more lives will be lost to this lack of medical provision. There have also been reported that people are less inclined to seek medical help even for serious conditions, such as heart attack. A large number of citizens with somatic complaints who cannot get the required medical attention may experience anxiety as a result (Asmundson & Taylor, 2020). This is accompanied by the rise of cyberchondria, which is a tendency to self-diagnose and treat using internet resources (Jungmann & Witthöft, 2020). As this self-practice tends to produce a high level of false alarms, it increases the already heightened level of anxiety and, possibly, depression.

Many issues are yet to be studied. Researchers and mental health professionals are concerned by the occurrence of the PTSD in COVID-19 survivors (Sękowski et al., 2020) and citizens after the pandemic (Dutheil, Mondillon, & Navel, 2020). Indeed, we are already witnessing the increase of PTSD symptoms related to quarantine (Fawaz & Samaha, 2020; Rossi et al., 2020).

Another issue is the rise of the prevalence of domestic violence. Aggression seems particularly dangerous in the case of a lockdown. People with weak self-control capacities and emotional instability are prone to expressing violence to their intimate partners during lockdown – heightened tension and close proximity interact to increase the probability of violence. When locked-down with an abuser, the victim is much more likely to develop mental issues, including posttraumatic stress disorder (PTSD), depression and anxiety, and these may lead to suicide. However, empirical studies on this specific topic have yet to be published. It is also of interest to speculate that the negative psychological state of the world's population and the invisible nature of COVID-19 have resulted in a redirection of fear, anger and outrage in the form of social unrest and protest – a speculation that needs empirical attention.

To sum up, the following months and years will be very challenging for mental health professionals worldwide since it is not only the medical aspects of the current pandemic that elevate the level of anxiety. Added to this is the resulting economic crises, amongst other things, increased unemployment and financial strain. These economic effects are bound to add to the significant negative impact on mental health (Bareket-Bojmel, Shahar, & Margalit, 2020).

So, what can be done? Having professionally-administered individual treatments is not feasible , so mental health resources must be oriented towards finding short, effective and easy-to-implement mental health interventions. Fortunately, some preliminary studies have already reported promising results, showing that self-guided therapeutic approaches, such as cognitive-behavioural, mindfulness, and acceptance-based interventions and similar interventions, have mild-to-moderate effects on the improvement of mental health (Fischer et al., 2020) - as these authors stated, such techniques are not efficient as traditional one-on-one therapy conducted with a certificated psychotherapist, but if nothing else, they can be used by a large number of citizens and, thereby, their combined effects may be considerable.

4.2. Stigmatisation

During the current pandemic, individuals with COVID-19 may experience stigmatisation from their social circles or neighbours. Stigma is manifested in terms of fear, suspicion, judgment, accusations, avoidance, refusal to communicate, and other exclusionary behaviour (Tuncay et al., 2020). Many other studies have shown that healthy people tend to avoid and stigmatise those who have been infected. In fact, not only those who have been infected by the disease but also their families and friends, as well as healthcare workers, are vulnerable to stigmatisation due to real or perceived exposure to the disease in question (Mak et al., 2009; Taylor, 2019). In order to avoid stigmatisation, people may conceal their health status and, even, delay seeking medical help. This outcome leads to a reduction in early detection and treatment and results in increased spread of the disease (Dubey et al., 2020); thus, stigma is not only a social problem but a medical one too. WHO (2020a) has made recommendations in *Mental health and psychosocial considerations during the COVID-19 outbreak* report with regard to combatting stigmatisation. For example, they suggest that diagnosed people should not be referred to as "COVID-19 cases", "victims", "COVID-19 families" or "the diseased"; instead, they should be referred to as "people who have COVID-19", "people who are being treated for COVID-19", or "people who are recovering from COVID-19". Whether this changed use of language has any positive effect is yet to be seen.

It is also important to note that there is a connection between the stigma surrounding COVID-19 and racist behaviour. Especially at the beginning of the pandemics, members of the countries where the virus originated were facing stigmatisation worldwide due to their ethnic and/or racial background (Karataş, 2020). Such actions can lead to further mental health issue and, even, social unrest which which can result in a failure to socially distance and, in this way, contributes to the further spread of the virus.

4.3. Altruism and Hoarding

During a pandemic, due to extraordinary conditions and feelings of frustration, socially-destructive behaviours are prone to occur. However, positive attitudes and behaviours appear to be more prevalent (Taylor, 2019). One of them is altruism. This can be described as "unselfish regard for the welfare of others" (Feng et al., 2020). Some of the attitudes and behaviours, such as being vaccinated (Taylor, 2019) once a vaccine is found, wearing masks, and staying in quarantine, are connected to altruism. In the first stage of the pandemic, people discussed whether or not everyone needed to wear a face mask and what type of masks were most effective. However, at the beginning of June, 2020, the WHO recommended that everyone wear masks in public places.

According to Cheng, Lam and Leung (2020), the wearing of masks by the entire population is both a useful and low-cost measure, shifts the focus from self-protection to altruism in terms of considering other people's health, and is a demonstration of social solidarity in the global reaction to the pandemic. Another measure that can be taken is reminding the public of the benefits of quarantine for society at large, which may appeal to their more altruistic inclinations and result in greater compliance (Brooks et al., 2020). Moreover, self-isolation and voluntary quarantine should be supported by giving necessary information about minimising distress and long-term adverse effects of imposed quarantine (Dubey et al., 2020). On the other hand, altruism during pandemics may affect people's mental health negatively since altruistic individuals may be more anxious for patients and feel more helplessness due to being unable to help those who have been infected (Feng et al., 2020).

During the COVID-19 outbreak, hoarding also occurred due to fear of losing the current standard of living (Sobirova, 2020). Yet, the hoarding of vaccines, masks, and sanitizers for self-protection is counterproductive, because if other people cannot access these products, the risk of further infection will only increase (Van Bavel et al., 2020). This situation requires altruism and social solidarity at the national and international level. Far too little is known about possible individual differences in hoarding behaviour. It would be a valuable target for future research.

4.4. Psychosocial Effects on People with Different Demographic Characteristics

The COVID-19 outbreak has different psychosocial impacts on society. However, these impacts can be seen differently according to demographic factors such as age, gender, occupation, and so on. For instance, the impact is greatest on women, health care workers, other frontline workers such as custodians, individuals getting relatively low social support,

individuals who are aged 50 or older and have chronic health problems such as weakened immune system, disease lung or heart, diabetes, and cancer patients are more vulnerable to infection (Jecker, Wightman, & Diekema, 2020; Stankovska et al, 2020; Tuncay et al., 2020). Additionally, because of isolation, child abuse, partner violence and suicide increase (Otu, Charles, & Yaya, 2020); and when children and their parents in quarantine are compared with those not quarantined, there is a rise in posttraumatic stress symptoms (Sprang & Silman, 2013).

When the negative impact is evaluated in terms of jobs, it is seen that one of the most vulnerable occupations is health care workers. They have job-related stressors: high risk of infection, disease or death; overwork, fatigue and burn-out due to long work hours; and exposure to the death of patients, including children and the inability to save some of the patients despite their best efforts. At the same time, they experience threats of violence from patients or their relatives. Besides external factors, they have to separate from family and loved ones because of the possibility of inadvertingly infecting them (Taylor, 2019). It would be surprising if these stressors did not cause anxiety, depression, insomnia, somatisation and obsessive-compulsive symptoms and the evidence shows that, indeed, they do (Zhang et al., 2020).

5. Personality and Public-Health Communications

Lastly, we look at the involvement of personality and how best to use behavioural science to communicate effective health-related messages. This is a very relevant psychological angle with considerable practical implications.

The first appearance of the unknown virus raised huge health concerns in the population. As such, increased fear and anxiety resulted in conflicted and cautious behaviour and a higher rate of acceptance of the lockdown as a strategy to fight pandemics. Over time, the economic situation and mental health issues are being perceived, at least by some people, as more dangerous than the pandemic itself. Therefore, during this pandemic, it is important to adjust public health messages in order to maintain disciplined behaviour aimed at decreasing the spread of the virus.

Although fear has been related to the higher level of health compliance (Harper, Satchell, Fido, & Latzman, 2020; Pakpour & Griffiths, 2020), it also contributes to a higher level of distress and lower mental health in general. For this reason, health messages must be designed in such a way as to produce better health compliance while at the same time not adding to

existing levels of fear, anxiety and depression. A few studies have suggested that compliance can be achieved by promoting more proactive or positive goals. For example, Bacon and Corr (2020a) found that approach motivation, specifically the Reward Reactivity tendencies (i.e. measure of how strongly one is experiencing the reward), alongside fear-related tendencies, are important in accounting for compliance. In their follow-up study, Bacon and Corr (2020b) reported a role for Goal-Drive Persistence scale (a measure of persistence to accomplish long-term goals) in the prediction of health compliance. A comparable finding was also reported by Žuro, Krupić, and Krupić, (2020), where the effect of these two approach measures on health compliance was replicated with different measures and in a different culture. These findings suggest that it would be more effective (and/or less costly) if the public health messages were reframed to evoke approach motivation and behaviour, and this is quite separate from any role for avoidance motivation.

6. Conclusion

Preventive measures are crucial to curtail the spread of COVID-19, as well as to lessen the resulting damage of social, political, and economic conditions – these are likely to affect more people than the virus directly. While the current pandemic has caused uncertainty, helplessness, and fear of falling ill and dying (for oneself and/or family members), the measures taken by the authorities to prevent the spread of infection have had a significant psychological impact. Curfews, lockdowns, quarantines, self-isolation, and social distancing, have all contributed to feelings of the loss of independence, challenges within the family, fear of losing one's job and livelihood, loss of social contacts, and loneliness, and these feelings have contributed to anxiety, anger, stress, and depression. In addition, many people have been stigmatised: those who have recovered from the illness or who are thought to have been exposed to it, and healthcare workers and frontline workers (cashiers, security workers, caregivers, etc.). Another behavioural change is the need to wash one's hands or use hand disinfectant frequently, and this has contributed to the formation of obsessive-compulsive behaviours which may last long after the pandemic subsides.

At the same time, there are also positive aspects which may be associated with the pandemic. For instance, when people wear masks, they not only considering their own health but also the health of others, in particular those people who belong to risk groups. Another example is the decision on the part of shoppers not to hoard items during the crisis, but to buy only what they need. However, we need to bear in mind that all psychosocial impacts affect people differentially. Determining the psychosocial effects of the pandemic would assist

psychologists and psychiatrists in determining appropriate forms of psychological treatment and/or intervention; and here individual differences in personality should not be ignored – differences between people in their habitual ways they think, feel, and behave are relevant.

Our review has some limitations that need to be acknowledged. We discussed short-term psychosocial effects of the current pandemic, such as anxiety, stress, depression, and so on; however, we are not yet able to observe the longer-term effects, such as the development of posttraumatic stress disorder or obsessive behaviours that persist after the present medical emergency. Another limitation is that the psychosocial effects of the pandemic may vary depending on the specific country's perceptions of the pandemic and measures taken locally as much as demographic characteristics, such as age, gender, and occupation. Country-wide and regional differences are likely to be relevant, yet our study has not focussed on them. Major factors of personality are suspected to either moderate or mediate stressors associated with Covid-19, and this seems especially important knowledge when designing public health interventions and information campaigns.

With a sustained research effort, much more will be known about the psychosocial impacts of COVID-19 and we shall be in a better position to help those who have been most affected. We are still, very much, at the start of this research journey.

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CHAPTER 6

SOCIOLOGY OF CORONAVIRUS CONSPIRACIES IN TURKEY: WHO BELIEVES AND WHY?

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ABSTRACT

The aim of this paper is to explore the demographic, political, and religious determinants of the coronavirus related conspiracy beliefs in Turkey. It also measures the relationship between the trust in science, political and religious authorities, and conspiracy endorsement. In a national survey (NTotal = 5538), we asked the participants three conspiracy questions and saw significant differences in all predictors that we identified. We saw that the housewives, youths, females, those living in rural areas and small towns, unemployed or less educated people were more prone to believe in coronavirus conspiracies. We also found that political identities, religious commitments, and trust in science were strongly associated with conspiracy endorsements. In comparison to their counterparts, the rightists, conservatives, and/or religious respondents were seen to endorse more the theory that the virus is a conspiracy. Further, as expected, there was a negative correlation between trust in science and conspiracy thinking. We also saw that people who believe a coronavirus conspiracy mostly believed two other conspiracies too, namely that conspiracy belief is an outcome of a general mindset.

Keywords: COVID-19, Conspiracy Theories, Pandemic, Turkey

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1. Introduction

The roots of the conspiracy theories can probably be traced back to prehistoric times when humans began living in communities. They provide a comfortable, and occasionally very reasonable, ground to explain the past, as well as to make sense of the present and to predict the future; albeit mostly being anachronic for the former and being misdirecting for the latter both. The conspiracy theories (and people who are attracted to them) can, therefore, be encountered in every sphere of life, from politics to sports, science, religion, and health. The pandemic diseases, potentially more dangerous for humanity, are unfortunately no exception to this.

As in Ebola or AIDS experiences in the recent past, in the coronavirus pandemic too, various conspiracy theories have begun to be released across the world, in simultaneous with the emergence of the outbreak (Freeman et al, 2020). In the USA (Mitchell and Oliphent, 2020), the UK (Dearden, 2020), and probably elsewhere too, a considerable amount of people with different ethnicity, religion, education, occupations do not trust scientific evidence or official explanations, but rather prefer to believe that the virus did not come out naturally, but was developed in a laboratory in China, perhaps as a bioweapon (Imhoff and Lamberty, 2020).

So, who are the believers of conspiracy theories and what motivates people to believe in conspiracy theories? Though being a cross-cultural reality, conspiracy theories are not endorsed by the greater parts of societies, but rather by people with a certain individual or social characteristic. A vast body of the literature concentrates on the psychological factors and cognitive abilities to explain why people believe in conspiracy theories (see, Douglas et al, 2017; Goreis and Voracek, 2019). However, in addition to personal differences, believing in conspiracy theories reflects a sociological reality since the endorsement of such thinking is more observed in specific parts of societies, such as marginalised groups, minorities, politically and religiously extremists, and most notably people with low education and income levels (see, Uscinski and Parent, 2014;van Prooijen, 2018).

In this chapter, we deal with this question and investigate the sociological predictors of conspiracy theories associated with the recent coronavirus outbreak in Turkey. To provide a meaningful explanation of which layers of society interpret the coronavirus process by associating it with conspiracy theories, we analyse the survey that we conducted with a large group of participants from different cities of the country, and with different occupations, political ideologies, education, age, and welfare levels. Considering the current literature, we would expect that the endorsement of conspiracy theories are more likely to be more common

among individuals with lower levels of education and income, higher anxieties about the pandemics, and radical political ideologies.

2. Contextualising Conspiracy Theories: What, Who and Why

A conspiracy theory can be identified as an attempt to explain an extraordinary social event in a different way from its formal explanation; as if they are actualised by a small group of people with a secret mission. (Keely, 1999). They are generally fed by uncertainties, lack of evidence, or unsatisfactory official information about any sensational event; or more often mistrust to public institutions may be the source of the conspiracy theories (van Prooijen, 2018). In such situations, beyond causing disinformation, conspiracy theories create an alternative reality that replaces the real reasons for the event that they provide an explanation for. What the conspiracy theory provides, the explanation may sometimes be an assassination (McCauley and Jacques, 1979; McHoskey, 1995; Enders and Smallpage, 2018), a terrorist attack (e.g. September 11, Goldberg, 2004; Jamil and Rousseau, 2011), or even a historical development (e.g. Moon landing, Swami et al, 2013).

The belief in conspiracy theories is also often reflected in people's perceptions of environmental changes (e.g. climate change, Douglas and Sutton, 2015; Uscinski et al, 2017), medical issues (e.g. birth control or vaccination, see Featherstone et al, 2019), and global pandemic diseases such as HIV (e.g. Nattrass, 2012) and more recently COVID-19 (Freeman et al, 2020; Imhoff and Lamberty, 2020). However, in such cases, denial of scientific explanations for the sake of conspiracies may bear more dangerous consequences for the believers as conspiracy beliefs may impact the behaviours and choices about healthcare issues. Indeed, as revealed in the relevant literature, in comparison to non-believers, people endorsing conspiracy theories are more reluctant to get vaccinated (Jolley and Douglas, 2014), treated (Ball et al., 2013), or prevented measures (Bogart and Thorburn, 2005; Grebe and Nattrass, 2012).

Research on believers of conspiracy theories shows that individuals who believe in a conspiracy theory are also prone to believe in other conspiracy theories, with or without there is a compatibility between them (e.g. Goertzel, 1994; Dyrendal, 2020). This implies that there may be specific factors making some individuals be more prone to believe in conspiracy theories. In much research, this tendency is explained with references to psychological and mental factors (Douglas et al, 2017). Although the results may show some differences on local grounds depending on the research scales and the qualification of the data analysed, the widely accepted argument is that conspiracy mentality is closely associated with at least one

of the following drivers; less analytical thinking ability (Swami et al, 2014), being prone to violence/crime (Jolley et al, 2019), narcissism (Cichocka et al, 2016), high level of anxiety (Grzesiak-Feldman, 2013), psychopathy (March and Springer, 2019), delusional thinking style (Dagnall et al, 2015),

Nevertheless, the psychological conditions of individuals are not the only predictors of conspiracy mentality; their social status and preferences may also cause them to believe in conspiracies (van Prooijen and Douglas, 2018). Put differently, looking through a sociological lens, people tending to explain events by attributing them to conspiracies are often observed to share some common social, political, economic, and demographic characteristics (Goertzel, 1994; Uscisnksi and Parent, 2014; Drochon, 2018). The education level, for example, is one of the key drivers of believing (or not) conspiracy theories (Georgiou et al, 2019). The current literature has revealed that individuals with lower education more tend to endorse conspiracy theories, but conspiracy thinking shows a decrease as the education level increases (van Prooijen, 2017; Mancosu et al, 2017). Likewise, such kind of misinformation finds more buyers among the people with lower household income (Douglas et al 2015; Freeman and Bentall, 2017), but those who earn higher wages and/or who work in the sectors that need higher educational qualifications are less likely to endorse conspiracy theories (Uscinski and Parent, 2014).

Further, the endorsement of conspiracy beliefs is generally more common among minorities, religious groups, and other disadvantaged social groups than those across society. For example, individuals with high religious beliefs or those who identify themselves as conservatives/traditionalists have been observed to have a stronger tendency of conspiracy thinking (e.g. Galliford and Furnham, 2017; Mancosu et al., 2017), but nevertheless, this may vary depending on different factors (Jasinskaja-Lahti and Jetten, 2019). This endorsement, however, may be generalised for the sub-cultural groups combining their religious identities with a collective group identity (Mashuri and Zaduqisti, 2014), especially for marginal religious groups (e.g. Newheiser et al., 2011). Likewise, ethnic minorities are observed to be more likely to believe the conspiracy theories compared to the dominant cultural groups (e.g. Freeman and Bentall, 2017). The popularity of conspiracy theories among individuals belonging to a minority group, or subculture, generally varies depending on their positions in the society, which is the level of social exclusion, and on their perceptions of whether the matter on which the conspiracy theory is produced is about themselves (van Prooijen and Douglas, 2018).

From another aspect, political identities, ideologies, and worldviews are among the factors shaping whether individuals believe in conspiracy theories or not (e.g. Pasek et al, 2015). Existing literature, for example, proposes that there is a connection between partisanship and

belief in conspiracy theories (Miller et al, 2016). Partisan individuals often tend to believe conspiracy theories about political events and to think that the opposite groups (e.g. media, secret organizations, and more often a political party) conspire against themselves (Oliver and Wood, 2014; Smallpage et al, 2017, Karp et al, 2018). This tendency is generally more common among the supporters of the opposition parties (e.g. Edelson, 2017). Further, the conspiracy mindset is much stronger at the extreme sides of the political spectrum (van Prooijen et al, 2015), notably in the far-right (Forchtner, 2019).

In short, conspiracist misinformation can be applied to explain a myriad of events, from politics to scientific facts, to diseases, to terrorist attacks, and individuals can hold these theories with various motivations. The general academic tendency to explain why people endorse such theories is to concentrate on personal differences, which is looking at the psychological and cognitive attributions of individuals. However, a recently flourishing research body underlines that conspiracy mentality is existent in certain strata of society, not the whole. They are seen as less educated, more radical, low-income people, often assumed to be more prone to conspiracy theories.

3. Research Questions

This paper intends to make a sociological analysis of coronavirus related conspiracy beliefs in Turkey. It will examine how demographic factors (gender, age, education, profession, and place of residence), political identities, and religious commitments have an impact on belief in conspiracy theories.

To this end, we asked three following questions exploring the coronavirus conspiracies:

- Q1: Do you think that COVID-19 a conspiracy of the great powers?
- Q2: How do you think COVID-19 has occurred?
- Q3: Do you think the vaccine for the virus has been found and is being knowingly hidden?

4. Data

To find satisfactory answers to our research questions, we employed data gathered from a large national online survey, titled as the Social Impacts of COVID-19, conducted by Prof. Veysel Bozkurt between the 17th and 20th of April, 2020. A total of 5700 individuals agreed to participate in the survey on a voluntary basis. After those who answered less than 10% of the questions were excluded, 5538 questionnaires were assessed in total.

Data, collected by the convenient sample method, does not represent the whole population in Turkey. The vast majority of respondents (92.3%) have a university or higher education (including students) degree, and 93.5 % live in cities, and in income level, the sample is representative in middle and upper-middle classes. However, in terms of the other predictors such as age, gender, political identities, and religious involvement, the sample was balanced.

5. Results

Conspiracy theories find many buyers around the world, especially in times of crisis, and this doubtlessly covers Turkey, too. In simultaneous with the appearance of COVID-19 in China, conspiracy theories have rapidly begun to be circulated in conventional and social media apparatuses in Turkey. Our research has demonstrated that people who are prone to believe in conspiracy theories about coronavirus are not a small, marginal minority that can be tolerated given the entire society. Quite the contrary, what we have seen was that a considerable number of individuals with different age, gender, education, or political backgrounds who participated in our survey gave positive answers to our questions examining coronavirus conspiracies.

For example, as illustrated in Table 1, approximately one-third of all participants (34%) have thought that coronavirus is a conspiracy organised by the great powers (e.g. China, Israel, the USA or Bill Gates) against them. Interestingly, in the other question (Question-2) about the way coronavirus appeared, the rate of believing in conspiracy arguments was significantly higher. About 41 % of the respondents did not believe that coronavirus disease occurred naturally, but rather thought it was made in a laboratory. The difference made us think that although they cannot directly point out the perpetrator, many more people believe that coronavirus was produced for a purpose so that it is associated with a conspiracy.

Table 1. The Conspiracy theories about the origins of the Covid-19 Pandemic

	Do you think that COVID-19 is a conspiracy of great powers?		**How do you think COVID-19 has emerged?**	
	Yes	No	Natural ways	I believe it was produced in a lab
Frequency	1733	3365	3098	2154
Valid Percent (%)	34	66	59	41

Another question addressing coronavirus conspiracies was about whether the virus vaccine was found. The number of people who believed that the vaccine was found, but hiding was significantly lesser than that< of those believing the other two Covid-19 related conspiracies.

As demonstrated in Table 2, 27.8% of the participants stated that they think the vaccine might be knowingly hidden. This difference could be explained with the fact that the survey was conducted in the early days that the pandemic began to appear in Turkey.

It is widely argued in the literature that conspiracy believing is a reflection of a general conspiracy mindset, and people believing a conspiracy theory are most likely to believe in other conspiracy theories (Source). As expected, in this research too, there was a strong correlation between three distinct conspiracy beliefs. The participants who perceived coronavirus as the conspiracy of the great powers also believed that the virus was human-made (r =68, n=5054, p=000), and the vaccine for the virus has been found and is being knowingly hidden (r =42, n=5056, p=000).

Table 2. Do you think the vaccine for the virus has been found and is being knowingly hidden?

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	No	3795	71.1	71.9	71.9
	Yes	1482	27.8	28.1	100.0
	Total	5277	98.9	100.0	

To understand the individual-scale determinants of believing in the coronavirus related conspiracies, we filtered and analysed the data with different indicators. Our results, first of all, revealed the gender, age, education differences were quite significant in believing in the coronavirus conspiracies. Firstly, we saw that the youth, in comparison to the elders, more approve of conspiracy theories. For example, while young people under the age of 24 were the most supportive of the thought that Covid-19 is a conspiracy, the least supporters of this idea were participants above the age of 55 (x^2 [4] 20.869, $p < .000$). For the Question-2, 24-45 age group was significantly higher than the others, but the 55+ individuals were still the least part among those who believe the virus was produced in a lab (x^2 [4] 12.070, $p < .017$). The results for the Question-3 were the same, too (x^2 [4] 20,180, $p < .000$).

At the gender level, females were seen to be more prone to accept conspiracist arguments than males. While 28.3% of the male participants believed that coronavirus is the conspiracy of the Great Powers, this rate increased 10 points in females and raised to 38,3% (x^2 [1] 55,075, $p < .000$). The gender-based differentiation was also valid in the other two conspiracy-related questions (Question-2, x^2 [1] 55,075, $p <.000$; Question-2, x^2 [1] 5,274, $p <.022$). Further, in line with our predictions, there was a meaningful negative correlation between education and conspiracy believing. Whereas almost half of the participants with secondary and lower education degrees stated coronavirus might be a conspiracy, at the graduate and

postgraduate level, this thought fell under 35% (x^2 [1] 13,788, p < .000). Likewise, 50% of high-school graduates and of those having lower education levels believe that the virus did not emerge inherently, but was made in a laboratory. However, among the participants with higher education degrees, the support for this theory fell to 40.3%, which was lower than the previous group, but nevertheless points to a high rate of belief in the overall context (x^2 [1] 14,431, p <.000).

When we analysed the tendency to believe in conspiracies according to the profession, we have observed that housewives and unemployed individuals are more prone to supporting conspiracy theses about coronavirus than the private sector employees and retirees. In our survey, almost half of the housewives (46%) and one-third of the unemployed (37%) agreed to the arguments that coronavirus might be a conspiracy. However, though meaningfully less than this group, coronavirus conspiracies could be said to be considerably approved among private-sector employees (31%) and retired participants (31%), too. From a different aspect, it was seen that the differences in the welfare levels are a significant determinant of conspiracy thinking. Whereas 44% of the participants in the lowest-income level gave the answer to our conspiracy related questions as yes, this rate fell under 30% in the highest-income group (x^2 [4] 25,320, p <.000).

Interestingly, where the participants live was also observed to cause a significant change in conspiracy mentality. Our survey revealed that the participants living in rural areas and towns are more supportive of coronavirus conspiracies than those living in metropolitan cities. For example, while 32% of the participants living in metropolitan cities answered Question-1 as yes, this raised to 44% in those living in villages and towns (x^2 [3] 25,707, p <.000). Similarly, the belief that the vaccine is found, but hiding was significantly higher in the second group participants than the first group (x^2 [3] 25,707, p <.016).

We have also explored whether political and religious belonging makes an impact on supporting conspiracy theories. Our findings were compatible with the relevant literature arguing that there is a positive correlation between political-religious involvement and believing in conspiracies. For example, we saw that there is a higher tendency to explain the pandemic with the conspiracy theories among those who said that their religious commitment (r = 212) and trusts in the state (r = 122) increased after Covid-19. In the opposite way, the statement of those who expressed that their trust in science increased after pandemic (r=-,136) shows a strong tendency to support the scientific theses and to reject conspiracist thinking.

In terms of political ideology, leftists were seen more sceptics of the conspiracies about

coronavirus than the others. Among those who defined themselves as leftists, the thought that coronavirus was a conspiracy was well below the general average with 25%, however, in centrists (35%) and rightists (42%), the support to coronavirus conspiracies were seen to be considerably higher (x^2 [2] 96,989, $p < .000$). A similar difference between right and left sides of the political spectrum was measured in the second question, too. The argument that the coronavirus was produced in a lab was supported by only 32% of the leftists, but 50% of the rightists (x^2 [2] 107,895, $p <.000$).

Based on our findings, we could say that religious involvement is a stronger determinant in believing these sorts of misbeliefs than the political ideology. Whereas those who don't have faith /believe or are sceptics approached the conspiracies with more sceptically (15%), those having faith but not practice it (35%) and those having faith and practice it (41%) were in a more tendency to believe in these theories (x^2 [2] 181,719, $p <.000$). Our data also revealed that so long as the religiousness increases, the support for the theses that coronavirus was produced in a lab (x^2 [2] 193,590, $p < .000$) and that the vaccine was hidden also increased (x^2 [2] 78,836, $p < .000$).

6. Discussion and Conclusion

Conspiracy theories never disappear, always exist, but they flourish especially in times of crisis and uncertainties. They easily capture people as they provide a comfortable ground to explain the things of which causes/effects are not known or their explanations cannot persuade the community. In our research, we found that conspiracy believers, unfortunately, were not a minor part of the society. Conversely, we saw that a substantial part of the society endorsed these theories. In our research, the support given to the conspiracy theories showed a change between 30% and 50%.

Among the three conspiracy questions, the highest endorsement rate was on the theory that the virus was produced in a laboratory. Many more people than those who believed coronavirus is a conspiracy of great powers or who thought that the vaccine was found carried in the belief that the virus was generated by humans. As well-known, there has been extensive literature, mostly published by the think-tank institutions and governments, arguing that viruses can be generated by the states as potential bioweapons (e.g. Henderson, 1999; Lam, 2003; Siegel et al. 2007). When the Covid-19 pandemic has emerged, such kinds of reports began to circulate in conventional and notably in social media (Acar, 2020). We suppose that the high support that was given to this theory might be an outcome of this circulation.

The Coronavirus related conspiracy beliefs were associated with a number of determinants. As expected, those with lower welfare levels, unemployed, and housewives, those with lower education levels believed in conspiracy theories more than others. Likewise, there were significant differences in gender and age scales. Female participants believed in conspiracy theories more than males, and those living in towns and villages more believed in conspiracy theories than those living in cities. A result that was surprising to us was that the conspiracies were more approved among the youth than the elders. This can be associated with the fact that the conspiracies about coronavirus were, firstly and intensely, circulated in social media in which the youth participate more actively than the elders.

Political and religious connections had a significant impact on believing or not believing conspiracies. People who identified themselves as rightists or centrist or more religiously conservative people believed more that conspiracies can be facts. Though compatible with the relevant literature, these results partially surprised us. This is because, unlike what Trump did in the USA, Turkey's central government did not attempt to explain the pandemic by associating it with China-based conspiracy , or with another one but nevertheless, the participants whom we can define as pro-government endorsed the conspiracy theories more in comparison to those we thought they supported the opposition.

Another important, but not surprising result was that there was a negative connection between the trust in science and conspiracy endorsement. Another important, but not surprising result was that there was a negative connection between scientific-trust and conspiracy endorsement. In our research, we saw that people who trusted in scientific explanations about coronavirus believed in conspiracy theories less; however, the participants relying on the political or religious authorities more tend to believe in conspiracies of coronavirus. This gives us a chance to make a forecast for the future, or to have a final word, so to say. Unlike conspiracy theories, scientific research is a long and complicated journey, having a particular methodology, needing measurable evidence, and emerging through undergoing peer-reviewed processes. It is very likely that the belief in conspiracy theories around the world will decrease so long as the trust in scientific explanations for diseases, ecological changes, or other popular events increases.

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CHAPTER 7

MUSIC INDUSTRY IN CRISIS: THE IMPACT OF A NOVEL CORONAVIRUS ON TOURING METAL BANDS, PROMOTERS, AND VENUES

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ABSTRACT

In March of 2020 the world began to take widespread preventative measures against the spread of a novel coronavirus through travel restrictions, quarantines, and limitations on social gatherings. These restrictions resulted in the immediate closing of many businesses, including concert venues, and also put an abrupt end to live music performances across Europe and the United States. This had immediate implications for touring metal bands, as bands earn most of their income touring, and many found themselves in a situation where they experienced substantial financial losses alongside negative affective ramifications. This chapter utilized evidence from qualitative interviews and public statements to draw inferences about the impact of COVID-19 on the music industry, with a particular focus on touring musicians and their respective managers, promoters, and booking agencies. Musicians reported negative affective and financial ramifications as a result of COVID-19, but they also reported financial support from metal music fans that made the fallout from the pandemic less severe. Further inferences were drawn about how the closures of concert venues adversely impacted the communities dependent on them, as concerts serve a stimulating role for surrounding businesses.

Keywords: COVID-19, music industry, heavy metal, affective consequences, financial consequences

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1. Introduction

The year 2020 was detrimental for many industries due to the spread of COVID-19, a highly contagious novel coronavirus that led to global shutdowns of businesses and the federally mandated prevention of large gatherings of people. One of the industries that experienced especially dire circumstances was the music industry, as the small businesses that operated as concert venues were at risk of permanent closure, and touring musicians found themselves without a source of income and emotional catharsis due to mandates prohibiting group gatherings including concert audiences. To understand this impact, information was gathered from literature, media sources, public statements, and interviews were conducted in the months immediately following the global spread of COVID-19 in March of 2020.

COVID-19 was a novel zoonotic coronavirus that was first detected on January 6th and was linked to the Huanan Seafood Market in Wuhan, China (Pan et al., 2020). The virus put vulnerable populations in particular at risk, because it had the capacity, much like other types of coronavirus, to lead to pneumonia and acute respiratory distress syndrome (ARDS). Coupled with its distressingly infectious nature (Liu, Gayle, Wilder-Smith, & Rocklöv, 2020), the virus became a global concern by March as it had spread worldwide. Its spread was initially difficult to gauge or detect due to many infected individuals being asymptomatic or having minimal symptoms, such as a fever, that could be associated with other forms of illness (Hu et al., 2020). Most individuals were at low risk of serious symptoms, however, there was great variability in the severity, onset, longevity, and complications associated with the virus (Bernheim et al., 2020), but those at greatest risk were vulnerable populations and individuals with potentially comorbid health concerns, such as cardiovascular diseases, hypertension, malignancies, and diabetes (Carli et al., 2020). One out of twenty COVID-19 cases required intensive care, which put global healthcare systems at risk of being overwhelmed (Murthy, Gomersall, & Fowler, 2020) without an adequate number of physicians, ventilators, hospital beds and treatments to meet the rapidly increasing numbers of cases (Emanuel et al., 2020). Although towards the end of the year many treatments were showing clinical promise, it still remained unclear how long COVID-19 would persist in influencing daily life, and the particularly strong sense of ambiguity about the future and how it was impacting the music industry is what is highlighted in this chapter. Governments worldwide acted quickly to try and control the spread of the virus, which led to widespread business closures, strict quarantines, and mandated restrictions on both public and private gatherings within the United States, Europe, and many other parts of the world. At the beginning of the pandemic, many areas of the United States required that people remain in their homes except to acquire food

or essential supplies, and they were not permitted to leave for other reasons unless they were considered 'essential employees.' These restrictions quickly crippled many small businesses, such as restaurants and concert venues, which left many people unemployed and without income.

In addition to the aforementioned financial concerns, viral pandemics come with a multitude of affective consequences too. In addition to the anxieties surrounding the contagious nature of the virus and the negative stigmas associated with being sick (Maunder et al., 2003), the quarantines and lack of permissible social interaction also had immediate consequences. Although the full extent of affective consequences following COVID-19 were not known at the time of this writing, insights can be drawn from earlier coronaviral pandemics. Posttraumatic stress disorder (PTSD) and depression were commonplace during the SARS pandemic in Toronto, Canada and during the 2015 MERS outbreak, especially for healthcare workers (Reynolds et al., 2008; Lee, Kang, Cho, Kim, & Park, 2018; Hawryluck et al., 2004; although see the work of Hull, 2005). Longer periods of quarantine have been associated with higher levels of psychological distress, including anger and confusion (Brooks et al., 2020) that stems largely from the ambiguity associated with the longevity of incarceration and the pandemic that caused it (Barbisch, Koenig, & Shin, 2015). There has also been some early work conducted that shows that the isolation associated with COVID-19 lockdowns elevated levels of depression and anxiety among those quarantined and increased with the duration of the quarantine dependent on feelings of control and coping (van Mulukom et al., 2020).

2. COVID-19 & The Music Industry

The COVID-19 pandemic caused irreversible and long-term damage to many industries, including the music industry. The closings that followed widespread quarantines, travel restrictions, and federal rules against large gatherings caused millions of people to lose their jobs in the United States alone (Long, 2020), with 700,000 of those jobs being lost in March when the outbreak first began in the West (Keshner, 2020). As many as 43% of U.S. businesses were at risk of closing permanently without substantial government assistance according to a survey by the U.S. Chamber of Commerce and MetLife. The situation was especially bad within the music industry, due to concerts requiring large gatherings, so concert venues were among the first businesses to close and they would be among the last to reopen. It was estimated by the National Independent Venue Association that 90% of music venues in the United States were at risk of closing permanently without federal aid well beyond

the measures that were in place at the time (Pasbani, 2020). Similarly, 556 music venues were identified as being at risk for permanent closure within the United Kingdom without substantial federal aid (Jackson, 2020). Many venues had zero sources of revenue during the pandemic despite continued bills to pay. It was estimated that if venues were not able to reopen by 2021 that it would result in a loss of nine billion dollars in ticket sales alone. Even when the pandemic eased or when federal restrictions on large gatherings would be lifted, that still would not cause live music venues to immediately recover because there was already evidence that public anxieties about contagion would persist. Data collected from Nielsen Music and MRC Data indicated that 21% of respondents would not start going back to concerts for at least five months after the pandemic ends, and they also found evidence of more permanent changes, as 2% of respondents reported that they would never go to a concert again (Levy, 2020). The impact on the music industry wasn't limited to smaller concert venues, as it also impacted arenas/stadiums and their respective staff; trucking, shipping, and logistics companies that work with moving venue equipment around; the travel and lodging industries that are deeply intertwined with live events; production companies and vendors that supply equipment; artists, musicians, promoters, event organizers and their respective teams; and all of the individuals that help design concert performances (Rivero, 2020). Some concerts can take months or even years to organize, so all of these industries would similarly need a lengthy period of time to recover, especially since it would be difficult to predict the behavior of event consumers after the pandemic. Recovery would also be stagnated behind continually rescheduled concerts, causing a lull for when bands could begin to book concerts after the rescheduled events finally occurred. It is important to note that if many music venues would close permanently, it wouldn't only hurt arts and entertainment in those communities, but rather, it would also hurt the local economies where the venues are homed too. It has been estimated that within the United States that an average of $12 is spent on economic activities such as eating and drinking in local businesses that surround a music industry for every $1 that is spent on a concert ticket (Levy, 2020). Without concert venues, many communities would not receive the economic benefits that would otherwise be generated.

An additional side-effect of the pandemic on the music industry was the impact it had on postal services. Some countries faced temporary bans on incoming and outgoing mail, causing delays for record labels trying to distribute music internationally. There was an even greater risk in the United States of postal services having a lasting impact on music distribution because there was increased strain on the United States Postal Service (USPS), both due to the pandemic and due to political influences, which had the potential to massively damage

independent record labels in the United States. The reason for this is that the USPS offers a budget option – media mail – that is used to ship media including music inexpensively. If this option went away, it could potentially cripple small record labels since consuming physical media was already an increasingly niche behavior despite many heavy metal music fans being devoted to it, and a dramatic increase in cost per unit sold could discourage music consumers to the detriment of independent music labels (Hogan, 2020).

Many individuals in the music industry were impacted, including concert venue owners, touring musicians, and the individuals that book, promote, and manage concerts and concert tours. More specifically, many employees were being laid off by their respective employers to keep their businesses afloat, including soundboard operators, lighting technicians, instrument technicians, accountants, directors, bookers, promoters, tour managers, music engineers, venue workers, crew members, and many others (Hissong, 2020). Some insight can be drawn about financial losses from the fundraising pages that were launched following concert cancellations when travel bans and bans on large gatherings went into immediate effect in March. The popular music venue Reggies in Chicago was temporarily closed due to restrictions on large gatherings, so they put up a GoFundMe for $10,000 to help pay their employees and help prevent their business from collapsing while they were unable to host concerts. Similarly, the popular metal venue Saint Vitus Bar, which is located in Brooklyn, New York, requested $15,000 through a Kickstarter page to help make sure that they would survive the pandemic (Shaffer, 2020).

3. Consequences for Touring Musicians

Touring musicians are often financially dependent on the income they make touring, which provides 75% of the income for most bands (Pasbani, 2020). Public fundraising pages provide insight into the losses that touring musicians were facing following concert cancellations caused by COVID-19. For example, the progressive metal musician Devin Townsend launched a GoFundMe request for $50,000 to recoup losses after lighting rigs, video screens, tour buses, work visas, merchandise production, international flights, and other aspects of his tour had already been paid for prior to the tour's cancellation. Many similar costs for bands that either had to cancel a planned tour or prematurely cancel a tour they had already commenced would be non-refundable, causing many bands to be at risk of losing thousands of dollars without guarantees about when they could continue making income from touring. As another example, the Finnish metal bands Insomnium and Omnium Gatherum launched a GoFundMe for €48,685 because their U.S. tour was cancelled after completing only a single concert. A

similar set of circumstances occurred for the Italian metal band Rhapsody, who following the cancellation of a Latin American tour, created a GoFundMe for $40,000. Musicians are also often reliant on touring for the affective wellbeing that it brings them (Lamont, 2012), which is particularly important, since metal music and culture has a large number of fans and musicians that struggle with mental health (Messick, Aranda, & Day, 2020).

I contacted a number of musicians that had been impacted by COVID-19 identified by concert cancellations or public posts on their respective social media sites to better understand and contextualize the financial and emotional consequences of the pandemic. These musicians included Chris Pervelis of New York band Internal Bleeding, Devin Swank of Ohio-based Sanguisugabogg, Enrico Schettino from Italian band Hideous Divinity, Lille Gruber from Germany's Defeated Sanity, Phil Tougas from the Canadian band Chthe'ilist, Tom Knizner from Chicago's Cardiac Arrest, and Tucker Thomasson from Indiana's Throne of Iron.

3.1. Financial Consequences for Touring Musicians

Touring International concert cancellations for a few of these bands, including Internal Bleeding and Throne of Iron, resulted in about $4,000 in financial losses for flights alone, although thankfully many of them were able to get that amount refunded due to the unique circumstances. Bands are also dependent on merchandise sales on tours, as most touring bands operate under a tight and challenging budget even under normal circumstances, so bands that were planning on touring and already had merchandise printed were at risk of major deficits. Lille of Defeated Sanity told me that his band was at risk of going bankrupt due to the cancellation of their American tour after completing only four days of the 30-day tour, however, Defeated Sanity came up with a plan to recoup their losses, as did many other bands that were facing major losses following cancelled tours. Lille had three days before he had to return to Germany, so he launched an online store so that Defeated Sanity fans could purchase the tour merchandise that was printed for the cancelled tour, and he shipped out each order prior to taking his flight home. Metal fans knew that many of their favorite bands were facing immediate and intense financial hardship due to the pandemic, so many fans supported their favorite bands through online purchases and donations. Similarly, music fans also made donations to the fundraising webpages of their favorite music venues, which greatly helped venues like Reggies and Saint Vitus (Shaffer, 2020). Parallels can be drawn between this communal display of support and other collectivistic aspects of metal music culture, such as in the rhythmic dance known as moshing, where metal fans immediately help any member of the community stand up if they have been knocked to the ground, preventing injury (Riches, 2011; 2012). It could be that the cultural prioritization of group support inherent for dedicated

metal music fans played a role in metal music consumers supporting their favorite bands and venues during the pandemic. In the case of Defeated Sanity, fans placed 300 orders in those three days, and left donations of one to eighty dollars on top of that. Similarly, Throne of Iron and Ctthe'ilist also successfully made some of their money back as a result of fans generously spending money on their merchandise during their time of need. In addition to the losses experienced after immediate concert cancellations, the pandemic also meant delays in album releases, stuttering yet another source of income for musicians. Without being able to tour in support of an album, many bands and record labels postponed the releases of their upcoming albums, including the bands that Devin Swank was a member of. Sometimes these delays would also be beyond the control of bands and labels, because the temporary closings of many businesses meant that many of the factories that printed the vinyls, tapes, and cassettes saw prolonged delays for printing new releases until their businesses could reopen after federally mandated quarantines, travel restrictions, and restrictions on gatherings. Just to provide a fuller perspective, it was not the case that all touring bands were dependent on the income from these cancelled tours, as Tom from Cardiac Arrest clarified for me, as in the case of his band touring was more of an occasional hobby, and so they were not dependent on that income and were not at risk of substantial losses, however, that doesn't mean that the tour cancellations did not have negative consequences for Tom and his bandmates, such as emotional consequences.

3.2. Affective Consequences for Touring Musicians

To fully understand what the loss of live concerts meant for touring musicians, I felt it was important to first understand what it was that they were losing, so I asked my interviewees what playing their music live meant to them. Devin from Sanguisugabogg told me:

> Honestly it's the greatest feeling ever. Only a few things can come close. Writing music and coming up with lyrics, patterns and vocal styles is awesome but performing is where it is all at for me so I can showcase all the hard work I put into my craft.

For Chris of Internal Bleeding, it also played a fundamental role in maintaining a feeling of youth:

> It means the world to me. When I am on stage, my 52 years of age simply melt away and I feel like I am 20 years old again. It's the most important outlet I have, and being denied that is akin to being denied oxygen.

For others, such as Enrico from Hideous Divinity, playing music wasn't just cathartic; it also played a role in providing his life with meaning:

> As obvious as it may sound, it still is the reason why we do all this. When you play in front of people, your music comes alive, and so do you. It's both fulfilling and cathartic, in its most classical meaning. It doesn't matter how long the trip to get to the venue was, the lack of food or showers, the sleep deprivation - you jump on stage and it's all like washed away. You stop asking yourself existential questions about why you're doing it, and all acquires meaning.

Given how powerful and positive the effective and functional roles that live performances play for touring musicians, it comes of little surprise that the sudden removal of that aspect of their lives, especially when combined with utter ambiguity about when they can return to playing live, results in massive affective consequences. Chris from Internal Bleeding explained how he felt only moments after announcing that his band's upcoming European tour had been cancelled:

> This is truly heart-breaking for us. We've been working towards being on a major European tour for a long time and now that we finally secured one, it has all come crashing to the ground… I hate to admit it, but depression is already setting in… I have experienced a wide range of emotions ranging from sadness and let-down to fear and paranoia. I am starting to settle into the reality of it all and will just have to resign myself to it and ride it out.

Chris also explained that he had a lot of anxiety about not knowing when touring could resume, which was especially salient for him as a musician that was growing older. The stakes were much higher for him than for younger musicians:

> Honestly, for me, it's a race against time. I am not getting any younger, and touring the past few years has become physically demanding on me. Sadly, I don't know how much more touring time I have left and the longer this keeps going, the more time I am going to lose.

The uncertainty of the future especially bothered Devin from Sanguisugabogg, as his band had to stop activities right as they were seeing a meteoric climb in popularity, but he still appealed to the sense of community that largely defined metal music culture:

> I feel worthless not being on stage and the uncertainty bums me out but every other band and musician is dealing with the same shit so at least we're all in this situation together.

Enrico Schettino described touring as being essential to his personhood, as he described that without being able to play live, he would feel incomplete, "Like a big part [of myself] would be missing," and he also helped bring some perspective to what it was like planning for the future during such turbulent times:

> When you face an exceptional situation like this, there's one thing for sure - no one knows exactly what will happen, and when. It's impossible to make plans, only projections provided

> by more or less trustworthy data. We may believe things will get better in the next months, but no one knows for sure.

Phil Tougas of Chthe'ilist had more mixed emotions about his sudden inability to tour, due largely to his own criticisms about himself:

> It's a love and hate relationship. On one hand, playing in front of a crowd is the most powerful feeling in the world and I would do everything to live on the road and do it every day. I was made for this lifestyle. On the other hand, I've played hundreds of shows in my life across 25 countries, and there's only about 5% of these shows that I would say I've put on a performance that I would deem satisfactory in my own musical standards. Is it because it has taken decades for me to attempt to overcome personal, physical and mental issues? Or is it because I push myself too hard and am too picky with myself and how I play? Probably a mix of all of these. I should also practice way more. Luckily these days I've gotten better at handling all of this.

Regardless of the individual, the immediate response to being unable to tour and there being no certainty when touring could resume was largely negative. Realizing this, I also asked the musicians how they were coping with these feelings and the inability to tour. Tucker of Throne of Iron explained to me that humor was important for his band as they struggled through the pandemic:

> I'd like to think that in spite of being angry over the sheer inconvenience of it all, that my bandmates and I have kept a good sense of humor about things. Humor is typically our coping mechanism for when things are frustrating or scary, and there was definitely no shortage of it during our, for lack of a better term, frustrating experience.

Many bands coped by trying to remain active and productive in other ways, so many changed their function away from touring and instead towards writing new music. Phil Tougas told me that all of his bands would become 'studio bands' while the pandemic was ongoing, and that the pandemic itself could serve as songwriting inspiration not only for himself, but for many other bands and musicians too.

The issues that musicians were facing had no modern equivalent in terms of the extent to which the music industry had been disrupted, however, Chris Pervelis, a resident of New York, and whose late drummer (Bill Tolley) served as a first responder during the September 11th terrorist attacks, was able to note one parallel:

> 9/11 caused quite a few issues for us and forced us to cancel quite a few shows because our drummer was working the attack site with the fire department. That's the closest comparison I can think of, and even that didn't compare in scale to the logistical problem the virus has created.

4. The Impact on Promoters, Booking Agencies, & Band Managers

The last area I want to highlight about the impact of the COVID-19 pandemic on the music industry is about its influence on the people that arrange live concert events: promoters, bookers, and band managers. Arranging a concert tour is an involved process, and many individuals make a living off of that job alone, whereas others are involved in arranging concerts as more of a hobby. Regardless, all individuals involved in live concert booking, whether on a large-scale, small-scale, or managerial level, all experienced consequences following the 2020 coronaviral pandemic. The touring musicians I had interviewed shared their concerns about how this would impact the individuals that book concerts. Tom from Cardiac Arrest explained:

> It is going to hurt the legitimate promoters immensely. These are the ones that put their asses on the line to have a good show. They pay for flights/travel, feed and water the bands, get them accommodations, and whatever else.

Tucker from Throne of Iron elaborated:

> The financial ramifications on the promoters and bookers of events like this as well as tours is immense. I can't begin to fathom how much money is being lost right now, between booking guarantees for bands and flights and lodging and food. It's simply staggering.

In order to gain further perspective, I interviewed individuals that ran large-scale, full-time booking agencies, local promoters, and booking agencies. These individuals were contacted following public posts made on their social media accounts about concert cancellations. The individual most greatly and negatively impacted from my interviewees was Bastian Doblekar who runs a booking agency called Master of Metal with his wife. Master of Metal used to operate out of Slovenia but Bastian later moved his agency to Spain. In addition to booking concert tours, booking as many as 80 shows per year per band across multiple countries, Master of Metal was also responsible for the Metalcamp music festival that existed from 2004-2012 that would annually cater to 12,000 heavy metal music fans. Bastian explained to me that when a band would contact him for a tour, he needed to know at least four months in advance, and then he would have to figure out the logistics of the tour: the most appropriate route, mileage and gas, and the payment each promoter guarantees each band. He also clarified to me that his losses were not limited to money:

> Well, I spent hours upon hours since October to book a 16-day tour for a band. It was a lot of stress to navigate around all of the bigger tours to get this tour booked for them [because large, competing tours can lessen attendance of smaller tours]. I didn't lose financially nor did I gain. However, time spent, to me, is more valuable than money. A lot of messages and emails went out. Many didn't respond. Many were read with no response. Some cities didn't

> work out and the locations had to be moved whilst trying to keep drive times reasonable. Dates were confirmed only to have some fall through and once again get confirmed elsewhere. In some places local support was just unavailable and then once again a date had to get moved. Negotiations, creating flyers, getting bands, staying on top of things with the promoters, etc. It was like this up until almost two weeks out from the tour in which the last 3 dates finally panned out. Then not even a week later it was all cancelled. It sucks, but I'd rather cancel than ever jeopardize someone's health and safety.

Bastian works with local promoters for each of the shows he books, as the success of each show would be dependent on the legwork performed through advertising and everything that would need to occur for each respective local venue. As Bastian noted, the local promoters were also facing major losses:

> It sucks completely. Imagine. You book bands, pay fee, flights, hotels, venue rent, and promo. The promoter's job is not easy. Many people see promoters' work as some necessary evil, but many don't realise what kind of risks promoters take every day with investments and how many jobs the promoter provides from security, technicians, crew. My wife Ana speaks daily with a German promoter who lost about 25,000 euro because of a cancelled festival. He had everything paid in advance.

The particular promoter that Bastian referred to had to cancel a concert that was to take place on a boat that took three years to plan due to all the government permissions that were required to host live music in that setting, so that was three years of work that were suddenly lost. To understand how the pandemic was impacting smaller-scale promoters, I interviewed Randy Kastner of RK Metal Promotions, who books and promotes shows and festivals within the U.S. state of Wisconsin. He wasn't facing the same massive losses as larger agencies, but he still had to cancel multiple shows, including the sequel to a music festival that he ran for ten consecutive years. For Randy, working as a promoter was a hobby, whereas for Bastian, his booking agency was his sole source of income and had been his only job over the past thirty years. For Randy, he wasn't as concerned about the concerts he had to cancel as much as he was concerned about how booking shows would be impacted post-pandemic. He predicted that bands everywhere would be eager to return to touring at the same time, which would oversaturate the concert market and cause promoters like him to continue to take losses due to the wider dispersion of concert attendees:

> Once things return to a new normal everyone will be on tour making it even harder to break even… Every band will be on a mission to get back out there, but unfortunately, with too many shows and not enough fans, money turnouts will suffer for many shows. Too many shows is never a good thing.

Similar to touring musicians, these booking agents also experienced negative affective consequences following tour cancellations, however, they didn't seem nearly as intense as what touring musicians were experiencing. For example, Mikael Parks, who runs WorldForge Booking & Touring, explained to me:

> I'm bummed out. All of my promoter buds, venues, and musician friends are as well. But, I am sure I can speak for most of them when I say that we'd rather cancel/postpone than see anyone suffer because of any irresponsibility during something like this. It's something we are all taking seriously with hopes that everyone comes out on the other side healthy.

Lastly, I wanted to understand how band managers were being impacted by the pandemic. I interviewed Tito Vespasiani who works as a manager for many bands, and he also is an employee at Everlasting Spew Records, an independent Italian record label. Tito explained to me what his job as a band manager entailed:

> A manager is in charge of constantly advising a band and leading it through its journey in the music business. This could include a variety of aspects - large scale decisions and actions - looking for a booking agency and negotiating terms, label shopping for example - or even simply coming up with effective ideas to push the band and keep it active and motivated. It could be merch sales and all sort of initiatives. I don't see the manager as something that invisibly controls the band but rather someone who strongly believes in the band and that works as an enhancer of the band's original purpose. The booking agent has the role of looking for shows - talking to either local promoters or tour agencies and negotiating those with them. "The man in the middle" in a few words. When it comes to web promotion I've got my own take on the matter. I don't do classic-approach PR, sending emails for interviews/reviews/magazine coverage in general, although I do shop for premieres for my bands and for my label Everlasting Spew as well. I've built - it took years and it's always expanding - a network of contacts through real and genuine interaction with fans, those who actually listen and buy music and I make sure most of them will at least listen to the bands I care for.

A common solution that managers, booking agencies, and promoters were embracing as concerts and tours continued to be cancelled was to postpone the shows, but Tito warned that further postponements and cancellations might follow since there was no certainty about when the pandemic would end. Further postponements could result in further financial losses. He explained how this impacted all parties involved with his bands:

> My main concern is, "what if we reschedule that show and maybe even face some [additional] costs and then lockdowns get prolonged?". Also I had a couple of bands thinking about not releasing new music which was ready [to be released] since while [music consumers were] in fear it would not get the proper attention. Some other bands couldn't finish their

> recordings and are afraid that when they take their recordings to go and shop for a label those labels will be swamped with applications. Some bands are being heavily hyped now, but they won't be booked for most fests next year anyways because fests will just replicate this year's cancelled line up, so they should apply for 2022 in hopes that the hype stays alive, but in a year many more albums will come out. It's tricky… I'm afraid the hard work we've put in to build a connection to the public will kind of go wasted, same as the promotional efforts for the albums, if this thing [the pandemic] will keep going for too long. Bands might be able to return playing [live] when hype has faded or tunes feel "old" at that point.

Tito was in a difficult position as a band manager. As he noted, the postponement of musical festivals, which can be crucial to exposing bands to a wider audience and growing their popularity, meant that he would be unable to book many of the bands he manages for many music festivals for at least two full years, which could cause their growth to stagnate. It is crucial for a band to support a new album release with immediate touring due to the fast rate at which music is consumed. Having to wait two full years to give a band greater exposure would likely be too late to promote an album that had been released during the 2020 pandemic. It made it especially difficult for newer, smaller, and growing bands to experience the growth that under normal circumstances would have occurred.

All of these culminating issues would also impact record labels. Tito explained how it impacted the record label he worked for:

> As I mentioned before, schedule issues are a real thing already. Many bands were meant to record so there was a certain schedule that will now change unpredictably. I might end up having some empty months with no releases and then two-three packed months with a lot of costs to front all of them in a short span. No live shows also means less promotion and sold copies which also impacts a label. And the most obvious concern is the financial crisis as a whole. It's pretty bad already and if people lose their jobs they won't be able to buy music. Hell, not even me or Giorgio [owner of Everlasting Spew Records] will be able to finance the label. But honestly I'm more concerned for human beings having no income than how this could potentially impact my label, even with it being a crucial component of my life. Things need to be put to scale sometimes.

5. Concluding Thoughts

The COVID-19 pandemic has widely and negatively impacted the global music industry. The year 2020 saw many concert venues face permanent closures, putting the jobs of millions of individuals at risk. Although the financial losses were expected, interviews conducted also indicated that touring musicians were facing psychological hardships. The generosity of

heavy metal music fans helped many bands and music venues combat their financial deficits, however, evidence for emotional support for touring musicians beyond the renewed focus on songwriting was largely not found. The metal music industry has previously shown resilence when facing change (Messick, 2021), but it is hoped that there will be greater attentiveness towards the mental well-being of musicians during and post-pandemic as an additional safeguard. Musicians described the loss of live concerts with powerful language, describing it as making themselves feel incomplete, and that it caused them to experience depressive symptoms and anxiety. Although the extent to which these findings can be generalized is unclear due to the small number of people interviewed, these individuals did come from a variety of global backgrounds, were in bands and agencies of various sizes and ages, and still experienced much overlap in their affective conditions. Perspectives were also drawn to understand how the booking agencies, promoters, and respective managers that work with bands were impacted, and all individuals expressed concern about the lasting effects of the pandemic on the recovery of the music industry. If the views shared here are representative of the widespread experiences of musicians and other individuals in the music industry, then it is likely that the impact of COVID-19 will have both financial and emotional ramifications far beyond the 2020 pandemic. Although this chapter focused on individuals on the business side of the music industry, it is important to note that consumers of music were likely also impacted by the pandemic, so it is hoped that future research can expand by exploring how the lack of live music has affected individuals accustomed to live music as a form of catharsis in their own lives too.

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CHAPTER 8

THE ARTS AS A FORM OF COMFORT DURING THE COVID-19 PANDEMIC

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ABSTRACT

Society turns to the arts for comfort, escape, healing, entertainment and intellectual challenge. By attending performances, festivals and events, visiting museums and galleries, studying the arts formally or informally, or producing art either professionally or for leisure, the arts assist with building a sense of individual and community identity. The COVID-19 pandemic has not only denied global societies and audiences with opportunities to engage with the arts in live settings, but it has had a profound effect on the arts sector, with institutions closing their doors, festivals and events cancelled, and the production of art either severely restricted, in hibernation, or at worst abandoned. Millions of artists and arts workers around the world are now unemployed and given the short-term, casual and project-driven nature of much of the sector, many are unable to access government support initiatives designed for more conventional business models. While there are many current challenges for the arts as a result of the pandemic, there has been significant engagement with the arts during lockdown periods, largely through digital technologies and virtual formats. This continued engagement with the arts proposes that once COVID-19 is brought under control, the sector will rebuild and prosper again.

Keywords: Arts, artists, COVID-19, pandemic, tertiary art education

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1. The Crisis that is COVID-19

The current impact of the COVID-19 pandemic on global societies is severe and the long-term future for many countries, economies and cultures remains unclear. While yet to reach the catastrophic mortality rates of the influenza pandemic of 1918-1920, where tens of millions of people died (Hodgson, 2017), current global infection rates and fatalities continue to rise. All areas of modern society are suffering moderate to severe impacts, be they social, cultural or economic. For the arts sector, which struggles at times to achieve recognition, the immediate impact of COVID-19 has been devastating (Boland, 2020). Around the world, many of the greatest institutions for opera, ballet, music and theatre, as well as galleries and museums, have closed their doors or suspended their programming. In the contemporary art space, countless music festivals, rock/pop concerts, art fairs, outdoor sculpture exhibitions, film and television studios and other art institutions have all either had to be partially or completely shut down. Millions of artists around the world are now unemployed and facing a bleak future, with the current and next generations facing significant career scarring and increased risk of mental health conditions. This bleak future is underpinned by the as yet unknown full economic cost of COVID-19 and the ongoing effect this will have on all industry sectors. Given the arts sector often survives on limited budgets, with a heavy reliance on audiences, the public purse and corporate and private sponsorship, there may be a significantly reduced resource base to support the arts as global societies set out to recover and rebuild (Midgette, 2020).

At the time of writing this chapter, countries were reeling from the ongoing human cost of COVID-19, with more than 120 million confirmed cases of the coronavirus and almost three million deaths worldwide, these figures growing at a daily rate (John Hopkins University and Medicine, 2020). The French President, Emmanuel Macron, even claimed that "We are at war … the enemy is here, invisible, elusive, it progresses" (Macron, 2020). The initial lockdown of societies around the world meant that a range of economic sectors were severely paralysed, including the airline, entertainment, education, tourism, sports, retail and hospitality industries. The arts sector in many countries faced almost complete closure, with the exception of the organisations or individuals who already had a strong digital presence and engagement with online audiences. Keller (2020) laments how the pandemic "has silenced the world's concert halls and opera theatres" (para. 1). Several of the most significant art institutions around the world have been unable to restart live performances and shows (Bedell, 2020; Brown, 2020a). New York City for example, home to some of the most famous art, music and performance venues, is still grappling with containing outbreaks of the virus (Danner & Stieb, 2020; Scott,

2020). Lockdowns have also recently occurred in other major cities, such as Melbourne, Brisbane, Beijing and Leicester, as further waves of the virus have occurred (de Courten et al., 2020).

2. The Arts and Times of Crisis

The arts have provided comfort and respite for centuries, as societies and communities deal with major events such as war, recession, plagues, famine and natural disasters. Artists in history have produced iconic works in response to some of the world's most serious events. Lockdowns have occurred numerous times in history and have had an influence on the artwork of the time. For example, during the period of the "Black Death" between the 14th and 17th centuries, the Flemish painter Anthony van Dyck created the well-known work *St Rosalie Interceding for the Plague-stricken of Palermo* (1624). This depicts St. Rosalie "being held aloft by angels with her hands outstretched in an intercessory manner as she gestures downwards … one angel holds a black skull, a symbol of Black Death, while another angel points to it" (Tabone, 2020, para. 7). Several of the great composers wrote works in response to major world events, including Haydn whose *Mass in Time of War* (1796) was written during the European War, Tchaikovsky whose *1812 Overture* was written to commemorate the Battle of Borodino in 1812, and Chopin's *Military Polonaise* which was composed at the outset of World War II and played frequently on Polish radio to rouse national protest against Germany's invasion (Classic fM, 2018). In theatre, the great plague in Europe influenced Shakespeare's works of the early 1600s, such as *The Winter's Tale* (Shapiro, 2015) and *Measure for Measure* (Kelsey, 2016). In literature, Boccaccio's *The Decameron* collection of novellas, written in the mid-14th century, documents the tales of a group of young women and men sheltering from the plague in a countryside villa. The work is regarded as perhaps his greatest and a masterpiece of Italian prose (Britannica.com, 2020). These and other creative artefacts linked to global traumas remain as permanent records of history and a way for humanity to reflect and contemplate the meaning of world events.

The great wars of the 20th century led to significant creative responses through the arts. Many artists initially welcomed World War I due to such reasons as patriotism and the belief that oppressive regimes would be removed and a more open-minded and peaceful society achieved (Farrell, 2017). While some artists resisted the onset of war, others enlisted with passion in the hope that they could make a strong contribution to their country's future. Artists created new work while involved in combat, ranging from artefacts displaying enthusiasm for the goals of the war, to lamentations and mournful representations of loss and trauma. Art

posters about the war were "being created and circulated at an unprecedented level – the likes of which were not seen before" (Art Fervour, 2020). Otto Dix's *Der Krieg* cycle of works, published in 1924, is regarded as one of the most powerful representations of the horrors of war and reflects his direct experiences as a young German soldier sent to the western front. Following the signing of the armistice agreement on November 11, 1918, artists continued to create visual works representing the ongoing loss and trauma associated with the major death toll caused by the war, as a way of reflecting on man's inhumanity (Farrell, 2017).

The arts and artists have also been a vehicle for predicting the future, in what has proven uncannily accurate in the current pandemic through the 2011 film *Contagion* which has "striking similarities to the [current] outbreak that has managed to cripple virtually the entire earth" (Nepales, 2020, para. 1). *Contagion* focusses on a virus that likely came from a bat, that caused flu-like symptoms, that was fraught with disinformation, required social distancing and that ultimately killed millions. Viewings of *Contagion* increased significantly during lockdown, the film offering a way for audiences to perhaps better understand their current reality. Another view is that people have experienced heightened levels of stress and anxiety, hence are drawn to the themes in the film (Morris, 2020).

It is certainly the case that "people across the globe are turning to the arts for much-needed connection and comfort" (Hoe, 2020, p. 1). Netter (2020) reflects on how "the arts and their contribution to our wellbeing is evident and, in some ways, central to coronavirus confinement for those of us locked in at home" (para. 1). Law (2020) describes how people currently "seek comfort – anything to settle our heart rate and combat the stultifying dread and silence of self-isolation. And we always find that comfort in the arts" (para. 7). In their study of the impact of the current pandemic on older adults, Kelly (2020) describes how the elderly are turning to the arts, with a "surge in creative arts – poetry, dance, music, visual – all inspired by this unusual moment in history" (p. 337). In order that people in lockdown can engage with the arts, numerous art institutions, museums and opera houses around the world have expanded their digital offerings to offer virtual experiences and extend their reach geographically (Keller, 2020). Consumption of music has grown, for example Behr (2020) describes how subscriptions to online platforms such as Spotify have increased significantly during lockdown. Similarly, engagement with other digital entertainment platforms such as Netflix, Disney+ and YouTube has increased over the course of the pandemic.

Contemporary artists in a range of disciplines have also responded to the current pandemic. One area is the work of graffiti artists and muralists (Billock, 2020). Some of the new creations include a mural in Berlin of the character Gollum from *The Lord of the Rings* movie trilogy

from 2001-2003, Gollum worshipping a roll of toilet paper with the caption "my precious" (Billock, 2020). Others that were created include a health-care worker in prayer, a road mural raising awareness of the importance of staying home to save lives, and one which depicts a woman with injuries on her face, highlighting the potential for domestic violence to increase during lockdown (Billock, 2020). In Italy, one of the most heavily impacted countries in the initial stages of the pandemic, thousands of people took to their balconies during lockdown to play music, to sing collectively, all with the goal of boosting morale (Thorpe 2020). While famous Italian opera singer Andrea Bocelli drew heavy early criticism in relation to his comments challenging the severity of COVID-19 and the strict lockdown, he also performed a major solo concert in Milan to send a message of hope and to raise funds to help hospitals (BBC news 2020). Rock musicians have also responded, such as the Rolling Stones who wrote *Living in a Ghost Town* as a direct representation of the impact of the pandemic on life in lockdown, exemplified in the following lyrics (Genius.com, 2020):

You can look for me
But I can't be found
You can search for me
I had to go underground
Life was so beautiful
Then we all got locked down
Feel a like ghost
Living in a ghost town, yeah

World renowned musician, lyricist and Nobel prize winner Bob Dylan also wrote and released *Rough and Rowdy Ways* while under lockdown, his first full album in nearly ten years. According to Snapes (2020), many critics have declared it one of Dylan's best albums, with its sociocultural messages and political references documenting a record of the extraordinary events occurring at this time. Other more humorous artistic creations have emerged, such as the unknown person who altered the famous Michelangelo painting *The Creation of Adam* to show God with a bottle of hand sanitizer in his hand, Alice Bellchambers' version of a famous war poster to read "Your country needs you *to stay at home"* [Author's italics] (Art Fervour, 2020) or the Australian street artist LUSHSUX whose mural displays "Chinese president Xi Jinping wearing a hazmat suit while saying 'Nothing to see. Carry on'" (Mitman, 2020, para. 6). The documenting of the pandemic through art has been a feature of the global lockdown and will likely be ongoing for some time. For example, the Smithsonian Museum in the United States and the National Museum of Australia each invited their audiences to share their experiences of the pandemic through creative work, in order to provide future

generations with a deeper understanding of how it has shaped society (UNSW Art & Design, 2020). These are just two examples of projects around the world designed to enable the public to contribute to historical records of the pandemic and to convey their understanding of the event through art.

3. The Economic Cost of the Pandemic

The COVID-19 crisis has been described as the greatest economic disaster since the Great Depression (Rajah & Tooze, 2020). The arts sector continues to suffer economic fallout due to its reliance on audiences and ticket sales, the majority of which has ceased under lockdown rules. While numerous governments have put in place cultural recovery or support programs, there is still significant concern in relation to whether these programs are simply delaying an inevitable disaster (Guardian writers, 2020). In terms of the non-profit arts sector in the United States, a recent report proposed that the financial loss over the 12-month period from March 2020 was likely to be in the vicinity of $6.8 billion dollars, creating a "watershed moment for arts and cultural organisations" (Voss & Robinson, 2020, p. 6). The Royal Opera House in London had a 60 percent drop in income after the shutdown began in March 2020 (Savage, 2020). In Australia, the film and television industry lockdown has meant that "about $2bn worth of production is in a state of suspended animation" (Westwood, 2020, para. 9), while losses in the live music sector are said to be be in the millions and increasing (Fairley, 2020a).

The impact on jobs in the arts and artists' income in numerous countries has been profound. In the three months to May 2020, job vacancies in the arts and recreation sector in Australia fell by 95% (Wright and Duke, 2020). Hoe (2020) argues that the pandemic "will have a profound impact on the long-term viability and sustainability of Singapore's arts ecosystem" (p. 3). The global art fair market, which provides millions of dollars in sales for visual artists, is yet to see the full effects of the pandemic on its core business model. For example, 73.8% of survey respondents in China reported in the first quarter of 2020 that their art business would be very unlikely to survive beyond three months due to the shutdown of their industry (Archer and Challis, 2020). In the UK, it is estimated that the creative sector – one of the fastest growing areas of the economy pre-pandemic – is facing a loss of income in the region of 74 billion pounds, with approximately 400,000 jobs likely to be lost. The study by Oxford Economics also claims that the arts sector "is expected to be hit twice as hard as the wider UK economy" (Brown 2020b, para. 3), this impact described as placing the UK at risk of a cultural catastrophe (Pickford, 2020). In the US, the leisure and hospitality sector – which includes the arts, entertainment and recreation – was the hardest hit across the three months

February-April 2020, with over 40 million workers losing their job(s), representing nearly 50 per cent of the industry (Paine, 2020). In Europe, it was cited in mid-April 2020 that 50% of the workforce (1.7 million jobs) in the arts and entertainment sector were at risk, the second highest area of employment behind accommodation and food (Chinn et al., 2020).

4. The Impact on Tertiary Arts Education

In addition to the impact on public art institutions and community-based arts, the discourse suggests there will likely be a significant to severe impact on University and College art schools. Rosenberg (2020) goes as far to suggest that "the coronavirus crisis could be the final nail in the coffin for many struggling US liberal arts colleges" (para. 1). In the UK and Australia, art schools face similar challenges to stay financially viable, with the majority of institutions closing campuses and having to move to online education methods. The shift to online delivery for art schools has been a serious challenge for many, while those that have had active digital platforms have been able to adapt far more easily (Boucher, 2020). Challenges have included accommodating students who have had to return to their home country and who are in a different time zone, making synchronous delivery problematic, as well as the difficulties associated with demonstrating particular artistic techniques through videos and without the capacity to work one on one with students who work with art tools, music instruments and digital cameras for example (Flaherty, 2020).

There have also been other significant disappointments for art students, in that public events such as graduating exhibitions, musical performances and theatre productions have been cancelled due to social distancing requirements. For example, the Provost of LASALLE College of the Arts in Singapore described how "almost 200 live performances and recitals, film screenings and exhibitions (the most awaited celebration in the calendar)" had to be urgently transitioned to digital platforms (Purushothaman, 2020, para. 2). In the UK, almost 5000 students at the Royal College of Art in London signed a petition arguing against the decision to move all courses online and graduating degree shows to virtual spaces, the students requesting the College postpone courses until it was considered safe to return to face to face learning (Shaw, 2020). These are just two examples of the significant and rapid changes that have occurred in tertiary arts education as a consequence of the pandemic, which have been further complicated by a major degree of uncertainty about how long it will be before education can resume in full face to face mode. There are, however, some who argue that the disruption has provided "a significant opportunity for reflection; to consider these questions of what and why, that will define the post COVID-19 art school" (Slatter, 2020, para. 1).

Despite the various challenges that tertiary art schools are facing as a result of the pandemic, there is ongoing commentary regarding the importance of arts education for the future. Huang and Zhu (2020, p. 1258) describe the importance of including at least some elements of arts education for all University students – not just arts majors – and they refer to the benefits in cultivating innovation and a "creative sense of unique subjectivity". Sunday (n.d, p. 98) refers to art education as a "powerful tool for national revival", while Mulholland (2019) proposes that there are now opportunities to revisit the way learning occurs in the 21st century art school.

5. New Ways of Working for Artists

Artists are typically risk takers, in that they invest considerable numbers of hours or even years developing creative products, hence around the world new models of delivery have quickly emerged or expanded. In terms of the performing arts, this has included strategies such as making digital archives public, and establishing new YouTube channels (Midgette, 2020). Musicians have collaborated virtually in creating new work, rediscovering old music, fundraising to attempt to secure the survival of venues and to support other organisations and charities (Behr, 2020). Numerous grass-roots works have emerged. One of the most significant involved centenarian and World War II veteran Colonel Tom Moore, who by covering the track *You'll Never Walk Alone* as popularised by Gerry and the Pacemakers, raised over 29 million pounds for the National Health Service in the UK (Behr, 2020). Live streaming has expanded significantly, for example, the Royal Opera House in London has presented live relays of several key ballet works, continuing the tradition started in the first decade of the 2000s by the New York Metropolitan Opera House and the National Theatre in the UK (Williams, 2018). While live streaming can cater to large audiences and therefore has potential for profit making, there is a general view that it is a second-best option as compared to live attendance and that the income potential is not significant due to the challenges of implementing ticket sales in the online space (Hoe, 2020; Williams, 2018).

There have been adjustments to some of the older models of delivery in response to the pandemic. Lulkowska (2020) discusses the future for film, and suggests that "perhaps the most exciting news is the renaissance of drive-in cinema" (para. 12). Another recent initiative has seen the world-renowned Turner Prize amended from one major winner to ten bursaries of 10,000 pounds each, suggesting that it may be a "step towards a more diverse and equitable industry" (Brown, 2020, para. 1). Artists are making a concerted effort to respond to the current global situation and what is likely to be a very different world in future.

6. The Future for the Arts after COVID-19

As Midgette (2020) questions, is the "flood of online creativity the wave of the future – or just a stopgap measure?" (para. 2). If it is a sign of the future, and institutions around the world continue to migrate to the online environment to deliver content (Cragg et al., 2020; Hoe, 2020), it will result in a highly competitive market for capturing audiences (Midgette, 2020). Fairley (2020) also sees a challenging road ahead, with references to the need for new rules around live interaction in art spaces, the loss of work opportunities due to years of ongoing economic hardship, and a future with yet to be seen challenges for the next generation of artists who may have less options for presenting their work. Voss and Robinson (2020, p. i) propose that art institutions need to consider the following four questions as they look to survive into the future:

- "What might the next year look like?
- What is the source of our strength?
- How will we manage our people and revenue propositions to confront the new reality?
- When our doors reopen, whom will we gather?"

There are a number of unknowns in terms of the future for the arts. In relation to the visual art fair market, which in 2019 was estimated to be worth US$64.1 billion, numerous events have been postponed or cancelled, and attendances at events that have gone ahead have dropped significantly (McAndrew, 2020). This sub-sector may take many years to recover. The future for major public events such as light shows, gallery exhibitions and outdoor performances is unclear, given the significant unknowns relevant to ensuring how to put in place adequate social distancing measures. Another factor that is yet to play out is in relation to the typical audience age for traditional performance genres such as opera, ballet and theatre. Given it is mostly older generations, Midgette (2020) questions whether people are "going to want to come into a theatre or concert hall, to sit cheek by jowl with others in a crowd of hundreds or even thousands, many of them senior citizens, many of them coughing?" (par 8).

Hands (2020) proposes that as the crisis starts to come under control, "it is an opportune time to rethink the value of the arts, and how we speak about their financial and artistic success" (para. 19). This would be an important step forward, given artists have long been recognised for their abilities to contribute new ideas, to problem solve and to build communities as part of urban regeneration for example (Clark and Madgin, 2017). The arts therefore offer a means of supporting and assisting communities not only during but in the aftermath of the current crisis. The arts will be needed for individual and collective healing,

for building communities, for stimulating debate, free thinking and for creating permanent creative representations of one of the most traumatic periods in recent history. As argued by the Director-General of the United Nations Educational, Scientific and Cultural Organization (UNESCO), "Creativity builds the resilience we need in times of crisis" (Azoulay, 2020, para. 4). There is no doubt that in the near future, artists around the world will explore and create extraordinarily meaningful work that responds to the current pandemic and that will provide a powerful mechanism by which the world can reflect, seek comfort and hope for the future.

While the global art world has suffered very significantly, history proves that the arts will endure given the passion, persistence and agency that artists bring to their work. Millions of people around the world have potentially engaged more with the arts while in lockdown than they have previously; the capacity of the arts to provide comfort is powerful. The arts sector will survive and eventually thrive again; the arts will be needed as part of the rescue package to build the 'new normal', whatever this may be, with the sector positioned to play a lead role in the revitalisation of the global economy and the health of developed and developing nations. Artists are willing and ready to tackle the world's greatest challenges, armed with tenacity, passion and connection to the human spirit. We need our artists, art workers and the arts sector now more than ever; while currently severely challenged, artists and the arts will continue to shine a light and bring hope for a brighter future.

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CHAPTER 9

THE IMPACTS OF PANDEMICS ON MIGRATION

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ABSTRACT

Pandemic emergence through migration of tightly connected populations materialized in late 2019 with a novel coronavirus (COVID-19). Global spread was catalyzed by business, education, tourism, family and medical-related travel leading to swift international restrictions on movement and closed borders. Two-thirds of the worldwide migrant population journey for job opportunities and to access healthcare; many move internally in low-income countries. While migration has been a driver of global prosperity, it also places individuals in situations that impact their physical and mental wellbeing; many become vulnerable and marginalized in their communities. However, it is those same migrants that play a role in shaping the context and response to COVID-19. They have the dual burden of being more vulnerable to infection but also play a critical role in response working frontline jobs in public services and health. This chapter analyzes the relationship between pandemics and migration by first looking at migration as a driver of the pandemic and then at the effects of the pandemic on both migrants and the communities that host them. We conclude by analyzing the policy implications of the two-way relationship between migration and the pandemic.

Keywords: Migration, health, public policies, pandemic

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1. Introduction

Migration is one of the principal characteristics of our globalized world. The latest figures indicate that there are 272 million international migrants – defined by the UN as those living outside their country of birth for at least one year (UN DESA 2019). As a percentage of the world's population, international migration has increased from 2.9 percent in 2005 to 3.5 percent in 2019. Overall, migration has contributed to global development and prosperity; while making up less than 4 percent of the world's population, the McKinsey Institute (2016) estimates that migration contributes almost 10 percent of global GDP. The international flow of remittances – now estimated at $550 billion annually (World Bank 2019, xvii) -- dwarfs both international development assistance and foreign direct investments; remittances are generally credited with alleviating poverty, increasing food security, enabling education and social mobility in the country of origin (World Bank 2020). In addition to its economic impact, international migration has contributed to cultural diversity in countries which receive the migrants.

While most international migration is safe, orderly, and regular, around 10 percent of the world's migrants are forced to leave their homes, many of whom are recognized as refugees. The UN High Commissioner for Refugees (UNHCR) estimates that there are around 26 million refugees, another 4 million people who are seeking asylum and over 3 million Venezuelans who have left their country because of its political and economic situation (UNHCR 2020). Of the world's refugee population 85 percent live in developing countries with almost 68 percent originating from just five countries: Syria, Venezuela, Afghanistan, South Sudan and Myanmar (UNHCR 2020). While COVID-19 is having a particular impact on refugees and on those displaced within the borders of their countries by conflict, this chapter focuses primarily on migrants who have traveled to their countries for other reasons – in search of better job opportunities, education, or to be with family, for example. While we will focus on the impacts on international migrants, the number of internal migrants, particularly those moving from rural to urban areas, is estimated at around 740 million people – or 3 ½ times the number of international migrants (IOM 2018). In particular, China has over 280 million rural migrant workers who travel within its borders for employment and who have been hardest hit by as a result of socioeconomic disparities. Of particular importance to this analysis is the fact that international migrants tend to work in sectors at heightened risk to the virus: in the service sector – ranging from child and eldercare to restaurants and the hospitality industry to gig workers -- as well as factory employees and farm workers. This has increased their risk of contracting the virus as well as their vulnerability due to limited access

to health care. Undocumented workers in particular are at risk – both because they work in occupations where they may be exposed to the disease and because of national policies, financial restrictions and fear of discrimination or deportation.

In particular, this chapter focuses its analysis on the consequences of COVID-19 and the policy measures taken to respond to the pandemic on international migrants and both their communities of origin and destination. But before turning to the main portion of our research, we offer some analysis of migration as a driver of pandemics with specific reference to COVID-19.

2. Migration as a driver of the pandemic

In December 2019, a pneumonia of unknown etiology was reported to the WHO China Country Office; within two weeks a virus (SARS-CoV-2) was isolated, characterized and sequences were shared on global scale. On 30 January, one month from the formal reporting and after cases were reported across five WHO regions, WHO declared the novel coronavirus (2019-nCov)[1] a Public Health Emergency of International Concern (PHEIC) as outlined in Annex 2 of the International Health Regulations (IHR) 2005 (WHO 2005). This novel virus emerged from an unknown animal reservoir host, spilling over to humans during a time of national and international travel for Chinese residents – the annual Spring Festival which includes the Lunar New Year. In fact, travel during this period – with an estimated three billion trips – is the largest planned human migration in the world. In 2020, the emergence of the virus came right in the middle of the Spring Festival (10 January – 18 February). Although the city of Wuhan went into lockdown on 24 January curtailing some travelers, many had already left their homes traveling to other provinces or countries. As Thailand and Japan are among the most popular destinations, it was no surprise that Thailand was the first country outside of China to report a case on 13 January.

There are many factors, including but not limited to: environmental, host-pathogen, geographic, and socioeconomic, that play into the emergence, re-emergence and spread of diseases. Global cities are hubs for international travel, trade and tourism where they continue to attract international migrants and students in search of economic and educational opportunities. They are also the gateway for disease importation and onward community transmission, especially for novel and emerging respiratory pathogens. This situation placed many of the globe's best-connected countries at highest risk in the early phases of the COVID-19 pandemic. As a result, the global cities most affected: New York, Madrid, and

1 It wasn't until mid-February that the disease was named COVID-19 (WHO 2020a)

the Lombardy region in Italy, to name a few, are all centers for business, trade, tourism and have a higher-than-average migrant presence, according to a recent report by the International Organization for Migration (IOM) (Guadagno 2020). It is important to note that the IHR (2005) take a preventative approach focusing on strengthening capabilities to confront all potential public health emergencies of international concern when and where they occur. States Parties commit to core public health capacities to achieve compliance, building networks that can prevent local public health crises from becoming international catastrophes. The IHR were established with the objective of maximum prevention of the spread of infectious diseases with minimal disruption of travel and trade. While legally binding, they lack a formal enforcement mechanism for failing to comply with recommendations so, despite compliance to the IHR, many countries close borders or restrict travel in an attempt to prevent disease from entering their borders, in complete opposition of the IHR and against WHO recommendations.

The role of migration in the transmission and dissemination of respiratory infections has been examined for a number of pathogens. In the face of emerging disease threats, countries implement phases of containment, typically (and ideally) before cases have been reported within their borders. However, the question of the degree to which mobility restrictions are able to achieve containment at the source, or in the early stages of an epidemic, especially in combination with timely mitigation policies in the country of origin, has been questioned. We can look at historical, impactful pandemics like the 1918 influenza pandemic which led to over 50 million deaths worldwide, targeting a vast majority of young adults during a world-war, and can see how mobilization and density of a susceptible population led to rapid and global spread. However, in order to model how migration in today's world can impact epidemic and pandemic spread we need look no further than the last eleven years and analyze events such as the 2009 H1N1 influenza pandemic (pH1N1 2009), the 2014 and 2018 Ebola epidemics, and on-going epidemics of MERS (2012), Zika (2014) and COVID-19 (2019).

On 18 April 2009, under the obligations of the IHR, the US and Mexico reported cases of a novel influenza A virus H1N1 to the WHO's regional Pan American Health Organization (PAHO) Office. Mexico's first case was confirmed on 17 March and eleven days later the first case was confirmed in in California. While the US and Mexican authorities were quick to report and characterize the novel influenza virus, it was not until 25 April that WHO declared a PHEIC. It took six more weeks for WHO to declare a pandemic (11 June). By this time, the CDC estimated that roughly one million cases had occurred in the US. During the early stages of the outbreak, some countries implemented travel restrictions to Mexico which appeared to have had no real effect on the spread of H1N1. In three months, the virus spread across the

globe resulting in over 254,000 cases and at least 2,800 deaths on six continents (WHO 2009). Viral spread was in large part due to international travel and subsequent human-to-human transmission at each destination. Retrospective research indicates that the travel restrictions were too small in magnitude to make any impact (Bajardi et al 2009). Based on the ease of aerosol transmission, a completely immunonaive population, and ever-increasing population mobility, it was unlikely that travel restrictions could have been used effectively during the 2009 H1N1 pandemic and many experts at the time indicated the case would be the same in a similar future pandemic event.

Like H1N1, the global spread of the 2014 Ebola epidemic was due at least in part to people traveling between countries. In 2014 three countries in West Africa battled an old virus in a new setting. Ebola was first detected in Guinea in December 2013 and rapidly spread across Sierra Leone and Liberia due to a cadre of factors including limited health systems and high population mobility across porous borders. The epidemic, which lasted for two years, was responsible for widespread urban transmission and at least 11,300 deaths across the three countries. In late July 2014, an infected Liberian man landed in Lagos, Africa's most populous city and a major hub for travel and trade, and initiated a chain of transmission in Nigeria that infected a total of 19 people resulting in 7 deaths (WHO 2014b). On Aug 8, 2014, WHO eventually declared a PHEIC citing the unprecedented scale of the outbreak, geographical range, and the observed international spread of Ebola virus into Nigeria (WHO 2014a). In response to growing concerns of travel-associated cases, a number of airlines canceled routes through Conakry, Monrovia, and Freetown and countries closed their borders in complete opposition to recommendations and guidelines outlined under the IHR. Retrospective studies indicate that exit screening of travelers at airports (which was eventually implemented and required international support) proved the best method to assess health status of travelers and to prevent onward transmission and that border closures, at the time of implementation, did very little to prevent spread out of West Africa (Bogoch et al 2015). Mobility restrictions and border closures can impact trade, restrict access to food and medical support (consumables and personnel). Given the relatively low passenger volume across the capital cities' international airports, their localized economies, and the mode of transmission for Ebola the travel bans placed a larger burden of response on the countries themselves and inadvertently increase rates of transmission and infection in the most at-risk groups in each country.

Middle East respiratory syndrome coronavirus (MERS-CoV), has been reported in twenty-seven countries since it was first reported in Saudi Arabia in 2012. Travel-associated outbreaks have been a key factor in the spread of the virus outside the Middle East. In 2015, a single

passenger who acquired the virus abroad and sought treatment at a tertiary-care hospital in Seoul, created a cascade of exposures and infections in the Emergency Room and hospital where he sought treatment. Epidemiological investigations pinpoint a contact of the index patient to have played a major role in transmission, being dubbed a super spreader. In total, patient 14 was linked to 82 cases, or nearly 45 percent of the total cases in South Korea. In the end, 186 people were infected, 36 died and thousands were quarantined in a city of 25 million. The outbreak lasted only a few months (May-June) but the economic toll was so severe the central bank had to cut interest rates (Cho et al 2016).

Novel and emerging diseases, particularly those that spread effectively via aerosol droplets, are very challenging to contain in a mobile and interconnected global population. Keys to containment of an infectious disease include identification of infected individuals, subsequent treatment (and potential isolation of patients), and contact tracing in order to break transmission cycles. Time and time again we have seen that travel restrictions and border closures on their own cannot prevent an epidemic or pandemic. However, it is the potential and risk of disease spread associated with migration that has led governments to adopt restrictionist policies.

3. Policy responses to migration in light of pandemics

Displacement – the forced movement of people – occurs in every other type of humanitarian crises whether resulting from conflict or natural hazards. Displacement is a survival strategy as people seek to distance themselves from threats in their communities, but in the case of infectious disease, governments usually impose restrictions on population movements – both within their countries and at their borders – in an effort to limit the spread of disease (Edelstein et al 2014). From the plague in fourteenth century Europe through the 2014 outbreak of Ebola, governments have closed their borders to travelers from disease-affected areas while taking measures to prevent people from moving from disease-affected areas to other parts of their countries (Kenny 2020). More recently, with the Ebola outbreak in the Democratic Republic of Congo in 2018, governments of neighboring Uganda (IOM 2019) and Rwanda instituted hygiene and temperature checks on travelers; Rwanda closed and reopened its border during one day in August 2019 (WHO 2019).

As noted above, WHO's IHR (2005) do not recommend travel restrictions during epidemics, citing evidence that restricting international travel is not only ineffective in controlling disease outbreaks, but may divert resources from other, more effective interventions and prevent movement of health personnel and supplies. Restricting international travel also

has economic consequences which typically affect populations already suffering from poverty and marginalization. Nor does WHO see temperature screening – a popular measure used in some countries – as effective in controlling disease spread (WHO 2020b). Nonetheless, restrictions on movements of people were one of the first and most-frequently applied policy responses to COVID-19. In fact, as Chishti and Pierce note, "In just a few months, the world has experienced the largest and fastest decline in global human mobility in modern history" (Chishti & Pierce 2020b).

As noted above, China officially reported a cluster of cases of pneumonia on 31 December, attributed them to a new coronavirus on 9 January 2020 and on 23 January, locked down Wuhan (population 11 million) – the site of the disease's outbreak (Holshue et al 2020). On 20 January 2020, the US recorded its first case of coronavirus, a patient who had recently returned from Wuhan. Eleven days later, on 31 January 2020, the US instituted a ban on entry of non-US citizens who had been in China during the previous 14 days (US White House 2020). Although heralded by US President Trump as a bold response to the crisis (Kessler 2020) it was too little too late; experts noted that the ban excluded some 40,000 people who returned from China in the two weeks following the ban (Eder et al 2020). US restrictions on entry of those from Iran were imposed on 29 February, followed on 11 March by restrictions on travel from Europe's Schengen countries and on 14 March by restrictions on travelers from the United Kingdom and Ireland (Chishti &Pierce 2020a). On 17 March, Italy imposed a strict requirement for 14 days of quarantine on anyone entering the country (Italy Ministry of Infrastructure 2020). The US and Canada mutually agreed to close their borders to each other on 21 March; US and Mexico agreed to close their border to non-essential travel on the same date (US, DHS 2020). US, Mexico and Canada subsequently agreed to extend these border restrictions through 20 August 2020 and again until 21 November 2020 (Tate et al 2020; US DOS 2020).

As of 8 June 2020, 220 countries, territories, or areas had issued travel restrictions (IOM 2020b). These travel restrictions impacted international trade and limited the ability of humanitarian actors to access countries and people in need of assistance as a result of the virus. They have also devastated the travel industry – and the millions of people, including migrants, who work in those businesses. According to the UN World Tourism Organization, by 20 April 2020, 100 percent of tourist destinations had travel restrictions (UNWTO 2020). In early June, some countries – such as Norway and Italy had begun allowing some international travelers to enter. Some countries – such as New Zealand -- were geographically better able to control international travel.

In addition, many governments imposed internal travel restrictions. By 11 July 2020, about one-third of US states had instituted travel restrictions or quarantine requirements for those entering their territories from COVID-19 impacted states (Schwartz 2020b). India experienced the largest recorded internal movement as 6.5 million Indian migrants were told to return to their communities – mostly moving from urban to rural areas – by late May (IOM 2020c). Other governments, such as Australia, began imposing internal border controls as a result of increasing numbers of COVID infections some six months after the initial outbreak. It is worth noting that governments with centralized health systems – such as New Zealand and Norway – were able to set and implement policies across their entire countries whereas governments, like the US, which left pandemic response to subnational authorities had more difficulties in developing a comprehensive response. A particularly challenging situation emerged for those travelers who were in international waters when the pandemic was declared, leading to cruise ships being prevented from docking at points of entry and passengers from disembarking as well as a decline in rescues of migrants crossing the Mediterranean Sea.

While these measures were clearly intended to contain COVID-19, there is little solid evidence that travel restrictions do in fact limit the spread of the pandemic. For example, Askitos et al (2020), using sophisticated modeling techniques, find no effects of international travel controls, public transport closures and restrictions on movements across countries and regions on the spread of COVID-19. But they did find that cancelling public events, and stay at home restrictions do have an impact on the spread of the disease. Similarly, surveillance, testing, and contact tracing are effective tools in identifying community clusters followed by direct interventions to slow the spread of the disease and provide education and awareness to at-risk populations.

While the vast majority of countries in the world have implemented border closures, travel restrictions on arrivals from certain areas or quarantine requirements, these measures failed to prevent a global outbreak. And the measures have had many negative impacts.

Of particular concern is the impact of travel restrictions for people seeking asylum or other forms of international protection. In reviewing the provisions of such travel restrictions, UNHCR and IOM (2020) found that by April 2020, almost 60 governments made no exception in those travel restrictions for people seeking asylum. UNHCR and IOM noted growing instances of governments refusing to allow disembarkation of asylum-seekers rescued at sea and increasing cases of collective expulsions of migrants in the name of protecting public health. The US effectively ended asylum by "invoking the power given to the Surgeon-General in 1944 to block entry of foreign nationals who pose a public health risk," by preventing asylum-seekers

from entering the country to ask for protection. Many experts argued that this reflected the Trump administration's long-stated policy of controlling the border rather than reflecting a genuine concern with health (Human Rights First 2020). The US has justified restrictive policies toward immigrants not just because of their potential in spreading disease but because of their economic impact. Thus, the US suspended granting visas to certain categories of permanent immigrants who "present a risk to the US labor market during the economic recovery following the COVID-19 outbreak." While unemployment in US was 3.5 percent in February 2020, by April it had reached 14.7 percent (Chishti & Pierce 2020b). In March the US State Department suspended in-person consular interviews and visa processing for the vast majority of immigrants intending to move to the US. The US now bans all travel from 31 countries while its citizens are prohibited from traveling to all but around 20 countries in the world – the result of the summer surge in COVID-19 cases in mid-2020 (Schwartz 2020a).

Other governments have justified their imposition of travel bans and crackdowns on immigrants on public health grounds but in ways that support long-held efforts to restrict immigration and asylum-seekers. Thus, the Greek government has leveraged fears about the spread of coronavirus to justify plans to build closed camps for asylum-seekers. Viktor Orbán, prime minister of Hungary, blames foreigners for COVID-19: "our experience is that foreigners brought in the disease, and that it is spreading among foreigners" (Banelescu-Bogdan et al 2020) in ways reminiscent of his long-time efforts to blame migrants for terrorism (Kaminski 2015).

Policy responses toward migrants already living in countries varied. In Portugal, the government announced that all foreign nationals with pending immigration applications, including asylum-seekers, would be temporarily treated as permanent residents (except for seasonal migrant workers and some unauthorized migrants). The UK automatically extended the residence permits of some temporary workers (doctors, nurses etc.) as did China. In the US many immigrants are explicitly excluded from federal COVID-related benefits (though some states have stepped up) (Chishti & Pierce 2020b).

Although the European Union reports that the number of arriving asylum-seekers had sharply diminished as a result of COVID-19 restrictions (European Asylum Support Office 2020), the UN Office for Drugs and Crime (UNODC) reports that border restrictions imposed by COVID-19 may lead to an increase in smuggling and trafficking of migrants (UNODC 2020). It also seems that the harsher backlash against undocumented immigrants – now ostensibly on health grounds – is leading undocumented migrants to go even further underground – and to stay away from accessing health services. Given their increasingly

precarious economic situations, it also may be leading them to continue to go to work – even if they have symptoms of COVID-19.

These pressures for travel restrictions are likely to continue in spite of the lack of evidence that they are effective measures to prevent the spread of COVID-19. UNHCR has issued legal guidance on dealing with people in need of international protection (UNHCR 2020b). IOM has issued guidance on such issues as consular relations and mobility corridors or bubbles IOM 2020a).

4. Effects of pandemic on migrant populations: Singapore, US, other cases

The novel coronavirus pandemic has underscored the vulnerability of migrant workers as an occupational group. Travel bans, lockdowns and social distancing have impacted local and global economies, hitting migrant populations hardest. As noted above, there are almost 300 million international migrants in the world. A significant number of migrants are low or semi-skilled workers, who live in crowded housing environments with inadequate sanitation and hygiene - all of which make a favorable environment for disease spread among workers and their families. Not only does the migrant population have an increased risk of exposure and infection they also are particularly at risk of losing employment, wages, and health insurance coverage as a result of the loss of businesses and services.

Migrants living in rural locations or in segregated communities may lack communication networks to the larger community, miss early, crucial messages on infection prevention control and can underestimate their exposure risks. Low-literacy resources on hand-washing, social distancing and other containment measures has been limited outside humanitarian settings. Migrants may be discouraged to find care or request help and face barriers to getting basic health needs met due to cultural and language barriers, financial constraints, and/or ineligibility for programs. The effect of epidemics and pandemics on undocumented migrants is a global issue but it falls beneath many political and social radars. Undocumented migrants lack basic legal rights to residence in their host country so while they fall into similar risk categories as other migrants, they have no relationship or mode of communication with the healthcare sector, no source of treatment or care and could be additionally burdened by underlying health conditions as a result of the lack of healthcare (Bhopal 2020).

Migrants provide a range of skills and professions that are essential to a community in routine day-to-day, during a pandemic they become crucial to response and recovery. These

sectors include healthcare workers, store clerks, cooks and agricultural workers, among many others. In the U.S. for example, 30 percent of doctors and 27 percent of farm workers are foreign born. In Australia, 54 percent of doctors and 35 percent of nurses are immigrants (Foresti 2020). The effects of the pandemic and resulting economic impact also affect the families and communities of migrants' origin. The World Bank estimates that the flow of remittances will decrease by 20 percent in 2020 as a result of the pandemic and resulting shut-downs affecting all regions of the globe. The drop, due to a decrease in wages and increase in unemployment of migrant workers, represents a major blow to low and middle-income countries (LMICs) and a loss of financial support for many vulnerable households. Remittances alleviate poverty in LMICs, improve nutritional outcomes, are associated with higher spending on education, and reduce child labor in disadvantaged households (World Bank 2020).

As a small nation of 5.7 million, Singapore was one of the first to detect cases of COVID-19 in early February and enact measures to effectively contain the virus within its borders. While cases grew in March, mainly due to citizens and residents returning from other countries; these individuals were subsequently quarantined or issued a stay-at-home notice for 14 days upon returning. However, a surge in April was linked to local transmission. The majority of new cases were found among migrant workers living in dormitories, a population overlooked by the Singaporean government in its containment efforts. By early May, 88 percent of all cases were from migrant dormitories with a single dormitory, of 13,000 workers accounting for 12.5 percent of all cases in the country (Singapore, Ministry of Health 2020). The reason for Singapore's surge was that national testing strategies failed to consider the over one million migrant workers who live and make up a significant portion of the workforce in the city state. Most migrants are employed in construction, manual labor, and housekeeping. Of these, an estimated 200,000, mainly males from South Asia, live in 43 purpose-built dormitories with an estimated 10 to 20 residents in each house who share toilet and shower facilities, eat in common areas, and sleep feet away from each other. The larger dormitories, which house up to 25,000, were built for communal living and include on-site groceries, recreational facilities, and remittance services and are managed by operators regulated by the Ministry of Manpower (Singapore, Ministry of Manpower 2020).

Singapore responded quickly and effectively to the virus: creating a task force, establishing a quarantine of the dormitories and extensive testing and segregation of healthy and ill residents with daily monitoring, and providing on-site healthcare facilities. The local community created websites to provide educational messages in migrants' languages and to recruit volunteer interpreters. Massive efforts were put in place for migrant housing facilities that

allowed for proper social distancing, monitoring and enforcement of quarantine and services including food, hygiene maintenance (reusable masks, hand sanitizer and thermometers), and Wi-Fi to communicate with family abroad (KOH 2020). While Singapore's response to the surge in cases was swift and effective, proper inclusion and consideration of migrant health in pandemic preparedness planning and response could have prevented such herculean efforts. Migrant workers in Singapore are not just at higher risk for COVID-19; cases of enteric fevers and tuberculosis have been on the rise while half of all diagnosed hepatitis E cases were associated with migrants. Those who work outdoors without proper protections are at higher risk of vector-borne diseases like dengue, Zika and chikungunya (Sadarangani et al 2017). In order to prevent further epidemics, Singapore, and other countries that rely on migrant workers, should implement policies and programs including education on hygiene, sanitation and nutrition alongside vaccine campaigns (when possible) for at-risk diseases and access to healthcare.

As noted above, COVID-19 and the US government's response disrupted virtually every aspect of the immigration system, including border closings, suspension of immigrant processing and limiting social services to immigrants. In addition, tens of thousands of people remain in immigration detention despite the high risk of COVID-19 transmission in crowded jails, prisons, and detention centers that U.S. Immigration and Customs Enforcement (ICE) uses to hold noncitizens. Not only were asylum-seekers prohibited from seeking protection in the US, the pandemic led to the suspension of almost all immigration court hearings and limited the functioning of those few courts which remain open (American Immigration Council 2020).

While immigrants are a large and ever-growing part of American society, they are also disproportionately low-income and uninsured. A number of those unemployed as a result of the pandemic have had to rely on publicly-funded health care for screening and/or treatment of COVID-19 however, due to eligibility restrictions, those who have not yet become US citizens do not qualify for Medicaid. Having populations of individuals without access to care or information on how to protect themselves creates an opportunity for virus transmission spreading across communities and the country. Unemployment places additional stress on migrants' access to health care. A recent study by the Migration Policy Institute provided scenarios for the impacts of unemployment on access to healthcare services. They estimate that before the pandemic about 4 percent (or 7.7 million) of those unemployed did not have public or private health insurance coverage. Using medium and high-employment scenarios they concluded that 17.5 percent and 25 percent (respectively) would be uninsured (Capps & Gelatt 2020).

5. What we learn about migration and global governance from the pandemic?

While it is likely that both internal and international migration will change in response to the pandemic, migration will continue to play a major economic and social role in the post-pandemic world. "Indeed, the immediate response of states across the globe to the spread of COVID-19 has been to close borders; however, the fundamental factors that led to an interconnected word will remain relevant. Information technology, social media, electronic payment systems, sophisticated shipping systems, multinational companies and complex international business structures are part and parcel of life in the twenty-first century and are unlikely to disappear" (Hafuel-Radoshitzkey & Heistei 2020) The fact is that the global economy depends on free movement of capital, services and migrant workers and that hundreds of millions of families live in different countries. As long as there are disparities in standards of living, people will move to where they can support themselves and their families. And unless there is a sharp reduction in conflict and human rights abuses, and the many on population movements, it is unlikely that either internal or international displacement will diminish. However, the pandemic will impact both national policies toward migrants and international governance of international migration and forced displacement.

On the national level, COVID-19 and migration restrictions are a boon to nativist nationalists – a trend apparent in democratic states over the past decade and characterized by the rise of right-wing, anti-immigrant political parties. The end of the Cold War and the 9/11 attacks changed the public discourse on migration to focus on international security in addition to the economic, social, cultural and humanitarian contexts. Now the COVID-19 pandemic is adding a public health dimension to traditional security concerns where migrants are seen as carriers of disease. The 'fear of the other' now includes a health dimension. Stigmatization, misinformation and discrimination are already leading to a rise in xenophobia (United Nations 2020)

As Sandvik and Garnier (2020) note, we are likely to see even more herding and lockdown of migrants and the exacerbation of marginalization of migrants. Given the dependence of modern developed economies on migrant labor, governments are faced with a choice. In some cases, such as Singapore where migrants make up over 40 percent of the population (Statista 2020), curtailing migration would mean either a drastic economic decline or a fundamental change in its economic model. In these cases, governments would be well-advised to ensure inclusion of migrants into their national public health systems. Thus,

countries such as Portugal, Canada and the United Kingdom have expanded access to health services to migrants. Other governments may try to expel migrants as a way of dealing with the potential public health threat; the US government expelled some 14,000 migrants in April 2020 (Montoya-Galvez 2020) while Saudi Arabia has expelled large numbers of undocumented Ethiopian migrant workers (Endeshaw & Paravicini 2020). And in yet other cases, governments may try to impose more restrictions on migrants while recognizing the need for their labor; Germany brought in 40,000 migrants in April 2020 to harvest asparagus while imposing strict limits on their movements and interactions with the local population. This 'quasi-quarantine' model is likely to become a more frequently-used mechanism for securing needed migrant labor (Hurst 2020). In another model, some governments are setting up migration 'bubbles' which allow travel between countries regarded as relatively safe while excluding others (Chugh 2020).

While some governments may expand health coverage to migrants in recognition of the fact that public health depends on the health of migrants, others will further marginalize migrants, particularly undocumented migrants, limiting access to social services, including public health. If migrants continue to work in essential industries and services, but do not have access to health services, they are likely to be disproportionately at risk of disease and of spreading the disease.

One of the striking characteristics of response to the pandemic has been the turning inward and moving away from multilateral cooperation. Most striking is the case of US president Trump's criticism and then withdrawal from the WHO in mid-2020. Rather than exercising leadership within multilateral bodies, the US rejected an expanded role for international cooperation, focusing instead on curtailing migration. The US withdrawal may lead to increasing Chinese influence in multilateral bodies such as the WHO.

In 2000, United Nations Security Council resolution (UNSCR) 1308 on HIV/AIDS and later UNSCR 2177 in 2014 on Ebola both underscored that the control of infectious disease required urgent action and a coordinated international response to the pandemic. In the case of COVID-19 – a much greater threat to international peace and security than either HIV/AIDS or Ebola -- the Security Council was painfully slow to react, largely because of US insistence on calling the disease the 'Wuhan' or 'Chinese' virus for months. It was not until early July 2020 that the Security Council adopted a resolution (UNSCR 2532) on COVID-19 (UN Security Council 2020). The resolution endorsed the UN Secretary-General's call for a global humanitarian ceasefire and asked for UN agencies and peacekeeping operations to assist with response to COVID-19. But there was only passing mention of the need to work

together and no mention of a commitment to strengthening global institutions to the pandemic or the central role of the WHO.

The lack of a strong multilateral response to the pandemic emphasizes the trend of declining commitment to international institutions and global governance and the growth of what some characterize as the 'illiberal world order.' And yet the impact of the pandemic on the global economy and on migration trends – notably the sharp decline in remittances – are global problems that require a strong collective response. The World Food Program, for example, is sounding the alarm of a dramatic increase in world hunger, pointing to an increase in the number of food-insecure persons from 149 billion to 270 million by the end of 2020 without a massive increase in international support (UN WFP 2020). The fact that it took the international community such a painfully long time to adopt a simple Security Council resolution on the pandemic does not inspire optimism in the potential for an effective response to the long-term global problems which will result from COVID-19.

And on the issue of migration governance, the 2018 adoption of the Global Compact on Safe, Orderly and Regular Migration seemed to herald a new phase of global cooperation on migration and underscored the need for countries to work together to address shared concerns, including global health. While governments have always resisted cooperating on migration issues – seeing it as fundamental to their national sovereignty – current trends suggest that implementing the Global Compact on Migration will become even more difficult in the future.

6. What we learn about pandemics from migration?

We must use our evolving understanding of emerging disease threats, the environment, and human behavior (including migration) to inform policies and procedures for disease prevention, containment and response. It is clear that the volume and frequency of global travel and migration will remain a key way of life post-COVID-19. Up until now, research has shown little evidence that travel restrictions and border closings alone can prevent disease spread. This is echoed in the IHR, focusing on detection and response at source, strengthening surveillance and response at Points of Entry, and on enabling global communication channels rather than border closures. In addition, it is now more important than ever for nations to consider social determinants of health frameworks in designing and providing health care. As we outline above, migration will continue to increase as people move to where they can support themselves and their families. Migrants contribute to basic infrastructure, culture and economy and have become, for many global cities, the backbone of a number of essential functions.

Migrant health often remains sidelined in broader discussions on migration. Available data is insufficient to inform and support robust health systems for migrant care, placing migrants in a forgotten demographic in national health strategies. To date action from the international community is lagging behind the commitments made in international compacts and agreements including the Global Compact on Migration (UN 2018), the New York Declaration (UN 2016), the Global Human Rights Framework (International Justice Resource Center), WHO Constitution (WHO 2006) and the 2030 Agenda for Sustainable Development (UN 2015) which directly and indirectly promote migrant health. The responsibility rests with States to respond to the health needs of migrants. It is our hope that with the acceptance by States of their responsibility to ensure adequate standards of care for health and human rights, coupled with the on-going threat of emerging infectious diseases in our interconnected world that coordination will/can occur between government and organizations to consider and plan for the inclusion of migrant health in national health programs and pandemic preparedness and response plans. This is not a short-term problem brought to light by the COVID-19 pandemic; we must ensure access to health care for migrants not only as human right but a critical component of health systems strengthening and global health security.

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CHAPTER 10

REFUGEE STUDENTS DURING PANDEMIC TIME: KEYWORDS FOR ACADEMIC INTEGRATION

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ABSTRACT

The present paper reports the experience of the CAP (Centre of lifelong learning of the University of Bari Aldo Moro) and its activities in the field of validation and certification of competences acquired in formal, and informal contexts of learning of young student refugees who have chosen to continue their studies which were interrupted in their own countries. This CAP's experience highlights how informal education is crucial within the processes of academic integration. Moreover, this experience represents an attempt of internationalization aimed to institutionalize the "finalized recognition" procedure, through the comparability of qualifications and the certification of competences. In particular, the paper focuses on the most relevant words of a Focus Group Discussion held with the refugee students at the University of Bari "A. Moro". The event was realized during the UNHCR World Refugee Day celebration. How did the students face the restrictions due to anti-Covid-19 security rules? How did they respond to the stop of face-to-face classroom teaching and to the solely digital learning arrangement and on-line administrative services of the host University? The paper presents the key words of the most relevant answers to these questions and starts from the testimony from a Dept. of Economy University freshman and from a Dept. of Education graduate student, different in the concern of integration levels but very similar on the aspect of motivations and resilience capabilities.

Keywords: Refugees, academic integration, UNHCR, resilience, pandemic time

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1. Education: a Resource for the Integration of Young Refugees in Italy

Education is, in the current refugee crisis that Europe is facing, a strategic dimension for integration, and higher education in particular is crucial in providing refugees with greater opportunities for access and social participation. Data from the UNHCR's *Turn the Tide: Refugee Education in Crisis Report* (2018) already show that only 61% of refugee children in the world attend primary school, compared to 92% of children in the world. In the case of higher education, the situation is particularly critical: if at this level school enrolment is 37% in the world, in the case of refugees the percentage drops to 1%, a situation that has not changed in the last 3 years. «Moreover, around half of all asylum applicants in the EU are aged between 18 and 34 – the age range typically associated with higher education» (European Commission, EACEA, & Eurydice, 2019, p. 24).

More than 79,5 million people in the world are currently displaced by conflict, violence and persecution. Of these, 26,0 million are refugees (of whom over 20 million are under UNHCR mandate)[1]. The 1951 Geneva Convention relating to the Status of Refugees establishes minimum standards for the treatment of refugees in countries of asylum, including the right to housing, public support and education. However, holders of international protection face greater problems and difficulties than both the resident population and other foreign persons in accessing these services, including access to education, especially university education[2]. In 2018, the number of refugees who had access to university education increased from 1% to 3%. However, with regard to the 37% globally, the difficulty for refugees to reach higher education opportunities continues to be dramatic and so far from the UNHCR target of 15% of the refugee population entering the higher education system by 2030[3].

The United Nations High Commissioner for Refugees (UNHCR) considers refugees' access to higher and university education to be an integral part of its protection mandate and a strategic operational priority[4]. As stated in the 1951 Geneva Refugee Convention and its 1967 Protocol, it is necessary first and foremost to recognize the fundamental norms regarding the rights of refugees in different areas of life, including access to education (Art. 22), as also reaffirmed in the United Nations Agenda for Sustainable Development. It states: "No

1 United Nations High Commissioner for Refugees (2019) https://www.unhcr.org/unhcr-global-trends-2019-media.html

2 United Nations High Commissioner for Refugees (2019) https://www.unhcr.org/tertiary-education.html

3 United Nations High Commissioner for Refugees (2019). https://data2.unhcr.org/en/documents/details/71213

4 United Nations High Commissioner for Refugees. (2017) https://www.unhcr.org/excom/announce/5894558d4/unhcrs-strategic-directions2017-2021.html

one is left behind"; this statement is also mentioned in the Sustainable Development Goal 4.3: "*By 2030 ensure equal access for all women and men to affordable quality technical, vocational and tertiary education - including university*". Furthermore, with regard to higher education, Article VII of the Lisbon Convention says: "*Each Party shall take all feasible and reasonable steps within the framework of its education system and in conformity with its constitutional, legal, and regulatory provisions to develop procedures designed to assess fairly and expeditiously whether refugees, displaced persons and persons in a refugee-like situation fulfil the relevant requirements for access to higher education, to further higher education programmes or to employment activities, even in cases in which the qualifications obtained in one of the Parties cannot be proven through documentary evidence*".

UNHCR therefore, urges the Lisbon Convention States Parties to put this provision into practice through the adoption of flexible evaluation measures, such as those suggested in the Lisbon Convention Explanatory Report and by the Lisbon Convention Committee on Recognition. In accordance with Article 22 (2) of the 1951 Convention and with reference to the recommendation of the Executive Committee, UNHCR also encourages EU Member States to extend the use of such flexible assessment measures to qualifications obtained by refugees in countries other than those covered by the Lisbon Convention.

Therefore, also because of the growing phenomenon of the devaluation of cultural and professional qualifications held by young beneficiaries of international protection, it is essential to promote an appropriate cultural/academic integration process that could encourage their active participation in the society. The chance to contribute to an adequate process of cultural integration of the young refugees, especially in the academic, would also involve the possibility to increase their empowerment and spread more inclusive and supportive communities in society.

Regarding these important priorities established at the international level, it is more necessary than ever to understand how fundamental is to promote, for young refugees, an adequate process of cultural and academic integration in order to favour their active participation, also because of the growing phenomenon of the devaluation of their cultural and professional qualifications. Offering educational opportunities to young displaced refugees, however, cannot be the result of late reflection, since it requires long-term planning and investment. For this to happen, it is also essential that refugees could be integrated into the education system of the country in which they live, as education and training can in fact be an essential and strategic part of the European (and not only) response to refugee crises.

2. The Experience of Refugee's Academic Integration at the University of Bari

A process of integration and inclusion involves multiple aspects, from economic independence to the creation of a relational fabric, from the acquisition of linguistic and cultural skills for full participation to the political dimension of citizenship, and may be achieved over different time spans and to various degrees (Cesareo & Blangiardo, 2009). Presupposing a multidimensional approach to operational solutions, and to ensure the result is extended to cover various generations, it is fundamental to work on the possibility to diminish social inequality starting from interventions of a cultural nature. Contrasting all approaches of a structuralist kind, it is fundamental to consider the relationship between education and social mobility in order to obtain a high-level qualification and a qualified job to make it possible for people to improve their initial social position. The step forward that the hosting societies are called upon to make, as expressed also by the UNHCR, consists of placing the refugees in the condition to be able to state their own needs and take part actively in decisions concerning their own lives. When they are in a position to be able to take part in the definition of strategies and policies, it will at last be possible to speak of the real empowerment of the refugees themselves. For these reasons, working in terms of valorisation and enhancement of the cultural capital of migratory resources represents a real turning point for inclusion policies (Colombo & Scardigno, 2019), a focus on the unexpected effect of unfairness (Peterson et al., 2017) that may be triggered in processes that – despite activating acceptance itineraries – does not make the step of promoting real recognition of human capital and the economic and cultural advantage of valorisation and integration.

The *CAP (Centre of lifelong learning of the University of Bari Aldo Moro)* thus currently works to apply the combined guidelines of articles 22 and 25 of the Geneva Convention, of art.2 of Law 148/2002, of art. 39 of the TUIM paragraph 5, the procedure laid out in the *Testo Unico* on immigration (legislative decree No. 286/98, directive 2011/95/EU – legislative decree 16/2014 – recognition of qualifications in lieu of original documents, the procedure foreseen for law No. 148/2002 following the Lisbon Convention). On the basis of this normative framework, the *CAP* operates on three main services of recognition and valorisation of the human capital of refugees, i.e.:

- The recognition of previous qualifications with a view to academic integration;
- The recognition of on-the-job learning with a view to the certification of professional qualifications as acknowledged by the regional council of Apulia;The vocational/ aptitude recognition with regard to the highlighting of the soft skills of service users.

The (interdisciplinary) practice of social research, applied to and in support of the public policies of inclusion, specifically concerns the recognition and assessment of the qualifications of people granted political asylum, refugees and beneficiaries of international humanitarian and subsidiary protection, cases in which it becomes a "moral and ethical obligation" (Trimble & Fisher, 2005) to make it possible for them to obtain an initial assessment by the host university on the equivalency of their qualifications granted in their countries of origin and of which no original copy is available. Given that the refugees have a well-founded fear of persecution and cannot turn to the authorities of their own countries, including consular representatives abroad, the state in which the refugee resides is obliged to deal with their situation, to activate all the necessary and substitutive procedures to understand the juridical status of the person as well as the formative and scholastic career they come from, both to access new scholastic transitions and to obtain certification of comparability of their previous academic career. The itinerary set up in 2017 therefore addresses a completely new target for our University, one that challenges the logic of inclusion based on the criteria of income and social status.

The young refugees who make use of the *CAP* academic services constitute a unique opportunity for us as researchers in the field (it is not by chance the interdisciplinary team is made up of academic researchers of sociology of education, psychology of work and didactics) to reflect discursively on the quality of our work and above all, on the potential of these tools to respond not only to criteria of internal and external validity, but to also be able to provide useful and applicable answers. This is a local perspective on integration processes which valorises experimentation and concrete, contextual inclusion practices, capable of creating virtuous circles that may also indirectly counter the emergence of new forms of populism and racism (Zanfrini, 2015), as community-based responses to the widespread sense of fear and disorientation among autochthonous citizens.

In the University of Bari, as well as for all Italian universities that wish to guarantee a process of academic inclusion, also with reference to the Manifesto for Inclusive Universities promoted by UNHCR, we make use of the important resource CIMEA, in order to promote the transparency of previous studies. CIMEA is the node of the international network ENIC-NARIC and, as a ministerial institute, it is able to produce a declaration of equivalence of qualifications (on MUR mandate it is free of charge for refugees and is the only instrument that allows access to a course of tertiary education), thus allowing the recognition of the university degree already acquired in the country of origin (Scardigno et al., 2019). Moreover, an important experience of integration was achieved with the certification of the skills of two

Afghan refugees who had gained in Italy several experiences of intercultural mediation and who obtained, thanks to the University of Bari, an important recognition with a consequent professional qualification of "Technicians of intercultural mediation" (Scardigno, 2019).

Currently, 16 refugee students are enrolled at the University of Bari, attending different courses of study and in 2019 the first two refugees graduated from Political Science and Linguistic Mediation, reaching the goal of the three-year degree and today they attend specialized courses of study (the first in Bologna, the second in Bari).

Our international students with protection come from Syria, Afghanistan, Iraq, Pakistan, the United Arab Emirates, Cameroon, Gambia, Guinea, Mali, Nigeria, the Palestinian Territories, Egypt and Libya. Four of them are enrolled in the first year of International Mediation (2), Economics and Commerce, Law. One student is enrolled in the second year and comes from Afghanistan (International Mediation), six students are enrolled in the third year of Biological Sciences (2), Education and Training Sciences (2), International Mediation (2); 1 student is enrolled in the first year of specialization in International Relations and 4 in the first year off and are about to graduate from Economics and Commerce, International Mediation, Languages.

In the course of these years, the *CAP* has also met students who abandoned the degree programme undertaken. It was the case of *U.* who, however, obtained the recognition of his degree in Communication gained in Pakistan and now works for the International Organization of Migration, or *S.* from Nigeria who decided to move with his new family to London, or *S.* from Yemen who unfortunately suffered the mourning of her Italian husband from whom she has not yet been able to recover.

Stories of resilience, of social fractures, made even stronger by a period that we are still going through and makes it particularly hard.

Table 1. Students with international protection enrolled at the University of Bari and CRUI - Ministry of the Interior scholarship-holders for the A.Y. 2019/20

Name	Gender	Year of birth	Nazionality	Degree course	CRUI scholarship year
N.	Male	1995	Nigeria	Political Science, International Relation and European Studies (three-year course)	3°
S.	Female	1992	Iraq	Biological Sciences (three-year course)	3°
K.	Male	1983	Egypt	Linguistic and Intercultural Communication (three-year course)	4°
G.	Male	1987	Iraq	Linguistic and Intercultural Communication (three-year course)	4°

W.	Male	1985	Palestinian Territories	Languages and Cultures for Tourism and International Mediation (three-year course)	1°
N.	Female	1964	Pakistan	Training and Education Sciences (three-year course)	3°
R.	Male	1988	United Arab Emirates	Languages and Cultures for Tourism and International Mediation (three-year course)	1°
S.	Male	1963	Pakistan	Training and Education Sciences (three-year course)	3°
L.	Male	1988	Gambia	Economics and business (three-year course)	4°
A.	Male	1994	Cameroon	Degree in Languages on 02.14.2020 Enrolled in Political Sciences, International Relation and European Studies (three-year course)	4°
S.	Female	1999	Libya	Economics and business (three-year course)	1°
G.	Male	1993	Nigeria	Languages and Cultures for Tourism and International Mediation (three-year course)	3°
K.	Male	1995	Afghanistan	Languages and Cultures for Tourism and International Mediation (three-year course)	2°
M.	Male	1990	Syria	Cultures of Modern languages and Tourism (three-year course)	4°
F.	Female	1989	Iraq	Languages and Cultures for Tourism and International Mediation (three-year course)	3°
M.	Male	1993	Guinea	Law (five-year course)	1°

Note. The scholarships are reserved for students having the status of refugees or subsidiary protection to enroll in bachelor, master degree and PhD programs in I talian public universities.

3. Different (but very similar) stories in the Covid-19 pandemic times

Each year UNHCR celebrates the resilience of refugees on World Refugee Day, 20 June. Since the *CAP* was established in 2016, our University has always honored its refugee students on this important day by organizing events in which they have enhanced their integration and studies, communicating with the local community and the academic community through poetry, music, art, dance and singing. It is an opportunity to interact and exchange ideas with Italian and international students from our University from an intercultural, artistic and convivial point of view, in order to share talents, diversity, spirit of adaptation, but also to preserve cultural background, show the motivational drive of international students and offer testimonies of resilience. On the website of our University you can view many videos

and photos of the many initiatives that over the years have been organized by the students themselves[5]. The World Refugee Day has always been a useful opportunity for the University of Bari to raise awareness around the value of differences and to make available to those who do not have a migration background or an unmediated knowledge of the phenomenon, the experience of students who, on the other hand, bear the scars of the phenomenon, with the aim of showing their experience, beyond the prejudices and encodings resulting from the media.

From March 2020 until today, the Covid-19 emergency and the harsh restrictions imposed by the pandemic period have unfortunately and drastically reduced the opportunities for engagement and exchange between students of our University. Refugee students in particular, have experienced great difficulties linked to the absence of their families of origin, which we all had the opportunity to consider as safe nests and protection elements during the lockdown.

Among the most vulnerable categories, these students have lost the daily relationship with their colleagues, reduced the possibility of interaction related to teaching aspects, lost the direct relationship with teachers and access to libraries and service counters, which in some cases also make up for language deficiencies and administrative support in the handling of practices related to studies. Often it is not simply a matter of knowing who to turn to for information and assistance, but also of relating to people with whom a trusting relationship has been established, sometimes also linked to psychological support which can become almost as essential as health and legal practice.

Having missed most of the opportunities for normal socialization in their respective Departments, it was decided to dedicate the virtual space of the University to them by transforming, for one day, the online teaching platforms into a place for meeting and discussion. Starting from the assumption that not all of these 16 students know each other, both because they are enrolled in different courses of study (the Departments are urbanistically distant from each other) and because they belong to different age groups and ethnic groups, the Focus Group Discussion also offered the opportunity to create a moment of contact, especially with freshmen, which is normally generated on the occasion of social events planned by the University, such as the Refugee Day.

In order to be able to understand and evaluate the difficulties linked to this period, *CAP* first proceeded with the administration of a self-completed evaluation questionnaire that the researchers prepared in order to understand the kind of problems faced by students and those that were accentuated by isolation.

5 Centre for Life Long Learning of University of Bari. Retrieved from https://www.uniba.it/centri/cap

The process of self-assessment is not only based on awareness, that is the ability to grasp critical elements in order to develop the necessary tools for change and to produce a resilience reaction, but on the courage to highlight one's own weaknesses, to face uncertainty, and on a basic principle of usefulness: to change and improve we have to recognize that evaluation, analysis, awareness raising are hard but necessary processes.

This first phase of compilation and analysis in autonomy was followed by a moment of collegiality and confrontation: the debate within the group gave space not so much to the verification of the answers, but to their sharing. Since there were no correct answers but reflections, self-analysis on moods and reactions to the problems encountered, the group discussion served as a phase of comfort, encouragement, consolation, stimulus… (leading to considerations such as: others have experienced the same fears as me, I am not alone, etc.).

However, this period was also an opportunity to renew the commitment of *CAP* researchers in the process of academic integration of refugees by listening to the stories and the (extraordinary) words of life experience and resilience of our students.

In order to highlight the different approaches to the pandemic in terms of age and living conditions, a space for intergenerational confrontation has also been created. For this reason, two testimonies have been offered that are very far apart in terms of age and experience: the first is that of N. and S., two spouses with three dependent children, who are students over 50, close to graduating and who have re-registered to have a university degree formally recognized in Italy; the second belongs to S., a 20-year-old and newly-registered Economics student of Libyan origin.

Below is the full story that the student N., enrolled in Education Sciences, mother of three children, former head of a Catholic school (and therefore persecuted) in Pakistan and already graduated in English in her country, wanted to share during our online meeting:

> *"My name is N., my husband and I have three children. I worked as an executive at a Christian school in Pakistan. It was a school/college for girls, where the girls came from the North of Pakistan. The school was burned because the militants didn't want the Muslim girls to study in a Christian school. First they threatened us and then they set the school on fire. We tried to re-open the school because of many requests from the girls' parents, but they burned the new school again together with our house. Moreover, they also tried to kill me, locking me in a room that was burned-out. I am alive thanks to our cook who was a Christian. He opened the door that someone had closed from the outside, when he heard me scream. The parents saw what had happened on TV and came to get their daughters right away. The nuns from my daughters' school took my children away for their own safety.*

When I finished sending all the girls home, I couldn't walk or talk anymore. My husband took me to the hospital, where it turns out I have diabetes, and I hurt my shoulder. In a few hours we were devastated, homeless, jobless and our children without school and our lives threatened. My husband and I decided that we had to escape Pakistan as soon as possible. Dubai was the closest place we could escape. We tried to start a new life in Dubai, working as teachers and our children started attending a new school. For security reasons we also had to leave Dubai after two years.

Thanks to the Italian Government, which has considered our problem and accepted our request for asylum, we received a house in Puglia from the Minister of the Interior. Our children started school in a completely different situation. We started our religious life with the parish. But even in the parish it was not easy to integrate. Our children suffered difficult times because they did not know the language and there was discrimination from students and some teachers. Our children struggled to settle both in the church community and at school. They went to school with tears in their eyes. The headmaster of the school spoke to the teachers in our presence and explained to them that our children's problem was only the language. After about 6 months the teachers 'welcomed' them as part of the class. At the same time, my husband and I had a lot of difficulty in learning the language and finding a job. We left our CV in more than 500 places but in vain. We were very tired and depressed because for two years we looked for work everywhere, it was very discouraging notwithstanding our Pakistani degrees: it was impossible to find a job.

In the meantime, an Arci educator introduced us to the CAP of the University of Bari which helps refugees to improve and reach the Italian education standards. We came to them for this purpose and we gained a new hope. We felt recognized and welcomed. Their way of helping us without considering us 'guilty of a crime not committed' encouraged us and boosted our spirits. We felt like human beings and not numbers. They put us on the road to our destination. This hope and encouragement were not only for both of us, but also for our three children who suffered with us during their childhood, their time to have only fun and play.

My husband and I decided to go to university and graduate again. During all this, the person who had given us the house to live in asked us to leave it. Our oldest daughter was only three months away from her diploma and we were forced to leave the house with no job and nowhere to go to live. Once again, the teachers at the school helped us get a place at Caritas for three months with the promise to leave it as soon as our daughter finished her exams. Then we had a lot of questions about what to do and where to go after our daughter graduated from high school. We started looking for a house. Even the church was unable to find us a place to live in because we were out of work. Luckily at least we found a house in Trento.

So we moved to Trento. When we were getting ready, we were afraid we'd have to interrupt our education. Once again, the president of CAP and his team were the ones who were with us in a new situation. Moving to Trento because of more job opportunities was a difficult

decision, made with a heavy heart, with the risk that our education would be interrupted. But the CAP has given us hope that we can continue our education. It is because of their kind behaviour, spirit of working with heart and soul for the refugees, that now we are able to reach our goals, despite the distance, thanks to an email or a phone call. They helped us to study and plan our exams also during Covid19. Thanks to them we are almost able to graduate, despite the pandemic times. We have great respect for them and we thank them for their kindness towards refugees. We are very happy for our future thanks to their commitment. I received a job as English teacher in a middle school because, during the interview, I presented my booklet from the University of Bari. Thank you for everything you are doing for the refugees and because you give them the hope of a safe and happy life".

N.'s story is full of sad emotions but also of a powerful message of trust, both for us social researchers who work for the academic inclusion of refugees and for the other students, especially the younger ones who are starting their university experience today in a new and strongly different educational context from the ones they left behind them and in a period, such as the pandemic one, very particular for the reduction of opportunities for exchanges and interaction.

During the Refugee Day the story of N., mentioned above, was also heard by S., one of the new students in Economics. She is from Libya and she also told her emotional experience during the pandemic, sharing her words of integration, highlighting above all the stereotype and prejudice of those who believe that the social and economic condition of refugee students, prior to their arrival in Italy, is significantly worse than the current one and to the one they found in Italy.

"I'm from Libya. I was born and raised there. Before the war I had a pretty quiet and stable life. My parents practiced quite important professions. My mother worked in the administration of Total, my father in the Embassy. When the war came, my life changed... I could say in a day and in a way I could never have imagined. From a normal family life to a life full of uncertainty. I guess it's not easy for anyone, but for me it was a big shock. When we had to leave the country, and we used to travel a lot before then, it was very different: it was not by choice but what we had to do. I think a lot of people don't know what the crisis of a migrant, the status of a refugee, could mean: around the word refugee there are so many misinterpretations. One thinks that he/she did it on purpose instead no refugee could ever think to do it on purpose, to leave his/her country and take a path so full of uncertainties and difficulties... nobody would leave a place that he/she considers home to go into a world full of uncertainties and dangers. A refugee did it because his first choice was just life.

When I started my journey, I learned many things. I have always valued study and education even before I left my country. I attended an international school so I grew up in a multicultural climate. When I had to make this trip, I learned many things, I met many

people who had different stories but partly similar to mine because we are all bound by this fact: we 'had to' leave our homeland for security reasons. It is not easy to integrate oneself into a culture, into a different world with the fear of not being accepted.

When I arrived in Italy I was immediately welcomed. First of all by the professors. I was very young, I was 16 and I was starting high school. The first person who welcomed me was an Italian teacher. For me professors have a special place in my heart, they had a really big impact on me because what I am today is thanks to all of them. The teachers I had in my life - and the teachers are our first approach to the world, the first things we learn are thanks to them - were special.

High school went quite well, I was happy. I remember classmates and teachers with so much affection. Even though there were so many difficulties, like learning the Italian language, integrating myself, they never made me feel different or foreign and I thank them for that. When I finished high school I immediately decided to go to university. I enrolled in a conscious orientation course and my choice was to enrol in Economics. From that day I loved all the subjects and the professors who gave us a message that impressed me so much. I told myself: this is exactly what I would like to do in my life. I enrolled. There are some difficulties, even in language. But I really like this path and I can't wait to see where it will take me in my life.

This Covid emergency has affected everyone. It is a kind of world war that has brought so many uncertainties to everyone and for the migrants the most difficult thing is that they also are far from home. They are very far from their families and countries and they felt more loneliness and uncertainty, even though we were all alone, locked in our homes. But a migrant feels this loneliness more. It was not only the Covid emergency but also the feeling of being far away, not knowing where to turn in case of problems, being afraid in a country that is not yours.

For me it was a very difficult period because, in addition to the emergency I had financial and family problems. I really say this from the heart: in a really difficult period, the University and the scholarship were fundamental. Even technology has helped us so much to not feel so alone in a dark moment for everyone.

This experience has also shown us that yes, there are difficult moments, but these moments serve to reconstruct our points of view and rebuild our knowledge. We can consider it a paradigm: when there are difficulties, we suffer them but they are useful. Although there are difficult moments, they serve to give more value to our life even if in that moment it doesn't seem like that, because we are so busy dealing with things we have never faced before. But I think that life is also made of this. If there's something I've learned during these years is that there are many difficulties in life but it's not true that your life will always be like this. Stability doesn't exist in one place. We have to find stability in transformation and that's what I've learned and that's what's going to make us stronger and open our minds to be able to move forward. That's why I'm saying it's a difficult time but little by little things will change".

4. Overcoming the pandemic hardship: the (resilient) words of refugee students

During World Refugee Day 2020 there was a Focus Group Discussion focused on the pandemic in which the 16 refugee students enrolled at the University of Bari talked with the UNHCR and the University of Bari. The words used during the discussion once again recall particular skills, the so-called soft skills, of our refugee students who, by evidence, for their biographies and cultural trajectories report, on the experience lived in the lockdown, previous experiences that still recall a desire for rescue and overcoming difficulties.

The discussion focused in the first instance on the theme: *"What have we learned in this difficult period?"*

- *We learned how to be united in pandemic time, that we are strong and can do everything together (Palestine).*
- *During this troubled period every other person in the world is experiencing the same situation as me. We have learned that everyone, no one excluded, needs to get up and we need encouraging words (Pakistan).*
- *I learned to be autonomous, to accept and face what life presents to you. I am not afraid of change anymore (Syria)*
- *I personally managed to understand more deeply the stories that my parents told me about the wartime, that is when we were locked in the house. I understood the importance of human affection, solidarity toward others (Iraq).*
- *I learned that despite all the difficulties, everything is usually solved for our good and these experiences, even if they are difficult, serve to give us a teaching and make us stronger and more aware (Libya)*
- *Do your best and leave the rest to God (Pakistan)*

The s tudents' answers carry a message of resilience, which is reflected in the stories and biographies of refugee students. It is also an opportunity to "learn that we all can overcome difficulties", as a very young student said, or to tell each other words that could help us and support each other.

Among the key words that better represent the thoughts of the refugee students about how to overcome this pandemic, there are patience, trust, dream and hope. Here are some keywords the students associated with the theme of the Covid-19 emergency:

- *Stay safe, respect for others safety, stay strong (Pakistan)*
- *Patience, Trust, Dream. Tomorrow everything will be better (Syria)*

- Patience, optimism, respect (Iraq)

- Hope, support, understanding (Libya)

Finally, the discussion focused on the further challenges faced by refugee students in this pandemic.

- *We had to overcome the difficulty and the challenge of staying all the time at home, and still studying despite the loss of will because we were mentally ill (Palestine);*
- *During the lockdown when someone who is already alone and away from his family, has to stay at home and can't meet friends, you have to overcome the anguish that can prevail (Pakistan).*
- *Pandemic has doubled the sad feeling of distance for us that we already are far away from our family, (Pakistan)*
- *The challenge was to try to do useful things that would drive away negative thoughts (Syria)*
- *There are challenges to which everyone is called, not just we refugees and international students. All the Italian people must try to work to get out of the economic crisis that crosses the whole country (Iraq).*
- *The greatest challenge is to be away from your country, your families and your homes, to overcome this feeling of being alone and in a period of great uncertainty (Libya).*

Even if the University of Bari, following the stop to in person lessons and the closure of Departments, has activated distance learning platforms in order to ensure the continuation of lessons, the indisposition of some tools that guarantee the right to study such as the closure of laboratories, study rooms, libraries, computer centres, hotspots and free wifi, has in fact led to the interruption of normal study paths. In some cases, the digital divide has drawn a clear dividing line between before and after.

The feeling of isolation, the fear linked to the virus, the impossibility of reaching friends or loved ones, as well as the lack of perfect knowledge of health care systems in Italy, have exacerbated the difficulties and made the lockdown period more difficult to bear. The closure, albeit temporary, of the administrative offices of the University has also blocked the normal processing of scholarship procedures on which students' livelihoods depend, so that in some cases, daily needs have created many urgent problems.

Domestic isolation has not found everyone in the same conditions or able to react in the same way, but it has exposed other vulnerabilities. Again, it was the availability or scarcity of resources (in this case the comfort of one's own home, the sharing or not of the flat with other people, just like the power of the network connection or the quality of the access devices) that amplified social inequalities and distances.

During the meeting, however, an attitude of relativization mixed with a feeling of universalization emerged, precisely on the basis of personal, or parental, experience of particularly painful and traumatic experiences. Not a simplistic *diminutio* in the comparison, because in many cases the pandemic has greatly aggravated vital conditions and increased the state of anxiety and uncertainty, but a more careful awareness of the values of life and the universality of the human condition of difficulty into which the pandemic has brought us all, none excluded. In some cases, spirituality and contact with one's inner self have increased.

Touching life narratives have been offered by people who have already been able to overturn harmful premises in the past, with courage and determination, turning difficulties into opportunities. Stories that have brought out loneliness, economic difficulties, discrimination, isolation, but also hope and the will to start again: "*The pandemic, like what forced each of us to flee and face so many problems here in Italy in order to start living again - said S.- has shown us that difficulties serve to reconstruct our points of view, our knowledge, our priorities. They serve to give more value to each person's life, even if while we endure them we don't think we can use them*".

In other words, many students shared a thought: every emergency brings with it new challenges that stimulate the ability to adapt, making us realize that we have skills and resources that we thought we did not have. The limit can become a point of support that gives us new strength.

If the pandemic has shown what happens when our points of reference suffer a shock, when a novelty, an external change undermines our certainties, the experiences of resilience shared by this specific group of international students of University of Bari have shown how much it is possible to learn from moments of difficulty and how important it is to network, so as not to leave anyone alone.

On the basis of the collected sensations, it has emerged the need to develop an innovative formula by the University that could be more inclusive because it could be first of all more able to "listen" to different sensibilities.

The common condition of deprivation, the serious limitation to our lifestyles that affected us not only in terms of reduction of displacements, of absence of social life but that also caused a stop to shared rituals and common spaces of meeting and carefree moments, has produced repercussions on everyone's subjectivity. The debate has therefore highlighted not only the need to take into account the principles of autobiography methodology in

the relationship with this peculiar segment of the student population, in order to better understand refugee students and to establish correct relationships with those who are undertaking a narrative construction of personal identity, who bear emotional baggage (and are now reprocessing it) linked to migratory wounds. The migratory background should not be understood as a burden, a past to leave behind. On the contrary, it is a resource that can be formally recognized by the university system. Valuing the human and cultural capital of international students is a fundamental enrichment opportunity for the University and not to do so would be a wasted opportunity.

Handling a personal experience full of "other" meanings and focusing on it, however, presupposes paradigm changes, relational evolutions and new behavioural and conceptual maps. Among all of them, especially for these students, it is necessary to strengthen the offer of opportunities for socialization, focusing on the structuring of relational networks that allow its users leave the protected perimeter offered by the *CAP*, especially if the final objective is structural social cohesion.

It is therefore necessary to learn to talk about human capital within a framework of humanizing the economy, through networks and relationships, grasping the sense of diversity, defeating fear and valuing stories of resilience. It is possible to change for the better and it is necessary to do it if it's true that the university system has a fundamental formative role within our societies. The experience of refugees entering our universities must serve to improve the services we offer to all students, but above all, it must serve other refugees who may feel encouraged to take this path, to understand that it is a possible way forward, based on successful examples of people who have gone through their own difficulties.

Not only words, then, but also experiences, expertise, responses. Perhaps the most important lesson that refugee students of our University have given us is that there can be no crisis without change and without new solutions.

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CHAPTER 11

MIGRANTS AND COMMUNICATION TECHNOLOGIES IN CHALLENGING TIMES; A DOUBLE-EDGED SWORD

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ABSTRACT

The COVID-19 Pandemic has affected every aspect of social life worldwide, from individuals to societies at local and global levels. Vulnerable groups are generally the most affected in societies during crises or outbreaks. Migrants are prominent among these groups. In the last ten years, millions of people have been forced to leave their countries due to numerous crises. Also, there have been a significant number of people who have decided to migrate because of economic, educational, and family issues. Turkey has not been left out of this sociological process. Turkey is among the countries most affected by the phenomenon of migration, especially with forced migration in recent years. Turkey, which is the meeting point of the continents as a geographical location and is on the migration route for many immigrants, is home to millions of immigrants and asylum seekers in recent years. The purpose of this study is to examine the social and psychological effects of the COVID-19 Pandemic on migrants in Turkey. A literature review and situation analysis method will be used in this study to understand the impact of the COVID-19 Pandemic on migrants and asylum seekers. The study will mainly examine the impact of mobile phone and internet dependency on the daily life habits of migrants during the pandemic period, with a particular focus on educational challenges, digital divides, loneliness, alienation, and other psycho-social factors impacting migrants.

Keywords: Migration, Asylum Seekers, COVID-19, Communication Technologies

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1. Introduction

The coronavirus that has emerged in China, and which has subsequently impacted the entire world, has, within a short time, significantly impacted the lives of countless people around the globe. Societies have been significantly affected both socially and psychologically. People's living standards have changed, and they have had to acquire new daily lifestyles and new habits. Research has been done during the pandemic period, which shows that young people, in particular, have anxieties about their future; during the time that they stay at home, they feel alone, and they don't have any hope for the future. The collective sense of hopelessness is very high. It is well known that generally, poor or economically disadvantaged people are becoming affected more than other people during the Pandemic. In this sense, migrants and refugees are being affected more negatively by social crises and pandemics. This study employs literature and contextual analysis methodology in order to analyze the impact of COVID-19 on the lives of refugees and migrants, with a particular focus on the role and impact of communication technologies and their usage and adoption by these communities. The study concludes that the usage of digital and communication technologies have increased to an important extent during the pandemic period and that this has yielded particular advantages and disadvantages for the respective communities of concern. In the sphere of education and employment, communication and internet technologies have been pushed to the forefront and gained prominence and prestige. However, immigrant and refugee communities face particular challenges with respect to access to these technologies as well as potentially negative social and psychological impacts when accessibility is available. While the problems impacting these communities are complex, this research primarily aims to critically assess the rise of Internet and communication technologies with respect to impacts in the area of education and economics.

Immigrant and refugee communities have been experiencing many challenges with respect to their education. Among the factors responsible for such challenges are language, economic disadvantages, and perceptions of familial rights to education, social exclusion, peer victimization, and legal regulations. There are many other factors that add to these challenges and problems. It can be observed that immigration, especially when compounded with the limited possibilities and constraints of having refugee status, results in great difficulty in overcoming such problems. The Republic of Turkey, along with the assistance of international organizations, has worked with extraordinary effort and diligence in this area. However, with the sudden arrival of the COVID-19 virus, new challenges and difficulties have arrived that have neither been previously faced by locals, government administrations, or immigrants. For example, as

a result of the closure of schools, it has become a necessity to use communication technologies in the form of "distance education." However, the limited accessibility of immigrants to these communication technologies has posed a significant challenge to refugees in terms of their level of accessibility to this newly emerging form of education. It is debatable concerning the extent to which internet facilities are practically accessible for refugee students in higher education as well as students who do not have television facilities in the context of primary and secondary education. The cost of online education is greater than in traditional offline settings, particularly when video presentations are factored in. It is also thought that immigrant and refugee communities, who try to stay at home during the Pandemic, spend more time on social media than they have ever done before. This situation thus brings with it new troubles.

This paper focuses on the impacts of problems faced by refugees and migrants as a result of the usage of communication technologies amidst the COVID-19 Pandemic. By doing so, new light will be shed on various related subjects, which will encourage new studies and projects within the area of digital migration. In this paper, different sources compiled by WHO were obtained and used, along with sociological analysis of pandemic processes. Even if extraordinary academic literature showed up in a very fast way, the topic of immigration and Pandemic would still show a great need for further research and literature. Particular attention will be drawn to persons of concern who are economical, geographical, and culturally constrained by every kind of challenge and global-scale problem as a result of the virus. This study will both draw attention to this problem and contribute to the strengthening of the literature.

2. Educational Challenges

Despite the problematic existence of a "digital divide" with respect to the practical affordability of Internet access for migrants and refugees across the globe, there has been an increasing emphasis and growing consensus on the importance of internet access for displaced peoples› during the COVID-19 Pandemic period (UNFPA, 2020). Turkey is among the countries most affected by the phenomenon of migration, especially with forced migration in recent years. The phenomenon of migration has changed shape since its history, and with the development of technology and increased transportation opportunities, the number of people migrating has continued to increase day by day. In addition to these developments, the number of people who had to leave their country and seek refuge in another country has increased day by day due to wars and internal conflicts in various parts of the world. Turkey, which is the meeting point of the continents as a geographical location and is on the migration

route for many immigrants, is home to millions of immigrants and asylum seekers in recent years. Millions of people have had to leave their homes due to internal turmoil and violence in Syria since 2011. Forcibly displaced people have migrated intensively to the surrounding countries. Turkey is one of these countries. According to the data of the Directorate General of Migration Management of the Republic of Turkey, there are 3,645,140 Syrian asylum seekers under temporary protection status in Turkey as of 28.01.2020 (Directorate General of Migration Management, 2021).

In Turkey, Syrian asylum seekers are regarded as being at a distinct disadvantage due to their low economic status and limited access to media technologies such as laptops and reliable internet. To combat this situation, charity groups and other organizations have looked into ways in which important information can be relayed to the refugees by Syrian-owned small and medium-sized businesses that act as "seeds." These business owners are more likely to have access to the internet, and this type of media is thus presupposed to be the most important channel during the epidemic (Poverty Action, 2020). The internet has also gained prominent importance as a distance-education source for many Turkish school children who have been unable to go to school as a result of the Pandemic. However, Syrian refugee children have been left at a distinct disadvantage as a result of the dependence on the internet as a medium of learning. This raises serious questions as to whether the internet itself has gained too much power and prominence during the pandemic period, and it also raises questions about the lack of competitive advantage of more redundant technologies for distance education (such as Interactive Radio Instruction) to meet the needs of those who cannot afford the laptops or the internet connections required for online interactive learning (McBurnie, 2020). For Syrian families who can afford the television sets in which state educational lessons are broadcast, there are still learning challenges that result from the lack of social engagement that the medium provides. School children miss the interactive face-to-face engagement with their students and pupils, and some have commented that television learning can be like "watching a boring documentary" (Hefzi, 2020). On the other hand, some studies have shown that online learning has more potential for increasing student engagement as a result of the inherent advantage of interactivity, particularly for younger students. Yet, despite this, a digital divide still exists within the refugee and migrant community with respect to access to more advanced digital learning platforms. In addition, there are serious questions as to whether communication technology can be of any significant benefit for refugees and migrants given the distinct language needs of Syrian refugee students and lack of instant feedback from teachers in a classroom setting, as well as the need for social play and a calming and structured setting.

Research has shown that despite handicaps and setbacks with respect to possession of technologies to receive effective distance education, smartphones have been of crucial importance for Syrian refugees since both their upheaval from their country and throughout their attempt to integrate into Turkish society. Of such importance is the smartphone that it has come to outrank the possession of furniture or carpets in many of the dilapidated residents in which Syrian displaced persons are renting. Smartphones are used to maintain a connection with relatives and loved-ones outside the country and at a rate far more affordable than making a traditional phone call. Interviews with refugees prior to the Pandemic have shown that some regard the smartphone as being given equivalence to that of "hands and feet" and even that of "life" itself. Among its diverse users are women and house-wives who use it to combat social isolation and to share their experiences with friends and family (Narli, 2018). In this sense, it is not only a means of connectivity but also a "virtual diasporic space" (Ponzanesi, 2020) which allows diaspora to maintain some kind of solidarity and connection that overcomes their geographical separation within the new country. Without the smartphone, it would be much more challenging for Syrian refugees to scrutinize the availability of job opportunities as well as access vital information pertaining to things such as health, legal aid, and other public services such as on-the-spot translation.

3. Asylum Seekers and Communication Technologies

There is a need for further research as to how the Pandemic has impacted the usage of smartphones amongst Syrian refugees, but every indication from studies that analyze pandemic-derived refugee job losses suggests that smartphones remain a vital practical lifeline for these communities. The main question that this crisis has brought to bear is perhaps a more fundamental one: Does such a high dependence on communication technology reflect a wider socio-cultural set of problems that give it prominence and importance? Syrian refugees have voluntarily chosen to depend on smartphones for their survival in a different culture and society. Media ecologists such as Neil Postman, while writing before the advent of the internet, qualitatively describe the emergence of the technological domination of culture in which "the culture seeks its authorization in technology, finds its satisfactions in technology, and takes its orders from technology" (Postman, 1993, p.71). Applications such as "Life Fits Into Home," designed by the Turkish Health Ministry, require citizens to record their health status on the application in order to be given the right to use public transport between cities. The usage of communication technology in such a way provides a compelling argument for the role of Postman's "technopoly" concept in shaping society and the perception of reality itself during the pandemic period.

At a global level, the prestige of the internet as an apparent COVID-19 technological panacea has prompted various NGOs to contact the UNHCR in order to lobby for further assistance of refugees and other "Person's of Concern" (POC's) in acquiring internet access. The UNHCR has thus far focussed on ensuring a broad range of connectivity options for POC's which includes older technologies (such as radios) rather than an emphasis on internet access per se (UNHCR, 2020). However, the need for the internet and access to mobile data communications is continuously emphasized by many charities around the world. One notable example being in Myanmar and Bangladesh, where up to 26 international humanitarian agencies have pushed for the governments of these respective countries to remove limits on internet access to refugees and displaced Rohingya populations. A report by Save the Children (2020) states that «restrictions prevent effective communication with the affected populations on hygiene, the COVID-19 Pandemic risks, symptoms, and preventative measures, making it much more likely that people will contract and die from the virus" (para. 5). The charity Access Now has also stated that internet access is the "key to the COVID-19 Pandemic response" with respect to refugees" (Access Now, 2020). Yet, at the same time, organisations such as the WHO have stated that we are amidst an "infodemic" situation, with an excess amount of the COVID-19 Pandemic-related information that is constantly accumulating on the internet. The highly variable reliability and quality of such information makes it a great challenge for online users to deal with. There are also a host of conspiracies being spread - both amongst internet users and even throughout camps without internet access (U.N. Department Of Global Communications, 2020). In light of this, it may be worth adopting a critical view towards the growing emphasis on the importance of internet access amongst vulnerable populations for gaining virus-related information. If indeed, the WHO is recommending itself as a primary source of reliable information, then is it worth asking why other more redundant technologies (rather than Internet access per se) are not given more priority? Additionally, there is a need for a greater number of studies and analyses on the impact of communications technologies on the lives of migrants and refugees during this crisis period.

With respect to the lives of refugees, smartphones have gained increasing attention for their growing importance for keeping refugees and other displaced peoples connected with friends and family. The smartphone is a means of communication that not only allows migrants to maintain contacts but also (via the usage of social media) allows them to become reunited with family members if they should become separated from them during the migration route. The benefits and power of social media in this respect are undeniable.

4. Dark Side of Technology

Yet, there is also a "dark side" to the beneficial effect of smartphones for refugees. Watsapp and Facebook messaging services allow smugglers and refugees to communicate with each other through what some have termed a "dark digital underworld" that is outside the scrutiny of official channels. Yet such channels are quicker and more efficient, and hence they have gained the adoption of many migrants. However, misinformation from smuggler-sources and false advertising has led to a host of challenges. According to a UNHCR blog, the usage of specific Facebook groups by refugees has been a vital means of dealing with misinformation and rumors concerning the highly confusing migration process. An analyst at the Migration Policy Institute stated that "A lot of people were using those groups in order to triangulate information between the official government sources and then more word-of-mouth sources because it wasn't clear what could be trusted and what couldn't" (Kaplan, 2018, para. 15). Thus it appears that in the specific context of the migratory journey, the internet has facilitated the creation of collaborative strategies in dealing with the misinformation problem. Various agencies and NGOs have also assisted migrants and refugees within the same online medium. However, the largely online-derived "infodemic" concerning the COVID-19 Pandemic constitutes a problem on a scale far greater than specific migratory journeys, and within this context, there may be limitations as to the usefulness of online media for becoming more informed. The question remains as to what extent do people trust authorities and institutions both in online and offline spaces in refugee and migrant communities. Rumors and misinformation have spread in refugee camps despite lack of access to communication media, though radio and loudspeaker announcements have largely been utilized in response (Reuters, 2020). More modern communication media have also been utilized in tackling the "infodemic," with a particular role played by refugee-led organizations in building the trust of camp residents and community leaders. However, as yet, there is no clear data as to the effectiveness of the different forms of information campaigns. A 27th May update from the Mixed Migration Centre demonstrated not only a variety of means by which migrants and refugees acquired information about the virus but also a relatively satisfactory amount of knowledge from respondents (Mixed Migration Center, 2020). The question again lies as to what extent the internet has played a part in this, whether directly or indirectly. Are the charities lobbying for further internet access amongst vulnerable populations justified in their argument?

5. Economic Impact of the COVID-19 Pandemic and Internet Connectivity

The economic impact of the COVID-19 Pandemic has resulted in very difficult survival pressures for refugees and migrants, and because these groups tend to be within the lower income bracket of society, their level of adaptation to online work is much lower than other groups. A study by Bozkurt (2020) shows how the level of anxiety about future unemployment decreases as internet usage increases in frequency, and this reduction in anxiety is clearly corresponding with higher wage earners. Yet, it remains a fact that despite high wage earnings, there are jobs that simply cannot and have not been adapted to be performed online or via the internet. The efficiency and productivity of workers, as well as students, has reportedly not increased as a result of transitions to online work. The reality is that many refugees are dependent on work in the service sector in Turkey as well as informal work in the manufacturing sectors, both of which have been significantly affected by the Pandemic. While Internet connectivity has been of key importance in facilitating their survival inside Turkey, the internet itself cannot act as a source of direct income for the majority of refugees, given its connection with more abstract types of employment activity. While the connective power of smartphones has allowed refugees to connect with each other, to share news and memories, to access information pertaining to vital public services, as well as for language and other purposes - its power to act as a lifeline is becoming threatened as a result of the economic crisis that many families are now facing. Yet, for those refugees who are living through this crisis while still connected to the internet, there are concerns for their psychological well-being as a result of the anxiety created by the Pandemic and the increased usage of the internet during the period as a coping strategy.

6. Social Inclusion of Asylum Seekers in Pandemic Times

The inability to fully engage with the social and cultural milieu of the host country risks turning migrants towards either of two options - an ethnic ghetto or, alternatively, an online diaspora network that bypasses the organic, lived-in geographical community. Studies of migrant workers in China's Pearl River Delta show that their precarious and temporary employment creates a psychological sense of aimlessness in which some have aimed to remedy by forming "cyber-relationships" (Vincent, 2012). Social media acts as a substitute for the lack of secure relationships made in the face-to-face world and also compensates for their lack of time to cement more authentic relationships. The internet becomes a kind of escapism from boredom and the oppression and anomie of the working life, yet as a result

of dependence on the technology, the migrant is more and more alienated and withdrawn from the real world (Liu, 2015). African migrants to Europe were found in some studies to have developed a strong emotional relationship with their phone devices, even in some cases fondling their phones when thinking of a loved one. The mobile phone has gained a prominent status among migrants to the extent that some scholars have talked of it as being a sign of a new "public sphere" and as a "cyborg diaspora" (Leurs & Prabhakar, 2018). While the internet has replaced traditional means of communication such as phone calls and hand-written letters, it has brought new problems as well as benefits. The hand-writing in a pen-written letter to a loved one, the feel of the paper, and the different style and content that typically appears in the medium of letter writing are arguably more emotionally significant than texts and emails. During the COVID-19 Pandemic crisis, the risk of increased anxiety from the virus as well as increased dependence on the internet may also erode the traditional intimacy and emotional bonds that keep families together. A point in support of this comes from a pre-COVID-19 Pandemic study by Pui-lam Law of Chinese internal migration in the Guandong province over a 20-year period. The generation of migrants that started adopting mobile phones had started developing a less intimate connection with their families in comparison to some past generations. For example, some of the workers had friends and families at the top of their contacts lists, but this did not mean they were the people whom they contacted the most often. Job information and entertainment have attracted more time and attention as means of escape and distraction, which contrasts with previous past members of coping via letters and expensive phone calls that carried such crucial significance (Vincent, 2012). If migrants and refugees are to avoid becoming "alone together" as a means of coping with this crisis (to borrow a title from Sherry Turkle's work), then more research needs to be done on the social and psychological impact of possible alternatives to convenient technological fixes to complex sociological problems that affect displaced people all around the world (Turkle, 2011).

7. Conclusion

It appears that the COVID-19 Pandemic will remain on the global agenda for a long time. People are still trying to get used to what has been popularly termed "the new normal". Societies have been evaluated sociologically both before and after the COVID-19 Pandemic. However, people still continue to migrate or be forcefully displaced. This displacement helps to increase social and psychological problems for immigrant and refugee communities as well as for local people in many ways. Undoubtedly, millions of displaced people have left all their

ties behind and have opened their eyes in a place where they do not know their language, symbols, and cultures, and this causes undeniable traumas amidst their inner worlds. On the other hand, it is a fact that both refugees and the communities that accept them have to deal with the sociological consequences of this most painful and traumatic phenomena. It is well known that migrants and refugees, who have limited opportunities in many respects, are the most adversely affected by global pandemics and economic crises. These and other such important global humanitarian issues continue to be answered with a global indifference. Immigrant and refugee communities face significant difficulties, especially in the accessibility and use of communication technologies. During pandemic periods, habits and the use and duration of communication technologies also change. Although this situation leads to advantages in certain aspects and contexts, it also brings about serious risks of social exclusion, alienation, and loneliness, especially with the usage of social media. Immigrants and refugees who have already been exposed to some degree of social and psychological trauma are also adversely affected by the dark side of technology. Considering the issues discussed in this article, it appears that immigrants were more adversely affected by the excessive reliance and promotion of communication technologies in society during the COVID-19 Pandemic period. The issue of refugees, in terms of its causes and consequences, is a great test and challenge for humanity as well as a unique burden for each individual, society, and culture. It is clear that all active actors in the areas of academia, government, business, and civil society must work together in order to effectively tackle this challenge within the framework of the most basic conscientious principles and to achieve multi-dimensional positive results.

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CHAPTER 12

THE IMPACT OF COVID-19 ON CRIME

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ABSTRACT

The coronavirus, which started in Wuhan, China and spread to the whole world, has affected many social phenomena in a short time; undoubtedly one of these social phenomena is crime. The phenomenon of crime, which is as old as humankind, is an important social problem. Since the COVID-19 outbreak which brought life to a standstill, crime rates in many countries have changed remarkably. As the COVID-19 pandemic evolved as a global health, humanitarian and economic crisis, criminals have been quick to seize opportunities to generate significant amounts of profit. While measures were being taken within the framework of COVID-19, including a call to "stay home" , many crime types (burglary, homicide, migrant smuggling) decreased, whereas some (cybercrime, domestic violence) increased. In addition, some types of crime (e.g. the drug trade) were observed to develop new strategies. This study aims to analyze the phenomenon of crime in the world in the epidemic process, both theoretically and statistically. The theoretical framework is based on Criminal Opportunity Theory. According to this theory, criminals are individuals who evaluate the opportunities around them and make rational choices. It is expected that COVID-19 will cause significant changes within several crime types. This research offers a different perspective on the COVID-19 situation, within the framework of the crime phenomenon.

Keywords: Crime, COVID-19, criminal opportunity theory

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Introduction

The phenomenon of crime, which is as old as humankind, is an important social problem that every society struggles with today. It has been observed that crime which has a dynamic and changing character, takes new forms and gains different dimensions in modern and postmodern societies. This affects criminals in different ways, forcing them to change their perspectives and leads to new conceptualizations.

The spread of the novel coronavirus COVID-19 has resulted in the most devastating global public health crisis in over a century. The global health crisis unleashed by the COVID-19 pandemic has been compounded by political, economic, and social crises. Since December 2019, when the coronavirus disease COVID-19 began its global spread, hundreds of thousandsof people have died, millions more have been infected with the virus, and entire economies have come to immediate halt amid government-imposed lockdowns. Since the COVID-19 outbreak, which brought life to a standstill, the change in crime rates in many countries has drawn attention.

The COVID-19 pandemic is putting the world under enormous strain, affecting the lives of everyone. The unprecedented measures adopted to flatten the infection curve include enforced quarantine, curfews and lockdowns, travel restrictions, and limitations on economic activities and public life. As the COVID-19 pandemic evolved as a global health, humanitarian and economic crisis, criminals have been quick to seize opportunities to generate significant amounts of profit (Europol, 2020: 3). Certain types of criminal activity intensified during the pandemic, while others almost ceased. Even during times of crisis, criminal business continued. These developments in crime are not unexpected and mirror the adaptability and flexibility of criminals displayed in other social change situations.

In this research, the criminal opportunity theory is explained and the varying crime rates within COVID-19 context are explored. Second, within the COVID-19 crime types that have changed are explored and analyzed. Finally, the relationship between the criminal opportunity theory and changing crime rates within the COVID-19 context is evaluated.

Criminal Opportunity Theory and COVID-19

As the COVID-19 situation is relatively new, there are very few studies in this field. However, some theories have been widely used to explain the temporal changes in crime rates. One of these theories is the criminal opportunity theory. In this context, the criminal opportunity theory is appropriate to explain the change in crime rates during the COVID-19 outbreak.

The term “opportunity” has been familiarized in criminology in relation to the anomic theory that the restricted socio-economic opportunities open to working-class youths encourage illegitimate solutions to the problems associated with acquiring wealth and status (Merton, 1957; Cloward & Ohlin, 1961). The theorists mentioned have stressed the importance of situational rather than motivational factors in explaining crime. Criminal opportunity theory suggests that offenders make rational choices and choose targets that offer a high reward for little effort and associated risk. Mayhew, Clarke, Sturman and Hough (1976) were the first to point out the necessary conditions for crime to occur and call them criminal opportunities. According to this theory, criminals are individuals who evaluate the opportunities around them and make rational choices.

Cohen and Felson (1979) think that the increase in crime rates in the USA beginning in the 1960s can be explained by the changes in people’s lifestyles and specifically the changes that people had to make to their routines and social lives. They state that there was a relationship between the participation of women in the labor force, which left many houses empty during the day, and theft. According to Cohen and Felson (1979), three elements must be present at the same time and place for a crime to ocur: A motivated attacker, a suitable target and a lack or absence of supervisors and/or guardians who can protect the target from the attacker. Crime occurs when these three elements intersect at the same time and place. All crimes require opportunity but not every opportunity results in a crime.

As an example, comparing of the United States to other nations underscores the role of guns as facilitators of homicide and aggravated assault. Homicide rates in the United States are much higher than in Britain and other European nations. This is not because the United States is a more criminal society. If it were, rates for other crimes such as car theft and burglary would also be higher when, in fact, they are lower than in Britain and some other countries in Europe. Rather, the high homicide rates in the United States result from the widespread availability of handguns, which means that the opportunity to carry out a quick but deadly attack is much greater, even when the victim is stronger than the attacker. Drug dealing and vice also depend upon opportunity. For example, drug sellers in the United States seek apartment buildings that have no building manager on the premises. Through redesign, management and patrol, drug markets have been driven out of parks and shopping malls (Felson and Clarke, 1998)

The criminal opportunity theory sets aside social, psychological and economic factors that push individuals to commit crime and focuses on the physical and environmental factors that make it difficult to commit a crime. Therefore it is suitable for explaining changes in crime rates during the COVID-19 period.

Changes in Crime Types During the COVID-19 Outbreak

The coronavirus, which started in Wuhan, China and spread to the whole world, has affected many social phenomena in a short time; undoubtedly one of these social phenomena is crime. Extraordinary changes have been observed. Some in the types of crime occuring: the rates of some types of crime have decreased while others have increased considerably. In this section, we will first consider the decreasing crime types of burglary, homicide and human trafficking. Second, we will examine the increase in cybercrimes and sexual abuse. Then we will analyze how the drug market, which is always active, has changed its strategy during COVID-19.

Burglary

There has been a noticeable reduction in theft during COVID-19. As confirmed by information provided by police departments. Ashby (2020) gathered data from eight large cities in the United States: Austin, Boston, Chicago, Louisville, Memphis, Nashville, and Los Angeles. A full analysis was not available for all of these cities. But burglary data showed a decline in Austin, Los Angeles, Memphis, and San Francisco. A New York Times article (Eligon and MacFarquhar, 2020) stated that there were half as many arrests between March 24 and April 14, 2020, as over the same period in 2019.

According to information compiled from the Istanbul Police Department, an average of 35 cases of theft per day in Istanbul decreased to 15. There was also a decrease in the number of citizens calling the155 Police Emergency Line. When a large number of Istanbul residents concerned about the spread of the coronavirus stayed at home, there was 37% decrease in the rates of crimes such as theft and extortion (Koyuncu, 2020). The data shows that theft has decreased considerably with COVID-19.

Homicide

American homicide rates declined dramatically in April and May, presumably as a result of coronavirus business closures and stay-in-place orders. Using crime data from 64 U.S. cities, the researchers found that homicide rates declined by 21.5 % in April and 9.9 % in May compared to the previous three-year average for those months. According to Rosenfeld, et al. (2020) that it all boils down to the level of public activity. Homicides depend on relatively vibrant activity patterns — lots of people on the street. When the streets are empty, the opportunities for all kinds of street crime go down. The notable exception is domestic

homicide, but overall we should expect homicide rates to decline as the streets are emptied and businesses close. High levels of unemployment also tend to coincide with lower levels of crime. They saw that during the Great Depression and the Great Recession. But as activity patterns go back to normal, we should expect these types of crime to begin going back up."

In Latin American countries, where crime rates are the highest in the world, it was determined that there was a serious decrease in murder rates. In recent years, there have been 600 murders per day were in El Salvador, this number dropped to 2 during the epidemic.

In Peru, the crime rate decreased by 84 % compared to last year. In Istanbul, due to the call to stay at home as part of new coronavirus measures, there was a 40 % reduction in incidents of murder (Koyuncu, 2020).

The United Nations Office on Drugs and Crime (UNODC) in its contribution, focuses on the impact of the pandemic on homicide and drug trafficking around the globe. Data on homicide trends show that in the months of March to mid-April 2020 homicide levels remained stable or slightly decreased in Central America. This could be linked to different lockdown regimes but can also be explained by the fact that the main actors, such as organized crime and youth gangs, continued, at least in this phase, to operate violently (UNODC, 2020). Data also shows that in countries with low levels of homicide, intensity of lockdown measures seems to have drastically reduced violence.

Migrant Smuggling

While it is impossible to know for certain how many irregular migrants use the services of smugglers, it is increasingly recognized that the majority of the world's 30 million migrants will have used the services of smugglers at some point in their journey.

According to Bird (2020), prior to the pandemic, the securitization of the migration landscape was shown to drive migrants' reliance on smuggling networks and increase protection risks on the migrant trail. New evidence points to the exacerbation of these trends by COVID-19-driven securitization. Currently, some smugglers have been reluctant to operate out of fear of contagion, resulting in a pause in irregular movement, but this situation is likely to be only temporary.

According to Europol, migratory flows were reduced during the COVID-19 lockdown. A loosening of travel and movement restrictions is likely to result in an increase in the movements of irregular migrants, both facilitated and unfacilitated, as they have been largely unable to make further movements during the lockdown. There may be further changes

in the most common modi operandi to smuggle migrants similar to the current switch from crossing green borders between border crossing points (BCPs) to increasingly using concealments in vehicles to cross the EU's external border at BCPs (Europol, 2020: 8). Also, migrants have been stigmatized in some areas as potential carriers of the virus, with some communities actively opposing their presence. Such stigmatization could potentially harden into longerlasting antipathy towards migrants that persists.

Cybercrimes

During the first weeks of the COVID-19 pandemic, law enforcement authorities across the EU noted a sharp increase in cybercrime offences. The nature of the cybercrime threat has also evolved throughout the crisis: what were initially simple phishing and malware attacks have become more sophisticated and complex since the pandemic arrived in Europe (Europol, 2020, p. 5). It has been observed that cybercriminals were actively recruiting collaborators in the early weeks of the crisis to orchestrate largescale phishing campaigns and maximize the impact of their attacks.

The International Criminal Police Organization (Interpol) recently issued a global threat assessment on crime and policing to its 194 member countries. This highlighted a marked increase of cyber threats connected with malicious domains, malware and ransomware. (Crisanto and Prenio, 2020). The modi operandi associated with certain types of cyber-attacks also changed. For instance, the cybercriminals shortened the period between the initial infection with ransomware and the activation of the ransomware attack not waiting for an ideal moment to launch the attack but trying as soon as possible to maximise profits (Europol, 2020, p. 5).

Domestic Violence

Increases in interpersonal violence during times of crisis are well documented, but wide underreporting has made response and data gathering a challenge: less than 40 % of women who experience violence seek any help or report the crime. Of those women who do seek help, less than 10 % go to the police.

However, early data shows that helplines in Singapore and Cyprus have registered a more than 30 % increase in calls. 40 % of frontline workers in New South Wales reported more requests for help with violence. In France, domestic violence cases have increased by 30 % since the lockdown on March 17. In Argentina, emergency calls for domestic violence have

increased by 25 % since the lockdown on March 20 (United Nations, 2020). While there were 1804 domestic violence incidents in Istanbul in March 2019, the number of incidents increased to 2493 in the same month of this year, an increase of 38.2 % compared to last year (Koyuncu, 2020).

Drug Markets: Criminals Don't Take Breaks

Although there are UN intergovernmental bodies put in place to address key illicit market challenges posed by the pandemic and its aftermath, many of these have, ironically, had their operations upended by the pandemic. Serious and organized crime is exploiting the changing circumstances during the pandemic.

"The feedback I'm getting is that they aren't able to move, to sell anything anywhere," said Joseph Lopez, a criminal lawyer in Chicago who represents reputed drug dealers. But while narcotics arrests are down, drug sales continue, with dealers likely forced to change their strategies, said Rodney Phillips, a former gang member in Chicago who now works as a conflict mediator in the city. "These guys already face poverty and death in these areas," he said. "They might be selling more online now. But they aren't going to give up just because of the coronavirus." (Dazio, S. et al, 2020).

According to Reuters' report, smugglers whose movement area was restricted were quoted as using "service to homes or cars" for delivery. It was also learned that, when both the smugglers and the customers could not leave the house due to the restrictions, the growing of cannabis in the house increased (Euronews, 2020). European Union's Law Enforcement Agency (Europol) stated that focusing on specific areas of criminal activity, they expected little mid- to long-term impact on the trade of illegal drugs. Drug markets are resilient and adaptable. (Europol, 2020: 8). Apparently, the drug market is a crime type that develops different strategies during COVID-19. Even this situation reveals how its structure is different from other crime types.

Conclusion

Crime statistics show that COVID-19 has a strong impact on crime behavior. The call to "stay home" during COVID-19 revealed changes in crime behavior that often appear in times of war and economic depression. Many crime types (burglary, homicide, migrant smuggling) decreased, whereas some (cybercrime, domestic violence) increased. In addition, some types of crime (e.g. the drug trade) were observed to develop new strategies.

According to the data, crimes such as burglary, homicide and migrant smuggling decreased during the epidemic period. With the criminals who committed these crimes, restricted by COVID-19 measures, opportunities to commit the crimes disappeared or decreased. All crimes require opportunity. These crimes have been reduced due to the fact that the criminals did not have the opportunity to commit crime during the epidemic period.

Crimes such as cybercrime and domestic violence increased in the epidemic period. Undoubtedly, opportunity is also very important in these crime types. During this period specifically, people have had to make significant changes to their routines and social lives; thus, it is a great opportunity for cyber criminals to be at home and to carry out most of their work on the computer. In domestic violence, there is the fact that individuals are constantly at home. The "necessary conditions for crime" for violent criminals exist in these cases. It is no surprise that the drug market has developed new strategies such as "online sales" because it has a structure that adapts to all kinds of changes over time. During COVID-19, the data shows that there is a relationship between opportunity and crime. Criminal opportunity theory tells us that crime can be interpreted in terms of exposure to risk. Crime is most likely to occur when likely offenders converge in space and time with suitable crime targets in the absence of capable guardians against crime.

Opportunity theory seek to explain the occurrence of crime rather than simply the existence of criminal dispositions. It emphasizes the fundamental element in the criminal act of opportunity: how this arises, how it is perceived, evaluated and acted on by those with criminal dispositions. The theoretical framework of the study was based on this theory instead of other crime theories, as criminal dispositions changed rather than rational choice during the Covid-19.

As a result, the COVID-19 epidemic era has caused significant changes in crime phenomena as it has in many areas of life. Epidemic life has affected criminals as well as everyone else. It is hard to know whether these changes will be short-term or permanent. All that can be said right now is that more research is needed to understand the long-term effects.

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CHAPTER 13

FAMILY IN THE COVID-19 PANDEMIC: FAMILY TIES AND COMMUNICATION PROBLEMS

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ABSTRACT

The purpose of this paper was to examine the effects of the COVID-19 pandemic on family relationships. The paper seeks the answer to the following questions: i) To what extent have family ties become stronger? and ii) To what extent have communication problems in the family increased? Data were taken from a study on the social effects of the pandemic. Of the total respondents, 55% stated that their family ties had become stronger during the quarantine period. In contrast, 17% stated that communication problems in the family had increased. The quarantine period brought family members closer to each other in middle and high-income families, whereas unemployed and poor people faced greater economic problems. This reflected negatively on family relationships among some disadvantaged groups. The majority of those who reported that family communication problems had increased were poor, unemployed, and young people. Especially those who could not continue their work online faced greater economic and social problems during the quarantine period.

Keywords: COVID-19 pandemic, family sociology, family ties, communication problems, social problems

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Introduction

In 2020 the world has experienced a huge pandemic. More than 100 million cases have been observed to date, and the number of those who have died from the pandemic has exceeded 2 million. During the writing of this paper, mortality rates continue to increase rapidly especially in countries such as the USA, Latin America, and India. This virus affects almost everyone, regardless of geography, country, race, nation, society, status, class, and gender. Presidents, ministers, deputy ministers, parliamentarians, wealthy businessmen, clergymen, famous footballers, doctors, and most ordinary people have been seen to be infected by the coronavirus.

The COVID-19 virus has affected the lives of billions of people around the world, with negative effects seen in almost every area of society, from the economy to tourism, from politics to family institutions (Şeker, Bayhan, & Köse, 2020). The concept of "ontological security" by Giddens is used to explain this situation in detail. According to Giddens, at the time of birth, an emotional vaccination against anxiety is given to people by their mothers. This dose of emotional vaccine, taken from childhood, protects the person against the negative effects of abnormal situations that may arise in their normal life (2010a, p. 88). There is a very close correlation between anxiety, trust and daily routines. The normal routines and rituals of people in their daily life serve to reduce their anxiety. Routines and rituals teach people how to manage social concerns as well as social integration (Giddens, 2010b, p. 67). The COVID-19 pandemic created an ontological insecurity in this context. People who cannot go to school, work, shopping, use public transport, or perform public worship because of the virus are in a state of great anxiety. The modern individual, who has lost daily routine and habits because of the pandemic, experiences "ontological insecurity." The prolongation of this period called "normal" deepens the negative consequences of the epidemic. From December 2019 to June 2020, millions of people around the world were removed from the normal order of their daily life and cannot predict how long it will last.

The COVID-19 pandemic is, above all, a health problem. However, the problem is not limited to the field of health. In a short time, it has negatively affected the social structure elements such as population, institutions, values, and social relationships etc.. The effects of pandemics are observed in all institutions of society.

1. Reflections of the Pandemic in the Family

Nobody expected to have an outbreak of this size. As in other areas, the pandemic also influenced family relationships. During the pandemic, people were confined to their homes

for a certain period of time. Uncertainty and anxiety increased at an incredible level. To this extent, the pandemic was something unknown for all of us. We had little idea of how it would affect the family. There are hardly any studies on this subject in the academic literature, so the aim of this study was to contribute to this gap in the literature.

This paper is based on the data of research conducted on 5338 individuals in April 2020 by Veysel Bozkurt. Data was collected online during the quarantine period when the coronavirus was at a peak. The convenience sampling method was used in the research so it does not claim to represent the whole of Turkish society. This sample represents the urban population at the middle / upper-middle income level, the majority of which has a higher education level. The respondents comprised 57.9% females and 42.1% males with a mean age of 35.12 years. Education level was determined as university (including students) in 61.6%, 30.7% were post-graduates and 7.7% had completed high school or a lower level. Marital status was reported as 48.3% single, 46.1% married, and 4.5% divorced. In the reporting of occupation, 25.6% worked in the public sector, 22.7% were students, 18.9% were private-sector workers, 10.2% were self-employed, 7.3% unemployed, 5.7% retired and 4% were a housewife. Income level was described as middle by 51.1% of the sample, "middle-upper" by 23.6%, 18.4% "middle-lower" by 18.4%, the "lowest" by 5.7%, and the "highest" by 1.1%. In respect of place of residence, 75.9% of the respondents lived in a metropolitan area. 71.8% in an apartment, 12.9% on a residential complex, 12.9% in a detached house and 1.3% in a villa.

Table 1. My family ties are now stronger

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	**Strongly disagree**	371	7,0	7,3	7,3
	Disagree	644	12,1	12,7	20,0
	Undecided	1288	24,1	25,4	45,5
	Agree	1775	33,3	35,1	80,5
	Strongly agree	986	18,5	19,5	100,0
	Total	5064	94,9	100,0	
Missing	**System**	274	5,1		
Total		5338	100,0		

The effects of the pandemic on family relationships are shown in Table 1. As can be seen in the table, the COVID-19 virus was reflected positively on the family relationships. Approximately 55% of the respondents stated that their family ties strengthened during the pandemic. During the quarantine period, all family members spent much more time together than ever before. Thus, the external threat (virus) brought the majority of family members closer together.

Modern urban life, intense working conditions and long school hours eliminate the opportunity for family members to spend time together and engage in activities at home. In this context, the pandemic gave families the opportunity to spend more together and to carry out common activities. Family members who had the opportunity to eat together, watch movies, chat and read books stated that they were happy with the situation.

Quarantine changes social role distribution. Although traditional household chores such as dishwashing, laundry, cooking, and house cleaning are traditionally performed by women, some men started to do some of these tasks during the pandemic process. The increase in shared posts on social media about men making cakes and bread is the biggest sign of this. The family division of labor during the quarantine period satisfied the majority of family members and strengthened the bonds of some families. In the competitive environment of business life, some people generally do not spend enough time with their family members. The quarantine period gave many people the opportunity to both do some hobbies and spend more time with their families.

However, the virus epidemic entered the life of world societies as a crisis and conflict. The epidemic disrupted normal life and created a source of conflict. Coser emphasizes that conflicts have a regulatory role in relationships. Conflict acts as a "safety valve" with functions of balance and order in social relationships (Swingewood, 2010: 266). Conflict and crisis also have a creative nature, sometimes revealing hidden malaise and problems. Coser stated that conflict is an integral part of human relationships (Wallace & Wolf, 2012, p. 190). Conflict also offers an opportunity for change and development. Therefore, the pandemic disaster also provided an opportunity for some families to improve their relationships.

Nevertheless, not everybody has been affected in the same way. For example, the effects of the pandemic on the wealthy are not the same as those on the poor. While some middle and upper-middle class families saw the pandemic quarantine as an opportunity to take care of their families, the unemployed and those without enough savings experienced more worry. Approximately 40% of the respondents stated that they were afraid of not being able to meet their basic needs, and negative aspects were expressed in the following statements: "I feel like I'm imprisoned" by 52%, "I have become angrier and irritable" by 37%, "I am living under constant fear of this virus" by 41%, and "I have become scared of losing loved ones" by 64%.

The participants were asked whether the problems of domestic communication increased after the pandemic. While the majority of the respondents (64%) said that their family communication problems had not increased, 17% stated that family problems had increased.

Moving away from familiar relationships that provide "ontological safety" may have affected these results.

Table 2. Communication problems have increased with respect to my family					
		Frequency	**Percent**	**Valid Percent**	**Cumulative Percent**
Valid	**Strongly disagree**	1440	27,0	28,7	28,7
	Disagree	1756	32,9	35,0	63,7
	Undecided	951	17,8	19,0	82,7
	Agree	570	10,7	11,4	94,0
	Strongly agree	299	5,6	6,0	100,0
	Total	5016	94,0	100,0	
Missing	**System**	322	6,0		
Total		5338	100,0		

In addition, the increase of "existential anxieties" of some people may have increased the problems of communication within the family. A statistically significant correlation was determined between the increase of intra-family communication problems and "existential anxieties" ($r = 0.245$, $n = 5006$, $p < 0.000$).

It was seen that what appeared in relationships during the pandemic was associated with the relationship before the pandemic. Poor family relationships before the pandemic were likely to become more evident under intense stress. The COVID-19 quarantine partially changed social role distribution, and quarantine at home led to some family members discovering new talents or improving existing talents, with some developing brand new skills.

Table 3. My family ties are now stronger and Gender			
	Gender		
	Female	**Male**	**Total**
Strongly disagree	6,7%	8,2%	7,3%
Disagree	11,7%	14,1%	12,7%
Undecided	25,5%	25,5%	25,5%
Agree	34,9%	35,2%	35,0%
Strongly agree	21,3%	17,0%	19,5%
Total	100,0%	100,0%	100,0%
(x^2 [4] 21,275, $p < .000$)			

Table 4. Communication problems have increased with respect to my family and Gender			
	Gender		
	Female	Male	Total
Strongly disagree	28,9%	28,3%	28,7%
Disagree	33,4%	37,2%	35,0%
Undecided	19,1%	19,0%	19,0%
Agree	11,5%	11,2%	11,4%
Strongly agree	7,1%	4,2%	5,9%
Total	100,0%	100,0%	100,0%
(x^2 [4] 22,194, p < .000)			

Table 3 and Table 4 present the relationships of the effects of the pandemic according to gender. Men and women evaluated the pandemic and its experiences differently. As can be seen in the tables, more females than males expressed that both the family bonds were strengthened and the problems of family communication increased during the pandemic. For women working online, obligations increased enormously, especially for those with large families, because women working throughout quarantine period had lost their assistants (Bozkurt, 2020).

Gender is a concept that tries to explain the status and role differences between men and women. Status and role differences between genders from past to present have attracted the attention of almost every sociologist. There are biological, social, feminist and patriarchal-based theories to explain the differences between genders. Theories based on biology see physiological and natural factors as the source of factors that cause and maintain universal inequality between men and women. However, historical, anthropological and sociological findings reveal that the behavior, status and roles of women and men vary according to time and place. While it is difficult to explain the change in the biological theory, social theory comes into play. The theory suggests that although we are born as female and male, roles related to femininity and masculinity have been learned by society. From this point of view, there are two gender roles, one being female and the other being male, and two different "scenarios" are attached to each of them by society. Genders are learned and implemented in the "scenarios" attached to them. Feminist theory, on the other hand, approaches this differentiation between the genders from a different perspective. In particular, Marxist feminists explain gender inequalities through capitalism, the economy-political system, in that a capitalist economy requires the free labor of women in the home and takes advantage of it. Therefore, in a patriarchal society, there is a tendency for women to see their submissiveness to men as a product resulting from the submission of labor to capital. According to Maynard,

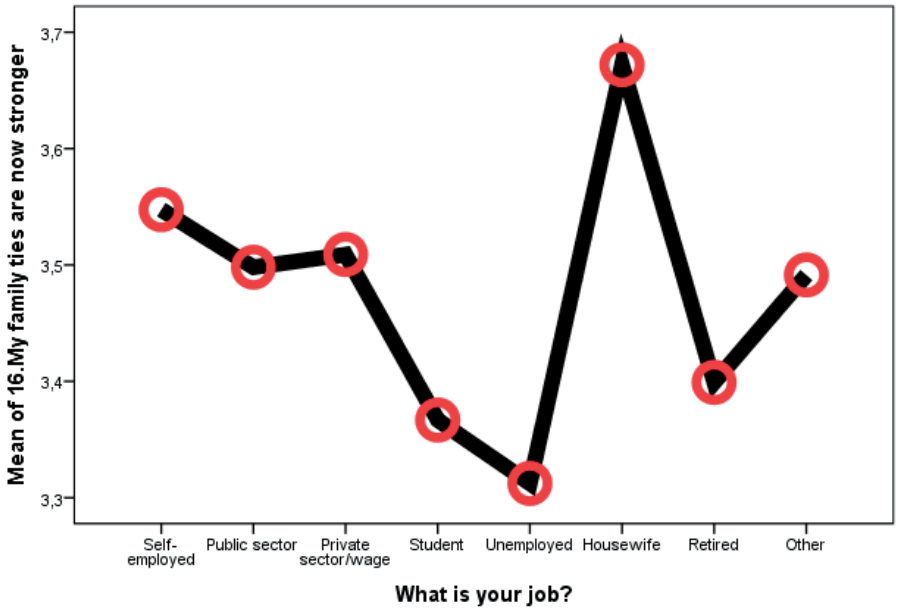
patriarchy created the most basic social divide. Walby focuses more on the concept of patriarchy, stating that patriarchy is a system of social structures and practices in which men rule, crush and exploit women. Especially with an application produced at home, women are almost always behind men. In a patriarchal society, women are often imprisoned in the household and their participation in public life is restricted. In the system of public patriarchy, women are not excluded from public life, but they face inequality and discrimination in paid jobs (Pilcher, 2010, p. 109-115). Consequently, men and women are not just born as two different sexes, but they are allotted different tasks, roles and status in society. In a male-dominated society, the life of women is associated with the home and the child or limited to the home and the child, while public life belongs more to the man.

Simmel (2016, pp. 9-12) states that human culture is not genderless, and objective culture has a completely masculine character except for a few fields. According to Simmel, it is the man who creates art, industry, science, trade, state and religion. Not only the object of culture, but its nature, is based specifically on masculine energies, emotions, and a markedly masculine mentality. It is decisive in this case that society allows men to express their energy without limiting their personality. The society provides more opportunities for men to do what they want, to produce and to express themselves.

Associating the issue as an economic-political system of society, Marx claims that all biological needs have a social mediation, and cultural constraints are decisive in meeting biological needs. There is no fundamental human nature in Marxism, but in contrast there are certain historical forms of human nature such as feudalism, capitalism, socialism and others. Starting from this idea of Marx, Holmstrom attempted to reach a theory about women. Based on the findings from a number of intercultural studies, he suggested that the majority of women's behavioral patterns are based on social imposition rather than biology (Brown, 2016, p. 39-40), referring to the difference in social role and status between men and women. As an extension of this difference, the place of women in science is quite limited historically.

In a study conducted in Turkey in 2016 of 20,580 households, 85% of the population had a positive approach to women's work, and 15% did not regard women's work positively (Ministry of Family and Social Policies, 2016, p. 142).

Graph 1. The Relationship between the Occupation and the Family Relationship in Pandemics



After the pandemic, especially housewives stated that their family ties strengthened. Before the pandemic, women who could not spend time with their husband because of work intensity spent more time together during the quarantine period. This seems to have satisfied the majority of most wives. In contrast, quarantine has not had the same effect on the family ties of all groups. Unemployed people in particular started to experience much more economic worry, as finding a job and making money has become much more difficult. The unemployed were seen to be least likely to say that family ties had strengthened (See Graph 1)

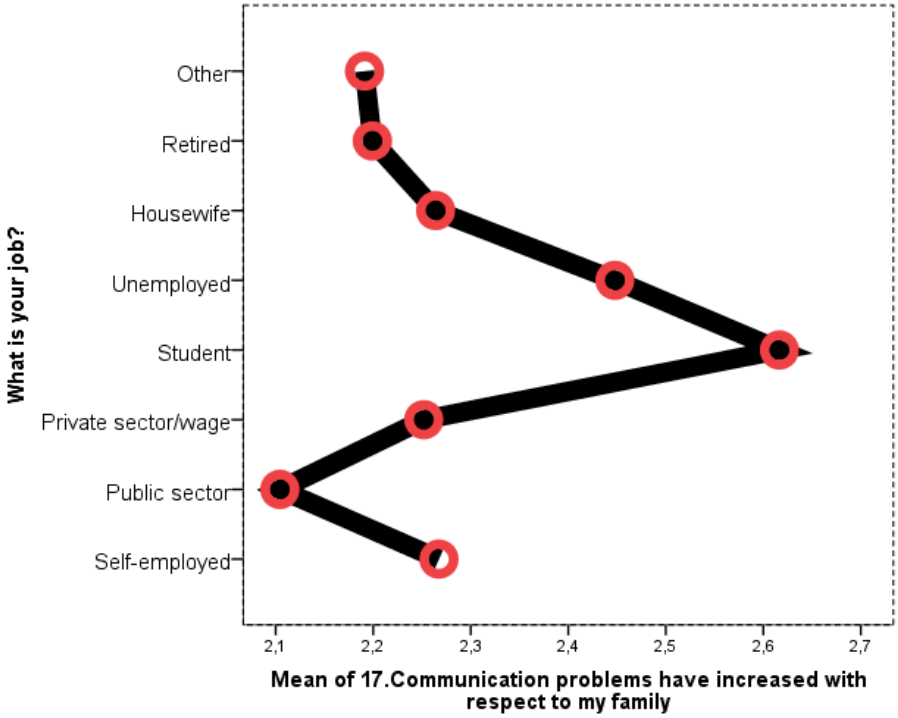
2. Two Elements that Increase the Problem in the Family: Unemployment and Poverty

Unemployment is a major current problem. Although this situation was also present before the pandemic, it increased exponentially after the pandemic. In addition, this problem is not only our problem, but can be seen throughout almost the whole world. According to a study conducted in the USA, 49% of the respondents were worried about losing their job in the next 2 or 3 years. Again, 70% thought that unemployment was not a temporary situation but has become the main characteristic of the modern economy (Lohr, 2010, p. 343). With the onset of the COVID-19 pandemic, global industrial production dropped drastically in a short time, with some factories having to close for a long time. Unemployment has increased worldwide.

Regular income increases a person's life satisfaction and optimism. It strengthens social ties and sense of responsibility. Working in a regular job disciplines people, and unemployment causes the person to lose control over time and space. This directly affects family and married life as lack of permanent employment or irregular employment prevents rational organization of daily life (Wilson, 2010, p. 329). The effects of the social control mechanism are weakened on the unemployed.

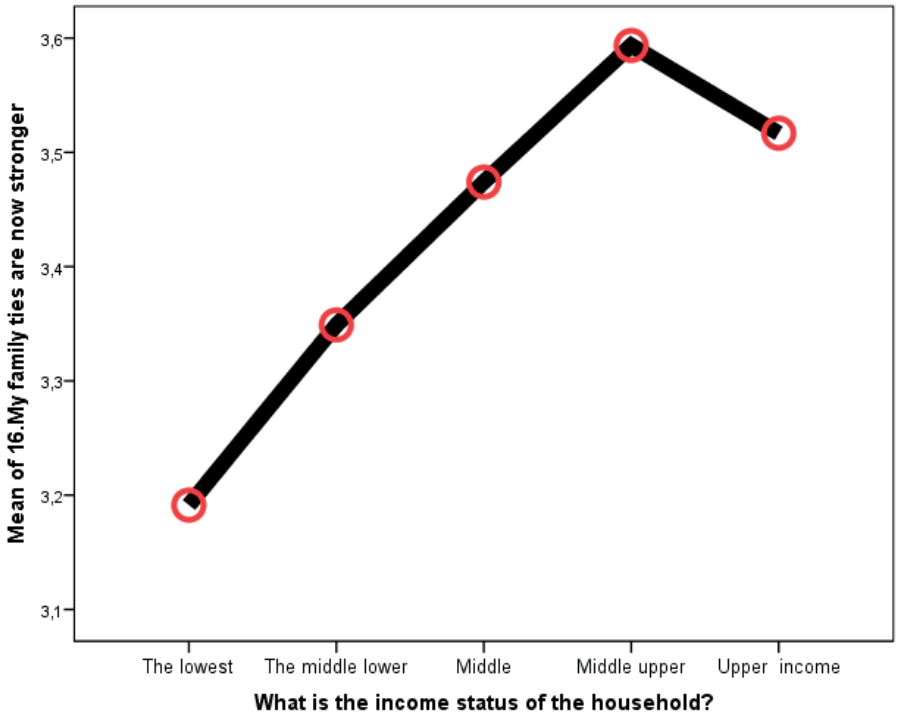
A decline in production and wages has a negative effect on family life. Economic concerns negatively affect people's moods, thereby affecting communication among family members negatively. Domestic violence is known to increase in times of increased economic problems. As can be seen from Graph 2, students and the unemployed were the groups who stated that their problems in family relationships had increased the most. Students are most affected by the uncertainty created by the pandemic. The unemployed cannot establish good quality family communication due to economic concerns. Public-sector workers with regular income were seen to be least affected by quarantine, as they had no concerns about unemployment and income loss.

Graph 2. Communication problems have increased with respect to my family and Job



It would not be correct to link the problems experienced by students during the quarantine period to "economic concerns" entirely. Young people, who are at a much more active age, were unable to go out during this period. Students at universities away from their hometown returned to their families and moved away from their friends, thereby losing their freedom. Therefore, the uneasiness of young students was higher than all other respondents.

Graph 3. My family ties are now stronger&Income Status

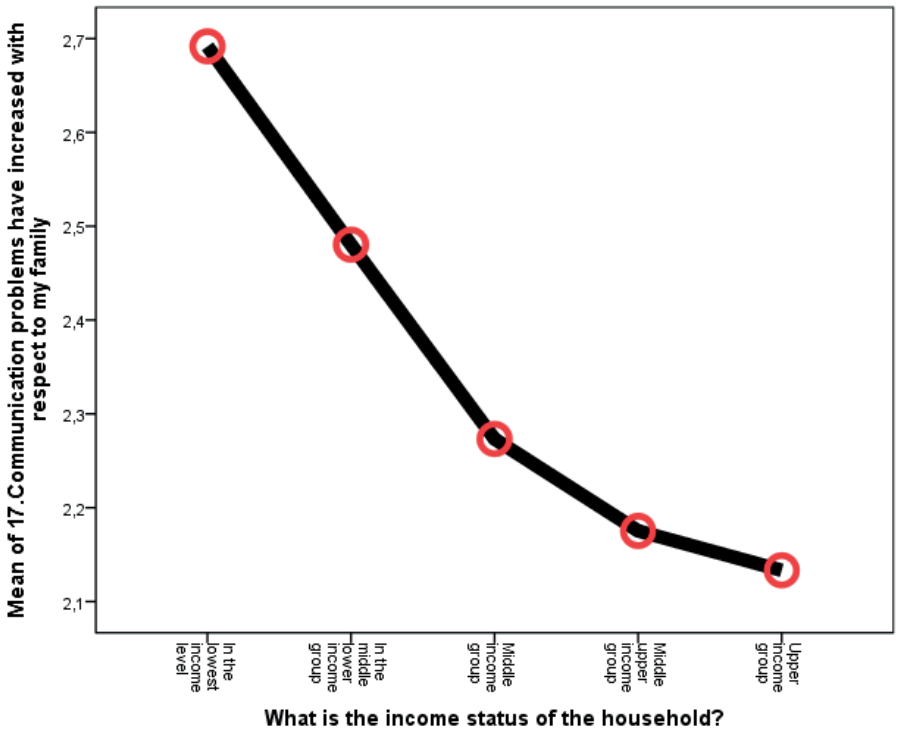


After the onset of the coronavirus pandemic, one of the factors affecting family relationships was household income. As seen in the related graphs, the ratio of those stating that family ties had strengthened increased in parallel with increased income. Families in the lowest income group reported the least that family ties had strengthened the least, whereas those in the upper-middle and upper income groups stated the most strengthening of ties.

An economic crisis creates poverty and has a negative effect on family life with already impoverished families most badly affected. The failure of parents to meet economic obligations for family members increases family problems (Çılga, 1995, p. 334-33). Economic problems have always been one of the important factors affecting family relationships (Saran, 1991, p.

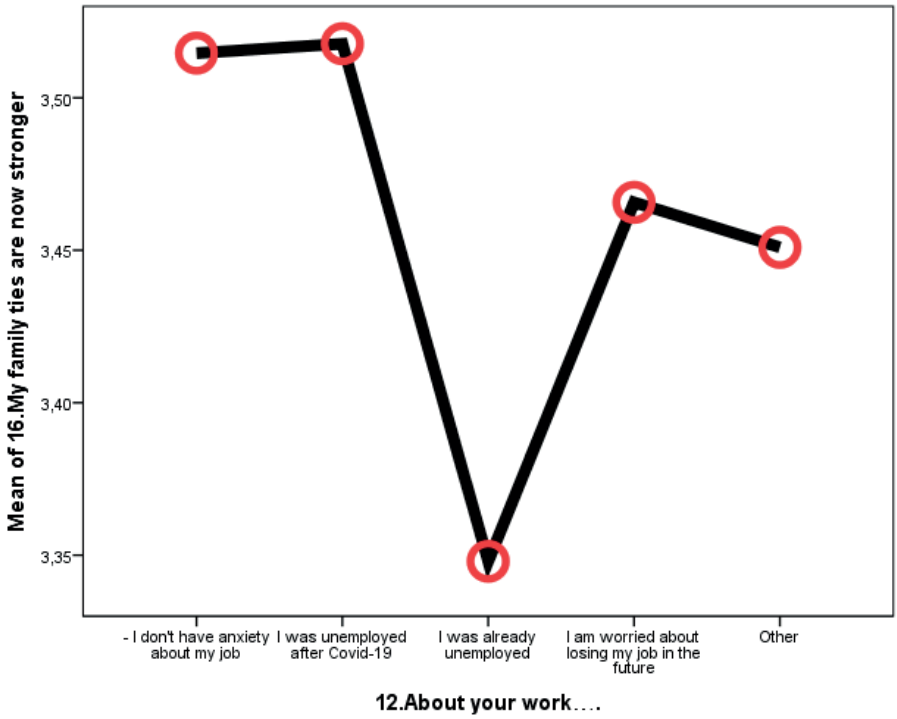
140). An economic crisis and unemployment also lead to violence and discord in the family, and the greatest impact of economic problems in the country manifests first within the family. In poor families, the care of children in particular becomes a major problem.

Graph 4. Communication problems have increased with respect to my family &Income



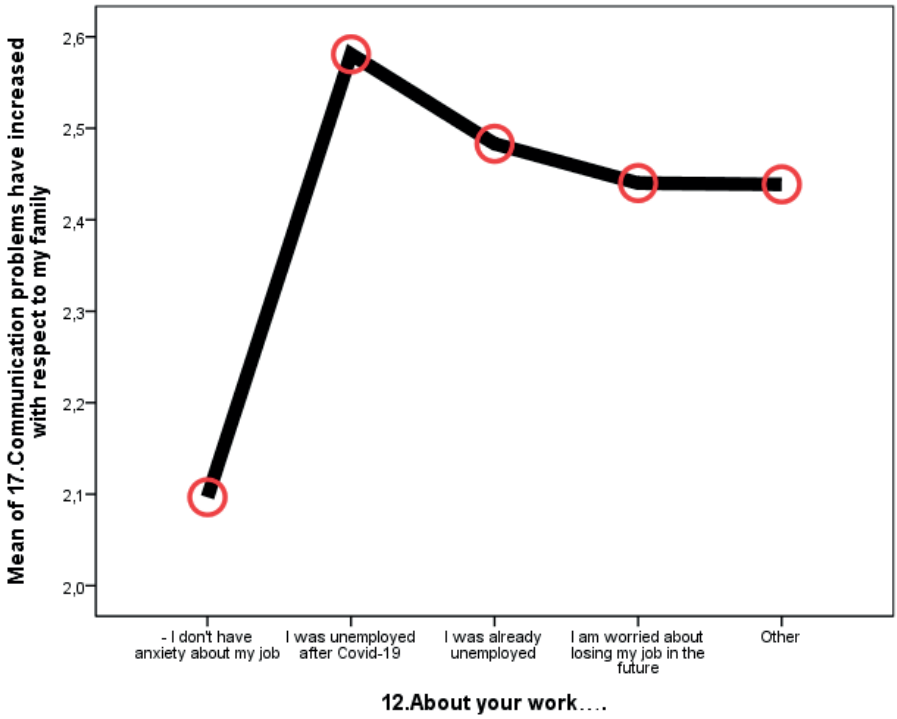
Economic problems affect men just as much as women, and poverty creates chronic stress and pressure. When a man is under intense stress, he may experience outbursts of anger. In traditional Turkish culture, the man is the primary breadwinner in the family, and if a man in such a society is prevented from providing for his family, he can easily become aggressive, leading to increased domestic violence in such times. In a previous field study by the Family Research Institution, the leading cause of domestic violence was reported to be financial problems at the rate of 28.2%. (Causes and Results of Domestic Violence, 1995, p. 143).

Graph 5. My family ties are now stronger & Work



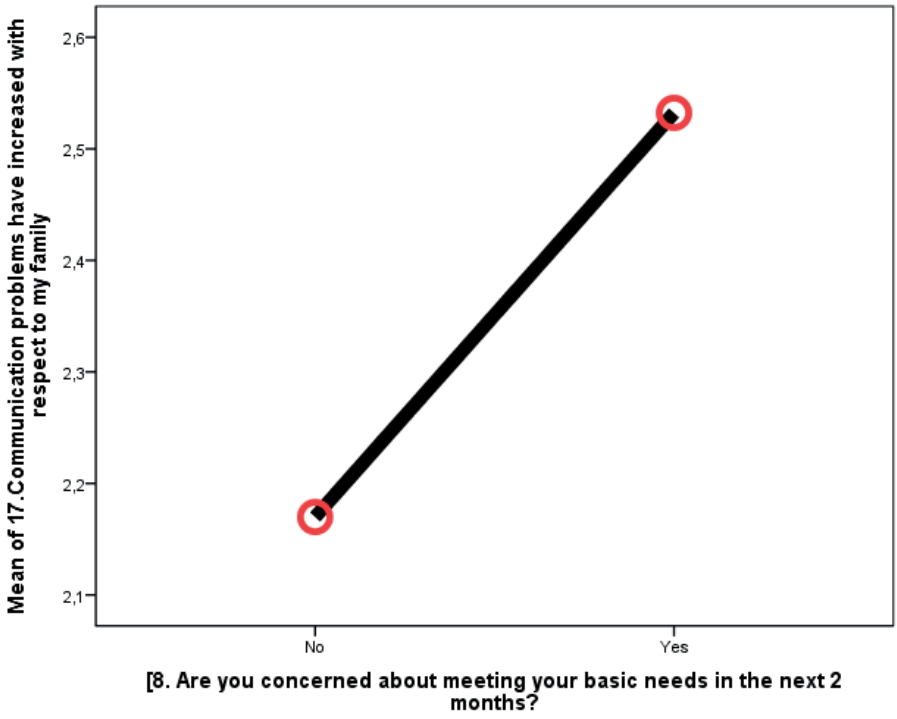
Graph 5 shows the relationship between the job position and family ties during the pandemic process. As can be seen from the table, those with no job anxiety stated that their family ties were strengthened, whereas the unemployed and those concerned about losing their jobs in the future gave relatively negative answers about the strengthening of family ties. In addition to economic problems, uncertainty about the future was also reflected negatively on family relationships.

Graph 6. Communication problems have increased with respect to my family &Work



Anxiety about the future has a negative effect on family communication, and this was confirmed by the findings obtained in the research. Those who fear hunger or being unable to meet basic needs in the future have more family communication problems. The anxiety caused by the pandemic has had a deep effect. In recent years, global warming and global poverty have become the most concerning issues. Beck (2011) pointed to the globalizing risk in his famous work entitled "Risk Society Towards Another Modernity".

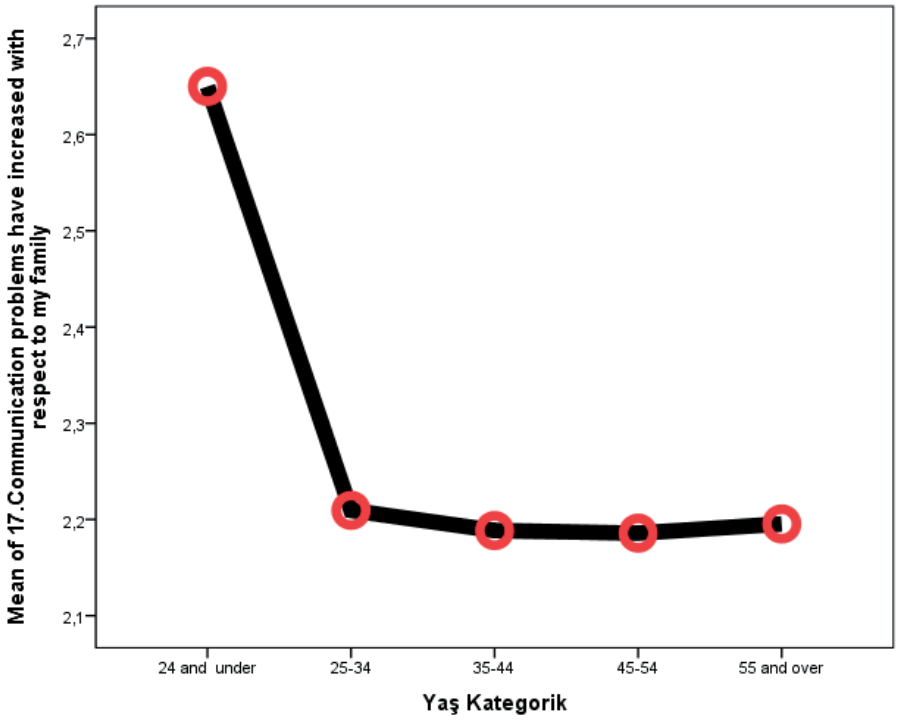
Graph 7. Communication problems have increased with respect to my family& Are you concerned about meeting your basic needs in the next 2 months?



3. The Effect of Age in the Pandemia

The pandemic has had different effects on different age groups. The statement, "My family ties are now stronger" was disagreed with most by those aged ≤24 years, and agreement was seen to increase with increasing age ($f(4) = 4.374$, $p < 0.002$). The very nature of being young means being in a state of change and uncertainty with less economic accumulation and less experience. Anxiety about exams and the future is at the highest level during youth.

Graph 8. Communication problems have increased with respect to my family& Age



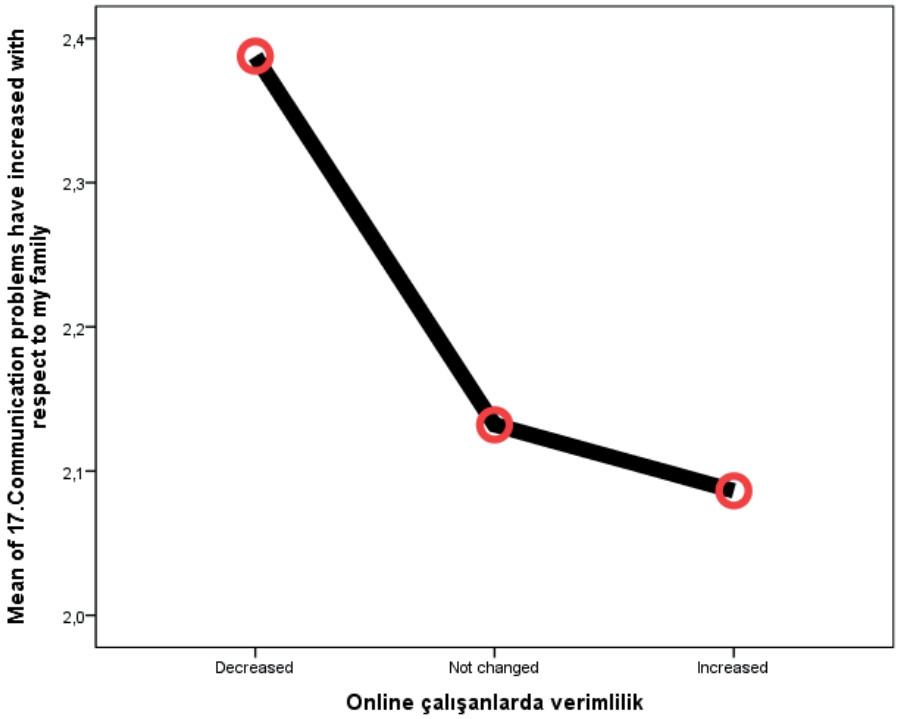
Modernization affects young people more than other age groups. Individualization among the youth tends to gain strength (Furlong & Cartmel, 2010, p. 306), and scientific and technological development changes the professional skills required. The jobs of Industry 4.0 (or Society 5.0) require higher qualifications. The number of students enrolled in higher education institutions in Turkey has risen to an unprecedented extent, but young people are now facing a much more complex labor market. The pandemic (quarantine) has taken away what young people value most, which is their freedom. As can be seen from the graph, the statement, "Communication problems have increased with respect to my family" was agreed with most by young people.

4. Working at Home in Pandemia

(i) Globalization, (ii) increased flexibility in the labor market, (ii) changes in information and communication technologies, and (iv) the development of an information-based economy have made it easier to work from home. Online work has been a cost-cutting factor for many businesses, but it became a lifeline during quarantine, and has become a preferred form of employment for some employees (Jewson & Felstead, 2010, p. 358-359).

However, all countries were caught unprepared for the pandemic and working from home. Employees mostly stated that their productivity decreased (Bozkurt, 2020), while those who reported that their efficiency had increased were also those who reported strengthened family ties. Those who reported decreased efficiency were mostly those who stated that communication problems had increased (f (4)= 21,396, p<0.000).

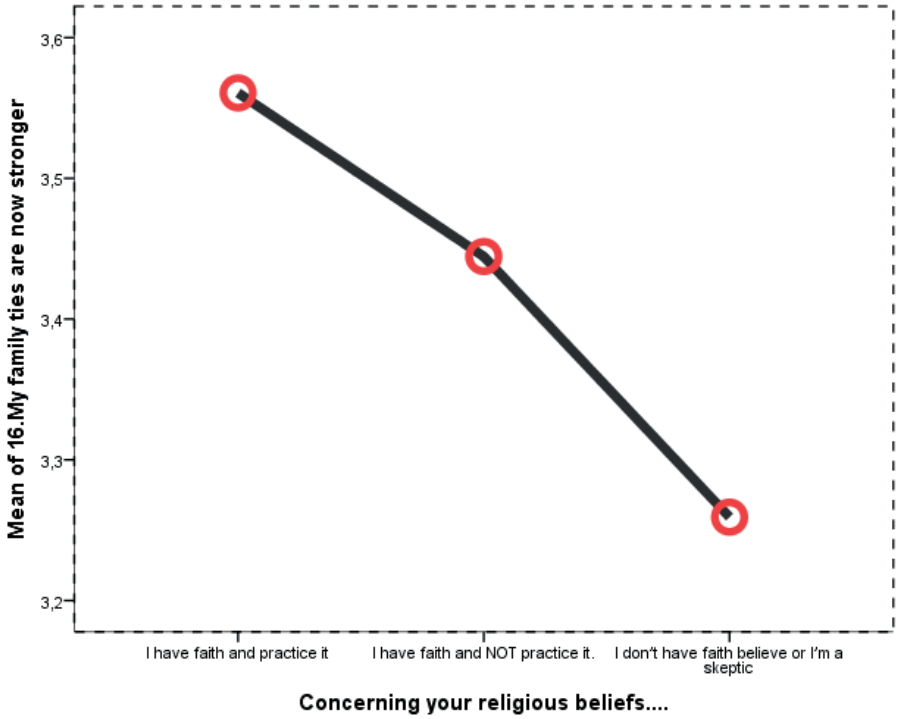
Graph 9. Communication problems have increased with respect to my family& Work productivity



5. Our Value Differences

The world views and cultural values of the family affected family relationships in the pandemic. Religious people in many countries often give the family more priority than people who are sceptical / non-believers. The family is at the heart of the conservative mind. Those who stated "I have faith and practice it" reported stronger family ties during the pandemic. In contrast, those who stated no religious belief or scepticism were the least approving of this view (f(2)= 21,509, p<0.000). The respondents with religious beliefs and who practiced their religion stated that they had fewer communication problems in the family than others (f(2)= 14,902, p<0.000).

Graph 10. My family ties are now stronger & Religious involvement



Conclusion

The COVID-19 pandemic has had a profound effect on the economy, politics, science, culture and the family. Especially during quarantine, people were confined to their homes for a long time and spent more time together than ever before. Quarantine was an opportunity for those who could not previously spare time for their families due to workload. Especially those who had no economic concerns stated that they were happy because they spent more time with their families.

The data showed that young people experienced family communication problems the most. Restricting people's freedom in quarantine created stress for everyone, but the stress it created on young people was seen to be a little more. Increasing stress increased family problems more for these young people. In contrast, it was observed that communication problems decreased with increasing age and family ties were strengthened during the quarantine period, especially for adults.

The COVID-19 virus does not recognize social class. It infects anyone who does not take protective action against the virus. It kills those with a weak immune system, whether rich or poor. However, the socio-economic impact created by the pandemic is different for each social class (Bozkurt, 2020). The problems experienced by rich families and the problems experienced by poor families are different.

Rich families were able to allocate more time to each other during quarantine period, developing new hobbies or learning new programs, and to a certain extent, they were able to work remotely.

However, poor or unemployed families experienced increased economic anxiety. Increasing concerns also increased communication problems among family members.

Some people continued to work during the quarantine period. As they used public transport, rates of infection increased especially in poor provinces. However, as the level of trust of individuals in other people and the government has increased, it can be seen that they cope more easily with the psycho-social problems in the family created by the pandemic.

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CHAPTER 14

PANDEMIC AND SOCIAL VULNERABILITY: THE CASE OF THE PHILIPPINES

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ABSTRACT

The COVID-19 pandemic crisis has created compounding challenges, disproportionately affecting the disadvantaged sectors of the society and heightening their risk of social vulnerability. In the Philippines, children, women, the elderly, persons with disabilities, and low-income families have faced stressors associated with vulnerabilities and are further triggered by the crisis amid the implementation of stringent quarantine measures. By adapting the socioecological framework, this work describes the pandemic's impact on vulnerable populations in the country. It explores how the factors affecting the vulnerability of the identified social groups are situated within the five levels, namely microsystem, exosystem, mesosystem, macrosystem, and chronosystem. In doing so, it examines how the risks they encounter are anchored in a dynamic social context that considers their immediate environment, social interactions, culture, macro-level societal influences, and significant life transitions. In each system, it is apparent that vulnerable individuals have to deal with different stressors that are likely to threaten their health, safety, and well-being. The problems encountered by these individuals are further aggravated by the occurrence of natural disasters, armed conflicts, and animal disease outbreaks alongside the pandemic crisis. It is worth noting that various local and international actors have carried out crisis response efforts to respond to vulnerable populations' needs. However, the extent to which such measures can help build their resilience amid the pandemic remains unclear.

Keywords: Pandemic, social vulnerability, risk, socioecological framework, Philippines

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1. Introduction

The unprecedented crisis originating from the outbreak of COVID-19 has placed specific population segments in a more vulnerable position. On the one hand, this pandemic crisis has exposed the socially vulnerable to new forms of vulnerabilities, further threatening their livelihood, health, and well-being. On the other hand, it has exacerbated the already existing vulnerabilities, placing them at increased risks due to the existence of underlying conditions. Undoubtedly, the pandemic has exposed the disparities that have long existed within the society and have long been faced by vulnerable populations.

From a sociological perspective, the concept of risk characterizes the challenges encountered by a globalizing society. Beck (1992) defined risk as a "systematic way of dealing with hazards and insecurities induced and introduced by modernization itself" (p.21). What have grown alongside the modernization of societies and technological advancement are risks that have significantly transformed contemporary social life. On a global scale, risks can be characterized by social vulnerability emanating from the occurrence of catastrophic events (Beck, 2006). For instance, in hazard-prone areas where poor people live, the negative impacts can be significantly felt as a result of simultaneously occurring socioeconomic, environmental, demographic, and political problems.

In what Beck (2009) termed as a world risk society, the most disadvantaged groups have no choice but to hurdle the challenges of being exposed to such catastrophes. These groups are most likely left behind in crucial decision-making processes when dealing with risks, given their marginal and scarce resources. As a result, they have to bear the unexpected dire consequences of the decisions made by those who are put in a better position to hold power (Beck, 2008). In this context, power relations should be accounted for when explaining the inequalities that reflect differences in exposure to risks (Beck, 2013). Contributing to the climate change discourse, Beck (2010) further argued that the disparity between the rich and the poor is aggravated as well as dissolved by contemporary risks such as the global challenge of climate change. The elimination of inequality requires then a cosmopolitan approach, in which individuals, regardless of their ethnic background, religion, and social class, should be part of a community with a common goal for survival (Beck, 2011).

It should be noted that at the expense of solidarity, an individualization of suffering is most likely to exist among specific members of society. Beck (1992) argued that people have to take full responsibility in dealing with social risks. With the individualization of risks, individuals are compelled to work things out for them, especially when they do not have access to social

support and services (Chan & Ho, 2017). This situation is particularly true for those belonging to vulnerable sectors who lack the required resources to address the risks and uncertainties they face, particularly during the pandemic crisis (Nygren & Olofsson, 2020). For example, workers who lost their jobs would find themselves struggling to make decisions and actions such as seeking relief assistance, enrolling in training programs to upgrade their skills, or making a living through online selling. Poor households that are already beset by health inequalities face difficulty managing their own risks, further contributing to their adverse health outcomes (Cardona, 2020). These unsurprising cases of individualization of risks can place more strain on vulnerable groups that are situated in an environment with scarce resources and demanding conditions (Hanappi & Bernardi, 2010).

Within the disaster management literature, the concept of social vulnerability has been thoroughly examined with a focus on the analysis of socioeconomic conditions and environmental risks (Alwang, Siegel, & Jorgensen, 2001; Bara, 2010). Such conceptualization becomes relevant for further analysis, especially when it advances the view that vulnerability results in the unequal distribution of social risks, indicating that not everyone within a community is most likely to suffer from the occurrence of disasters (Llorente-Marrón, Díaz-Fernández, Méndez-Rodríguez, & Arias, 2020). Existing evidence has consistently identified children, women, the elderly, persons with disabilities, and low-income families as socially vulnerable groups affected mainly by disasters (Fatemi, Ardalan, Aguirre, Mansouri, & Mohammadfam, 2017; Flanagan, Gregory, Hallisey, Heitgerd, & Lewis, 2011; Morrow, 1999).

With its damaging effects on public health and the economy, the COVID-19 pandemic has drastically transformed the social condition by seriously disrupting the functioning of society. This major disruption has led some scholars and institutions to characterize the pandemic as a disaster. For instance, Karaye and Horney (2020) described COVID-19 as a large-scale natural disaster that disproportionately threatens the health of socially vulnerable groups. Lavell and Lavell (2020) advanced the idea that it is a severe disruption to normal lives at different scales, which could be more directly felt in vulnerable situations. Lee and Morling (2020) highlighted the societal effects of the pandemic in terms of putting vulnerable groups "at greatest risk not just from infection but the indirect consequences" (p. 188). Cheval et al. (2020) characterized the pandemic's consequences as a disaster with prolonged effects on various socioecological systems. The United Nations Industrial Development Organization (2020) described it as a pressing disturbance that has driven businesses and livelihoods to enormous losses.

In the Philippines, the pandemic has bared the vulnerabilities of individuals and households, especially during the implementation of strict quarantine measures. Its negative social and

economic impacts revolve around the loss of jobs and livelihoods, restrained access to social services, and aggravation of violence-related conditions (Philippines Humanitarian Country Team [HCT], 2020a). In some areas of the country, the effects could even be worsened by the occurrence of natural disasters, such as typhoons, earthquakes, outbreaks of animal diseases, and armed conflicts. In these contexts, social vulnerability becomes a relevant subject matter that needs to be discussed and addressed.

Anchored on the socioecological framework, this paper examines the factors that drive and shape vulnerabilities experienced by specific social groups. It recognizes the multifaceted nature of social vulnerabilities, which can be described at different levels. In doing so, it attempts to simplify the complexity of discussing the different dimensions of social vulnerability as situated within the pandemic context.

2. Socioecological Framework

The socioecological framework advances that human development is shaped by a combination of individual and environmental factors that occur within nested layers. Humans are situated within interconnected structures that influence their development (Bronfenbrenner, 1986). The interplay of such structures is illustrated as a model composed of five nested levels. At the microsystem level, the immediate environment bears a strong influence on individuals' activities, relationships, and interactions. When two or more microsystems interact, individuals become active participants in processes that take place within a mesosystem. The next layer, the exosystem, could also influence the processes experienced by individuals in their immediate environment but in an indirect manner. Operating at the broadest level, the macrosystem comprises the cultural context and also deals with the interplay of varying social, political, and economic factors. Lastly, the chronosystem is characterized by significant changes and transitions that are likely to affect individuals' lives.

The socioecological framework has been extensively applied to understand disaster recovery and resilience. Noffsinger, Pfefferbaum, Pfefferbaum, Sherrib, and Norris (2012) shed light on the components of children's social-ecological environment that shape their reactions when exposed to disasters. The nested layers of systems encompassing children's social ecology can be beneficial in supporting gradual recovery from disaster impacts. Boon, Cottrell, King, Stevenson, and Millar (2012) worked around the concept of community or social resilience to explain how the interconnections and interactions among the systems contribute to strengthening resilience to natural disasters. The linkages that exist among the nested factors are beneficial for crafting mechanisms and policies

appropriate for a particular system, contributing to the resilience-building efforts to address future disaster risks.

In the context of vulnerability, only a limited literature adopted the socioecological framework to examine the interplay of social factors that either promote or reduce social vulnerability. In their analysis of the factors affecting social vulnerability among older adults, Andrew and Keefe (2014) identified dimensions of social vulnerability that stretch their influence, ranging from the immediate individual and family environments to the broader community spheres. By investigating the social factors particularly affecting older adults' health from the lens of a comprehensive ecological perspective, the authors argued that a more elaborate understanding of social vulnerability could be advanced. Applying the socioecological model to explore HIV vulnerability among women, Frew et al. (2016) found that the dynamic interactions of factors situated in the microsystem largely contributed to HIV risk. Dominant themes such as substance use, sexual concurrency, intimate partner violence, community violence, discrimination, poverty prevalence, and financial insecurity emerged as the interconnected multilevel factors affecting women's vulnerability.

2.1. Microsystem

Within the microsystem level, vulnerable individuals are likely to be at risk of experiencing abuses, violence, isolation, insecurity, and other forms of stressors. Filipino elderly, for instance, are prone to physical and psychological forms of abuses, and their frequent exposure to such negative situations is likely to heighten their risk of death (Commission on Human Rights [CHR], 2017). Within their homes, they are unprotected from experiencing abuses committed by their family members. Since they are prohibited from leaving their houses during the pandemic, the elderly are put in an inescapable situation, in which they could be recurrently encountering violence against them. The lack of public discourse on this alarming issue, coupled with the dearth of a substantial amount of data that would detail the abuses that they experience, makes elder abuse an invisible issue in the country (CHR, 2020a).

As they remain inside their houses, the elderly have no choice but to rely on their families to meet their basic daily needs. The latest statistics on the elderly population in the country points out that they comprise 7.5% or around 7.5 million of the more than 100 million total population (Philippine Statistics Authority [PSA], 2015). A 2019 longitudinal study on ageing and health in the country by the Economic Research Institute for ASEAN and East Asia highlighted the reliance of older persons on their family members, particularly on their children, for financial and material support (Cruz, Cruz, & Saito, 2019). However, with the

ill effects of lockdown restrictions on livelihood and work, the elderly who depend on their children who work as daily wage earners face the uncertainty of being continuously supported. The situation becomes even worse for aging parents who have to support their adult children. Regardless of the condition they are in, what is evident is that the pandemic has overburdened them in terms of food insecurity, inadequate supply of medicines, and financial struggle (Paul, 2020).

Another long-hidden issue that has revealed its dire consequences during the pandemic is the occurrence of violence against women and their children (VAWC). Trapped within the confines of their homes, the victims have to endure repeated abuses such as intimate partner violence, online sexual exploitation, and rape, placing them in a more vulnerable position. The Philippine National Police reported nearly 3,700 VAWC cases (March 17 - June 4) during the implementation of the community quarantine measures. While the figures reflect a reduction of almost half in the cases reported for the previous period (January 1 – March 16), they do not straightforwardly indicate a declining trend and thus should not be treated as welcome news. The Philippine Commission on Women (PCW) explains that mobility restrictions caused by quarantine protocols hamper victims from reporting to authorities (Ranada, 2020). For the CHR (2020b), the problem lies in the underlying fear of being caught in reporting violence by their perpetrators.

The perpetration of abuse has also been carried out online, targeting children for sexual exploitation. Due to quarantine restrictions, which have led to the disruption of school operations, children are at a higher risk of being victimized by traffickers who happen to be their family members. With cases of cybersex trafficking steadily rising in recent years in the country, online sexual exploitation of minors has still become a matter of urgent concern. Citing data from the National Center for Missing and Exploited Children, the country's Department of Justice reported that children's sexual exploitation increased by more than 270,000 cases during the quarantine period alone (March 1 to May 24), reflecting a 264 percent over the previous year's cases (Pulta, 2020). However, the figure does not represent the actual number of cases due to multiple, misleading, or inaccurate reporting. Still, it indicates that home confinement serves as an opportunity for traffickers to carry out their criminal activities, largely contributing to the spike in online child exploitation cases.

As regards people with disabilities (PWDs), the risk of isolation puts them in a more vulnerable position. Being confined inside their homes prevents them from getting assistance from others to respond to their specific needs. For some PWDs like those with intellectual impairments, staying at home hampers them from going to public places to help them get

through the situation (United Nations Human Rights Office of the High Commissioner, 2020). Women and children with disabilities are also exposed to a higher risk of abuses and violence. PWDs with underlying health conditions become more susceptible to become infected with the virus. For the majority of Filipino PWDs belonging to the disadvantaged sector and relying mostly on their immediate family members for support, a serious concern revolves around the lack of access to basic goods such as food items and medicines brought about by financial strain and job losses.

Undoubtedly, the pandemic has caused disruptions and pressures on families, especially on those who have to survive on a low income. Its detrimental effects are evidenced in the inability of parents to support their children and food insecurity. According to Albert, Santos, and Vizmanos (2018), more than half (58%) of Filipinos belong to the low-income class, indicating that a large number of the population would face difficulty sustaining their needs amid the pandemic. It is estimated that about 1.5 million families are located in informal settlements in the country (Housing and Urban Development Coordinating Council, 2014). While not all informal settlers can be regarded as income poor, many of them are most likely to be susceptible to "external shocks that can easily push them below the poverty line" (Raghunath, 2020, para. 4). For instance, mobility restrictions hamper families from continuously providing their members with basic needs to support their daily survival. Worse, families that rely on minimum-wage income are at risk of losing their source of income due to the possibility of layoff.

2.2. Mesosystem

At the mesosystem level, the needed interactions, which would have contributed to the coping and resilience of vulnerable groups, have been interrupted by the coronavirus outbreak. The provision for a supportive social network at this level is so crucial that it could ease the difficulty of living in uncertainty. However, in a pandemic crisis, social support systems could be impaired by the increased stress and anxiety, financial threats, and lack of caregiving assistance (United Nations High Commissioner for Refugees [UNHCR], 2020a).

The suspension of school operations has led to an unfavorable impact on children's personal development and social engagement. The United Nations Educational, Scientific and Cultural Organization (2020) has reported that around 25 million pre-primary, primary, and secondary learners in the country have been affected by school closures. Due to social isolation, these students suffer from the unavailability of essential social support and care services that, for the longest time, have been provided by schools in conjunction with families

and other community-based groups. For the most marginalized children greatly affected by school closures, this would mean the lack of provision for their meals, hygiene, and other support services (United Nations Children's Fund [UNICEF], 2020). Further, the lack of social interaction undermines children's well-being and sense of community. Although interactions are likely to be established with other children from a nearby neighborhood, strict confinement would make it rather impossible for them to do so.

The absence of social engagement, which could have been offered through extra-familial social support networks, also has detrimental effects on the elderly's well-being. Regarded as high-risk individuals, elderly Filipinos are not allowed to go out during the quarantine period, increasing their risk and experience of being socially isolated. Such a condition becomes even more burdensome for them when they have no means to communicate with other individuals outside their home or when they cannot even use technologies such as digital tools (Buenaventura, Ho, & Lapid, 2020). Due to the lack of access to technology, the elderly lose the crucial opportunity to use either online or phone-based mental health services to address their mental health conditions. Further, due to long-term social distancing measures, the needed social support they can obtain from their community is no longer available to help them meet their mental, emotional, and even spiritual needs.

The pandemic has also caused interruptions in the delivery of community-based services aimed at promoting and safeguarding the welfare of women and children who are victims of abuse and violence. When social support networks become inaccessible, vulnerable individuals' sense of security is endangered. This condition is particularly true for victims of violence who could not get out of the way to seek social protection from community-based institutions and organizations. As noted earlier, the decrease in the number of VAWC cases emerging during the quarantine period cannot be regarded as a positive development. Aside from reasons such as movement restrictions and fear of perpetrators, the difficulty of accessing vital social services that can provide them the necessary protection and support contributes to the underreporting of cases (Mlambo-Ngcuka, 2020). Victims also face stigma and discrimination associated with stereotypes of abuse and sexual violence within the community.

2.3. Exosystem

The effects of the pandemic are very much evident at the exosystem level. The economic strain of quarantine restrictions has far-reaching repercussions on vulnerable individuals. Alongside the lockdowns are massive business shutdowns and layoffs, affecting millions

of workers worldwide. In the Philippines, the PSA (2020) recorded an unemployment rate that increased to a record-high 17.7% or 7.3 unemployed Filipinos in April, manifesting the pandemic's direct impacts on the labor market. Low-income families, who largely depend on members who are informal and minimum wage workers, have to face the immediate loss of income and food insecurity due to unemployment and considering that even before the pandemic, these families had already been experiencing poverty. A closer look at their condition during the pandemic would reveal the desperate measures they need to undertake for survival.

Insufficient healthcare resources have also become an emerging concern. With a strained healthcare system resulting in a public health crisis, the widening of healthcare disparities for vulnerable populations has transformed into an inevitable situation. Families who seek maternal and child care services are likely to find themselves being sidelined and struggling for access to such resources. Since most of the resources are allocated to battle the virus outbreak, essential services aimed at protecting the welfare of women and children are also interrupted. An immediate effect is the discontinuation of family planning use of more than 3 million women aged 15 to 49 years based on the projection made by the University of the Philippines Population Institute and the United Nations Population Fund (Commission on Population and Development [POPCOM], 2020).

Likewise, children's nutrition needs are being threatened by strained healthcare. Prior to the pandemic, undernutrition prevalence in the country had already been alarming in recent years, with cases of stunting (below 5 years of age) affecting 3.5 million children based on a 2003-2018 trend (UNICEF, 2019). This only suggests that addressing this perennial problem of malnutrition becomes even more challenging at a time when critical nutrition programs are not adequately provided due to pandemic. It also comes at a period when "an estimated 5.2 million Filipino families experienced involuntary hunger – hunger due to lack of food to eat – at least once in the past three months" (Social Weather Stations [SWS], 2020a, para. 1). In the case of disadvantaged families suffering from income losses, failure to address even the most essential nutrition needs would eventually result in extreme malnourishment.

High-risk groups such as the elderly and PWDs also have to face the risk of not being prioritized in the uptake of essential healthcare services. This is despite the need to give them the utmost attention considering that they have higher health care needs than others and a higher risk of being infected with the virus (Humanity & Inclusion, 2020a; HCT, 2020b). For instance, the unavailability of outpatient services due to the diversion of most healthcare resources to COVID-19 emergency response has either minimized or removed older Filipinos'

access and uptake of such services (Buenaventura et al., 2020). Healthcare inequality has become even more evident for PWDs who, aside from not being able to gain access to basic health support needs, are also experiencing inconvenience in obtaining access to relevant health information. Thus, a survey carried out by Humanity & Inclusion (2020b) with Manila-based youth with disabilities aged 18 to 39 reveals that 49% of them are in need of health support services, and 41% want access to vital information about the virus and quarantine measures.

2.4. Macrosystem

The pandemic's significant disruptions at the macrosystem level, particularly those that are significantly affecting the economic, political, and social systems, have influenced Filipinos' perceptions of the pandemic and its impacts on their lives. Surveys conducted by SWS reveal a negative picture of how the people are trying to deal with the pandemic. Most (85%) Filipinos are worried about the possibility that their immediate family members might be infected with the coronavirus disease (SWS, 2020b). The vast majority (86%) of them report that the crisis has given them stress, and this could be primarily attributed to experiences of involuntary hunger and loss of jobs (SWS, 2020c). Pessimism is evident among almost half (47%) of working-age Filipinos who believe that the worst-case scenario is yet to come amid the pandemic crisis (SWS, 2020d). Additionally, nearly half (43%) of Filipinos from the same age group anticipate that their lives will worsen in the next 12 months.

In the meantime, however, Filipinos have to learn how to live with the virus. The initial response to the pandemic is marked by an emergency declaration by the national government that has paved the way for community quarantine measures. Despite worries surrounding the coronavirus outbreak, they have responded to the challenges of the pandemic with favorable views about public health measures. Most (84%) Filipinos perceive that the strict implementation of 'stay-at-home' orders, which are aimed at limiting exposure to the virus and protecting lives, are 'worth it' (SWS, 2020e). Large 'majorities' continuously practice preventive health measures such as wearing face masks when leaving their houses (76%), washing their hands several times per day (65%), and observing physical distancing (59%) (SWS, 2020f).

2.5. Chronosystem

It is not only the pandemic crisis that yields stressors for vulnerable populations at the chronosystem level; the threat from natural disasters also augments the risks they face. In May 2020, Typhoon Vongfong (local name Ambo) hit the country, displacing hundreds of

thousands of residents and complicating disaster risk management efforts. Most of these displaced individuals belong to "vulnerable communities in the Eastern Visayas, Bicol and Southern Luzon which were also heavily affected by Typhoon Kammuri (local name Tisoy) in December 2019" (United Nations Office for the Coordination of Humanitarian Affairs, 2020, p. 1). With the response strategies being directed at ensuring safety during the typhoon's onset, authorities are confronted with another set of problems caused by the pandemic. This has significant implications for the mobilization and allocation of emergency resources during a period when major disastrous events exist simultaneously.

Even before the local coronavirus outbreak in March 2020, the country had already been beset by a volcanic eruption in January, which caused the displacement of vulnerable individuals during the pandemic crisis (Acosta, 2020). From February to March, the agriculture sector was hit by African swine fever and avian influenza infections, putting a strain on agri-food security for a short-term period (Food and Agriculture Organization, 2020). In Mindanao, vulnerable communities had been displaced due to recent earthquakes and ongoing armed conflict. The existence of a combination of highly distressing events puts these communities in critical situations of losing access to social services and endangering their lives (UNHCR, 2020b).

Undoubtedly, the pandemic has become a defining moment in the world's history. In the Philippines, the compounding challenges encountered by the vulnerable populations due to the coronavirus outbreak are likely to create long-lasting impacts on their life transitions. Such challenges, brought by the inevitable occurrence of the coronavirus pandemic alongside typhoons, earthquakes, animal diseases, and armed conflicts, constitute a dimension of chronosystem that can bring 'cumulative effects' on their lives (Schaie, Willis, & Pennak, 2005). It is yet to be known how the combination of these macro-level stressors will shape vulnerable individuals' resilience in adapting to future crises. In particular, how their current perceptions and responses will form part of their future adaptation to unexpected events remains a question.

3. Response Efforts

In dealing with the needs of vulnerable groups, response efforts at the macrosystem level have been initiated by the national government and several non-profit and humanitarian organizations. The foremost response came from the government, which launched an emergency subsidy program to benefit 18 million low-income families. Widely known as the social amelioration program, the massive measure aims to provide each family social

aid amounting between P5,000 to P8,000 for April and May 2020 (Official Gazette, 2020). The Department of Social Welfare and Development granted a social pension for indigent elderly and relief goods (e.g., family food packs). For its part, the Department of Labor and Employment offered a 10-day employment program for displaced informal sector workers. Privately-owned corporations also had their share of contribution in providing food packs and essential health supplies to vulnerable families.

International organizations also carried out initiatives to support the government's pandemic response. Responses included disbursement of unconditional cash transfers to families with malnourished children (World Vision, 2020), distribution of hygiene supplies and cash grants to displaced families affected by typhoons and earthquakes (Plan International Philippines, 2020), provision for medical equipment and supplies for the benefit of internally displaced communities in Mindanao (UNHCR, 2020c), and healthcare support and donations in conflict-affected areas (International Committee of the Red Cross, 2020). Further, the country acquired aid in cash and in kind from other countries such as Singapore, United States, Japan, China, Taiwan, United Arab Emirates, Australia, South Korea, Brunei Darussalam, and Canada (Tomacruz, 2020). It also received assistance from the European Union. The aid was mostly aimed at strengthening the country's healthcare response through measures ranging from the distribution of medical supplies to technical assistance.

4. Conclusion

This paper has discussed how the COVID-19 pandemic crisis has disproportionately affected specific population segments, resulting in conditions that either produce new forms of vulnerabilities or aggravate those already existing. Through a socioecological framework, it has shown the multifaceted nature of social vulnerabilities, highlighting the pandemic's impacts due to the disruptions and failures that exist in each system. Due to strict quarantine measures, socially vulnerable groups have been placed in a more vulnerable position, increasing risks and threats to their well-being. The occurrence of other stressors brought by other threats (e.g., natural disasters, armed conflicts, and animal disease outbreaks) has aggravated the dire situation experienced particularly by displaced vulnerable communities.

It has also shown that a vulnerable individual's socioecological environment at nested levels has been largely transformed by an unexpected crisis. For Filipinos who are regarded as highly relational people, the pandemic has undermined relationships, largely affecting the social interactions at the mesosystem level. The connections, which should have been strengthened at such a level, have failed to minimize the struggles experienced by vulnerable

groups at the microsystem level due to the strict implementation of quarantine measures. The relevant resources and services that could have been directly made available to these groups are also minimal due to a strained exosystem characterized by mass layoffs and a weakened healthcare system. It is in this setting that these people have to resort to individualized actions to deal with risks for their daily survival.

Despite the disruptions in the implementation of community-based services, several response measures planned at the macrosystem level have been directed on the ground. These efforts have benefitted individuals mostly belonging to low-income and displaced households. For instance, emergency cash aid provision has allowed beneficiaries to afford basic needs during the crisis. Aside from macro-level interventions, measures advanced by exosystem-based entities such as voluntary sector organizations have reached out to victims of abuse, the elderly, and PWDs. Such measures are crucial when response efforts are split between handling the pandemic crisis and ensuring the continued delivery of social services. A case in point is how local government units even at the village level are mobilizing their respective quarantine task forces while constantly monitoring cases of violence. They are even coordinating with other government agencies and private organizations to provide legal assistance to victims. Measures like these, which are enforced at the exosystem level, reflect the relevance of collaborative efforts to foster resilience at the microsystem level. Considering that response interventions have already been undertaken collectively by different social actors and institutions to address the plight of vulnerable groups, the process of developing and strengthening resilience becomes an ongoing question.

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CHAPTER 15

GLOBAL HEALTH STATUS IN THE COVID-19 PANDEMIC PERIOD: HOME QUARANTINE, OBESITY, AND PSYCHOLOGICAL BEHAVIOUR

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ABSTRACT

The coronavirus pandemic has substantially changed the rhythm of our daily lives, our habits, and the way we communicate. It has become crucial to protect our mental health, as well as our physical health by taking measures during this outbreak. Besides, evaluation of the relationship between childhood and adult obesity and pandemics is needed. The purpose of this study is to evaluate the positive and negative indirect effects of COVID-19 on the environment and people, especially focusing on psychological factors and obesity. This article aims at a timely and comprehensive review of this rapidly evolving research topic in response to a growing number of publications related to emerging diseases. While many questions about COVID-19 remain to be answered, it can be said that this review, written in accordance with the literature, will help understand the life-threatening COVID-19 pandemic and people's state of physical (obesity prevalence) and mental health with the elimination of the disease.

Keywords: COVID-19, obesity, psychological effect, pandemic

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1. Introduction

One of the natural and unnatural disasters faced by the world is undoubtedly pandemics and they have had deep impacts on societies for centuries (Ekiz et al., 2020). Recent pandemics are as follows; SARS (Severe Acute Respiratory Syndrome) 2003, Influenza A H1N5 (bird flu) 2007, Influenza A H1N1 (swine flu) 2009, MERS (Middle East Respiratory Syndrome) 2012, Influenza A H7N9 2013, Ebola 2014 and Zika 2015 (Hui et al., 2020; Paules et al., 2020; Prompetchara et al., 2020; Velavan and Meyer, 2020; Zhou et al., 2020). Pandemic is a general name given to epidemics that spread over a wide area to more than one country or continent in the world. According to the definition by the World Health Organization (WHO), there must be three criteria for a disease to be classified as a pandemic (Maffetone and Laursen, 2020; C. Wang et al., 2020; Yi et al., 2020; Zhang and Ma, 2020). These include, being a new virus or mutated factor, easily transmitted to humans, and easy and continuous transmission from person to person. The impact level of pandemics on individuals varies depending on the infectivity and virulence of the virus, herd immunity, living habits and socio-economic conditions of individuals, risk factors of individuals in their lives, quality of health services in the country where they are located, and the climate's positive or negative effects on the ability of the pandemic factor. The new coronavirus outbreak (COVID-19 or 2019-nCOV), which is known to have emerged in Wuhan, China and has rapidly affected the world, has significantly changed the lives of people and the world economy (Guo et al., 2018; Zhu et al., 2020). Viruses, bacteria, and other microorganisms have been playing a vital role on earth for 3.8 billion years. The majority of them are harmless and are often required for ecosystems and human health. It is particularly possible to encounter many different types of viruses in animals. Diseases that can spread from animals to humans are called zoonoses. Zoonotic diseases include various groups of infections that can be caused by viruses, bacteria, fungi, and other organisms. Studies on zoonoses make up one of the biggest interests of the health sector (medicine and veterinary medicine). Like rabies, leptospirosis, anthrax, SARS, MERS, yellow fever, dengue fever, HIV, Ebola, Chikungunya, and coronaviruses; the common flu is also zoonotic (LePan, 2020). Wildlife associated zoonoses are one of the most significant threats to the world population among all diseases that have emerged recently. Three-quarters of the human diseases known to date have come from animals, and 60% of new diseases have been transmitted from wild animals. Failure to control a zoonosis on time results in pandemic.

The coronavirus family (CoV) has traditionally been regarded as non-lethal pathogen viruses for humans (about 15% of the common cold) (Paules et al., 2020). Coronaviruses

enveloped RNA viruses with a single-chain and positive polarity. Because they have positive polarity, they do not contain RNA-dependent RNA polymerase enzymes, whereas they encode this enzyme in their genomes. They possess rod-like extensions on their surfaces. These viruses are called Coronavirus (crowned virus) based on the meaning of "corona", that is, "crown" in Latin (Fig. 2). Serious outbreaks originating from this family were faced twice, and these were the pandemics known as SARS-CoV and MERS-CoV that spread to many countries such as China in 2003 and Saudi Arabia in 2012. The current COVID-19 is the third CoV outbreak recorded in human history. COVID-19 was first reported from Wuhan to the Chinese National Health Commission on December 31, 2019, and the first fatal case was reported on January 15, 2020 (Yi et al., 2020; Zhu et al., 2020). During this period, the outbreak started spreading rapidly to nearby regions and countries. On January 30, 2020, WHO declared this outbreak a global health emergency. Information and news about the COVID-19 pandemic has reached an alarming level with many new cases and deaths (Fig. 1). Since social distancing, quarantine, and isolation practices have been made mandatory in countries, long-term negative effects can be observed (Santos, 2020). Moreover, the duration of this has been stressful and it is not known how the pandemic will affect people's lifestyles or when they can return to regular life conditions due to the unknown long-term state of the virus. This general uncertainty makes it difficult to plan for the future and has caused an increase in obesity and mental problems in individuals. Although the physicochemical properties of COVID-19 are not yet known, the virus is known to survive in dry and humid environments for up to 2 to 5 days (Yi et al., 2020). It has been reported that COVID-19 is sensitive to ultraviolet rays and heat for 30 minutes at 56°C, 80% ethyl alcohol products, disinfectants containing chlorine, as well as some while some oil solvents which can effectively wipe off the virus (Turkey Republic Health Ministry, 2020; Zhou et al., 2019). A comparison of COVID-19 with MERS-CoV and SARS-CoV in terms of differences, death rates, and transmission rates are given in Table 1.

Table 1. Comparison of COVID-19 with SARS-CoV and MERS-CoV (Yi et al., 2020)			
Comparison items	**COVID-19**	**MERS-CoV**	**SARS-CoV**
Characteristics			
Date extracted from	Dec. 2020 – Feb. 2020	Sept. 2012	Dec. 2003
Place of origin	Wuhan, China	Jeddah, Saudi Arabia	Guangdong China
Age range	56 (22-92)	56 (14-94)	39.9 (1-91)
Male/Female sex ratio	1:3:1	3.3:1	1:1.25
Mortality rate	2%	34%	6%
Confirmed cases (Global)	6.181.781	2494	8096
R_0	4.7 – 6.6	0.45 – 0.91	0.86 – 1.88
Incubation period (day)	7 – 14	5.0 – 6.9	4.4 – 6.9
Symptoms			
Fever	93%	98%	99-100%
Dry cough	70%	47%	29-75%
Dyspnea	35%	72%	40-42%
Diarrhea	6%	26%	20-25%
Sore throat	4%	21%	13-25%

Indicators (active case numbers, spreading rate, etc.) show that COVID-19 has higher spreading potential than MERS-CoV and SARS-CoV (see Fig. 1). Therefore, controlling the COVID-19 pandemic seems much more difficult than controlling outbreaks of MERS-CoV and SARS-CoV (Xie and Chen, 2020). Besides, recent research has highlighted the similarities between COVID-19 and coronaviruses found in bats of the genus Rhinolophus, which are considered to be the natural reservoirs of the virus. Bats carry a large number of viruses that have evolved together over their long evolutionary history. They easily spread these viruses and easily catch new ones due to their ability to fly over long distances and they live in crowded groups.

The worldwide distribution and spreading potential of COVID-19 cases has been in a continuous increasing trend since December, as shown in Fig. 1. As a result of the increase in COVID-19 spreading potential, a mandatory lifestyle has emerged where everyone starts working from home, one-to-one interaction is virtually zeroed, and all education is remotely computer-assisted. This obligatory transformation has rapidly transformed the world into an "online" laboratory and introduced concepts such as "new digital world" and "new normal" into our lives.

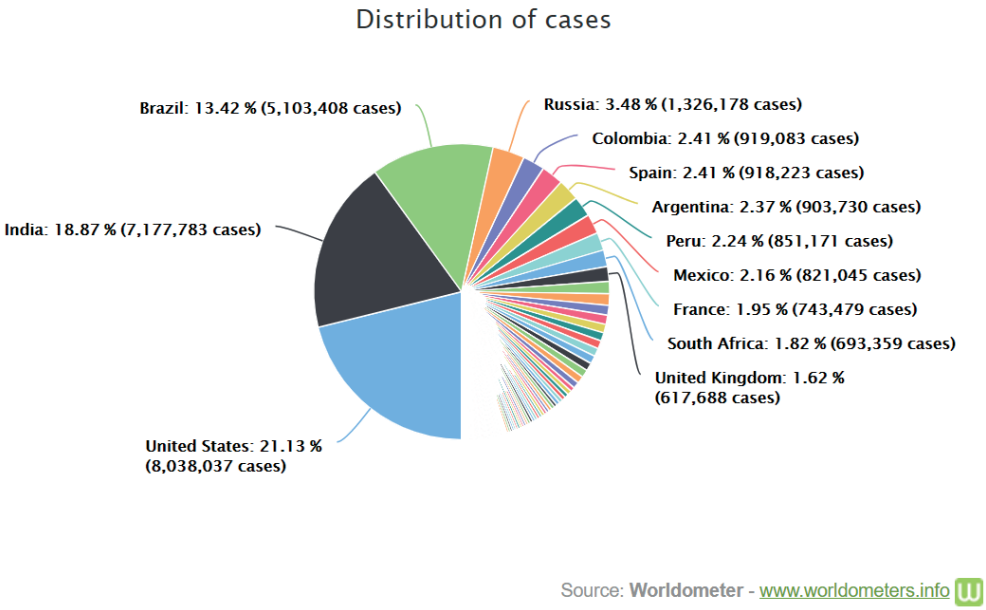

Figure 1: Worldwide distribution and spread potential of Covid-19 cases (Hiscott et al., 2020)

Quarantine and isolation are basic practices that can minimize or prevent the impact of a wide variety of infectious pandemics of the past and present (Center of the Disease Control and Prevention, 2017). The countries of the world have faced difficulties to control the spread of viruses from the CoV family in the past and today. Accordingly, keeping populations at home and the effects of precautionary conditions have had negative mental effects on people. Previous experience with pandemics has certainly demonstrated the effectiveness of quarantine and isolation measures (Mattioli et al., 2020; Parmet and Sinha, 2020). However, quarantine is generally an unpleasant situation for individuals and it can cause various behavioral changes. In this case, besides the potential benefits of compulsory quarantine, individuals may also experience mental and psychological perception problems (Suppawittaya et al., 2020). Much the same as all pandemics, the COVID-19 pandemic can have not only physical health effects but also direct and indirect effects that affect many fields. According to a wide range of databases, especially PubMed, a large number of medical articles (publications, research) on COVID-19 have been published in under two months. On the other hand, studies addressing indirect effects remain limited. This review attempts to outline the impact of the new and rapidly developing COVID-19 on obesity and psychological problems.

2. Literature Survey

All academic areas related to COVID-19 and effects were determined by the electronic scanning of MEDLINE, PubMed, Google academic, ISI web of Science, Springer, Taylor-Francis, Elsevier and Scopus etc. without time and language limitations. The current scientific literature was searched with the following keywords: "COVID-19", "SARS-CoV2", "Pandemic", "Obesity", "weight gain", "Psychology", "Psychosocial", "Psychiatry", "marginal", "indirect effect", "mental health", "Quarantine", "Social behaviours" and "Food behaviours" etc. The final search date for all databases was June 11, 2020.

3. Relationship Between COVID-19 and Obesity

In December 2019, the city of Wuhan in Hubei Province of China became the center of an unknown pneumonia pandemic, which was later named as the coronavirus disease 2019 (COVID-19) by the World Health Organization. Currently, there is no specific, effective antiviral drug or vaccine against COVID-19 infection for the potential treatment of humans. Apart from the positive effects that the COVID-19 pandemic has had on the environment, it has some negative effects in terms of health. In particular, individual isolation, home, and other environment quarantines have unavoidably changed people's lifestyles (watching TV for a long time, using a computer, sleeping, etc.). Compulsory quarantine and isolation at home can trigger anxiety and stress in individuals. Some studies have examined the relationship between anxiety and stress and eating and drinking behavior and found that people cope with stress by eating and drinking to feel happier. This stress-focused behavior often leads to excessive weight gain as a result of decreased physical activity along with an unhealthy and unbalanced diet (Pietrobelli et al., 2020; Rundle et al., 2020b). Obesity, the accumulation of fat in a body on a health-threatening degree, is today accepted as a common health problem worldwide by international standards (An, 2020; Hussain et al., 2020; Torres and Nowson, 2007). The prevalence of obesity worldwide is increasing at an alarming rate (about 50% of the population is overweight or obese in industrialized countries). In addition to the current situation, practices for protection against COVID-19 virus can result in excessive fattening in regular individuals over time. As a result of the increase in adipose tissue, various diseases (diabetes, hypertension, cardiovascular disease, liver, and kidney disease) occur in the individuals and body mechanisms such as the respiratory, immune, cardiovascular, muscular, and skeletal systems weaken (Maffetone and Laursen, 2020; Polito et al., 2018; Bialek et al., 2020; Maffetone et al., 2017).

Most recent studies on the relationship between viral infections and obesity have been conducted on Adenovirus 36 (Adv36). However, research on COVID-19 remains limited (Maier

et al., 2018; Misumi et al., 2019; Rundle et al., 2020a). The most significant problem with isolation at home to protect against COVID-19 is physical inactivity. Inactivity or decreased physical activity can increase obesity (Ferreira et al., 2020; Frühbeck et al., 2020; WHO, 2010; Woods et al., 2020). Adipose tissue is a multifunctional endocrine organ involved in many physiological and metabolic processes (Balanzá–Martínez et al., 2020; Zachary et al., 2020). However, excessive fattening leads to metabolic disorders, an increased risk of infection, and an increase in various diseases in individuals. Therefore, the immune system will be adversely affected by increasing obesity and the impact of COVID-19 will increase (Abbas et al., 2020; Kassir, 2020; Rodríguez et al., 2020). As shown in Fig. 2, a regular individual faces obesity due to a lifestyle with habits such as immobility, vitamin D deficiency, and excessive food consumption as a result of isolation (Luzi and Radaelli, 2020). Consequently, while obesity continues to increase all over the world, the pandemic duration poses a serious risk in this increase and creates the concept of quarantine obesity. During the pandemic period, time spent in the kitchen increased in terms of cooking and eating. However, our physical activities were limited. This process has gradually led to quarantine obesity, but individuals need to consider the obesity factor when organizing their new lifestyles. In this context, physical activity, exercise, and balanced nutrition should be practiced in homes and other settings. Positive contributions can be made to one's metabolic and immunological system in this way.

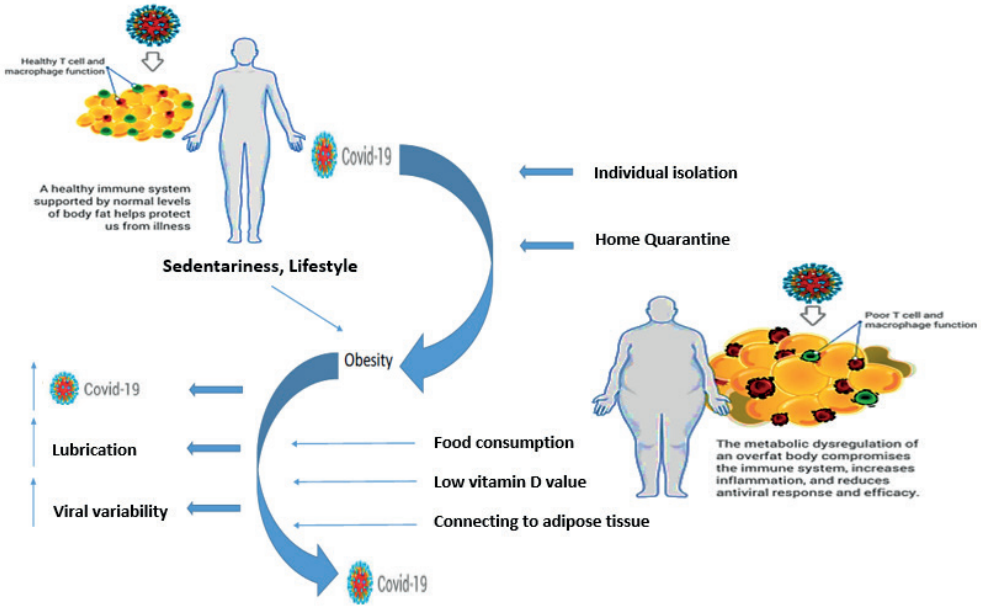

Figure 2: Indirect effect on obesity as a result of quarantine and home isolation to protect from COVID-19 (Luzi and Radaelli, 2020; Maffetone and Laursen, 2020)

In the duration of COVID-19, three main factors indirectly affect obesity (Fig. 2). While individual isolations and home quarantines are mandatory among these factors, lifestyle and habits appear as non-mandatory variable parameters. Pandemic-induced psychological changes occur differently in each individual. Some individuals have a desire to glut in this psychological state. Some individuals behave just the opposite. In addition, the increased time spent at home increases the frequency of consuming drinks with high caffeine content such as tea and coffee. As a result of this, eating habits at night and sleeping problems increase . Thus, obesity and psychological problems occur with the effects of COVID-19.

4. Psychological Circumstances During COVID-19 Period

Although great emphasis was placed on just the high contagiousness and lethality of the COVID-19 infection on 11 March 2020 by the World Health Organization, the pandemic also remains important in terms of psychiatric and mental health (Santos, 2020). Currently, the effects of COVID-19 and other past pandemics on individuals in terms of psychiatry are not completely known despite intensive research being conducted in the literature. During the pandemic period, situations such as disruption and unexpected change of routine life, sudden change of known safe space understanding, loss of expectations and goals, disruption of plans, or postponements bring about mental problems (Brooks et al., 2020; Rubin and Wessely, 2020; WHO, 2020; Xiang et al., 2020). During the COVID-19 pandemic, which is accepted as an extraordinary situation, healthy individuals can have different emotions (shock and denial, stress, anxiety, fear, loss of self-control, anxiety, panic, anger, intolerance, tension, hopelessness, restlessness, guilt, helplessness, loneliness, dysphoria, stigma, prejudice, suicidal thoughts, sleep problems, frustration, addiction or substance use, medical insecurity and conspiracy theories, etc.) (Betsch et al., 2020; Brooks et al., 2020; Chatterjee and Chauhan, 2020). It is a known fact that these emotions are quite usual reactions in sudden and unexpected situations. At this point, it can be said that the expressed emotions will not reach the level of psychological and mental illnesses as long as they are not exaggerated and continuous (Cabrera et al., 2020; Lima et al., 2020; Rogers et al., 2020). Psychological problems can arise if these feelings take control of the individual and mental effects such as panic attacks, anxiety disorders, hygiene obsessions, stress, sudden emotional changes, anxious and fearful behaviors, and burn-out syndrome can be observed in healthy individuals (Fig. 3) (Carvalho et al., 2020).

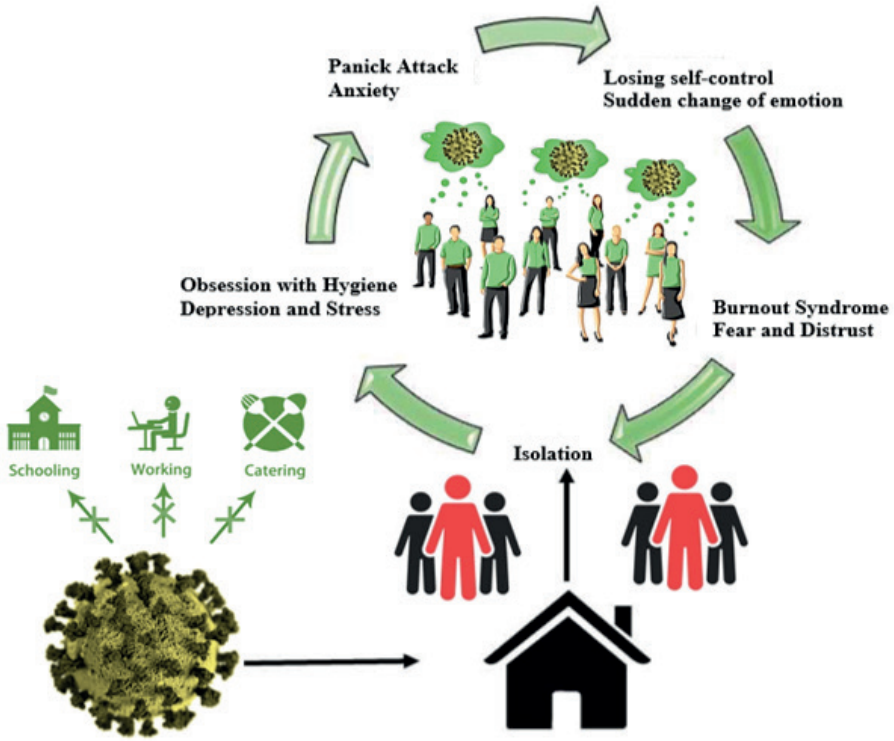

Figure 3: Psychological effects of COVID-19 in quarantine and isolation process (Woods et al., 2020; Zhu et al., 2020)

COVID-19 virus causes health problems in two ways. The first is the physical health problems directly caused by the virus, and the other is psychological problems such as anxiety, panic and anxiety associated with the pandemic. As seen in Fig. 3, COVID-19 should not only be considered a medical health crisis, but also an emergency for mental health and human psychology. Infectious diseases affect not only the physical health of individuals but also the psychological health and well-being of the entire population, whether infected or not. In the early days of the pandemic, the physical consequences of the virus attracted more attention and the psychological consequences were disregarded. However, even if the pandemic ends, its psychological effects will likely last for months or even years after returning to our normal lives. In the face of this pandemic disease, typical trauma responses of denial, shock, and confusion are likely to be observed in individuals (Fig. 3). Denying the existence of the virus is a psychological defense mechanism that all people initially use as a means of coping and reflects the difficulty in accepting the pandemic. These emotional changes and psychological reflections do not affect each individual equally. In particular, the fact that

many healthcare professionals are at the forefront during the pandemic and have to deal with a heavier and more stressful workload than usual affects them more psychologically (Chen et al., 2020). These unselfish individuals in the health sector are subjected to deep psychological factors such as family separation, extraordinary situations, more exposure to COVID-19, fear of contamination, feelings of failure and insufficiency in helping patients. This rapidly developing situation can increase the risk of depression, anxiety, or born-out syndrome for healthcare professionals. Quarantine and individual isolation, which is the most crucial protection practice against COVID-19, causes individuals to experience psychological and mental problems over time. Although quarantine measures protect against the spread of COVID-19, it constitutes a state that can trigger or increase major psycho-social problems (Mukhtar, 2020a; Vahia et al., 2020). COVID-19 reduced the sharing of enjoyable events, which brings about the emergence of uncertainty and loss of routine life and feelings of 'loss, anxiety, fear, tiredness, stress, shame, depression, loneliness' (Mukhtar, 2020b; Temsah et al., 2020). COVID-19 pandemic, along with a fundamental physical health problem, also brings forth serious socio-economic and psychological crises. In fact, all these have a domino effect. On the other hand, since the focus of COVID-19 is physical health, the effects of the pandemic on psychological health in daily social life are regarded as less important. However, the human body works physically and mentally in a synergy. Physical health affects one's psychological health, and psychological health affects one's physical health. The COVID-19 pandemic, the end of which is not known exactly, requires seeking ways to protect one's mental health and reducing the psychological effects one can have for the benefit of one's physical health and social life. In this period, it is necessary to continue the activities and sharing as close to daily life habits as one can in the quarantine days to decrease the frequency of negative emotions and thoughts related to mental and psychological conditions. If the practices specified in the COVID-19 period are not performed and are not useful, it becomes imperative to seek professional support in case of highly obsessive behaviors, excessive depressive feelings, harm to yourself and others, insomnia, anorexia, desire to overeat (obesity factor), eating due to change of emotions, exaggerated social environment isolation, tantrums, etc. A limited number of studies have been carried out in this respect in the literature. In a study, Zhang and Ma (2020) investigated the effects of the COVID-19 pandemic on the quality of life with ≥18-year-old local Chinese individuals in Liaoning Province, China. The data show that psychological problems surface in individuals while the COVID-19 pandemic persists. In another study, Lau et al. (2006) investigated pandemic-related psycho-social health in individuals living in Hong Kong during the SARS outbreak in 2003. As a result, they determined that pandemic had psychological effects on individuals. In a study conducted by

W. Wang et al. (2020) in China, it was observed that access to detailed, up-to-date, and correct health information by individuals and taking personal precautions (hand hygiene, wearing a mask, etc.) decreased the level of psychological effects, stress, depression, and anxiety. Zhu et al. (2020) found that the psychological conditions of people affected by COVID-19 in China put great psychological pressure on everyone, including the healthcare staff and the general population. As a result of this study, they observed that approximately 20% of the participants had psychological health problems. Post-quarantine psychological effects are also important, and individuals may have psychological problems due to socioeconomic distress and financial losses (Dubey et al., 2020; Vinkers et al., 2020).

5. Conclusions

There is a linear relationship between the COVID-19 outbreak and increased obesity and psychological changes. This study examines the indirect effects of the COVID-19 outbreak in line with the literature and contributes to some important research fields in the future. Two new concepts have entered people's daily lives, especially as a result of research and experiences. With the combination of COVID-19's high contamination characteristics and quarantine applications, 'Corona Obesity' and 'Coronaphobia' have become the concepts that have taken their place in our future life. Therefore, as a result of this review on the indirect effects of COVID-19, suggestions on obesity, and psychology can be listed as follows:

1. In the COVID-19 pandemic, the psychological and behavioral responses of individuals should be systematically examined.
2. More attention should be given to the social impact while planning and implementing precautions against pandemics.
3. The domino effect of COVID-19 and other pandemics (tourism, travel, health sector, economic activities, human relations, etc.) should be evaluated from every angle possible.
4. COVID-19 has changed almost every aspect of people's lives, from school to work, sports, where we eat and what we do, and all these changes have affected people both physically and psychologically. In such times, applications of psychological support (TV programs, public spots, advertisements, etc.) should be carried out in addition to the physical health aspect. Also, online applications developed for individuals to manage stress and anxiety (Calm, Headspace, Smiling Mind, Daylio, etc.) should be evaluated.

5. With COVID-19, environmental studies to protect healthy ecosystems and restore damaged ones to health (halving our ecological footprint in nature, halting the loss of natural habitats, stopping the extinction of living species, etc.) should be carried out.

6. The applicability of the 'One Health' concept should accelerate across the world, which is a concept based on the basis that human health is closely linked to the health of other animal species and the environment. For the Single Health approach to be truly effective, there is a need for stronger and systematic interaction between relevant occupational groups such as physicians, veterinarians, epidemiologists, environmentalists, and wildlife experts, as well as sociologists, economists, and lawyers, which is stated in the Environmental Impact Assessment Report (EIA).

As with all pandemics, COVID-19 will be brought under control over time and the world will return to healthy days; however, the work we do today and the steps we take can lead to changes that will deeply influence the future. Thus, let us continue to stay at home and take part in life from home, appreciating the value of quarantine and isolation days.

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