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Inclusive recovery planning for incremental systemic change: A methodology, early outcomes, and limitations from the Falkland Islands' Covid-19 recovery planning experience

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Abstract

Crises do not affect populations equally but expose and exacerbate long-standing vulnerabilities and inequalities. Recovery language such as 'build back better', or 'bounce forward' has been criticised for neglecting underlying inequalities. This paper reports on the process and early outcomes of an inclusive Community Recovery Planning process for the Falkland Islands, in response to Covid-19. The Falkland Islands is home to a complex community, with close ties and short power distances (due to its small size and remoteness), with differences institutionalised in citizenship statuses and entitlements, and shaped by geopolitical tensions. We aimed to use the 'pandemic as a portal', seeking out previously 'less heard' voices, to make visible previously hidden impacts, and initiate incremental systemic change to tackle them. Community Impact Assessments evidenced specific areas of vulnerability (e.g., housing and income insecurity) and inequalities, largely shaped by differing citizenship status. In tandem with other government currents, the Community Recovery Planning process has contributed to progressive policy changes in Equalities legislation and Income Support. We offer this paper as a demonstration of our methodology for inclusive recovery planning that could be adapted elsewhere. We argue that the inclusion of previously unheard voices contributed to incremental systemic change to reduce inequalities.

KEYWORDS

community recovery, Covid-19, disaster justice, inequalities, planning, systemic change

1 | INTRODUCTION

Between January and July 2020, a group of emergency management and healthcare practitioners, policy makers and researchers came together to explore how Covid-19 impacted the everyday lives of the people of the Falkland Islands, conducting a series of Community Impact Assessments (CIAs), to make sense of the community's Covid-19 experience, identify areas where support or policy changes were needed, and, in partnership with Members of the Falkland Islands Legislative Assembly (MLAs), develop actionable recommendations for

the Falkland Islands' Covid-19 recovery. These CIAs revealed not only challenges raised by the pandemic, but longer-standing inequalities creating unequal distribution of vulnerability to crises across the population. The recovery phase has traditionally been the 'poor relation' in emergency management, allotted limited economic, social and intellectual resources. This project sought to take recovery seriously, and ambitiously, taking the vulnerabilities exposed by the pandemic as impetus to tackle underlying inequalities, thus increasing resilience longer term—with greater success in some areas than in others. In this article, we document the collaborative process. Bridging gaps between researcher, policy maker and practitioner (McIntyre, 2005), we outline the learning presented to the Falkland Islands (FI) community and government, and the ensuing actions, and we reflect on strengths and limitations of our methodology. We do so aiming to contribute to the literature on the intersection of disaster recovery, inequalities, and as a case study for policy learning in other locations.

In what follows, we first contextualise our work in the literature on postdisaster recovery, inclusive recovery and disaster justice, situating our orientation towards 'incremental systemic change'. We then introduce the specific context of the Falkland Islands' Covid-19 experience, noting the specificities of the small, remote, postconflict island location, before presenting the case study of the Falkland Islands' recovery planning process.

2 | LITERATURE REVIEW: POSTDISASTER RECOVERY, INCLUSION AND INCREMENTAL SYSTEMIC CHANGE

It is well-documented that disasters have unequal impacts, both exposing and exacerbating underlying vulnerabilities and inequalities (Reid, 2013). In relation to the Covid-19 crisis, the unequal health, economic and social impacts of the virus itself and the related public health policies (especially 'lockdowns') have emerged as major concerns (Ezell et al., 2021; Perry et al., 2021). The UN Sendai Framework for Disaster Risk Reduction (UNDRR, 2015) institutionalised the term 'build back better' for disaster recovery and reconstruction that sought not to return to the prior status quo, but to rebuild societal systems so as to be more resilient to future shocks, including addressing previously under-recognised inequalities and vulnerabilities (Fernandez & Ahmed, 2019). However, as the term has diffused into political rhetoric, it has been used to provide a generic positive gloss to any postdisaster policy. Chmutina and Cheek (2021) argue that building back without addressing long-standing structural drivers of inequalities cannot achieve building back better for all. They ask 'who decides what is better? Better for whom?' and call for a recommitment to addressing the 'social and political systems that create risk in the first place'. Foregrounding the redressal of inequalities, 'disaster justice' is a useful alternative to 'building back better' as a guiding concept for postdisaster recovery (Montano, 2021).

In their study of postearthquake rebuilding in Aquila, Italy, Imperiale and Vanclay (2021) argue that emergency powers, command-and-control and top-down planning allowed for corrupt capture of rebuilding opportunities and worsening existing inequalities and social exclusion. They call instead for a shift from *protecting* vulnerable, affected communities to *engaging* and *empowering* their capacities to learn and transform. Roy (2020) proposes that we use 'the pandemic as a portal', to take the opportunity to break with past policies and ways of working that entrenched inequalities, transforming into something new and hopeful as we go through that portal. The present paper offers a modest response to these calls, reporting on a state-led community recovery planning process that sought to uncover and begin to address longer-standing inequalities.

The recovery phase has been relatively neglected in disaster management practice and literature. Quarantelli (1995) traces the origins of contemporary emergency planning and disaster response in the Civil Defence approach to community protection, which emerged primarily in response to acts of war, and was directed by a central command structure, to keep people and places safe from immediate harms. Longer term consequences were seen as someone else's problem. The massive costs of disasters are a further reason for the neglect of the recovery phase (e.g., Chernobyl—$700 billion [Samet & Seo, 2016]; Sichuan Earthquake—$180 billion [Miyamoto et al., 2009]; Australian bushfires 2019/20—$71.8 billion [Australian Institute for Disaster Resilience, 2020]—all adjusted for 2021). Given such enormous costs, it is unsurprising that post incident recovery management is populated by those already in positions of power, already maintaining existing structures and less likely than those less powerful to perceive a need for systemic change (Few et al., 2021).

We propose viewing the after-disaster space as a complex system, through the lens of 'wicked problems, social messes' (Conklin, 2005; Horn & Weber, 2007). The widely used Disaster Management Cycle, presenting some combination of stages of prevention, preparedness, response, recovery and mitigation in a repeating loop has received important critiques, notably regarding its 'closed loop' nature, where recovery serves to *return* the process to its original point, rather than to a new position, and regarding the separation of activity into temporally distinct *stages*, which are in fact causally interrelated (Coetzee & Van Niekerk, 2012; Easthope, 2018). Further, if disasters are 'totalising events' and their impacts are 'culturally constructed and socially experienced' (Oliver-Smith, 2015), instead of top-down, closed, command-and-control approaches, we need ways of thinking and planning that are responsive to, and can accommodate the multiple experiences and sense-making of affected communities (Imperiale & Vanclay, 2021; Ruszczyk, 2019). From a complex human systems perspective, planners, policy makers and implementers operate in complex, evolving spaces of historical, messy human relations in materially and symbolically unequal contexts (Easthope, 2018). Planners work with 'messy' risks, probabilities, changing environments, growing situation awareness, multiple communities, to craft a 'good enough', imperfect, and often contested response in an unpredictable, nonlinear process. This perspective guides our work, implying that disaster-affected communities, recovery planning, and the interest in tackling underlying inequalities will be best served by a paradigm shift to embrace a nonlinear and inclusive process.

This article is directed at the role of recovery planners as the agents of change. It is not an argument against the radical empowerment of affected communities (as called for by Imperiale & Vanclay, 2021), but it focuses on how recovery planners can identify and initiate systemic changes. Numerous case studies have shown how the rhetoric of community participation in disaster recovery is not sufficient for meaningful and effective participation, and that institutional infrastructure and political will to take community voices seriously are necessary (Dhungana & Curato, 2021; McDonnell et al., 2019). We present our effort to do so. The community recovery planning methodology which we present here is a state-led CIA and inclusive community recovery planning approach, which seeks out and listens to multiple voices, considers messy issues, and engages stakeholders with decision-making power, to identify systemic inequalities and implement policies to make gradual systemic changes.

3 | FALKLAND ISLANDS

The Falkland Islands is a self-governing British Overseas Territory. It lies about 400 miles from the southeast coast of South America, and has a population of about 4000 people, making it one of the smallest countries in the world. Most inhabitants reside in the capital, Stanley, with a smaller proportion living in Camp (i.e., rural areas), and a combination of military and civilian personnel living in the Mount Pleasant Complex (MPC) as part of British Forces South Atlantic Islands (BFSAI). The remoteness, small population and reliance on international deliveries mean that travel disruptions have major impacts on supply lines, necessitating careful planning at household and national level including bulk-buying. Most news consumed within the Falkland Islands is international and is accessed either via the internet or subscription TV services. Local news is shared through several community Facebook sites, Falklands Radio,[1] the Penguin News (weekly newspaper)[2] and FITV[3] (subscription TV channel that provides a news roundup, only available in Stanley).

Geopolitically, the Falkland Islands are in a contested space. Argentina maintains a consistent and vocal claim to sovereignty (Benwell & Dodds, 2011) forming a pervasive and threatening backdrop to everyday life in the islands (Lisińska, 2016). Argentina's claim is disputed by the overwhelming majority of the voting population of Islanders, who voted, in a 2013 referendum, to retain their status as an Overseas Territory of the United Kingdom (92% voter turnout; 99.8% voted Yes; Dodds & Pinkerton, 2013). Many of these Islanders experience Argentina's position as an aggressive threat to their autonomy and safety, and the 1982 conflict over the territory continues to cast a shadow over life on the Islands, whose beaches were declared free of landmines only in 2020, for example.

The Falkland Islands are home to a diverse and, to some extent, sectionalised community, with social groups coalescing along intersecting dimensions of citizenship, nationality, faith, socioeconomic position, race and duration of family heritage on the Islands. The 2016 Census (Falkland Islands Government, 2016) found that, in terms of citizenship, 87% of the inhabitants have British or British Overseas Territory citizenship, with Chilean (5%), Zimbabwean (2%) and Filipino (2%) being the next largest citizenship groups. In terms of national identity, 49% considered themselves Falkland Islanders, 24% British, 8% St. Helenian, 5% Falkland Islander/British and 5% Chilean. Overall, there is a large majority White British/Falkland Islander population, with small but growing minority groups. There is almost full employment in the Islands, which rely on increasing numbers of migrant workers with temporary work permits. Whereas 69% of residents are permanent residents (with Falkland Islands Status or Permanent Resident Permits), 31% are resident with temporary Work Permits or other temporary immigration status. Work permit holders are a diverse group, with some on relatively well-paid public-sector salaries, while others are employed in lower paid roles in service industries.

An important dividing line is between those who have Falkland Islands Status and those with a more temporary status. For many Falkland Islanders, their rootedness in the FI is counted in generations, flagging up their distinction from the many 'contractors' (on temporary work permits) who are brought in for their professional skills for fixed-term periods, to eventually return to their home countries overseas, with different stakes in the future of the FI. This dividing line is institutionalised in that only those who are Naturalised Citizens, with Falkland Islands status (around 63% of the population), can vote in elections, and have full access to state-provided income support, healthcare and education. This leaves some of the 37% of residents without Falkland Islands Status at risk of material disadvantage, experiencing disenfranchisement, and feeling excluded. Falkland Islands Status is obtained through birth, parentage, or, with limiting annual quotas, through long-term residency and other qualifying criteria.[4] This led to many visible minority migrant labourers being less able to gain the points necessary to seek Falkland Islands Status before this was addressed in the revised 2021 Regulations. Their disadvantage and vulnerabilities were heightened by the Covid-19 crisis, given their limited access to state support to weather the crisis. The Falkland Islander Status group is not homogenous, with particular vulnerabilities among those reliant on state pensions, and those living with long-term health conditions.

In sum, in some senses, the Falkland Islands comprises a tight-knit community, where residents know and recognise each other, use the same supermarkets, schools, and attend the same community events, and often rely on each other for support. Yet in others, multiple communities with different experiences traverse the shops and events in different ways, attending different churches and contributing to different Facebook and Whatsapp groups. To inform our Community Recovery Plan, we explicitly did not assume homogeneity in the community and set out to pro-actively listen to members of groups that had tended to be less heard in government consultations.

Legislation and governance within the Falkland Islands are built on the Constitution.[5] Elections for MLAs are held every 4 years. The executive branch is led by a Chief Executive, organised into Directorates. The remoteness and small size of the Falkland Islands mean that a strong sense of self-reliance, local partnerships and close working relationships are central to everyday policy making and delivery of outcomes. In most organisations in FI (including government) staffing is regularly referred to as being 'one-brick thick', that

is, one person has both managerial and implementation responsibility for an area of work, necessitating that individuals will often hold multiple job roles, are very well networked and known, and the power distance between policy making and the frontline is minimal.

4 | COVID-19 IN THE FALKLAND ISLANDS

During January 2020, as per the norm for the time of year, the Falkland Islands hosted thousands of tourists and business visitors. Large cruise and expedition vessels arrived almost daily, weekly flights from Chile and Brazil brought land-based tourists and business visitors and the twice weekly airbridge brought people in from the UK. Preparations for the Loligo fishing season were well underway and Antarctic research teams were setting off for their research bases. Yet an undercurrent of anxiety was building, driven by the growing international media coverage of the new SARS-CoV-2. On January 17, 2020, the Falkland Islands Government (FIG) established a Risk Assessment programme.

The FIG risk assessment approach was based on that used within UK Resilience Forums. Specialists came together to consider how SARS-CoV-2 could present within the islands using existing planning assumptions for both Pandemic Influenza and Emerging Infectious Diseases. The resultant Reasonable Worst-Case Scenario was used to inform discussions about the potential consequences of the virus reaching the community and ultimately the development of the Falkland Islands Infectious Diseases Plan (Noran, 2014).

The wider community also began to create risk narratives, often informed by sensationalist international news coverage, exchanges on social media, and personal stories, experiences and assumptions (Karasneh et al., 2021), rather than by official advice or public health information.

Despite the differences in approach, communities and government identified similar risk areas, namely, large numbers of visitors from countries where the virus was spreading rapidly arriving by cruise ship; arrival of the fishing fleet with crews from high-prevalence countries; capacity of the health service to respond; and the potential impact on friends and neighbours if the virus arrived in the Islands. Restrictions on travel and 'stay at home' guidance were in place between late March 2020, and May 2021, when re-opening commenced. Table 1 summarises the key milestones in the initial Falkland Islands response. Table 2 presents the milestones of re-opening.

5 | THE INCLUSIVE RECOVERY PLANNING METHODOLOGY

5.1 | Background and principles

The recovery planning methodology was specifically designed to be (i) inclusive, (ii) historically sensitive, (iii) capable of addressing structural inequalities.

Policies to address the Covid-19 crisis had been developed rapidly, and top-down, due to the time-critical nature and severe risks of the pandemic. Anecdotal experiences shared on social media and between friends detailed how the crisis exacerbated pre-Covid-19 vulnerabilities (e.g., in relation to housing, employment, income, citizenship, health and social connections), and that the government's rapid actions to prevent and mitigate the Covid-19 crisis were not experienced equally by all residents. Many residents were separated from family and friends on different continents. It was important for the recovery process to re-engage community perspectives to discover unanticipated and unequal impacts, and potentially long-standing invisibilities and inequalities. Multiple communities, with differing political, social, economic trajectories, would feed into recovery.

A tactical-level Recovery Working Group (RWG) was established in April 2020 to begin the recovery process in the islands. Under the leadership of an FIG Director (who was chosen as someone who had credibility and legitimacy), the CIA process was developed before being used to support conversations with people whose lives had been impacted by the virus and subsequent government actions. The RWG was made up of specialists that included Social Services, Communications, Mental Health and subject matter experts. As the results began to emerge and the national restrictions were lifting, a strategic Recovery Co-ordination Group (RCG) was convened. Leadership of this group rested with the FIG Chief Executive and membership included an MLA, senior government officers, leaders from the British Forces South Atlantic Islands and Government House. The RCG sat outside the existing FIG Committees and alongside the Strategic Pandemic Management Group (SPMG). It was essential that all these groups had legitimacy internally within FIG and externally across wider communities (Purdue, 2001), without which there was a significant risk that recovery would be seen as something that was 'done to' rather than 'developed with'.

Informed by the fluid and nonlinear perspective outlined above, that recovery is not a 'final stage' of emergency management, but an ongoing and complex practice, the community recovery working group (CRWG) was convened during April 2020, holding its first meeting on April 30, 2020. The group explicitly recognised that Covid-19 was only one in a series of emergencies that Falkland Islanders had experienced, and recovery planning had to take into consideration how some people were already sensitised to co-existing with perceived external threats (Benwell, 2019).

It is not easy for authorities and institutions representing the state to admit to past structural inequalities, to redistribute power, or to redress historical inequities but the Group agreed that the outcome should not gloss over awkward issues or aspire to return to normal. The approach would scope community needs and experiences holistically, across all groups on the Islands, while making special efforts to include historically neglected and less powerful voices. 'Taking quiet voices back to power' is how one of the lead officers described the intentions.

TABLE 1 Timeline of the Falkland Islands response

March 16, 2020	The Executive Council of the Falkland Islands approved a new Infectious Diseases Plan
March 17, 2020	All passengers arriving into the Falkland Islands by air were asked to isolate themselves for a period of 14 days
	Foreign nationals who were seeking to leave the Falkland Islands were advised to do so on the final LATAM flight (March 18)
	Only cruise ship passengers able to disembark were those who were being repatriated home by air
March 23, 2020	King Edward VII Memorial Hospital (KEMH) admitted a child who was critically ill with suspected Covid-19 and given the limited amount of intensive care facilities and lack of testing facilities within the Falkland Islands the decision was taken to • close schools the following day • ask people to reduce nonessential activities and • request that they stay at home where they can, and work from home where possible • People with health vulnerabilities were advised to self-isolate
March 31, 2020	KEMH was reconfigured internally to handle potential cases and developed plans to manage up to seven ventilated patients
	Additional medical specialists were recruited in the UK and brought in via the South Atlantic Airbridge (SAA)
	The UK Ministry of Defence deployed additional medical resources to provide additional capacity within the islands
	No routine passenger flights were available either by SAA or LATAM
	Covid-19 tests flown to Portsmouth for testing by SAA when flights were available – test could take up to 5 days from swab to result
April 01, 2020	Lab results showed that the child did not have Covid-19 but was instead ill with a para-influenza virus
	FIG announced that support packages for businesses affected by the social restrictions were under development
	Changes were made to internal travel within the islands and the Falkland Islands Government Air Service (FIGAS) moved to taking freight and medical supplies only; Work Boat Services transport priorities were food and fuel
April 03, 2020	Further and Higher education students begin to return from the UK (all post 16 education is delivered overseas)
	News of a positive Covid-19 test for a patient in the KEMH is received (a second positive case was confirmed April 04, 2020)
April 07, 2020	Advisory movement restrictions are put into place to limit the potential spread of Covid-19 between people living in the BFSAI Mount Pleasant Complex (MPC) and the wider Falkland Islands community
April 17, 2020	Reassurance messages shared by FIG that there were no food or toilet roll shortages within the Falklands
	Support measures for households and businesses were announced alongside reductions in charges made for electricity and water
April 24, 2020	Additional oxygen making capability is brought to the islands by the MoD
	The construction sector goes back to work
April 30, 2020	First meeting of the Community Recovery Working Group is held

Abbreviations: BFSAI, British Forces South Atlantic Islands; FIG, Falkland Islands Government; MoD, Ministry of Defence.

Thus, the FI Recovery Planning approach aimed to

- generate new knowledge about vulnerabilities, community relations and inequalities in the Falkland Islands, through engaging the experiences and participation of a wide range of community groups on the Islands,
- share that knowledge among stakeholders (e.g., making decision-makers more aware of issues, tailoring the messages to audiences),
- develop a Recovery Plan grounded in evidence of local realities and life experiences of diverse groups of residents.

5.2 | CIA methodology

The CRWG developed a CIA methodology that aimed to provide a framework that would both help to initiate conversations with people without confining them to a set agenda whilst also providing quantitative data to help give a sense of scale. The CIA was built locally using academic and experiential knowledges shared by practitioners who led the delivery of social services, mental health services and emergency management in the Falkland Islands.

Recognising that any type of community engagement, and in particular engagement after disasters, can raise uncomfortable questions, the MLAs affirmed from the beginning that the CIA should collect experiences from across all the island's communities, be anonymised not sanitised, allow positive experience to be celebrated, and identify and address negative experiences.

5.3 | Data collection

Online population surveys and public meetings were the mechanisms traditionally used by the FIG to engage the community and scope issues of concern. Aware that these mechanisms may be less

TABLE 2 Falkland Islands' process of re-opening

May 01, 2020	Decision is taken to begin re-opening the islands
	Restrictions on social and physical activities are planned to be relaxed from May 06, 2020
	Nonessential work to restart and schools to reopen on May 11, 2020
May 07, 2020	Covid-19 testing platform arrived into the Falkland Islands and the KEMH begin calibrating process (operational May 18, 2020)
	People with high levels of vulnerability still advised to self-isolate
	Socially Connected, Physically Protected guidance published[a]
May 15, 2020	Restrictions on passengers travelling by Falkland Islands Government (FIG) Air Service and on the inter-island WorkBoat Service are eased
May 18, 2020	Library and Stanley Leisure Centre re-open
June 13, 2020	Community Impact Assessment work is launched by FIG
June 19, 2020	Nightingale Stanley exercise is held allowing BFSAI and KEMH to practice how additional medical space can be provided in Stanley Leisure Centre if needed
July 15, 2020	Zero cases of Covid-19 within the Falkland Islands

Abbreviations: BFSAI, British Forces South Atlantic Islands; KEMH, King Edward VII Memorial Hospital.

[a]Socially Connected Physically Protected Guidance (fig.gov.fk).

accessible to some communities, and thus over-represent the voices of more secure or majority communities (Cretney, 2018), the CIA process was designed to be inclusive and transparent in as many ways as possible. Information about people's experiences was collected in three ways: surveys, workshops and one-to-one conversations.

5.4 | Survey data

The Covid-19 survey, developed by the CRWG and the FIG Statistician, was launched on 22 July 2020.[6] The survey was designed to give a snapshot of how people felt between January and July 2020 whilst also providing baseline data, should the Falkland Islands experience another period of Covid-19 driven disruption. Adults were asked to consider the impact Covid-19 had on their job roles and their physical and emotional well-being; how well government kept people informed about what happening; how the community reacted and if people supported one another; whether they felt safe and secure (and if this had changed since Covid-19); and how well they thought the government had responded.[7]

A link to the survey was published and highlighted in press statements and shared on community Facebook pages. For those who did not have access to the internet or who preferred to write in, hard copies were left in the Post Office, Supermarkets, Library and Leisure Centre alongside boxes for people to deposit their completed forms. The survey was also translated into Filipino, Spanish and Shona, the main minority languages on the Islands. For children and young people (CYP), four age-appropriate surveys were produced for different age groups and were distributed in hard copy via schools.

When compared to other online surveys conducted by FIG, the response rate was high with 290 people over the age of 16 sharing

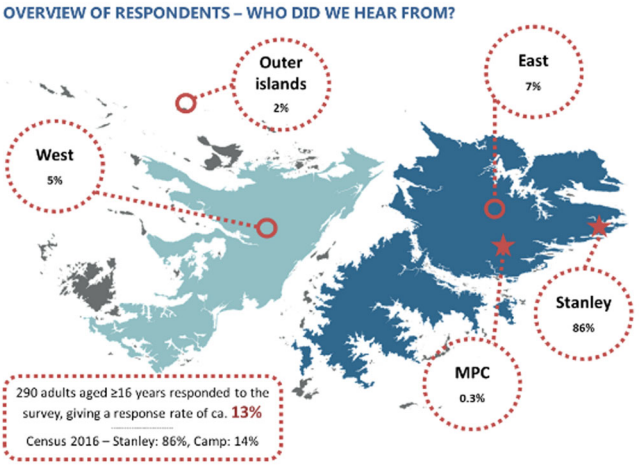

FIGURE 1 The survey responses

their opinions (national response rate of 13%). Of these, 86% lived in Stanley, 7% lived in Camp on East Falkland, 5% lived in Camp on West Falkland, 2% lived on the outer islands and 0.3% lived in the British military base (MPC). This distribution is roughly in line with 2016 Census data. Figure 1 illustrates the geographical spread of responses.

Demographic data on the sample revealed that although many nationalities were represented there were some notable absences (St. Helenians and Zimbabweans) and areas of under representation (Filipinos). Comparing survey respondents to census data in terms of immigration status revealed under-representation of those with more precarious immigration status (see Figure 2). Those with Falkland Islands status are most secure (as long as they also have naturalised citizenship, as most do), with voting rights and access to all government services, while those with Work Permits are present on a temporary basis, without access to many government supports.

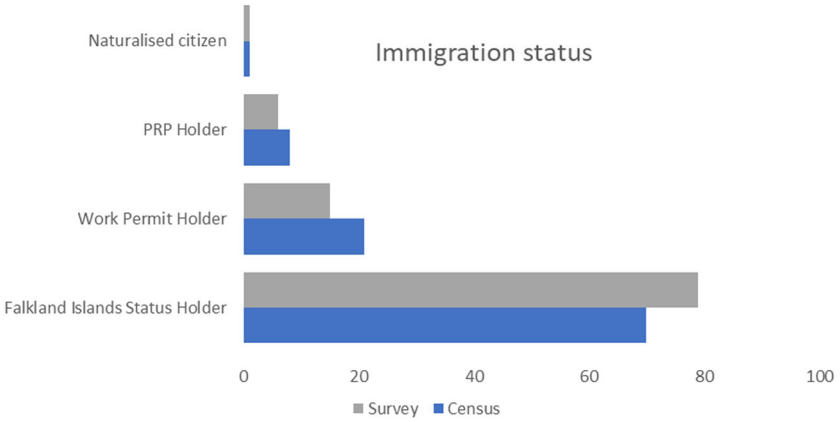

FIGURE 2 Immigration status of survey respondents versus census data

Those on Permanent Residence Permits have greater security, moving towards full rights, but cannot vote.

Overall, there was a higher response rate to the adult questionnaires than to those aimed at CYP. One explanation for this could be that the surveys were circulated towards the end of term and that both schools and parents were nervous about talking about potentially upsetting issues.

5.5 | Workshops

Rather than relying on open-invitation 'public meetings', CRWG were aware that some groups of residents felt uncomfortable about expressing their views in public, and instead a series of smaller scale, group-specific, face-to-face workshops were organised during July and August 2020. Anecdotal evidence and survey response rates suggested that this discomfort was related to people's immigration status and/or their nationality. The workshops were designed to enable these previously less heard voices to be heard.

Care was taken with the composition of residents attending workshops and the CRWG sought to curate the experience carefully rather than issue an open invitation for a general free-for-all discussion. Some people were identified by their employer or members of their community group, others were approached as individuals and where people were self-selecting, the planning team sought to recognise commonalities and barriers. Where there was a possibility for interpersonal or intergroup tensions to emerge, these were managed by invitations to reduce the potential for communication blocks.

A set of target audiences was identified, and each workshop was made up of 10–12 attendees (plus facilitators). Given that it would not be possible to hear everyone's story, attendees were invited to speak on behalf of their service, community group or sector. They were asked to link in with others and consider four issues: what did not go well during the response; what went well during the response; what should we do differently next time; the impact of Covid-19 on people's rights. Workshops aimed to offer time for free discussion within a structure. Each session lasted about 2 h and was facilitated by a member of the CRWG, supported by other members. To help reassure people that they could speak freely, notes were taken but comments were not attributed to people and when the data was collated, great care was taken to anonymise the information.

Workshops were held with the following groups:

- *MLAs*: to capture and reflect the personal experiences of the MLAs who took difficult decisions throughout the pandemic.
- *Front Line workers*: people who delivered front line, public facing roles throughout the response period, including cleaning staff, hospital staff, teachers, police, border teams and trade staff.
- *Secondary service providers*: people whose role continued during the response but it was not public facing, including power station and water plant staff, pilots, vets, court and treasury officers.
- *Those supporting people with additional needs*: people providing personal support to those who needed help with day to day living or who were isolated, including social workers, domiciliary care workers, mental health workers, CYP support workers, leaders from the Seamans Mission and the Citizens Advice Bureau.
- *Those supporting young people*: we were unable to host a workshop with CYP so invited people who worked with them, including teachers, school nurses, apprenticeship leaders and nursery providers.
- *Social groups*: people who led social groups within the Falklands, including the Women's Association, Opera and Dramatic Association, Sport Association, Scouts, Guides, Conservation Group and Team Tranquil.
- *Cultural Groups*: people from a wide range of cultural backgrounds defined by nationality, residence and self-identification. Following this workshop, two further events were held to help explore in more detail the experiences of individual communities.
- *Twenty-somethings*: people who formed part of the 18–30 community cohort.
- *Commercial sector*: people who owned or managed businesses within the Falkland Islands.
- *Self-selecting*: within the survey people were invited to self-nominate for a workshop.

5.6 | One to one conversation

For some people, it was more appropriate to have one to one conversation, particularly those living in Camp or those with personal

stories that they wanted to share directly with the CRWG. Their experiences and opinions were recorded in the same way as the workshops with particular care being taken to anonymise their perspectives during analysis.

5.7 | Data analysis

The CRWG took a collaborative and inclusive approach to data analysis. Following an initial clustering of the workshop notes, anonymised data was shared between groups members and a coding grid was developed to help make sense of the information provided. The following areas of impact were identified:

(a) Everyday lives,
(b) Access to home and housing,
(c) Emotional and physical well-being,
(d) Connections with friends and family,
(e) Tensions between communities,
(f) Ability to work and provide for their family,
(g) Changing access to community spaces,
(h) Changing ways that government and commercial services were delivered,
(i) Feelings of safety and security,
(j) Access to transport and freedom of movement,
(k) Community reputations,
(l) Governmental leadership.

Initial coding was conducted electronically, but final decisions were made during an all-day workshop of the CRWG, using post it notes, cut out phrases and large sheets of paper. The CRWG benefited from closeness to the experiential data, given that all but one of the members of the CRWG were present in the Falkland Islands during the period January–August 2020, and four of them were part of the wider incident management team. Critical distance was a priority, with robust internal challenge from the team, systematicity in data analysis, and triangulation by sharing presentations with the Island's political leaders, senior government officers and Government House. Where there were differences of opinion, the data was reviewed and the position was either confirmed or changed.

The recovery areas identified from within the workshop were then used to frame the statistical analysis of the online data, undertaken by the FIG Statistician.

6 | FINDINGS AND OUTCOMES

Based on the above analysis processes, the FIG presented a series of summary bullet points of the findings of the CIAs, as shown in Box 1, to the island's communities in April 2021, in a news conference, and published on the government website.[8]

BOX 1: Summary findings presented to FI communities

- Overall, the majority of people were satisfied with FIG response, recognised quick decisions, hard work and that luck had played a part when cruise ships brought passengers to visit and later had outbreaks aboard.
- Connections between people in the community were highly praised and valued.
- The initial outbreak coincided with the anniversary of the Argentinian invasion that triggered the Falklands War and this caused some people additional anxiety.
- Many people spoke about their fear of leaving their house and catching Covid-19 being similar to the anticipation of invasion and the reality of living under occupation.
- People whose families were overseas experienced high levels of anxiety watching how the virus moved around the world.
- A small but significant number of people experienced hardships when FIG changed how people could interact during the initial stages of the pandemic.
- All groups commended FIG's overall response.

FIG also compiled and published a table of findings and associated responses, as presented in Table 3. For transparency, the statistical results of the survey were also published.[9] We present these as examples of how findings can be communicated back to communities, to aid a common understanding, across government and diverse communities, of the experience of the crisis and the response, areas where action is needed and expected, and to provide a foundation for transparency and accountability. Reading through Table 3 presents an overall picture of the experience of COVID-19 in 2020 in the Falkland Islands. The findings revealed not only the immediate impact of the crisis, but longer-standing impacts of multiple layers of vulnerability and inequality, as well as perceptions reported by all communities that their own community was particularly badly affected. These findings highlighted both the urgency of an inclusive recovery, and the need to address underlying perceptions of fairness.

What is the potential for inclusive recovery planning to enable us to use the 'pandemic as a portal' to move towards systemic change and disaster justice? We here draw out key areas where the FIG responses have potential for systemic changes, in different ways, and to different degrees.

First, the inclusive methodology employed brought new narratives and voices into the open, which had previously been invisible to the FIG. The power of these narratives was intensified

TABLE 3 You said–We heard

	You said	We heard
Business and economic support	Many people said that the economic support provided by FIG helped them during this time, for example, furlough payments and the wool purchase scheme	FIG need to ensure that public money is spent effectively so the approach (what was intended to happen/what actually happened) will be reviewed
	Some people felt that it would be better to pay support directly to individuals rather than by employer	FIG chose the employer route as most people in the Falkland Islands are in work. As part of the overall review other support routes are being explored
Personal economic support	Some people felt that those who were furloughed received more money (80% of usual income including overtime) than those who were not (who received 100% of regular salary but no overtime)	HR and Treasury are reviewing these figures to help improve the support schemes
	People whose only income is a basic pension and who were in isolation experienced particular financial hardship as their food costs increased	Single Income Support scheme and Hardship Fund are being reviewed to explore whether these could be developed further
Employment	Many were concerned that even though they were on the frontline of our Covid-19 response, they were not eligible for Death in Service payments should the worst happen	Interim protection in place for medical teams but it is recognised that this was not the only group affected
	Some people felt poorly-treated by their employer during this time and did not feel confident enough either to challenge or talk publicly about their experiences	This is being reviewed as part of an internal audit and FIG are looking to understand this further and consider what role government can play in helping people assert their employment rights
Housing	Many people described how Covid-19 impacted on their housing, with the government's quarantine programme increasing demand for rented properties in Stanley	The lack of housing in Stanley is well recognised, although Covid-19 has brought added pressures
		FIG provides housing for the government's 14-day quarantine for those who need it. Until quarantine ends this will continue to impact FIG housing availability
	Some people's rent went up considerably during this period and they found this (alongside the reduction in their income) hard to manage	A Housing Strategy is under development and tenancy protection forms part of this study
Caring for people	People who were already being helped by the Community Support Team experienced service changes due to limited staff numbers	Continuity plans are in place to ensure that we can support people in their own homes
	People asked for more support when they were self-isolating	Social Services are formalising a volunteering scheme and we are addressing the individual issues that were raised
	Some people lived with high levels of financial hardship: they had low levels of food and little or no heating in their home	FIG is working with the Foodbank to support their work and are also reviewing how hardship payments are made
Staying healthy	People recognised the great work done by the KEMH team in particular the Chief Medical Officer	The CMO wore lots of hats during the outbreak—led the medical response, treated patients and provided public health advice, FIG is looking into how she can be more supported in her role
	Some people were confused by the public health messaging and whether they were being told or asked to do things	As Covid-19 has continued, regulations were introduced that described what people must do and now that time is available, FIG is reviewing additional guidance to help people decide what they can do
Bringing communities together	Survey analysis revealed that the survey demographic did not accurately represent the entire community	FIG is developing ways to ensure that underrepresented voices can be heard
	People from ALL walks of life told us that they felt that their community experienced particular hardships in comparison to others—those with FI Status, PRP and Work Permits	FIG is exploring how we can support everyone to feel part of our community
	People told us it was difficult to get the correct advice from FIG	FIG is reviewing whether a single point of contact can be developed

(Continues)

TABLE 3 (Continued)

	You said	We heard
Integrating our community	Facebook was helpful and harmful during the outbreak with some individuals and groups being singled out with harmful and distressing comments	FIG is looking to amend and implement relevant equalities legislation, and is reviewing how we respond to Facebook comments targeting people or groups
	The survey and workshops showed us how well people helped others in their community during the outbreak	FIG is exploring ways to help break down barriers between groups to help us see ourselves as an integrated community
	Some communities are often unseen by FIG and so their needs are difficult to reflect in our policies	MLAs have been working with community groups who come together for many different reasons to hear their experiences and concerns
Passports and visas	Some people who live here have been having difficulty in renewing passports and other travel documents	FIG is working with Government House to link in with their embassies to explore how people can update their documentation
	Some parents have been unable to get identity documents for new-born children	FIG is working with embassies to help families get these documents but unfortunately FIG cannot solve this problem
	Some people have been unable to return home following the suspension of the LATAM flights	FIG is continuing to support repatriation where possible
Children and young people	Our children and young people were asked directly about their experiences of the pandemic	The Education team continue to support those who in education overseas and have response plans should schools need to close again
	They told us about the impact it had on their lives and how they adapted to the changing world they found themselves in	The Health team are also providing individual support through the school nurse and KEMH
		Situation kept under constant review
How long will the recovery last?	What are we trying to fix as part of the recovery?	Some of the impacts highlighted by the Impact Assessment were caused directly by our response to Covid-19, some have been with us for a long time: it is the impact, not the cause that is important
	Will the fixes take a long time?	Where the fixes are quick, for example, providing quarantine accommodation for returning students these have been completed
	What about the difficulties we experienced?	Many are more complex and require more significant changes to be proposed and then agreed by Members
		Work will continue on recovery issues into 2022 and beyond

Abbreviations: CMO, chief medical officer; FIG, Falkland Islands Government; MLA, Members of the Falkland Islands Legislative Assembly; PRP, Permanent Residence Permits.

by the way the pandemic had exacerbated vulnerabilities, as the policy measures to contain the virus stripped away some of the layers of the 'Swiss cheese' in people's resilience. For example, the insufficiency of the basic pension was made evident when low-income pensioners had to stay home and order groceries remotely. With no online shopping, and unable to visit the shops, pensioners had no access to the discounted aisles or special offers which they had relied on to make ends meet. Workers who relied on overtime payments were not compensated for lost overtime earnings when furloughed, revealing their insecurity. And when the government was implicated in the squeeze in the rented housing market—by using rented properties for quarantine—the longer-standing issue of housing insecurity became much harder to ignore. The CIA brought all these issues to the fore, put them in writing in front of the FIG, and demanded acknowledgement and action. We argue that putting new narratives on the table is a first (though not sufficient) step towards change. Moreover, the inclusive methodology is also an intervention towards systemic change. The analysis showed that traditional survey methods of consultation were under-representing certain groups, making the case for changing the ways that the FIG consults its communities, to be more inclusive in future. We demonstrated the practicability and value of making pro-active efforts to engage all communities, and the FIG's response is to rethink their traditional methods of engagement.

Second, in some cases, the new narratives are producing systemic change. Racial inequalities had had some verbal acknowledgement in government before the pandemic, but due to perceptions of bureaucratic complexity, the long-awaited Race Relations Ordinance 1994 had not been brought into effect. Moreover, Equalities Law incorporated very limited protections.

With the strength of the CIA findings of inequalities and impacts on social cohesion, the Attorney General submitted, and had adopted, a paper initiating work to enact the Race Relations Ordinance, establish a working group on equalities to review and update legislation, and agree a Portfolio for Equalities be established as part of the government apparatus, with a named MLA assigned the Portfolio.[10] These are structural changes to the governance of the FI, prioritising equalities legislation and policy in a new way.

Third, the responses to problems of income insecurity are an example of how the CIAs, in tandem with other government momentum, are creating energy to address vulnerabilities in new ways. In April 2021, the Chief Economist produced the annual 'State of the Falkland Islands Economy' report. Stimulated by the findings of the CIA, the report included, for the first time, a highlight report on income inequality, the CIA results providing qualitative context to the quantitative data.[11] In June 2021, to replace a disjointed and complicated benefits system, which was found to be inaccessible to some eligible households, a new 'Single Income Supplement' came into effect. In April 2022, MLAs unanimously supported a Motion supporting a new initiative for the Chief Executive to consult those experiencing financial hardship to bring a policy paper by the end of 2022, with the MLA who proposed the motion citing the Covid Recovery work as having drawn attention to the issue.[12]

6.1 | Learning

A reflective exercise conducted with members of the CRWG produced an account of the strengths and weaknesses of the Community Recovery Planning process, documented in Tables 4 and 5.

TABLE 4 Strengths of the Community Recovery Planning process

Leadership	CRWG worked with the Falkland Islands Strategic Pandemic Management Group (SPMG) to establish how the recovery process would be established, informed and managed. They recognised the importance of a defensible and auditable process and the risks posed once the process began, not least that once questions were asked there would be little control over the issues that were raised.
Engagement of Decision Makers	MLAs supported the CIA process throughout. Within the islands there are very short chains of influence as MLAs live their lives within the community and are readily accessible to people who want to raise issues with them either physically or virtually (primarily Facebook). During the course of the incident, Members received many personal messages from people; asking for help, sharing opinions, and in some cases expressing discontent. When the CIA was proposed, the MLAs recognised that this was an opportunity to identify areas where changes were needed and to provide support to those people who required it.
Engagement of Community	People within the islands gave their opinions freely and trusted the working group to manage sensitive and potentially contentious issues Response rate provided was very high—enabled the group to describe experiences that were shared by many people
Resources	The CRWG undertook this study in addition to their ordinary day jobs—it was seen to be an important activity that needed to be prioritised.
Influencing	As impact information emerged, it was possible to directly influence response decision making. An example of this was the FIG communicating clearly which aspects of people's everyday lives were restricted by Regulation which by Guidance Data collected is rich in detail and depth and has been used to inform many areas of government
Transparency	CIA approach was transparent, and people found it easy to follow and it was possible to see impact of impact assessment quickly

Abbreviations: CRWG, community recovery working group; FIG, Falkland Islands Government; MLA, Members of the Falkland Islands Legislative Assembly.

TABLE 5 Weaknesses of the Community Recovery Planning process

Data gaps	The survey data has gaps as a decision was taken to keep the survey as short as practicable. The workshop data is challenging to generalise and report on as many people shared personal experiences that, within a small community, makes them identifiable
Integrity	There is limited specialist expertise available within the Falkland Islands, so it was challenging to maintain a reflexive approach
Capacity	If this process was to be repeated, the CRWG would look to seek additional specialist help to help reduce the personal toll of holding professional and impact assessment roles in tandem

Abbreviation: CRWG, community recovery working group.

7 | CONCLUSION: TOWARDS INCREMENTAL SYSTEMIC CHANGE AND INCLUSIVE RECOVERY

In this paper, we have sought to set out a practical, replicable approach, with which authorities can use the impetus provided by the pandemic and the vulnerabilities it has exposed, to plan an inclusive recovery, and take steps towards systemic changes which tackle underlying inequalities. We hope we have demonstrated that, with pro-active effort, previously 'quieter', 'less heard', 'marginalised' or 'hard-to-reach' voices can be made louder, and thus heard and acted upon. Hearing those voices takes some effort, some departure from 'business as usual', some political will—but we argue there is no excuse for fatalism regarding communities being 'hard-to-reach'. We hope that we have detailed our methodology and the kind of outputs we developed, in such a way that others may adapt it for their local contexts. We here reflect on how we understand this methodology to have contributed to producing changes and its limitations.

We were inspired by Roy's (2020) call to treat the 'pandemic as a portal'. In what sense has the pandemic been a portal in the case of the Falkland Islands? We have argued that the deprivations caused by the pandemic, in stripping away people's sources of resilience, intensified and made visible vulnerabilities and inequalities that had previously been little acknowledged. Thus, it was a portal to identifying neglected inequalities. Anecdotal evidence circulating in this small and close-knit community called for government action on inequalities, opening the way to a more inclusive style of community engagement and generating political will and momentum. The design of our multifaceted CIAs was intended to prise open the portal further, by hearing from traditionally less heard voices and generating evidence on social and economic inequalities.

How was it possible to create this opening, in this instance? The CIAs, through their quantitative and qualitative methodologies, secured wide and enthusiastic community involvement, which led to robust and relevant findings. We believe that this responsiveness was aided by the inclusive nature of the membership of the CRWG, the conscious efforts to curate coherent workshops respecting the diverse communities of the FI, long-standing working relationships between government actors and communities across the Islands, and consequent relations of mutual trust and confidence. The willingness to address structural factors of racial and socioeconomic inequality as part of the recovery was helped by champions of equality within elected and appointed members of government departments, and the fact that the CIAs were designed to make visible inequalities where they existed rather than gloss over them.

While situating our intervention in the literature calling us to use the pandemic as a turning point, we do not here take on the battle of transforming the global structural inequalities identified as the root of the problem by Chmutina and Cheek (2021); or imagining a radically different society as invited by Roy (2020). Our level of intervention is at how the relatively mundane tools of state-led consultation and recovery planning can aim to listen to multiple, including less-heard, voices, develop forward planning to tackle inequalities rather than exacerbate them, and improve community relations rather than further divisions. In terms of systemic change, we have taken an incremental approach and acknowledge that systemic change is hard, and is often resisted. Putting new narratives on the table, and demonstrating an inclusive methodology are foundations for more systemic change in the longer term. Some changes (e.g., the changes to income support) have happened in tandem with other sources of momentum, not solely attributable to the CIA process. We would argue that this is often how systems change, often not as a result of a single cause, but through alignment of multiple movements. Updating equalities legislation was long overdue, highlighted by the visibility of recent global movements for racial justice (e.g., Black Lives Matter), and we suggest the CIA process provided a tipping point (not a sole cause) to move the FIG forward to updating equalities legislation.

Not all sources of inequalities may be amenable to this incremental approach. The fundamental division in the Falkland Islands, in terms of citizenship status, remains pivotal, with rights to vote and access public resources constrained by access to citizenship, which remains tightly controlled. Additionally, as a British Overseas Territory, the UK government's immigration policies impact the Falkland Islands' citizenship processes. The CIAs and Recovery Planning process do not have the power to shift the landscape regarding citizenship. What they could do was to suggest extending supports regarding housing and income to a wider population, particularly under the crisis conditions of a pandemic or other emergency, in which unusual and acute loss of income or housing pressure affect less secure residents severely. The geopolitical context makes citizenship of the Falkland Islands a high stakes and inflexible issue, beyond the control of recovery planning, and likely to affect inequalities in the Islands beyond the period of pandemic recovery.

The Falkland Islands is of course a unique location with unique dynamics, notably the short power-distance between decision-makers and front-line and community. Elected politicians are embedded in the communities they represent, and there are not many layers of government to penetrate to institute change. This may be true of other small nations, particularly small island nations. It is also true of other groups who may wish to either conduct CIAs, with or without creating and delivering recovery plans, such as local government, or NGOs and local voluntary sector organisations.

It is not proposed that the FI approach is a magic bullet. It produced valued results in this context and for this place. We hope our case study resonates with experience in other settings, demonstrating how one group of policy makers, professionals and researchers developed an inclusive methodology to rapidly and effectively shape an After Disaster journey that begins to transform rather than return to, unequal social relations.

DATA AVAILABILITY STATEMENT

Research data are not shared.

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ENDNOTES

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