Rural Voices

Impacts of the Covid-19 Pandemic on Cook County, Georgia Residents

A research study compiled and published by Cook County Family Connection
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Introduction

Even in the best of times, rural communities across the Deep South are engulfed in poverty, disproportionate health inequities, food insecurity, and racial or ethnic disparities. During the past year, the Covid-19 pandemic exacerbated these conditions, and many rural families have found themselves in an unprecedented struggle to simply survive from day to day. The economic, social, health, and education impacts of this pandemic have affected individuals and families in unparalleled ways whether by magnifying their pre-existing needs and inequities, or by generating new and unique needs that individuals have never experienced before.

In Summer 2020, Cook County Family Connection was one of seventeen organizations across the U.S. to receive research funding from Robert Wood Johnson Foundation and the Urban Institute to conduct research on the local impacts of the Covid-19 pandemic. The purpose of this six-month research project in rural Cook County, Georgia, was to capture data to document the actual impacts of the pandemic on residents and families. Our research team collected local data that could answer real-world questions: How has the pandemic changed the daily lives of residents and families?; What are the economic, social, health, and education impacts affecting individuals across the community?; What do these impacts look like demographically by age, gender, race and ethnicity?; and How have local institutions, agencies, and service-providers adapted and responded to new and increased needs within the community?

Rural Voices highlights the most significant findings from the data our research team collected during July through December 2020. These findings provide a data-informed representation of the ways in which Cook County residents and families have been impacted by the Covid-19 pandemic. The report also includes key findings from our in-depth interviews with diverse community leaders, healthcare providers, educators, law enforcement officers, and agency leaders.

While some of the findings in this report are distressing and reveal unprecedented needs in our community, you will find the report to be informative and meaningful in your efforts to serve others. This data serves as a tool to guide all of us in improving, modifying, and re-thinking the ways in which we support and serve the children, families, residents, and senior citizens of our community. Stay Well and Hopeful.

Zoe Myers MS and Chet Ballard PhD
Cook County Family Connection
January 2021
Research Methods

The Covid-19 impact study in Cook County was conducted by Cook County Family Connection under the direction of Executive Director Zoe Myers, MS and Board Member Chet Ballard, PhD. Both Myers and Ballard are professional sociologists with decades of experience in research methods, data collection, statistical analysis, and research publications. They designed the Cook County research study to include both qualitative and quantitative data collection to examine impacts of the pandemic on local residents in areas of food insecurity, mental health, physical health, employment, economics, childcare and education.

During the period from July 2020 through December 2020, our research team collected 258 questionnaires from a cross-section of the general public and conducted in-depth personal interviews with 28 diverse community leaders and agency directors. Questionnaires were collected from individuals during drive-through events for emergency food and educational resources during the pandemic, and from clients and consumers at Cook Senior Center, Cook Community Action Agency, Candy Cane’s Learning Centers, Adel/Cook Chamber of Commerce, and Cook County Family Connection. Volunteers from Cook County Family Connection assisted in the process by distributing questionnaires to their neighbors, co-workers, and church parishioners.

Compared to the total Census population of Cook County, our survey overrepresented Blacks (Census 28% vs. Survey 45%), overrepresented women (Census 52% vs. Survey 75%), and over-represented seniors (Census 20% vs. Survey 45%). In terms of age, 45 percent of surveys were completed by seniors (age 60 and over), 41 percent by middle-aged residents (ages 30 to 59), and 14 percent by younger residents (ages 18 to 29).

The 258 completed surveys were analyzed using the Statistical Package for the Social Sciences (SPSS) to examine frequencies, statistics, and valid percentages. Significant findings from those surveys are detailed by category in this report.

“Those of us in the rural south are so people-oriented. We are accustomed to gathering, shaking hands, patting backs, hugging, kissing, sitting on the porch talking. Not being able to do those things in a safe manner anymore, and being in quarantine or isolation, you begin to feel disconnected from everything and everyone.”

-a community outreach advocate
In addition to administering surveys, our research team conducted in-depth interviews with 28 community leaders, healthcare providers, educators, law officers, faith-based groups, and agency leaders to document their frontline perspectives. Those qualitative interviews, which ranged in duration from thirty minutes to two hours per session, provided insight from diverse organizations into the ways in which their customers, clients, and staff were impacted by the pandemic. The interviews also provided an opportunity for these leaders to discuss how their specific institution, agency, or organization adapted and responded to new and increased needs generated by the pandemic. Key findings from those interviews are included in this impact report (Page 10), and quotes from many of the interview subjects are embedded throughout.

Key leaders interviewed as part of this study represented 28 different organizations and/or agencies and were categorized into six broad sectors of the local community as follows:

Healthcare providers – 7
Educators – 5
Social service providers – 5
Faith-based groups – 3
Law/Justice – 3
Nonprofit agencies - 5

Survey findings from questionnaires and qualitative interviews have been compiled and presented in this report to guide local leaders and service providers in modifying and re-thinking ways to serve residents, families, children and senior citizens during the pandemic and beyond.

“I am seeing depression issues among my elderly patients who are missing the touch and the feel of their grandkids and families... as humans we require physical touch and feel and the elderly population is especially suffering from that loss. But with my patients in general, it is more about anxiety issues than depression—the fear of the unknown is really driving anxiety levels.”

-a family physician
Food Insecurity

The first need that surfaced in Cook County at the onset of the pandemic was food insecurity, the need for emergency food supplies. The few faith-based food pantries that typically provide emergency food across the community opted to suspend their operations in order to protect their vulnerable volunteers. While the regional food bank, Second Harvest of South Georgia, continued to work nonstop to provide emergency food for those in need, many Cook County residents did not have transportation to travel 30-40 miles for those regional food drop events. Cook County Family Connection partners were able to bridge that gap by providing drive-through food drops, doorstep deliveries of food boxes, and children’s feeding projects. During the 2020 pandemic, they distributed over 110,000 pounds of supplemental food to help feed vulnerable children, families, and senior citizens.

Prior to the Covid-19 pandemic, about 16 percent of Cook County residents reported struggling with food insecurity (County Health Rankings 2019). Our recent survey shows that, because of the pandemic, that rate jumped to over 57 percent during 2020. Those numbers represent a 356 percent increase in food insecurity and hunger among local children, residents, and senior citizens.

Food insecurity was an important factor across all age groups although senior residents (ages 60 and over) were the largest group struggling with food issues. This was due in part to the fact that they were homebound for safety reasons, were afraid to go out shopping, were no longer able to visit local faith-based food pantries as needed, and/or were no longer able to attend senior programs where they normally received a hot meal each day. In terms of race, Whites (50%) and Blacks (46%) were equally likely to report that adequate food was a critical issue for them. While Hispanic residents represented a much smaller subset within our study, they were most likely to report food insecurity.

“Hundreds of people lined up every week for Family Connection food drops; and many of them arrived up to two hours in advance to make sure they got into the line. Some had lost their jobs, had their work hours cut, or were suddenly trying to feed children and grandchildren who normally ate at school or at youth programs that were now closed. People came to the food drops by every possible means...some walked long distances to stand in line, while others arrived on bicycles and even lawn mowers. People were desperate for food supplies, and we could see the anxiety, worry, and even humiliation on their faces.”

-a food drop volunteer
Mental Health & Emotional Wellness

The Covid-19 pandemic brought with it a wave of depression, anxiety, social isolation, fear, worry, and other unhealthy emotions. Some people were afraid of illness and death; some were anxious about their jobs and finances; some were lonely and isolated because of social distancing; some were frustrated and confused trying to maneuver daily life in new and complicated ways; and some were worried and uncertain about the future. Our local mental health agency ramped up services to handle increased caseloads through tele-therapy and virtual services; and Family Connection continually shared resources on free mental health hotlines offered through state-based agencies. However, many people did not reach out for help because of the stigma and shame associated with mental health. One survey participant, an elderly woman who lives alone, shared her experience by saying “I have never felt so all alone in all of my life. I would prefer to go ahead and die than have to keep living isolated and alone, cut off from everyone in my small apartment.”

Prior to the Covid-19 pandemic, about 14 percent of Cook County residents reported mental health issues (County Health Rankings 2019). Our survey conducted during the pandemic shows a three-fold increase to 45 percent. Reports of mental distress were fairly equal between senior residents (age 60 and over) and middle-aged residents (age 30-59), while the younger group (under age 30) reported lower rates of mental distress.

In terms of age differences, senior residents expressed more feelings of isolation, fears about health and safety, worries about food and supplies, and religious sentiments about missing church. Middle-age residents expressed more worry about finances and generalized anxiety. In terms of racial differences, White residents (69%) were more likely than Black residents (30%) to cite isolation as a primary mental health factor, and Whites (58%) were also more likely than Blacks (41%) to express fear of the virus.

While our survey did not ask about substance abuse issues, the Centers for Disease Control released a December 2020 study showing that over 81,000 Americans died from drug overdose in the U.S. from June 2019 through May 2020—the highest number of overdose deaths ever recorded in a 12-month period. This reflects an 18 percent increase nationally and a 12.6 percent increase in Georgia with the most significant increases occurring after March 2020 when the pandemic began.

"So much of the stress centers around just not knowing things. How long will the virus last; what do you do if you get sick; why do some people get the virus and it’s almost nothing while others end up on their death bed? All of the unanswered questions add to the stress and anxiety."

-a local business leader
Physical Health

The Covid-19 pandemic has created physical health impacts for individuals in numerous ways. Some employees lost their health insurance coverage; some hospitals and clinics postponed non-emergency medical procedures; some individuals did not seek medical treatment because of fear of visiting a hospital or clinic; and some contracted Covid-19 themselves and/or suffered personal losses due to the virus. Following are some of the most significant findings from our local Covid-19 survey related to physical health:

- Prior to the pandemic, 18% of local residents reported that they had no health insurance including Medicare, Medicaid, or other government or military insurance (County Health Rankings 2019). Our recent survey shows a higher rate of uninsured individuals at 21%, and the majority of those uninsured residents are White (57%) compared to Blacks who are uninsured (36%). Women were over twice as likely as men to report they have no health insurance (24% to 10%); and about 36% of those who have no health insurance are employed part- or full-time.
- In our local survey, 20% of respondents said they had a medical procedure postponed or cancelled because of the Covid-19 situation. Some examples included mammograms, colonoscopies, pap smears, and diagnostic procedures.
- Survey findings show that 19% of respondents had a medical/health problem during the pandemic but did not seek treatment because they were afraid to go to a hospital or clinic. The majority of these individuals were senior residents age 60 and over. Men were more likely not to seek medical treatment during the pandemic than women (27% to 16%). White residents were more likely not to seek medical treatment than Black residents (57% to 37%).
- At least 14% of respondents reported that they and/or someone in their home had contracted the Covid-19 virus. Rates were fairly equal between White and Black residents, and there were no major differences by gender.
- Over 9% of respondents reported that they had lost a family member to the Covid-19 virus; and Black residents were much more likely than White residents to have had a family member die from the virus (67% to 29%).
- About 28% of respondents said that they personally knew someone who had died from the virus (a friend, neighbor, associate). While there were no significant differences by age or race, men were more likely than women to report having lost someone they knew personally (36% to 25%).

"By August I knew only a few people who had the virus and two people who died. Six months later, I now know many people who have had the virus and I have lost several friends and acquaintances. That sad reality is hard to process."

-a social worker

It is important to note that the Cook County survey questionnaire process covered the period from March through August 2020. As Covid-19 has continued to spread and wreak havoc, the rates and percentages from our original survey would undoubtedly be much higher today. As of January 2021, there have been 1,393 confirmed cases of Covid-19 in Cook County with 28 deaths.
Employment & Economics

The shutdowns, layoffs, and closures created by the Covid-19 pandemic generated unexpected hardships and financial problems for residents and families. Many people, in the midst of financial crisis, found themselves having to make difficult decisions such as whether to pay their rent or mortgage instead of their electric bill, or whether to forego buying their prescription medications to instead buy groceries for their families. While there was a common misconception that unemployment benefits filled this gap, the reality is that many Georgians were denied benefits and forced to pursue a long and complicated appeals process. By November 2020, nine months into the pandemic, there was a backlog of over 40,000 denied unemployment claims across Georgia where people were waiting to have their appeals heard or paperwork issues resolved.

Of the residents who participated in our survey, 19% were unemployed, 9% were employed only part-time, 31% were employed full-time, and 38% were retired. A total of 21% said they either lost their job or had their work hours cut because of the pandemic. Another 15% said that someone in their home (spouse, parent, partner) either lost their job or had their work hours cut which created financial hardship.

Nearly one in four survey participants (24.8 percent) reported that they fell behind on their payments and bills during the pandemic. This included house payments, rent, utility bills, car payments, and other monthly expenditures.

![Cook County Unemployment Rates, 2020](image)

U.S. Bureau of Labor Statistics
Childcare & Education

As schools, childcare centers, and youth programs were shuttered during the pandemic, families struggled with how to educate their children at home, how to maneuver a new world of virtual learning, and how to continue going to work with unsupervised children at home. During our research process, we learned that older siblings were having to step up and act as babysitters for younger siblings so the parent(s) could continue to work. We heard frustration from parents who were trying to now work from home while also having their children at home all day; and we heard their guilt about not being able to devote quality educational time to their children while trying to balance the responsibilities of their job. Many senior residents shared how they had been asked to babysit children for neighbors, relatives, and acquaintances because “working parents were desperate for anyone to watch their children”.

Of the individuals who participated in our survey, 30% said that they had to care for their children or their grandchildren who were displaced from school or childcare programs during the pandemic. According to 2019 U.S. Census data, about 20% of Cook County households do not have a computer and about 35% do not have broadband internet in their home.

One of our survey subjects, a Hispanic mother of five, explained her dilemma by saying: “My English is very limited, we do not have a home computer, and we do not have the extra money to pay for internet service. So here I have five children who need to be educated, but I am not smart enough to teach them. I am counting on my oldest child, a teenage girl, to step up now and be the teacher for her younger sisters and brothers.”

“We recruited volunteers to help senior citizens apply for emergency utility assistance because we realized that many of our seniors do not even have a computer or internet service. And for the ones who do, they aren’t prepared to figure out a complicated on-line application system.”

-a senior program director

“The social class factor is important in understanding these impacts. If you were already struggling as a family or individual, the pandemic impacted you more. Those individuals and families with better financial situations, better education, could handle the stresses of the pandemic better...they had more existing resources to solve problems, address educational changes, and weather the health issues.”

-a college administrator
Key Leader Findings

Our in-depth personal interviews with 28 leaders from diverse sectors of the community provided front-line insight into the ways in which their customers, clients, staff, and organizations were impacted by the pandemic. Several of these leaders had been ill with Covid-19 themselves, so they also had a first-hand perspective about the virus and its implications. While these leaders represented 28 different organizations or agencies, we discovered many recurring themes in the stories that they shared:

- **Key leaders across Cook County were pressed to reinvent systems**—how children were educated, how families functioned, how church and faith were practiced, how government services were delivered, how people accessed healthcare, and how goods and services were provided to meet people’s needs. Organizations shifted to telehealth services, virtual meetings, drive-through services, grab-and-go resource events, doorstep delivery programs, and daily operations that prioritized safety and disease prevention. A leader of a local youth program explained, “To ensure the safety of our students, Covid-19 protocols became priority—screening forms, temperature checks, requiring masks, social distancing, hand sanitizer stations, disinfecting and sanitizing constantly.”

- **Key leaders recognized quickly that taking care of individuals was top priority**, and that shift occurred across organizations and institutions. Educating children had to take a back seat to first ministering to the immediate needs of those children; and providing social programs for elderly seniors was superseded by meeting the immediate health and food needs for those individuals. Leaders recognized that health, safety, and security were suddenly more important than administering the “normal” functions of education, government, social services, the economy, and religion. The consensus among leaders shifted to Rather than business as usual, we must first take care of people and their basic needs. One school administrator explained this new priority of care by saying, “As it became a choice between the care mission (caring for immediate needs of children) and the educational mission, the care mission of our schools came first.”

- **Key leaders recognized the impact of the social divide, the socioeconomic barriers and inequities that many faced in battling the pandemic.** For those without many resources—the poor, the homeless, the marginalized, the uninsured, people of color—the effects of the pandemic were felt more directly and more intensely. For those with more resources and better support systems, the challenges were easier to manage. Technology, a necessity in the pandemic, magnified the divide between the haves and have-nots with all the consequences that implies. A nonprofit leader explained that “Job losses and lost income created more stress on people who were already vulnerable to begin with--people with limited resources struggling to not only care for themselves, but also now taking on the responsibility of caring for other family members who had lost jobs, or fallen ill, or needed help taking care of kids who were out of school during the pandemic. We’ve worked with many families who have doubled-up because of the pandemic;
moved in with relatives or friends so that they could share expenses and share resources in order to survive.

- A common opinion of key leaders was that children were going to adjust to life during the pandemic far better than senior residents, and leaders expressed open and frank concerns about the mental health of local seniors. Social isolation, lack of human contact, and separation from church and senior social programs for many months has led to a sense of hopelessness and anecdotal reports of cognitive decline among seniors. The director of a local senior program explained, “This is where they came every day for a hot meal, exercise, singing, playing Bingo, and socializing with their peers. Now after being homebound alone for months, many of them have become depressed and fear that they’ll be isolated for the rest of their life. We telephone to check on them and deliver food to their door weekly, but some of them have told me they’d rather go ahead and be put in a senior home somewhere so they’d at least be around other people and have something to do.”

- Key leaders expressed concerns about hidden consequences and long-term impacts of the pandemic. Those concerns included unreported cases of child abuse and neglect, increases in family violence situations, increases in alcohol and drug use, and declines in children’s educational progress. As one key leader stated, “Child abuse and neglect reports have dropped by 40 to 50 percent during the pandemic, and not because abuse has waned. When children are isolated at home with abusers, there is no one to see the signs, symptoms, or bruises.” A domestic violence specialist added, “When everyone is at home, it is likely that those experiencing domestic violence cannot call for services, out of fear the abuser would hear them make the call. Quite a dangerous time.”

- The impact of social distancing was a common theme among key leaders. One law enforcement officer talked about how shaking hands has been a priority in their policing efforts to build rapport with the public. “You may not think that hand shaking would be a big deal, but for us in defusing situations and extending a friendly hand to someone in a bad situation, it is a very big deal. Social distancing is undoing years of work to improve how we deal with the public, especially in stressful situations.” The director of a men’s transition shelter also explained the loss of personal contact, “When you are working with a vulnerable group of recovering men, that personal contact is so important—a pat on the back, a brotherly hug, a firm handshake—and that part of your ministry and leadership doesn’t happen through a computer screen.” Leaders discussed how distancing had created new challenges for community organizations, civic clubs, and faith-based groups. The director of a community partnership explained, “My biggest challenge has been re-assessing how you lead and manage a community partnership when people cannot congregate or meet in large groups. It feels like trying to conduct a symphony while all of your musicians are in separate rooms playing their own parts individually.”
We would like to acknowledge and thank the following organizations, agencies, and individuals that enthusiastically volunteered to participate in our key leader interviews:

Adel-Cook Chamber of Commerce
Boys & Girls Club of Greater Cook County
Candy Cane’s Learning Centers
CASA (Court Appointed Special Advocates)
Cook County 4-H Club
Cook County Community Service Center
Cook County Dept. of Family & Children Services
Cook County Family Connection
Cook County Health Department
Cook County Public Library
Cook County School System
Cook County Senior Center
Cook County Sheriff’s Department
Family Health Center of Adel
First Baptist Church Food Pantry
GA DECAL (Dept. of Early Care and Learning)
Legacy Behavioral Health Services
Lenox Family Health Clinic
Power Camp Recreation Program
Prevent Child Abuse Council
Southwell Medical
The Haven Shelter
The House of Grace Shelter
The Two Georgias Initiative of Cook County
Wiregrass Technical College
A Private Speech Language Pathologist
A Private Home Health Nurse
A Community Advocate

“One thing I have heard from so many folks is around “information overload”—suddenly we were all bombarded with so many emails and zoom meetings and conference calls. Everyone meant well and were just trying to keep everything moving forward, but there was so much sudden information at one time that it was overwhelming. It’s important as leaders to consider that people can become too overloaded especially when trying to cope with all of this.”

-a childcare specialist

There was a serious need among families who needed Wi-Fi access... We saw many more children with adults and parents out sitting on our grounds to use the Wi-Fi we offered during all these months. There was a big increase in the numbers of families sitting in our parking lot in their cars or vans, some would get out and sit with their children on the grass lawn. We definitely witnessed an increase in family Wi-Fi time versus adults coming alone to use internet services.

-a library director
Conclusions

The most basic individual needs—food, shelter, safety—have become top priorities because of the pandemic. The extent of food insecurity and the reality of hunger during the pandemic has been alarming. With job losses or work hours cut across multiple sectors, economic assistance has become a great need. Residents have been worried about putting food on the table, having a roof over their heads, and keeping their lights and utilities turned on. These are not wants, these are basic needs, and people feel desperate and hopeless when they cannot meet those needs. The federal government’s response has been uneven and inconsistent, adding to the stress and feelings of despair for families trying to manage as best they could. The long history of persistent poverty and limited resources in our community meant that the pandemic quickly pushed people deeper into debt and overburdened local social support agencies who, even in pre-pandemic days, did not have adequate funding to meet people’s needs.

The importance of education and childcare rose to the surface. Our community lags behind Georgia which lags behind the nation in educational achievement. We fall even farther behind when education must take place at home; when schools, libraries, and childcare centers are closed or operating at reduced levels; when children become teachers for their younger siblings; and when many parents are ill-equipped or do not have the necessary resources to educate their children. Like most communities, we think of our local educators as heroes and believe they have done their very best given the uncertainties and risks that Covid-19 brought inside the schools and classrooms. The education sector must find the ways and means to stay open and serve the important functions of providing safety and security for children, providing high-quality equitable education, and providing childcare so that parents can focus on their jobs and work.

Mental health and emotional wellness surfaced as priority issues with long-term implications. The pandemic has created significant increases in depression, anxiety, fear, social isolation, grief, and other stressors. Living with life-threatening risks, managing stress, and experiencing illness and death within the community became social facts that affected everyone on a daily basis. Many senior citizens have been negatively impacted by social isolation, the hiatus of senior programs and church activities, and separation from family and friends. This generation of children has been exposed to illness, dying, and death in unprecedented ways, and the long-term impact of that trauma is a concern. Healthcare workers, first responders, and front-line workers have faced the fear and trauma of serving others in high-risk environments and situations. And then there are the hidden impacts lurking in the shadows of the pandemic—increases in suicide, substance abuse, family violence, child abuse, and other consequences that may not be evident or measurable until long after the pandemic.
Global and national powers became more real in people’s lives as they dominated local level decisions and protocols. This global pandemic was now real in the lives of Cook County residents. Most were dependent on how the federal level government would funnel money to the states and local governments to assist people who had lost jobs, to provide personal protective equipment, or to provide Covid-19 tests and vaccines. The Centers For Disease Control and the Surgeon General were in charge of getting medical information to the local level and establishing health protocols that local residents would follow. The Internet was no longer an amenity, it became a necessity in order for people to participate in institutional life and to get the goods and services they needed. Whether purchasing household supplies or learning virtually or applying for assistance benefits, global technology became a necessity. Local residents and leaders fell under the power of global, national, and state structures, and became distrusting and frustrated by the confusion, inconsistent messages, and even incompetency of those dominant structures.

Local leaders showed heroic efforts in serving others during the pandemic. Key leaders in Cook County were already expert at pulling together scarce resources to address problems and issues across institutional sectors. This is fairly common for people in rural communities who understand the power of collaboration—that we are stronger when we work together across agency lines. Yet the pandemic brought out the most heroic efforts among our local leaders. Healthcare workers and first responders put themselves in harm’s way daily to provide services; others risked their health and safety to provide emergency food for those in need; and others were selfless in their efforts to provide transportation, childcare, and essentials for families in crisis. Core values of selflessness, service, and sacrifice were clearly on display. Out of necessity new ways of collaborating emerged; new resource networks were built on the fly; and new ways of thinking replaced established relationships. Emergent social structures were created to meet local needs—Cook County Family Connection partners stepped up to meet food insecurity needs when local food pantries closed; Cook Senior Center organized volunteer teams to handle on-line applications for benefits when they realized most senior citizens had no computer or internet; and community partners organized systems of transportation to deliver groceries and necessities to elderly and homebound residents.

Hope has surfaced as an unmet need during the pandemic as people need a spark of hope that we will indeed get through these dark days. Seniors worry whether or not they will live long enough to see the end of the Covid-19 threat. Children need to be children again, and not have to be small adults worrying constantly about their parents or whether they will be safe, have a place to live, be able to get food. Adults need hope that they will be able to provide for their families and recover from the crises created by the pandemic. From the national level to the state level to the local level, leaders need to communicate a message of hope. People feel isolated and depressed; family support networks have been depleted; and people’s spirits have been fractured. There is a great need to replenish hope and to feed the human spirit.
The year 2020 will be remembered as some of the very darkest days and months in our history. The impacts of fear, social isolation, family crisis, illness and death will be felt for a long time to come. But on the community level, we will also remember the heroic efforts of local leaders, the selfless volunteerism of residents, and the shining examples of neighborly compassion and mercy. The Covid-19 pandemic, and all of the complicated implications that came with it, appealed to the better angels of our nature. We saw those angels step up to care for needy neighbors, to comfort those who were sick or grieving, and to be servants on missions of love and hope. We will always remember that.

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