

Report on Community Coping Experiences during the South African COVID-19 Lockdown

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This study reports on the coping experiences of a convenience sample of 16 people: 8 males and 8 females (mean age = 58.4, SD = 17.6) during the COVID-19 pandemic. NVivo thematic content analyses and syntheses by three independent researchers' yielded ten coping themes of time, lockdown, work, family, friends, activities, technology, health, prayer and care. The relative affluence of the sample is reflected in the rank ordering of the themes. Men and older people reported more positive emotions than younger people, which is understandable in relation to balancing work and family roles, especially when working from within their home environments. The meaning of these findings is discussed in relation to other studies in other contexts, as well as future investigations and interventions.

Key words: *Community, Coping, Experiences, COVID-19 Lockdown, South Africa.*

Introduction

Stress refers to a challenge to people's capacity to adapt to and cope with inner and outer demands (Slavich, 2016). It is endemic for contemporary humanity (Robinson, 2018). Social support has long been recognised as a vital resource in coping with stress and lack of social support is associated with illness and disease (Zee, Bolger & Higgens, 2020). People react to stress in various ways, using a variety of coping mechanisms, which may be both maladaptive and/or unhealthy, as well as adaptive and/or healthy (Clark, 2013). The World Health Organization (WHO) has declared the current outbreak of the novel coronavirus (COVID-19) a pandemic and a public health emergency (WHO, 2020). International lockdowns in many countries are a clear indicator of the intimate interconnectedness of planet earth, with all its enveloping technological communication and information systems



(McCraty & Deyhle, 2016). Social distancing is a method to minimise crowd interactions and prevent the spread of disease by limiting incidence and prevalence among communities (CDC, 2020). It may be combined with a general lockdown requiring people to stay at home.

A large global study (Plomeka et al., 2020) screened individuals from twelve countries in and five WHO regions for psychological symptoms related to the COVID-19 pandemic. Risk factors included females with traumatic and psychiatric histories. Resilience factors were optimism, social support and daily exercise. A large Spanish study (Sanguino et al., 2020) revealed similar findings. Higher symptomatology was found among females with psychiatric histories, similar symptoms as COVID-19, who had a close relative infected with the virus. Loneliness was the strongest predictor of depression, anxiety and post-traumatic stress disorder (PTSD); whereas spiritual well-being, age and economic stability were protective factors. Other studies have emphasised the interrelationships between human well-being and a healthy natural environment, including ecosystem integrity, clean air and a stable climate (Chen, Wang, Huang, Kinney & Anastas, 2020). The editorial for the International Journal of Health Sciences emphasizes the need for more research into social sciences and related understanding, compassion, solidarity, and global collaboration for a global pandemic (Saqr & Wasson, 2020).

The South African Lockdown experience began on 27 March, with a further extension owing to the likelihood of the rife spread of the pandemic in many South Africans who live in densely populated urban areas, townships, temporary housing conditions and informal settlements, commonly referred to as a shack lands and/or squatter camps. The present study constitutes a response to calls by the local and international research community for various investigations into the COVID-19 pandemic. The specific focus will be on people's coping experiences.

Method

Approach

This is an exploratory, phenomenologically orientated study. It was considered that qualitative, interpretive, data analysis should give valuable direction for future research.

Data Collection

A survey type questionnaire technique was motivated by the consideration that the consciousness raised by people considering their coping experiences would be intrinsically therapeutic. By 27 May, 2020, two months after the lockdown began, sixteen responses had been received from an electronic questionnaire sent to a convenience sample of 627 South Africans via a local church and municipality of Umhlanga Village, KwaZulu-Natal, South



Africa, as well as related snowball sampling techniques. Respondents were asked to provide their age, gender, experiences and ways of coping with the lockdown for the COVID-19 pandemic. Anonymity was guaranteed and required ethical research standards assured. Participants were informed that, although no personal identification was required, and confidentiality guaranteed, information as to age and gender would assist in structuring findings and that in depth descriptions of experience would add meaning to the findings, which would be available on email request.

Participants

There were 8 males and 8 females, with a mean age of 58.4, standard deviation of 17.6, median of 63.5, and range of 37 to 87 years. This indicated a fairly elderly sample. In fact 6 could have been formerly retired from work, as they were 65 years or older. Although the sample of respondents seemed biased in terms of age and affluence, it was considered sufficient in provision of qualitative depth and detail of COVID-19 Lockdown, experiential coping data for initial report purposes.

Data Analysis

Raw data were subjected to three levels of analysis. Firstly, NVivo analysis provided a course sieve for further data thematic analysis (Clarke & Braun, 2013). Secondly emerging themes were independently elicited by three researchers. Thirdly final themes were consensually validated, integrated and relevant examples chosen for this report.

Ethical Considerations

The study followed ethical standards in accordance with the Declaration of Helsinki. Institutional approval was obtained from the Zululand University research committee, project number S894/97. The authors are Psychology Professors and Clinical Psychologists attached to this University.

Results

Emerging Themes

The following ten, overlapping themes emerged after NVivo analysis, researchers' independent elicitation and rank ordering of themes, in terms of their frequency per se as well as how often these themes were mentioned by particular participants. This was followed by: repeated reading of all participants' experiences and ways of coping; researchers' final agreement as to themes; integration of themes; and choice of one particular word that most closely conveyed the experience and meaning of the particular theme. Although there was clear overlap among themes, in the spirit of qualitative inquiry, it was decided not to collapse

themes but rather amplify distinctions so as to reveal more clearly the different dynamics and mechanisms related to the various ways of coping. Summaries and examples of each theme are as follows.

First Theme: Time

Fifteen participants mentioned the word “time” in at least one of these senses of the word: human existence, temporality and emotionality; experience of time; moment to moment; time together; clock time; lockdown time; time unknown; and time with God. Time itself can promote insight, coping and healing as noted by Participant G. In this sense, time itself is one dynamic mechanism underlying spontaneous healing that can occur in the case of the placebo response. Although Participant B did not mention the word, he did mention gratitude that “Nanny has remained with us throughout the duration of the lock-down to take care of our home and twin daughters”.

Typical examples of time in terms of existential, experiential, emotional and coping responses were as follows.

“One of the things I found that came up for me was the realisation of how at risk I am from the COVID-19. I realised that I hadn’t really come to terms with my mortality” (G, Male aged 72).

“We also follow the news and know that everyone is working together for the same goal” (H, Female aged 85).

“Emotions fluctuated more than normal during the day and from day to day. Week days and weekends felt very similar, and without the separation for rest” (N, Male aged 38).

Second Theme: Lockdown

This meant staying at home, coping, experiencing lots of different emotions, surviving, and coping, adjusting, adapting and finding meaning. Out of the sixteen participants, thirteen expressed negative feelings such as shock, anxiety, panic, fear and frustration as a result of the COVID-19 lockdown and related extensions in South Africa. However as noted by Participant’s D and M, lockdown also provided a perspective for coping and opportunity for working health promotion.

“At first there was a lot of uncertainty as I had become accustomed to waking up at a certain time, follow a routine and get on with it, almost like a programmed robot. Then came the second set of panic and fear as to how to cope. After a few days of adjustment, the lockdown became like the perspective I needed” (D, Female aged 39).

“Can’t believe that something like COVID-19 is happening in my lifetime. Mentally still coping but deep down the fear that things could go wrong in our care home” (I, Female aged 87).

“It has not been easy to cope with the lockdown. The ways of coping have included much prayer, quiet time, appreciation, thinking about others, focusing on the needs of others, going for walks a few times a day and a couple of runs a week, trying to do a range of activities, playing games with the kids, watching television, and resting as much as possible” (N, Male aged 38).

Third Theme: Work

Participants coping experience in relation to work varied considerably. For some this theme implied: thankfulness of having work during the lockdown when others didn’t or wouldn’t; doing different types of work; struggle of working from home during the lockdown; juggling home and work life; and adjusting to new ways of working. Lockdown related work problems were particularly experienced by E, J, K, L, N and P. For B, C and D the adjustment to working from home was not too difficult. In fact, as D mentions, it became an opportunity for rest, peace and quiet. Participants F, G, H and I did not indicate specific work issues. A, M and O indicated particular concern for unemployed, poor and starving members of the population.

“As an IT professional, working from home is as though I have gone into the office, only difference is I didn’t have to spend the hours to commute to work. During the working week I am working as normal, during weekends I am catching up on household chores, gardening and simply resting to enjoy the peace and quiet” (D, Female aged 39).

“It has been an extremely difficult time. Both our young kids have been unable to attend school which has resulted in my wife and I sharing the burden of home-schooling whilst both working” (L, Male aged 40).

“Juggling working full time from home doing a role that is community based, and doing additional work and research wasn’t easy” (N, Male aged 38).

Fourth Theme: Family

Family were mentioned twenty-three times by ten people. Participants often linked family with friends. The focus was on spending time with family, being able to have more time with family than usual, remote contact with family members, struggle of being together in a confined space and becoming closer. Six participants mentioned coping through sharing feelings together as a family.



“On a positive note, the lockdown has made me grateful and appreciative for my family, friends, colleagues and generally society at large” (L, Male aged 40).

“It wasn’t all negative though, we got to spend more time together, we got to cook and bake together, we got to FaceTime as an entire family from all over the world for the first time” (K, Female aged 37).

“We all became closer to our ancestors especially my mother who would provide warmth when it is cold. I have been using a lot of breathing exercises as well as meditation and concentrating on hope that things will be OK. The power of the mind has helped a lot with regard to visualizing” (P, Male aged 64).

Fifth Theme: Friends

Friends were mentioned fifteen times by eleven people. Although focus tended to be on missing absent friends, of the eleven people who mentioned friends, on six occasions this included some way of coping. Family and friends were mentioned together on nine occasions, four of which included contact via electronic technology.

“A degree of light-heartedness and frivolity is provided also by many of our WhatsApp groups and some of my friends and family” (A, Male aged 74).

“Use the time to tidy up the correspondence in your life (those old friends you said you’d write to, do it!” (G, Male aged 72).

“I have kept in contact with family and friends via Whatsapp which has been amazing” (K, Female aged 37).

Sixth Theme: Activities

This included exercises and other routines, as well as: not being able to undertake usual activities like going to church, going to work, being out in nature, exercise, sport and physical activity; and having social interactions, doing new activities, undertaking old activities and finding a new norm. Ten participants coped well through exercises and other forms of activities.

“The way I have coped with lockdown is by creating a routine and finding ways to give my day purpose” (F, Female aged 68).

“Daily walks, bike rides, playing games and doing daily exercise challenges with the family was relaxing and an escape from the lockdown pandemic” (J, Male aged 40).



“We have worked at promoting our health, through eating and sleeping well, practising regular exercise, meditation and prayer, and observing basic health promotion, such as having our food delivered, washing hands, staying at home and observing recommendations as to social distancing” (M, Male aged 70).

Seventh Theme: Technology

Ten participants mentioned coping through the use of modern technologies such as media, computers, cell phones, and other electronic devices, such as HeartMath and Fitbit.

“We are fortunate in that we have technology that allows us to work remotely and the children can study online” (C, Female aged 56).

“Device time became the ‘norm’ in our house while we worked and kids were bored” (K, Female aged 37).

“After putting down the kids and dinner I find myself on the couch – my wife watching a series on Netflix and I’m on YouTube” (L, Male aged 40).

Eighth Theme: Health

Healing was mentioned ten times by five people. The focus was mainly on the restrictive or negative effect of the Lockdown on: health; through work related issues or concern for the many unemployed poor; and suffering persons, thus overlapping with the third and tenth themes. However coping through health promotion was also mentioned.

“I am mindful that there are many people who are having very a difficult time with loneliness and health and those that are battling with everyday living and there are those who are going out to work and putting their lives and families at risk and this puts the lockdown in perspective” (C, Female aged 56).

“We have continued to eat healthily and only have one drink a night” (F, Female aged 68).

“We have worked at promoting our health, through eating and sleeping well, practising regular exercise, meditation and prayer, and observing basic health promotion, such as having our food delivered, washing hands, staying at home and observing recommendations as to social distancing” (M, Male aged 70).

Ninth Theme: Prayer

Prayer included meditation, HeartMath and general spiritual and/or religious orientations. Five participants specifically mentioned coping through spiritual connection by listening to their priest online.



“I rest in the knowledge that ultimately God is in control and will have the final say. To this end our priest’s podcasts and other Christian literature posted by our many congregants have been very uplifting especially in sometimes inevitable ‘dark’ moments” (A, Male aged 74).

“I have practiced yoga and a couple of HeartMath meditation and prayer sessions a day” (F, Female aged 68).

“The experience of the pandemic has resulted in my spiritual journey being deepened. I am so grateful for our priest’s services and prayer sessions. Realizing the importance of prayer” (H, Female aged 85).

Tenth Theme: Care

This theme included sincere human concern for unemployed, starving, struggling, poor, lonely and ill people. Four participants shared specific experience of being mindful of the poor who are far more vulnerable as a result of their lack of basic facilities such as water, food etc.

“One is intensely mindful of the millions of people in our land who do not have our modern amenities to keep clean and hygienic, as well as the lack of food for the hungry, already suffering from the weak economy, brought about in no small part by a greedy and corrupt government and public sector (with a few exceptions)” (A, Male aged 74).

“However we constantly express ultimate gratitude as to how well off we are comparatively, as so many people are suffering terribly, without food, shelter and other basic physiological and safety needs. We heard of one Gogo, Zulu for grandmother, feeding her grandchildren with maize complemented by sand to fill up empty stomachs” (M, Male aged 70).

“I am extremely anxious about our poor and unemployed population, I can’t imagine how awful life must be for them, I have little trust in our government to alleviate their situation significantly” (O, Male aged 63).

Discussion

In his seminal 2007 work, *Being and Time*, Heidegger (2008) attempted to uncover the fundamental structures of human existence. Two recent works have given attention to such human, existential/experiential time, or temporality as distinct from, physical chronological time (Gruber, Montemayer & Block, 2020; Zhao, 2020). Essentially, this meaning of time enables, and is enabled by, human existential meaning in life. NVivo analysis of participants’ collective experiential and coping responses indicated that the most frequently used word “time” occurred 55 times, nearly twice as often as the next most frequent word, “lockdown” which occurred 32 times respectively. Participants experiences resonated more deeply with

what may be considered human existential/experiential time, as distinct from physical time references, e.g., FaceTime, break-time and device time. Although time and lockdown were essentially given or imposed themes, like the other themes they included coping orientations or opportunities for participants as well.

Existential and humanistic phenomenology emphasise the pathos of human existence. We become people through human relationships. In Zulu culture this is expressed as *umuntu umuntu ngabantu*. We also dwell in a feeling world in sympathy and empathy with others. This became so apparent in participants experiencing the COVID-19 Lockdown as a difficult, anxious and uncertain time; with strong negative emotions as fear and frustration, as well as various positive and renewing emotions used to care and cope, such as love and peace. Traditional Zulu cultural views of COVID-19 include a time of pollution (*umnyama*), contagion (*umkhondo omubi*), and practicing abstinence (*ukuzila*). The Anti-Apartheid rallying slogan “an injury to one is an injury to all” also aptly describes the present, international, health context. Participant K expressed the sentiment with reference to the popular phrase being “in the same boat” resonating with Poet G. K. Chesterton’s 1910 phrases “upon a stormy sea” and “owing each other a terrible and tragic loyalty”.

Clearly this emotional time related directly to the particular theme of staying at home during the Lockdown. All participants experienced adjustment issues related to the South African COVID-19 Lockdown. Thirteen expressed strong negative feelings such as shock, anxiety, panic, fear and frustration; with women reporting more negative emotion than men. These findings are similar to the global study of Plomeka et al., (2020) as well as the Spanish study of Sanguino et al., (2020). Although older people seemed to have coped generally well, some also indicated their perceived vulnerability, as would be expected from a fairly elderly sample with seven having passed usual retirement age. Others simply experienced the lockdown as inconvenient, whilst yet others took time to catch up on neglected tasks and to-do-lists. Appropriate to their particular South African, human, social, spiritual and community orientation, this elderly group also seemed very aware how many people were struggling with unemployment, loneliness and health, as well as how others who were at work, were putting their lives and families at risk, which put the lockdown in further perspective. Younger people below the median of 63.5 years reported more negative emotion than the older group. This is particularly understandable in relation to juggling work and family time, especially when working from within their home environments.

While the study may have given some participants the opportunity to examine their consciousness and experience, with special reference to coping, their concern with less fortunate persons indicated clear directions for further research and action into the present COVID-19 pandemic, as well as future pandemics with the goal of optimising global collaboration, illness prevention and health promotion.



Conclusion

In relation to the COVID-19 pandemic, a convenience sample of sixteen South African people reported ten overlapping, experiential, coping themes of: time, lockdown, work, family, friends, activities, technology, health, prayer and care. The relative affluence of the sample is reflected in the rank ordering of the themes. Thankful for retirement, work and affluence, the majority had time to communicate with family and friends, exercise and cope through religion, prayer, meditation and the use of technology. Further investigations and intervention are clearly needed amongst less affluent groups in South Africa and other countries in Africa and other continents. Although South Africa and Egypt seem to have the most infections and deaths at present, these figures seem certain to increase both in these countries and elsewhere.

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