

The Pandemic Plan of the Czech Republic and Pandemic Learning

Bohumila Baštecká

DOI: 10.32725/cetv.2022.005

Abstract:

The Pandemic Plan of the Czech Republic is a crisis management tool for the pandemic area. The article reflects the Pandemic Plan of the Czech Republic in its 'soft' emphasis from the point of view of psychosocial crisis assistance and cooperation. It recommends: strengthening the skills of strategic variability, (media) communication, and cooperation with different stakeholders in achieving a lasting vision; the ethics of balancing; network style crisis management; and field services and volunteering, including strengthening the (church) voice against human rights violations and for a mood of gratitude. All this should be done with the hope of coexistence strengthened by the civic virtues of resilience, mutuality, and preparedness and based on pandemic learning.

Keywords: Pandemic Plan of the Czech Republic, the ethics of balancing, civic virtues, participation, normalisation

Introduction

Pandemics characterized by rapid disease spread into all parts of the world and a rapid rise in morbidity and mortality have been credibly documented since the 16th century, appearing at intervals of 10 to 50 years. In view of the genetic instability of the influenza virus and its animal reservoir, pandemics must be taken as a fact that society must face. The precise timing, severity and impact of the next influenza pandemic remain great unknowns. Timely planning and preparedness are thus utterly essential in order to limit the impact and consequences of a global pandemic on society.¹

The traditional autumn trans-disciplinary conference at the Protestant Theological Faculty of Charles University was called *Svoboda a společenství za nouzového stavu* (Freedom and Community during emergency state). It took place on 20th November 2020, i.e., during the emergency state. The name of the conference was brought about by the first wave of the Covid-19 pandemic in spring 2020. In the autumn we wanted to reflect on what we had experienced in the spring: student work, exclusion of people who fell ill, narrowing of attention to Covid, new

1 Ministerstvo zdravotnictví ČR [Ministry of Health of the Czech Republic], 'Pandemický plán České republiky' ['Pandemic Plan of the Czech Republic']. Last update: 11th July 2020; accessed 1st December 2020 and later: 3. <https://www.mzcr.cz/pandemicky-plan-ceske-republiky/>.

procedures in education, limiting of human and civil rights. We asked: What to do to rebuild the neighbourhood? What about freedom, fear, protection, solidarity, risk? What do we want to keep and what do we want to leave? How to balance personal freedom with community commitments? The spring 2020 questions are still valid after one year. The decisions made at the conference are equally valid: not to forget other events and happenings; to hear each other, although our attitudes and experiences are different; think and act civically and act even in crisis situations; advocate for and participating in rights.

At the conference, we necessarily came up with the topic of ethics in an emergency state. The same topic is mentioned in the Pandemic Plan of the Czech Republic. The present panellists (politically active people) did not know about the existence of the Pandemic Plan of the Czech Republic. I said the proud sentence: 'Our students know it!' Of course, they may not know it. However, as citizens, they should know that plans are a tool for preparedness. Plans come to life as threats come. They provide guidelines that need to be fine-tuned with respect to specific needs in a particular situation, protected values, and the state of strengths and resources.

In this article, we will examine the Pandemic Plan of the Czech Republic in terms of preparedness, that is, what we have learned (for the next time). I will base it on the principles of psychosocial crisis help and cooperation, and I will use autoethnographic reflection for research.

Autoethnography (as a qualitative methodology in general) changes the experienced structure of scientific works. The research becomes a story that the author presents in the form of a journey. He invites the reader on this journey, and they, together, meet events and milestones, bearers of meaning. The author stops by them and examines them, puts them into a well-known theory, asks new questions. His path, including the path of his associations, is not entirely predictable at first. The author discovers the data and especially the context of the process of writing and self-examination, in which the traditional division of genres into science and fiction disappears.² The resulting data are therefore an inspiration; they are evaluated mainly in the dialogue. At the same time, this way of working recognises that none of us can cover all current scientific knowledge on a given topic. We choose. Personal reflection should help us to see the reasons for the choice. Scientific honesty should lead us to the recognition of the sources we select from.

The first chapter of this article therefore presents my preconceptions and context of the work. In terms of psychosocial crisis help and cooperation, I want to focus on pandemic learning. Learning depends on memory. Therefore, I will define the memory which I use and the areas of learning on which I focus autoethnographically. I will explain autoethnography.

In the second chapter, I will describe how the Pandemic Plan of the Czech Republic understands communication and how it corresponds to the planning of assistance in the field of psychosocial crisis assistance and cooperation. Due to the scope of the article, I do not compare how the Pandemic Plan of the Czech Republic understands cooperation, even though it seems to be, linguistically, the best approach. I start from communication with the knowledge that communication requires cooperation: bees and ants have had to learn to communicate in order to cooperate. It is similar with people.

Through the third to fifth chapters I present the results of the work.

2 The scientific process then is not direct (linear), but it becomes variable (fluid); it is like 'being sent into the woods without a compass'. Cf. Sarah Wall, 'An Autoethnography on Learning About Autoethnography', *International Journal of Qualitative Methods* 5, 2 (2006): 151, <https://doi.org/10.1177/160940690600500205>.

Wall quotes Ellis from the author duo Carolyn Ellis and Arthur P. Bochner. These classics of autoethnography and their chapter 'Autoethnography, Personal Narrative, Reflexivity: Researcher as Subject' in *The Handbook of Qualitative Research* from the year 2000 are mentioned by Adam Wiesner, author of the award-winning publication *Jediná jistota je změna. Autoetnografie na transgender téma* (Bratislava: Ústav etnológie SAV within the edition Etnologické štúdie + VEDA, Vydavateľstvo Slovenskej akadémie vied, 2017).

The third chapter draws attention to the lack of a communicated and shared vision as a basic cultural and political obstacle for interpersonal, interdisciplinary, intergenerational, etc. cooperation. The vision is based on values; it is an expression of accepted ethics. The Pandemic Plan of the Czech Republic contains an ethical part, which evokes the appearance of a certain detachment from the rest of the text. It seems as if the state's human rights ethic did not meet the pandemic reality (or pandemic realities): human rights violations and abuses of power in the name of protecting each other had been almost unnoticed for many months.

The fourth chapter approaches the assumption that the form of reality is co-created by media communication. Based on the reflection upon this area, I was able to realise that media standards in the field of psychosocial crisis assistance and cooperation have become obsolete. The changing functions of the media call for a critical reflection, a sense of perspective. The pandemic exposed media helplessness and a lack of shared vision, as if the media were just copying social events and emphasising its demoralising part.

In the fifth chapter, I briefly mention the areas where pandemic learning and verification of the Pandemic Plan of the Czech Republic in the field of communication and cooperation is still underway. Civil society, expressed, for example, through volunteering and partnership communication with state systems, is a source of hope for me.

The final chapter offers a summary of the main ideas of the article and their corresponding challenges for practice.

1. Definition of Psychosocial Crisis Help and Cooperation, Type of Memory and Areas of Learning (= Context of Work, Goals, and Chosen Methods)

Since 1997, I have been dealing with disasters in the field and academically from a gradually developing civic and community position. Since 2000, I have been cooperating as a founding member with the Psychosocial Intervention Team of the Czech Republic.³ The PIT CR is the largest source of experience and opinions for the founding of psychosocial crisis assistance and cooperation⁴ presented as an interdisciplinary discipline for disaster management and its impacts, networking perception of the world and practical field interconnection of resources and people, especially in the 'bottom-up' direction. In 2005 we published the first textbook.⁵ In 2010, together with psychologists of the General Directorate of the Fire and Rescue Service and other people, we created the Standards of Psychosocial Crisis Assistance and Cooperation.⁶ In them, we emphasised that people have been helping each other since time immemorial and that helping helps – especially to helpers. The original idea was that standards would focus only on information. The common need to share information after disasters for all affected groups seemed undoubtedly significant. Today, I would only slightly expand the idea of the pillars of psychosocial crisis cooperation:

³ Cf. <http://pitcr.cz/>.

⁴ We recognise 'help' as an act of the stronger towards the weaker, that is, in a 'top-down' direction. It happens in situations where it is necessary to estimate the needs of the victim relatively quickly (e.g., when unconscious or disoriented). In other situations, including first psychological aid, we believe that co-operation comes into play. It occurs in situations where both sides are equally strong or weak, and have their own specific strengths and vulnerabilities. Their meeting is a partnership and is based on a dynamic understanding of the person in his situation. It is therefore necessary to understand the situation and the needs arising from it, to which the (affected) person somehow responds in the spirit of his values and according to his strengths and resources. For more details see: Bohumila Baštecká, 'Dynamické porozumění člověku v dané situaci' in *Klinická psychologie*, ed. Bohumila Baštecká, Jan Mach et al. (Praha: Portál, 2015), 426–441.

⁵ Bohumila Baštecká et al., *Terénní krizová práce. Psychosociální intervenční týmy* (Praha: Grada, 2005).

⁶ *Standardy psychosociální krizové pomoci a spolupráce zaměřené na průběh a výsledek* (Praha: MV – Generální ředitelství Hasičského záchranného sboru ČR, 2010).

it is information, recognition, rituals (ceremonies). These are all communication procedures that enable good cooperation and coexistence of people and groups whose diverse interests are exposed due to a disaster and highlighted in steps.

Psychosocial crisis assistance and cooperation is further developing as an interdisciplinary field that emphasises preparedness, resilience, and shared commitment in the context of the socio-ecological⁷ and spiritual paradigm. We supplement horizontal socio-ecological emphases with an emphasis on the spiritual vertical of forces, which are always more powerful in disasters than isolated human will. We merge these paradigms into the relationship triangle of the double commandment of love. This means that in a situation of unhappiness and its effects, we pay attention to the individual and his relationships with other people in families or communities and his relationship with the space where some people place God, the next world, or hope. Similarly, we pay attention to the community and its relationship to the individual and God (or the space which takes his place). We also examine how God's relationship to the individual and fellowship manifests itself in adversity. In the field of health, we agree that health is seen 'as a resource for everyday life, not the objective of living' and that 'the fundamental conditions and resources for health are peace, shelter, education, food, income, a stable ecosystem, sustainable resources, social justice and equity'.⁸ We realise that justice and equality between people is, on the one hand, created by daily coexistence,⁹ and, on the other hand, remains an unfulfillable dream at the earthly level. The way to (perceive¹⁰) equality and justice for us is the participation of people in the management of our own affairs. We consider participation to be one of the criteria for success in the practice of psychosocial crisis assistance and cooperation, which is essentially field and community-based. By participating, we also measure readiness, resilience, and shared involvement.

Readiness means being able to assess reality, to be aware of unwanted and inevitable changes. Preparedness complements prevention, which seeks to ensure that unwanted changes do not occur, threats do not materialise. Countermeasures are a tool of prevention.¹¹ The main tool of preparedness are plans that anticipate that a situation will arise and address what to do in that case. Resilience as the ability of a system to absorb adverse changes, and to recover after them,¹² does not make sense without the opposite of general vulnerability as the basic situation of us, humans. Resilience sometimes means a simple decision to resist vulnerability.¹³ We define shared involvement as a phenomenon in which different interest groups with different types of power (for example, direct victims, their loved ones, but also firefighters, media workers, etc.) show the same needs.¹⁴ We use shared involvement as one of the forms of participation in the creation of

7 The socio-ecological paradigm belongs to the family of system theories about the lived world, on which, for example, humanitarian and social work, community psychology, and others are based. It views the interdependence of people in a shared space and diversity as a condition for stability. It has emerged, among other things, in the context of public health care since the 1970s. A socio-ecological approach to health has been expressed, for example, in the Ottawa Charter of Health Promotion in 1986.

8 'Ottawa charter for health promotion', First International Conference on Health Promotion, Ottawa, 21 November 1986, World Health Organization, https://www.euro.who.int/__data/assets/pdf_file/0004/129532/Ottawa_Charter.pdf.

9 Coexistence in the sense of conviviality, as understood by Ivan Illich, cf., for example, Bohumila Baštecká, 'Na hranicích mlha aneb, nová my' rozmanitých', *Studie a texty Evangelické teologické fakulty* 32, no. 1–2 (2019): 83–114.

10 My basic profession is psychology. I therefore consider reality to be a mediated result of the perception of reality.

11 Due to the scale of this work, I cannot deal with the two-way context of risk perception and preventive measures. However, it is important to know that announced preventive measures can reduce risk perception and therefore preparedness.

12 For this classic definition by Crawford S. Holling from 1973 and further developments in the understanding of resilience, cf., for example, Michael Bollig, 'Resilience – Analytical Tool, Bridging Concept or Development Goal? Anthropological Perspectives on the Use of a Border Object', *Zeitschrift für Ethnologie* 139 (2014): 273; Henrik Thorén, 'Resilience as a Unifying Concept', *International Studies in the Philosophy of Science* 28, no. 3 (2014): 317, <https://doi-org.10.1080/02698595.2014.953343>.

13 On 4th March 2020, PIT CR issued a statement on the situation around Covid-19 in the Czech Republic called *Můžeme se rozhodnout*. One of its decisions was: We may decide not to succumb to fear.

14 From the position of psychology and neuroscience, shared impact can be explained as a manifestation of our 'social brain' with

community interventions in order to support preparedness and resilience.

The goal of psychosocial crisis help and cooperation is to restore order and everyday life (children go to school and adults to work, people and communities can take care of themselves and manage their daily routine); inclusion, mutuality, participation (solidarity is linked to universal vulnerability, to the suffering of ancestors and descendants, to the relationship with God, including his silence; the event gradually becomes part of a common history, affected people and communities are perceived as part of the whole and their experience is important for the whole; gratitude appears); strengthening the courage to live (people and communities have confidence in themselves and the future and feel ready for any further adversity); willingness to help others (the experience of an adverse event and a deepened perception of solidarity motivates the affected people and communities to help other people and communities in a comparable situation). The encryption grid¹⁵ of standards of psychosocial crisis assistance and cooperation offers a quick assessment of the adequacy and effectiveness of assistance. The results of psychosocial crisis aid and cooperation are 'attached' to individual statements, which contain the desired goals in a condensed form:

- Mutuality, inclusion, participation (including spiritual participation). Statement: we are not alone and in this. Aid evaluation: Has our intervention raised the people's and communities' belief that we are not alone in this, whether in the 'past-future' or 'now and here' dimension in relation to people or to God? If so, thanks to what? If not, why not?
- Restoration of order and everyday life, cooperation. Statement: together we can do it. Aid evaluation: Did our intervention in people and communities create a desire to cooperate, an impression that we can do it together? If so, thanks to what? If not, why not?
- Strengthening courage to live, resilience and preparedness. Statement: we will prepare for the next time. Assistance evaluation: Has our intervention in people and communities encouraged self-confidence, the belief that they are ready for another similar event, that they can prepare for it, that they will manage it next time? If so, thanks to what? If not, why not?
- Willingness to help others, personal responsibility. Statement: each of us can help the other. Assistance evaluation: Has our intervention in specific people and communities encouraged the belief that they can help others, that it is enough to make a decision? If so, thanks to what? If not, why not?

The basic procedure of psychosocial crisis cooperation is documentation. Standards of psychosocial assistance and cooperation focus twice on it. Direct assistance standard 4.10 *Dokumentování události, pomáhání a vývoje* (Event documentation, assistance, and development) sets out the objectives – 'We need to set up procedures to support the rights and interests of those affected, the development and well-being of the assistants, the quality of assistance and cooperation (individually, within the team and between teams). It is necessary to maintain event memory, to capture positive change, to evaluate assistance and cooperation.'¹⁶ Coordination Standard 5.3 *Dokumentování pomoci a spolupráce a vytváření informačních a osvětových materiálů* (Documenting assistance and

mechanisms of identification, emotional contagion, empathy, compassion. In situations of mass disasters, these mechanisms relate to a strong common task of managing the effects of disasters. I do not deal with the topic in this article anymore. For more information on the social brain, cf., for example, Adriana Galván, 'The Social Brain', in *The Neuroscience of Adolescence*, ed. Adriana Galván (Cambridge: Cambridge University Press, 2017), 179–213, DOI: <https://doi-org.ezproxy.is.cuni.cz/10.1017/9781316106143>.

15 This designation was used by the coordinator of PIT CR, Pastor Karel Šimr. It was widely accepted.

16 *Standardy psychosociální pomoci a spolupráce*, 23–24.

cooperation, and creating information and educational materials) aims to 'encourage coordinators / team leaders / community workers to appreciate the importance of documenting and creating information and educational materials as part of the assistance framework and assistance tool and to ensure documentation and information and education materials in the spirit of the principles and values of psychosocial crisis assistance and cooperation. In this way they should create a basis for learning, development, cooperation, and change.'¹⁷

This article is also built on documentation: with PIT, we have been involved with the pandemic from the beginning by creating leaflets, collecting stories from the pandemic called *Jsme lidi, ne čísla* (*We Are People, Not Numbers*), and by organising a conference.¹⁸ During extraordinary events, I routinely and continuously write field notes¹⁹ and follow the social mood expressed by the abbreviations of newspaper headlines. I am 66 years old and my perception is influenced by many years of experience with misfortunes and their management. In the field of societal crises, I experienced the hope and disillusionment of 1968 and the following years, the onset of wild capitalism in 1989 going hand in hand with the awakening of the joyful energy of civil society and the building of services. After a long time, the pandemic once again offered me a charming mix of the unknown and the familiar, destructive and reviving, including the notion of new beginnings. In this context and with these contents of memory in the article, I emphasise exactly what I always emphasise.

The chosen method is autoethnographic reflection. Autoethnography can be simply defined as a subset of qualitative methodologies combining scientific research procedures with appropriate personal experiences and beliefs in order to capture a cultural phenomenon in a comprehensible and credible way. It is assumed that the researcher is emotionally, morally, and intellectually involved in the matter. He then, from his perspective, captures a topic that is often filled with emotions and can be viewed from many angles.²⁰ There are a number of autoethnographic approaches. Together, they assume that these are some audience – readers, listeners, viewers – and their response. It is an interview with oneself given to others. The origin of autoethnography can be attributed to the feminist questioning of the objectifying (ethnographic) world of the white man. Autoethnography emphasises an interest in embodied²¹ and relational perspectives, lived experience,²² the science of flesh and blood. It requires reflexivity, contextuality, and intersubjectivity,

17 *Standardy psychosociální pomoci a spolupráce*, 29–31.

18 An assisting person during the fulfilment of standard 4.10, also: 'through notes and their evaluation, acquires and maintains an overview of events, including the capture of the changing situation of those affected; keeps a diary where, in addition to events and activities, he captures their reflections; maintains a written memory of the event, captures (positive) changes; encourages the collection and telling of stories.'

19 I have been using writing for reflection, stabilisation, critical distinction of context, gaining insight and inspiration since the beginning of my career. Field notes take the form of a diary, where I capture anything that interests me or that I need to deal with. The first diary note concerning the pandemic is from 13th February 2020, when a report was published in the media: *Na výletní lodi v Japonsku se dál šíří nový koronavirus. Nakazilo se dalších 44 lidí* (http://www.irozhlas.cz/zpravy-svet/koronaviurs-japonsko-diamon-princess-vyletni-lod-olympiada-cina_2002130637_ako). My task was to comment on this in the evening television news from the position of a psychologist. Then I wrote down: 'I'm going home taking the last express train, sprinkled with carrot from a vegetable baguette, which I bought to support the steward. Catching the train was the main cure for the TV experience. What was I supposed to do when the foreign editor was making impressions – sensational – aggravating. Luckily, TV is just like a washing machine. So don't go there anymore! But still – no matter how I think, I wouldn't change the way I reacted. They must distinguish, not create sensations from the position of people who are safe and just observe the situation of others. And I have to learn to say that I am incompatible with TV – I am compatible with a debate, not with individual expertise.'

20 Robin Hogan, 'Autoethnography', In *Salem Press Encyclopedia* (2018): 1, database Research Starters, 10th September 2021, <https://www.coursehero.com/file/107280346/autoethnography-salem-presspdf/>,

21 Our experiences are *embodied* – connected to one's own body in a way we can hardly imagine. I do not discuss the current theory of embodiment in more detail in the article.

22 Cf. Sara L. Crawley, 'Autoethnography as Feminist Self-Interview', in *The Sage Handbook of Interview Research: The Complexity of the Craft*, ed. Jaber F. Gubrium, James A. Holstein, Amir B. Marvasti, Karyn D. McKinney (Thousand Oaks: Sage, 2012): 143–159, <https://dx.doi.org/10.4135/9781452218403.n10>.

thus it leads to positionality. It is the same as in case of (probably) all current communication methods aimed at equal coexistence of the diverse. My position in writing this article combines long-term work experience with the new civic experience of a person affected, similarly to fellow citizens, by the Covid-19 pandemic. Field notes reveal parts of the attitude continuum in which I get into in crises.²³

The aim of the article used for practice is to compare the Pandemic Plan of the Czech Republic with the lived reality in 'soft' areas which are typical for psychosocial crisis cooperation. The aim is then to balance this and other crisis plans and direct them towards people's participation, readiness, and resilience. The process goal, which is fulfilled by writing itself, is documenting: capturing part of the pandemic memory, because memory is a condition for any learning. The interim results of the comparison relate to the 'soft' emphases of the Pandemic Plan of the Czech Republic (that is, communication and, consequently, cooperation), ethics, and the vision of the Pandemic Plan of the Czech Republic, media strategy, and the civic virtue of volunteering.

2. The Concept of Communication (and Cooperation) in the Pandemic Plan of the Czech Republic in Comparison with the Coordinates for Assistance Proposals

According to psychosocial crisis cooperation, assistance or other procedures used for crisis management are designed (planned) so that they are culturally and situationally appropriate. 'Culturally' means taking into account values, strengths and resources, and 'situationally' means noting the needs and strategies that the situation will evoke. Disasters and their effects evoke a series of situations that vary over time in different people and groups of people. This means that needs are changing, along with ways to respond adequately to them. Guidelines for estimating needs therefore lie in the characteristics of the event, the time after the event, and the groups affected.

2.1 A Pandemic Differs from Other Emergencies and Crisis Situations Mainly in its Creeping Course over Time; It Is Therefore Necessary To Take into Account the Affected Groups of People Which Change in a Long-Term Manner.

A pandemic lasting over a year²⁴ is, in terms of psychosocial crisis cooperation, an 'event' and a 'situation' if we use a term from the field of security terminology. We then define a crisis situation as 'an emergency under the Integrated Rescue System Act, a critical infrastructure disruption or other danger in which a state of danger, a state of emergency, or a state of threat to the state is declared'.²⁵ The repeated extension of a state of emergency during a pandemic draws attention to

23 'The world has been covered with masks. They are a symbol of the time (as was the sea lion Gaston during the flood season). I am taking the train through XY with some of things which I picked up at work. These things belong to my colleague XY, and I am delivering them to him. He is afraid of death, anxious. He hid like almost everyone. At the same time, this is a chance: if it does not fall into a dictatorship, then it will not be possible to avoid partnerships – in schools, in health care – and to communicate openly. [...] Since the announcement of the quarantine on Monday 16th, there have been 14-hour shifts for me. This means forward bends for me in front of the computer, networks networks networks. Endorphinised by the enthusiasm of pandemic solidarity, my hesitation was gone. I went on a refreshments trip to the cemetery. It was twenty degrees, and I sat in the back seat of the car and began writing a flyer. It worked (as I found out later). Driven by the enthusiasm of networking, helpfulness, dissolving borders, volunteering, etc., I just rejoiced. [...] The body lasted until Friday.' (Selection from notes from Tuesday 24th March 2020, summary of the previous week.)

24 'A pandemic is a large-scale epidemic which affects all continents. It is therefore the occurrence of a disease with a high incidence in a large area (continent) over a period of time. According to the WHO definition, an influenza pandemic is characterised by the spread of a pandemic virus in communities in at least 2 countries in one WHO region and in at least one country in another WHO region.' (Pandemic Plan of the Czech Republic, 2.)

25 Act No. 240/2000 Coll., on crisis management and on amendments to certain acts, § 2, letter b). Act No. 139/2000 Coll., on the integrated

the fact that an event and a situation become a story. A pandemic is defined by the inconspicuous or abrupt increase in numbers of infected; its 'new waves' are assumed. The suddenness of 'ordinary' emergencies is rather indicated by its effects.

The usual circular phasing²⁶ of emergency and crisis responses changes in a pandemic. It is as if the circle is kept only in case of individual destinies and it is stretched to the shape of an arch with a steep rise and gradual fading if understood socially.

The Pandemic Plan of the Czech Republic, which is to prepare the state's response to the pandemic, follows the phases according to the World Health Organisation. The phases correspond to the spread of the virus to individual countries and regions. Chronological phases are added to these quantitative phases: the post-peak phase, possible new wave, and the post-pandemic phase (when the pandemic ends). In events with a more distinct demarcation, the immediate response to a catastrophe is the rescue or the heroic phase, and sometimes it is called 'miracles'. After the first hours or days, this phase is alternated by 'honeymoons' characterised by the gathering of people and solidarity, cooperation in renewal. Exhaustion then brings a period of disillusionment of varying length, while efforts are made to mitigate the long-term consequences of the disaster. The last part of the catastrophic cycle means preparedness for the next catastrophe: new beginnings become a norm and memory preserves what we have learned in the context of the catastrophe.

In the pandemic arc, this mechanism is partly true and partly not. This is probably also because, unlike other events, the groups of victims are constantly changing and activating. The event seemed to happen and end at the same time again and again. It occurs, for example, for people whose loved one dies as a result of Covid or has permanent health consequences. It distances itself from people who have had a coronavirus infection with a mild course, which is in the Czech environment at first sometimes out of the reach and interest of the public health care system.²⁷ It remains present as a threat to other people. According to the reactions of the environment, their nature and the situation, they assess the degree of risk – not only from the point of view of state-protected values of life and health, but also from the point of view of their own values, that is, to keep a job, or to maintain children's education, to maintain wider family ties, or to maintain a summer apartment in Spain and other warm regions? To 'keep' it or 'change' it?

The lack of sensitivity to the dynamics of the impact is probably one of the reasons for the shameful communication strategy of the state and the media. Instead of understanding the changing groups affected and their interests, there was an effort to maintain a heroic phase throughout the year. Instead of equal cooperation with the victims, the dictates of area protection occurred. Even during ordinary emergencies, it turns out that there is a confusion (especially in case of

rescue system and on the amendment of certain acts, defines in § 2, letter b) an emergency as 'adverse effects of man-made forces and phenomena, natural influences, as well as accidents which endanger life, health, property or the environment and require rescue and destruction work'.

26 Cf. Bohumila Baštecká, 'Fázování katastrof a udržitelný rozvoj', in *Psychosociální krizová spolupráce*, ed. Bohumila Baštecká et al. (Praha: Grada, 2013), 117–119.

27 At the conference on 20th November 2020, we asked why the public health system had not recovered since the spring wave, why cooperation with public health offices was failing, why there was unrest and chaos in the Czech Republic in this area, while in the comparatively large and comparatively affected Netherlands there was peace and reality. 'Because we have been liquidating the public health care system here for thirty years, while the Netherlands is one of the world's leading companies in this area', responded health sociologist Hana Janečková. Public health is defined, for example, in Act No. 258/2000 Coll., on the protection of public health. It turns out that the term 'public health' as 'the health of the population and its groups' is often unknown to people, including professionals. They forgot about the 'Czechoslovak medical miracle' from the times of socialism, which precisely lay in the preventive 'care for the health of the people'. That was also the name of the very well-constructed law from 1966. They narrow their attention to the state of health services (see Act No. 372/2011 Coll., on health services and the conditions for their provision). The image of exhausted heroes of acute health care from the pandemic era seems to copy the popularity of television series made in the emergency room environment. Action heroes are probably more attractive than epidemiologists and hygienists. Nevertheless, The Pandemic Plan of the Czech Republic is designed for the public health threats.

social workers) about the idea of target groups. Be careful! 'Affected groups' are not 'target groups', arranged on the basis of 'top-down' ideas of several typical characteristics. Affected groups correspond more to interest groups in the sense of *stakeholders*²⁸ (that is, groups and individuals with a stake and interest in things) with diverse perspectives and interests that change over time and with the assumption of active participation in the events or potential of participation, including possible self-definition. Crisis management is not just a matter of the integrated rescue system.

Governments, the private sector, civil society actors including grassroots organizations, local associations and interest groups, as well as individual citizens, all have a stake in how we deal with the future in light of individual disasters [...] Calls for stakeholder inclusion and engagement are at the heart of international agreements and frameworks on disaster management.²⁹

The variability of the impact and the duration of the pandemic situation implies a constant demand for flexibility, including the assessment of changing and recurring needs, and for a flexible long-term communication strategy with a clear vision based on communicated values. The vision helps to maintain direction and stability in the variability of the impact and in the changing sub-goals and strategies.

We can say that the Pandemic Plan of the Czech Republic hardly takes into account the experience of people in various affected groups and over time. In terms of psychosocial crisis cooperation and its coordinates for aid proposals, this may be one of the causes of the unhappy state of 'soft' crisis management during a pandemic. This causes the loss of sensitivity to development and ongoing contact with the changing needs of people, their values, resources, strengths, strategies to manage the situation, with their ability to contribute and engage.

2.2 Soft stresses in a pandemic: what we live if we live in a pandemic

According to the Pandemic Plan of the Czech Republic, planning and coordination, monitoring of the situation and evaluation, limiting the spread of the disease, ensuring the continuity of the health care system, and communication and cooperation between sectors and sections of society are monitored in all phases of the pandemic.³⁰ Communication and cooperation are among the 'soft' manifestations and forces of life of social animals. It is 'software' with the power of a *shem* embedded in the Golem's forehead. Without communication and cooperation, the best hardware or other parts of the Pandemic Plan of the Czech Republic lack meaning. Among the expected 'soft' effects of the spread of the pandemic virus is the fact that 'national preparedness is under the scrutiny of the public, government agencies and the media'.³¹ In addition to showing a lack of

28 R. Edward Freeman's *stakeholders theory* emphasises the interconnectedness of the social environment, the active role of the public and its participation, corporate social responsibility, cooperation, and reciprocity. The concept of interest groups is considered a theory of organisational ethics. The main purpose of the organisation is not the narrowly understood generation of profit, but the creation of values for all interest groups. In addition to the fact that stakeholders are the 'voters' of an organisation (they decide whether to vote for it), their interests have value in themselves. Obstacles along the way, along with side conflicts, provide an opportunity for organisations to improve their creation of values. Cf., for example, Jose Luis Retolaza, Ricardo Aguado, Leire Alcaniz, 'Stakeholder Theory Through the Lenses of Catholic Social Thought', *Journal of Business Ethics* 157, no. 4 (2019): 969–980, <https://doi.org/10.1007/s10551-018-3963-6>. It is interesting for our environment that the law on social services was created with references to the concept and ethics of *stakeholders*.

29 Kristoffer Albris, Kristian Cedervall Laut, Emmanuel Raju, 'Strengthening Governance for Disaster Prevention: The Enhancing Risk Management Capabilities Guidelines', *International Journal of Disaster Risk Reduction* 47 (2020): 5, <https://doi.org/10.1016/j.ijdrr.2020.101647>.

30 The Pandemic Plan of the Czech Republic on p. 13 states 'intersectoral cooperation'. The term is usually translated into Czech by the word 'meziúdvětová'. This translation loses the fact that it is an interpersonal, intergroup (thus also intergenerational), interdisciplinary and interdepartmental cooperation. Thus, it is more an intersection between all (stakeholders) than limited 'industries'.

31 'Pandemic Plan of the Czech Republic', 3.

understanding of intersectoral cooperation and stakeholder involvement, this sentence also highlights the importance of communication. Public scrutiny follows the communication of national preparedness rather than preparedness itself.

As stated at the beginning, considering the interconnected pair of 'communication and cooperation', due to the scale of the article, I will focus only on communication. All goals of the Pandemic Plan of the Czech Republic have their 'soft' (i.e., communication) parts: ensuring treatment of patients and treatment of complications, ensuring burial of the dead, monitoring compliance with recommended measures, reducing the impact of influenza pandemics on society and communities, minimising economic losses, and ensuring information for health professionals and public. So what does the communication strategy look like according to the Pandemic Plan of the Czech Republic? I especially cite places that, in my view, point to a problem and an opportunity to solve it. In the period between the epidemics, the state plans, among other things: initiation of 'communication activities to communicate with the media and the professional and lay public regarding the potential and real risk of pandemic influenza'; 'Setting out the principles and objectives of a communication strategy'; 'Appointment of a communication working group (from phase 3 onwards, activation of the mentioned working group)'; 'Building long-term cooperation with the media at the national and regional levels in order to ensure that they are informed about pandemic issues'; 'Developing an effective dialogue with the public with the aim of ensuring it is sufficiently informed on the issue of the pandemic'; 'Creating special channels of information for hard to reach groups of the population.'; 'Conducting exercises to test communication skills at least once a year or more frequently if necessary'; 'Updating communication strategies in accordance with feedback from the public and partner organisations – information collection and analysis'; Exchange of 'information on the effectiveness of recommended measures at international [...] and national levels';³² and 'Promoting consistent and accurate disease and epidemiological reporting'.³³

In the next phase, the procedures are complemented by: 'holding frequent and preannounced briefings via the popular media - web, TV, radio as well as press conferences, with the aim of containing panic and dispelling rumors';³⁴ and 'Exchange of public messages and educational materials [...]'.³⁵ With the oncoming epidemic, the emphasis will be on the 'active development of communication activities in order to communicate with the media and the professional and lay public about the potential and real risk of pandemic influenza; activation of communication mechanisms to ensure the widest possible dissemination of information'³⁶ and 'ensuring procedures for all speakers to provide consistent information', including regular communication 'by established mechanisms: What we know and do not know about the virus, the epidemiological situation, the use and effectiveness of the measures and the likely next steps; the importance of restricting the non-essential movement of persons to and from the designated area where containment measures³⁷ and relevant screening procedures are applied at points of transit; the importance of compliance³⁸ with the recommended measures to prevent the further spread of the disease; how to access medicines, basic services and supplies in the containment area'.³⁹ In

32 All listed citations can be found in: 'Pandemic Plan of the Czech Republic', 21.

33 'Pandemic Plan of the Czech Republic', 22.

34 'Pandemic Plan of the Czech Republic', 27.

35 'Pandemic Plan of the Czech Republic', 28.

36 'Pandemic Plan of the Czech Republic', 32.

37 Containment in this use means preventing the transmission of the virus or rather slowing its spread. The containment ceases to make sense in a situation of community spread. 'Pandemic Plan of the Czech Republic', 14.

38 Compliance means submitting to (medical) recommendations and regulations.

39 All these quotes in: 'Pandemic Plan of the Czech Republic', 34.

a developed epidemic (i.e., in a pandemic emergency), ‘developing an effective dialogue with the public’ still has the same goal: ‘to provide information [to the public] about pandemic issues.’⁴⁰ New tools will appear to do this: ‘Regular updates and public information on what is known and what is unknown about pandemic disease [...]’;⁴¹ ‘Providing regular information targeted at societal issues, such as travel alerts, border closures, etc.’⁴² And then during the pandemic: ‘Regular updating of information for the public about medical facilities with emergency medical care and about the possibilities of self-treatment.’⁴³

I no longer list activities to support cooperation between the society sections.

2.3 What Does the List of Communication Procedures from the Pandemic Plan of the Czech Republic Show?

- A change to the epidemiological view, and a lack of prototypical insight or connection with the vision. The main goal is an ‘awareness of pandemic issues’ such as ‘what we know and do not know about the virus’ with the subgoal of ‘preventing panic and dispelling rumours’.
- The language chosen reflects the difficulties of cooperation. The plan was probably not prepared in a team, in a transdisciplinary way.⁴⁴ In some places, it is characterised by epidemiological slang, and in some places it shows signs of misunderstanding. ‘Hard to reach groups of the population’ are likely to be identified as citizens with possibly worse access to information. The goal of ‘preventing panic’ seems to neglect current knowledge about mass behaviour.
- In terms of psychosocial crisis cooperation, the determination to shape a ‘communication strategy based on feedback from the public and partner organisations’ is promising.
- The general weakness of contingency plans is repeated. The plans are for preparation for the next event in a period of rest. This corresponds to reality only if we have not yet forgotten it and the relevant crisis memory is working. The preparation (for the flood) really takes place in a quiet time only for people with a fresh (for example, ‘flood’) memory. Human learning has its laws. Journalists and politicians learn just like other people. This means, among other things, that without a pandemic memory, preparatory meetings at a time when ‘nothing is happening’ are doomed to disinterest.⁴⁵ Memory can be created or maintained through exercises.

40 ‘Pandemic Plan of the Czech Republic’, 39.

41 ‘Pandemic Plan of the Czech Republic’, 39.

42 ‘Pandemic Plan of the Czech Republic’, 40.

43 ‘Pandemic Plan of the Czech Republic’, 47.

When the inconspicuously coming pandemic became an event, it evoked widespread black-and-white impressions: fear (of death), the idea of the need for hospitalisation, the idea of risk groups, etc. Guidance on differentiation, including, for example, self-medication recommendations, was delayed. From my point of view, self-treatment is also delayed in the Pandemic Plan of the Czech Republic. At the same time, the SARS 2002-3 epidemic reminded us, among other things, that hospitals with their high risk of nosocomial infections are not and will never be a safe place. Cf. Henry Masur, Ezekiel Emanuel and H. Clifford Lane, ‘Těžký akutní respirační syndrom. Poskytování péče vzdor nejistotě’, *JAMA – Česká verze časopisu Americké lékařské společnosti* 11, no. 7-8 [2003]: 541-543.

44 Transdisciplinarity is a claim for the cooperation of diverse stakeholders in solving a common specific problem. It is based on the premise of equality. An expert in communication with the ‘general public’ is therefore a representative of the general public. A media analyst or other expert will have his turn to speak after him. This leads, among other things, to the choice of a common intelligible language with the exclusion of industry slang. Such a language is also required, in the context of universal design, by *Úmluvou o právech osob se zdravotním postižením*, no. 10/2010 Sbírky mezinárodních smluv [Convention on the Rights of Persons with Disabilities]. Cf., ‘Metodický postup pro tvorbu srozumitelných sdělení ve veřejné správě a pro tvorbu zjednodušených textů pro osoby vyžadující zvláštní přístup’, Ministerstvo vnitra České republiky 2018, https://www.vlada.cz/assets/ppov/vvozp/dokumenty/ETR-Metodika_srozumitelneho_a_zjednoduseneho_vyjadrovani_ve_veřejne_sprave_1_.pdf

The transdisciplinary approach can be seen as one of the tools of intersectoral cooperation. The plan seems to draw from international sources primarily through translation, not understanding.

45 One of the common abbreviations is the belief in our minds that problems that arise suddenly and have short deadlines are more important than long-term and inconspicuous problems.

The Pandemic Plan of the Czech Republic calls for ‘conducting exercises to test communication capabilities at least once per year or more often if necessary’. Have any of us experienced a population protection exercise that taught journalists, politicians, and other citizens strategic cooperation in the long-term management of a pandemic?

These points reflect, among other things, the tension between the ‘military’ type of crisis management (command and control) and the ‘network’ type of management (communicate and coordinate).⁴⁶ The command and control type presupposes an integral command power which is entrusted to an individual or a team. One-way communication is used on the assumption that the information from the commander will increase the awareness of the recipients of the information. The communicate and coordinate type corresponds to the network world.⁴⁷ Power is entrusted to a team that can think and act procedurally in a universal design – that is, with thinking about all society areas or interest groups. In the Pandemic Plan of the Czech Republic, the requirement to shape a ‘communication strategy depending on feedback from the public and partner organisations’ corresponds to this style. Communication is not one-way; it is assumed that ‘recipients’ respond to information as people with their own experience influenced, among other things, by their involvement in networks, that is, by the experience of others. The information from the management is then more a seed sown in the information field than an accepted form without change. Therefore, it is necessary to constantly ask how the counterpart receives and understands the information, and also what he thinks (in the environment where he lives and in the situation in which he is). The communicate and coordinate type corresponds to the starting points of psychosocial crisis cooperation, which strives for the sustainable coexistence of diverse individuals and groups.⁴⁸ It seems that network management, ‘communicate and coordinate’, can also be an appropriate style of crisis management for inconspicuous and long-term pandemics. Crisis situations with legal restrictions on civil rights do not change that either.

I consider the emphasis on network – i.e., participatory – management to be one of the most important lessons from the pandemic. Let us try to discuss it with the knowledge that any communication serves a purpose, is guided by some values, and creates some type of relationship.

3. Balancing Ethics Compared to Lack of Vision and Human Rights Violations

An influenza pandemic, similarly to any emergency situation in the field of public health, requires

46 In English, they are the 4 Cs: *Command, Control, Communicate, Coordinate*. All four axes are useful in the managerial context. I take into account a certain difference in our context because: ‘It is tempting to apply the principles of military leadership to civilian healthcare, particularly in times of crises, such as during the recent pandemic. However there are a number of challenges to this application, most notably the differing culture between the two organisations.’ Samuel D. Hutchings et al., ‘Command, control and communication (C3) during the COVID-19 pandemic; adapting a military framework to crisis response in a tertiary UK critical care centre’, *Journal of the Intensive Care Society* 22 (11. 1. 2021): 7, <https://doi.org/10.1177%2F1751143720982191>.

47 Cf. Alfonso Gonzalez-Herrero, Suzanne Smith, ‘Crisis Communications. Management 2.0: Organizational Principles to Manage Crisis in an Online World’, *Organization Development Journal* 28, no. 1 (2010): 97–105.

48 Cf., for example, standard 5.5 *Podpora spolupráce a připravenosti v regionu s popisem*: ‘Event collaboration is supported by pre-event collaboration (in this sense, “after” event means another “before”). Interpersonal and organisational ties and the determination of individuals and communities to cooperate in helping are proactively strengthened before and during the event. Community, information, and coordination networks are created, updated, and revitalised. Cooperation between individual interest groups is encouraged and proposals for assistance and cooperation are created and verified. Readiness and cooperation are verified through joint meetings and their evaluation, appreciation, and criticism. Crisis plans of all types [...] are also created with an emphasis on the psychosocial and spiritual needs of all affected groups.’ (*Standardy psychosociální pomoci a spolupráce zaměřené na průběh a výsledek*, 32–33.)

making decisions that imply a balancing act between potential conflicts of interest involving individuals on the one hand and the community on the other. The persons responsible for this process may use ethical principles as tools for evaluating and balancing this conflict between interests and values. The ethical approach does not provide a previously set procedure. Rather, it applies principles such as equality, benefit/efficacy, freedom, reciprocity and solidarity. These principles may be used as the basic framework for evaluating and balancing the range of interests in order to achieve the set goal (such as the protection of human rights and the specific needs of vulnerable and minority groups).⁴⁹

The Pandemic Plan of the Czech Republic offers European values enshrined in the Charter of Fundamental Rights and Freedoms.⁵⁰ There is an enchanting tension between freedom and solidarity. Freedom is promoted by equality of people in dignity and rights; solidarity is supported by reciprocity and mutuality. We should take the view of freedom and solidarity throughout the pandemic. It is actually a 'cryptographic grid' of the Pandemic Plan of the Czech Republic, which can be used to assess the interests of individual interest groups and balance them in achieving the goals, knowing that the values of the process and the values of the result should not differ.

The Pandemic Plan of the Czech Republic in the field of ethics offers the vision of managing a pandemic through maintaining or strengthening human freedom and interpersonal solidarity. However, the main goals of the Pandemic Plan of the Czech Republic⁵¹ focus more on the tension between 'life and livelihood',⁵² that is, between the values of health and material well-being. The implementation parts of the plan in the individual phases of the pandemic are shifting in the area of communication to the side of limited epidemiological goals – to prevent or slow down the spread of the virus. Solidarity and freedom are the values of the framework. For example, the financing of our health care is based on the principle of solidarity. The individuality and autonomy of an individual presupposes his personal responsibility for how he manages, how he takes care of the people around him and the environment, and how he accepts the procedures of the state. Let us keep freedom and equality, solidarity and mutuality as a cipher grid, by which we can evaluate a year with coronavirus. Imagine what a communication strategy would look like if 'building long-term cooperation with the media at national and regional level' and 'developing an effective dialogue with the public' took place with a clear societal vision, that is, to encourage citizens' personal responsibility, solidarity and mutuality. How this could work knowing that we are all people and citizens – from journalists to homeless people to politicians, and that trust between individual social circles is probably impossible without value integrity.⁵³

49 'Pandemic Plan of the Czech Republic', 6.

50 Constitutional Act No. 2/1993 Coll. as amended by Constitutional Act No. 162/1998 Coll., Charter of Fundamental Rights and Freedoms, Article 1 'People are free and equal in dignity and rights.'; Article 9: '(1) No one shall be subjected to forced labour or services. (2) The provisions of paragraph 1 do not apply to: c) service required by law in the event of natural disasters, accidents, or other dangers that endanger lives, health, or significant property, d) conduct imposed by law to protect life, health, or rights of others.'

51 'Pandemic Plan of the Czech Republic', 5.

52 I adopt the designation used by the British journalist Richard Quest.

53 The model Diana Kobzanová called for solidarity after a year of the pandemic (10th March 2021) in a speech devoted to her colleagues from show-business who filled social networks with pictures from their southern seaside residences: 'But I do not understand why you have to share 350 posts and stories every day. After a bottle of wine, you report about how you wash your asses in the sea, eat shrimp, share photos without a mask with hashtags: freedom, fuck covid, fuck government, we are in it with you, we will not give up, it will be better and similar nonsense. Is it really necessary to show everyone that you have what it takes? Is it really necessary to make it harder for those who wade around in trouble?' (<https://www.seznam.cz/komentare/10766761-kobzanova-to-dovolenkarum-v-pandemii-reklatezky-od-plic-mejte-ohled-na-ty-kterym-umiraji-blizci>).

3.1 'Communication Strategies Depending on Feedback from the Public and Partner Organisations' in Practice

There is always enough feedback from the public, because social beings can do nothing but constantly evaluate the response from the environment. During the spring honeymoon, when the solidary sewing of masks became a national adhesive, an inclusive language prevailed spontaneously. The slogan 'We are in this together' prevailed throughout society. On 20th March 2020, we published⁵⁴ an electronic leaflet called *How to live together and with the virus: Let's gain time and keep a good mind*. Many people and institutions, including Charles University, signed up for it, and municipalities also sent it to their citizens. It was based on the findings of psychosocial crisis cooperation: inclusive language, an emphasis on 'we', mutuality, equality and diversity, the presumption of resilience and the position of preparedness. The individual chapters were named: *Let's not look for the culprits, we will not find them – let's gain time and collective immunity; Let us not underestimate and overestimate the threat; Let us protect civil liberties even in a crisis situation; Let's help each other: it works in many ways; Let's save strengths for long run; Let's keep the view from above, gratitude⁵⁵ and humour*. The names and the leaflet are still valid today. However, the leaflet phase as an expression of energy for the rescue and honeymoon phase has passed. If the leaflet were to remain useful, the crisis would have to last only six weeks, or the chapters would have to be filled with current 'How to do it' guidelines for the rest of the year.

Spontaneously, there was plenty of humour in the spring wave on the networks and among the people, and there was also gratitude and a desire to help. However, Seznam.cz Internet news chose the path of numbers and threats. The main reports concerned Covid-19 and were worded negatively. On the right, next to the reports, there were red, green and black numbers of the sick, the healed, and the dead. In response, we began collecting stories *Jsmě lidi, ne čísla* (*We are people, not numbers*).⁵⁶ I choose from the contributions of women over the age of 65, that is, from a part of the vulnerable group:

31st March 2020: 'We certainly must not lose each other. It occurred to me that we, the older generation, should be the first not to be afraid of hugging each other. We have to set an example in something.' (70 years)

6th April 2020: 'When the government set a preferred shopping time for my category and changed it by the next day, our Penny [supermarket] was crowded. The change did not reach some people, so we all met there.' (75 years)

19th May 2020: 'Otherwise, I was still at home, running the household. My husband watched and is watching what is happening. Our officials were unable to agree at the beginning and the news changed several times a day. My husband kept feeding me with the information which he had learned, even though I forbade him to do so. I was actually under house arrest and I had nothing to do but run a household. [...] I missed the community of close people, I suffered from insomnia. My whole body hurt from sitting, I lacked movement in nature. My daily prayer helped, especially

54 'We' usually means people from the Psychosocial Intervention Team of the Czech Republic. In addition to PIT, many other people participated in this leaflet, from co-authorship to peer-reviews.

55 At the end of 2020, I was surprised at how many people wished for a better time in the following year. This was the wish of the mayor of the city where I live. It reduced his credibility for me. I expect a balance, including tones of gratitude, from politicians – that is, from church leaders, for example.

56 The first stories appeared spontaneously; we wrote to each other via personal and working networks about our current lives. For the next collection, we chose the snowball method. We included the contributions in several categories: 'We learn together at school and at home' (since 19th March 2020), 'At our hospital: we continue to serve' (since 26th March 2020), 'I'm not even thirty-five (even though I sometimes feel that way)' (since 4th April 2020), 'In our village, in our city' (since 6th April 2020).

if filled with the request to stop the coronavirus pandemic. Then a beautiful day came when my daughter 'kidnapped' me by car and took me to her family in the countryside. Before that, of course, I made sure my husband had something to eat. He endured this house arrest and still endures it much better. [...] Thanks to my stay in nature (where I didn't have to wear a muzzle), longer walks in the surrounding forests, and also thanks to my grandchildren, I realised what I had been missing all this time. I returned home strengthened and also with more courage.' (77 years)

In the second (autumn) wave, exhaustion from the crisis is already manifesting itself⁵⁷ and normalisation is beginning. In the sense used here, normalisation means that deviations from the standard become the new standard. The process of normalisation allows a person to live more easily even in difficult conditions, and it is considered a way to manage them.⁵⁸ The risk is that evil will become the norm. On the other hand, a good change can be introduced through the normalisation process as well. In the autumn of 2020, mutuality and solidarity had to be purposefully promoted, for example, by reminding us that each of us can help the other – simply because depression arises, among other things, from helplessness, from the idea that the task is too big and that my forces are too small. Therefore, it is necessary to constantly strengthen the awareness that the solution is to take a bite that I can handle, and that the others are taking their manageable bites as well.⁵⁹ There was no spontaneous desire to write stories. One of them started with the words 'Why don't I want to write? Or better yet: When there is hope, I can write!'

25th October 2020: 'On Friday, our son was unexpectedly operated on. It was his gallbladder. It was acute, unplanned, I was afraid of how crazy it might look in the hospital.⁶⁰ I was surprised by the amazing calm atmosphere that was there, the peaceful pleasant behaviour of the paramedics and the overall very calm atmosphere. It is essential to face the events calmly, matter-of-factly, with the hope that life must be managed, including in a pandemic. It is admirable that health professionals are not confused, paralysed by terror and devoted to their work, even though they are more at risk than others.' (67 years)

30th October 2020: 'We are actually (at our age, retired, with facilities) in the best situation. What bothers me the most is that I am used to the other, non-contact, not safe world so much that it does not bother me anymore. What bothers me the most or I do not like is the fact that nothing is the same and it certainly will not be in the future. I feel a big hole, a wasteland (?), in my heart, soul, head.' (71 years)

A communication strategy aimed at personal responsibility and interpersonal solidarity would have been extremely important in autumn 2020. There has been plenty of information from the public: the waning of jokes, secret parties, and other manifestations of 'disobedience' or non-compliance, the fatigue caused by the crisis, the search for ways of normalisation and the

57 The crisis is an opportunity for learning. The sensitive window of change lasts briefly, within four to six weeks of the event. 'Persons cannot remain indefinitely in a state of psychological turmoil and survive.' Albert R. Roberts, 'An Overview of Crisis Theory and Crisis Intervention', in *Crisis Intervention Handbook. Assessment, Treatment, and Research*, ed. Albert R. Roberts (Oxford: Oxford University Press, 2000), 10.

58 For the long-term course of events, for example: Steve Thill, Claude Houssemand, Anne Pignault, 'Unemployment Normalization: Its Effect on Mental Health During Various Stages of Unemployment', *Psychological Reports* 122, no. 5 (2019): 1600–1617, <https://doi.org/10.1177%2F0033294118794410>.

59 Marek Havrda, the leader of the Medici na ulici association (Medics on the street), also spoke at the conference on 20th November 2020. Their medicine is in the field; they visit homeless people in their environment. Among other things, Marek Havrda said that because of his own mental health, he takes care of what is around him and what he can influence on his own. I realised that in addition to this strategy, I also needed to know about the actions of others (e.g., Medici na ulici). It gives me hope.

60 The result of the ongoing media strategy of intimidation was reflected, for example, in the fact that people were not sure about health care even at a time when the system had already normalised under the new conditions, i.e., since about May 2020.

search for positive role models. The slogan 'Do not trust politicians, trust health professionals' in itself captures the second-wave communication: resistance to one group of people balanced by hope placed in another group of people; the whole is lost, the self-motivating slogan 'We are in it together' is weakening, and a new one is not formulated for the whole.

3.2 Violations of Human Rights and Social Evil: a Blanket Categorization of People

I consider the blanket 'protection' of older people to be the value agony of our state power. At the very beginning of the pandemic, the state categorised people with "one size fits all" approach to those over the age of 65. They were strongly recommended to stay at home, separated from others in shops, receiving masks (because they all were poor) and state began to consider what age is decisive for letting people die.⁶¹ Visits in homes for elderly were collectively banned and everybody over age of 65 received five thousand Czech crowns (nearly 200 British pounds) at the end of the year.

So far, I am surprised by two things: how it is possible to invent something like this and how it is possible to keep it in practice for so long. I do not even understand the real helplessness I experienced around this rhetoric and its implications. From the beginning, many of us knew it was wrong. Gradually, it became worse – people remained imprisoned in homes for the elderly and in aftercare departments or hospitals for the long-term sick. We joined forces, sent each other examples of bad and good practice,⁶² strengthened the need to do something about it, and yet we remained paralysed, without joint action.⁶³ I explain this by saying that many of us felt like 'hostages' of these facilities and the people in them were real hostages. At the same time, these institutions strengthened their maternalistic totalitarian power over time. An example of nursing power, including those they have power over, can be an article from 26th November 2020 with the title: 'From next week, families could start visiting relatives again in social facilities. At first, only on condition that they submit a negative test for coronavirus'.⁶⁴ I use several quotes:

'For each visit, it would be good to have a worker who would make sure that the family behaves safely, but we would need a lot of people.' This is the idea of XX [...] who is also thinking about the solution. Among other things, this person takes care of the home for the elderly in XX. The directors who have been addressed by Seznam Zprávy [Seznam News] clearly want to allow their clients to have visit, but they all agreed on one thing – that visitors must be extremely careful. XX summarises: 'We need to be very careful, we no longer want our clients to become infected. At the same time, we have to allow those visits, as people are suffering terribly.' [...] However, according to XY from Asociace poskytovatelů sociálních služeb [the Association of Social Service Providers], there will be no problem and providers will continue with regulated visits. However, he also points out that seniors cannot be prevented from leaving the facility after an emergency state.

How is it possible to violate human rights to such an extent and justify it by protection? Homes (!) for the elderly often proceeded as if the staff were completely different from other visitors to

61 The topic of disaster medicine and triage (including articles on global Covid-19 health care restrictions for citizens over the age of 75) appeared in March 2020. It re-emerged in the autumn. However, they were also accompanied by a warning that a participatory approach can also be applied to patients over 75 years of age during their dying.

62 At the conference on 20th November 2020, it seemed that good practice was only abroad: in Norway, for example, visitors to health and social care facilities could enter when they had a negative test. They made it out of their saliva directly in the facility and the test result was known within 15 minutes.

On 24th November 2020, a colleague from the geriatric services, Jindřiška Kotřlová, wrote: 'Recently, Domov na Palatě has been "opened". There have been visits in a room designated for these purposes. It must be booked in advance, for half an hour, an on-site test is a condition. One needs a mask, nothing special otherwise. [...] So it works.'

63 This necessarily offers a comparison with the helpless and surprised non-opposition to Nazism.

64 Available at: <https://www.seznamzpravy.cz/clanek/rodiny-vyhlizeji-pondeli-s-podminkou-za-150-kc-se-asi-pujde-za-babickou-131175>.

the facility. According to this, one cannot be infected by the staff, while a family member, even if he has just been negatively tested or wears a protective suit, can infect someone. This distortion of thought has been accepted by the other side as well. An infection from a professional can be seen as a failure of his professionalism.⁶⁵ The top-down pandemic protection measures thus, through isolation, actually created vulnerable groups, as the Pandemic Plan of the Czech Republic speaks of them. In addition, it has divided society and damaged freedom and solidarity. The general perception of the groups and the sharpening of the interface between them revived my memories of the beginnings of the AIDS pandemic in the 1980s. The rhetoric of at-risk groups, which provoked attacks on homosexuals, soon turned into an awareness of risky behaviour.

In the spring of 2020 I was 65. The state's actions towards my age category activated my personal and civic responsibility: in April 2020 I joined the hospital in the Covid department as a field crisis worker, returned received masks to the registry office of the Office of the Government of the Czech Republic, and five thousand Czech crowns 'for Christmas' I returned to the account of the Office through the initiative *Senioři státu* (Seniors to the State).⁶⁶ Restrictions on the freedoms of the people of my age in homes for the elderly have resulted in my decision never to enter a residential facility in a "client" position.. This means focusing on strengthening field services and a person-centred approach in the future.

Violations of the human rights of seniors were the second issue during the Covid pandemic, in which I hoped for a strong and decisive word from the churches.

4. Media Communication Compared to Media Functions and (Surviving) Standards: a Call for Critical Reflection

It is also necessary, over the long-term, to work on a communication campaign which, in accordance with WHO and European Commission (EC) recommendations, will also involve individuals, families and communities and will increase awareness about the pandemic and the importance of each individual's behavior in such situations.⁶⁷

We live in a time when it is more socially acceptable to fart out loud than to cough quietly.⁶⁸

'Communication' is one of the chapters that go through the entire Pandemic Plan of the Czech Republic and summarises the partial goals in the development of the pandemic. However, this chapter does not seem to appreciate the lesson 'You cannot avoid communication!', which applies to all social beings. Communication is everything: slogans, jokes, one's own behaviour and the behaviour of politicians, etc. There is no cooperation without communication. A subset of communication is media communication. The relationship between the media and society (i.e., the function of the media) manifests itself in three major areas: the extent to which the media can combat or strengthen the dominant flows of power and influence in society (social control); how the media 'interpret and cope with the chosen or given mission, especially in the context

65 'My mother died when she contracted a virus from a worker in a nursing home. I was angry at the worker and at the management of the home. How can this happen in a facility that was supposed to protect my mother?' (55-year-old woman, 25th November 2020).

66 I would like to present this part of the justification of the petition: 'We did not ask for these five thousand crowns and we receive them against our will. This money expresses disrespect for our will, values and personal decisions. We refuse this act of "giving presents" from someone else's pockets. We reject generalised thinking and rhetoric aimed at individual population groups. This money divides society, unfavourably and widely labels (stigmatises) older people and undermines intergenerational solidarity. They get the next generation into debt.' Available at: <https://e-petice.cz/petitions/seniori-statu-pet-tisic-vracime-nesouhlasime-s-plytvanim-.html>.

67 'Pandemic Plan of the Czech Republic', 3.

68 A joke from the time of the onset of the spring wave.

of changing technology and the struggle for resources and support; and the importance of the media for the recipient in gaining social experience (socialisation).⁶⁹

Psychosocial crisis assistance and cooperation is dependent on the media and cooperation with them. For example, in the event of mass disasters, the media can decide where the public aid is focused. The importance of cooperation with the media is also reflected in the duplication of standards of psychosocial crisis assistance and cooperation. Three areas appear twice in the standards – for direct assistance and coordination of cooperation: teamwork, documentation, and media. At the time of the standard setting (2006-2010), journalists had a reputation for being ‘hyenas’ in the context of a disaster. We have purposefully changed this image.⁷⁰ The experience of the pandemic shows how, in the long run, the media copy and maintain the dominant discourse (i.e., intimidation, devaluation, non-cooperation): the lack of a value-shared vision has resulted in what I would call ‘sceptical chatter’. There were plenty of incentives to fight political power: four health ministers, waiting for the epidemiologist-saviour, who would eventually deny his own order by a secret visit to a restaurant (21st October 2020), and an unused field hospital worth a hundred million Czech crowns (over three million British pounds).⁷¹ Political scandals also brought a regular dose of internet jokes. It would not be surprising if the classic media function of the ‘watchdog of democracy’ moved to the democratic environment of the Internet. Due to this, I find the question of how the media interpreted their own mission during the pandemic and what their social function was (drawing attention to the ‘importance of the behaviour of each individual’, that is, shaping civic responsibility) even more important. I will use several newspaper headlines to get to the point. Psychosocial crisis cooperation teaches us to notice newspaper headlines, because, by the unconscious activation of associations and procedures of rapid intuitive thinking,⁷² they create the impression of reality and social mood. I will give an example of headlines of articles published in one day⁷³ during the autumn wave:

Epidemie nabírá na síle. Skoro 8 000 nakažených, stouplo i číslo R. [The epidemic is gaining momentum. Almost 8,000 infected, the number R has also risen.]

Finta z Krkonoš. Hoteliér zve hosty na vánoční lyžování, ale jako služební cestu. [A trick from the Krkonoše Mountains. A hotelier invites guests for Christmas skiing, but he presents it as a business trip.]

Německo vstupuje do lockdownu s přísnými pravidly. Počet obětí je rekordní. [Germany enters the lockdown with strict rules. The number of victims is a record.]

Peníze došly a další nečekáme. Svědectví od hostinských. [The money has run out and we do not

69 Denis McQuail, *Úvod do masové komunikace* (Praha: Portál, 1999), 91–92 and further.

70 Objectives of standard 4.9 *Informování a osvěta; komunikace s veřejností a médii* [Information and education; communication with the public and the media] are: ‘to establish procedures that ensure, with regard to human dignity and the pursuit of inclusion, that honest and truthful information is provided (using various ways as much as possible) about the disaster and its management options in order to strengthen the leadership of those affected and their courage to face such situation or another unfavourable fate; to set mutually beneficial rules in contact with the media; to set rules for the handling of information and education materials’. Objectives of standard 5.4 *Spolupráce a komunikace s médii* [Cooperation and communication with the media] adds others: ‘to set up a good position for coordinators and team leaders so they would be able to work with the media on the one hand and to promote the rights and interests of those directly affected on the other; to encourage a specific kind of cooperation with media professionals which would also help them to cope with the consequences of emergencies; to support proactive and ongoing cooperation with the media in promoting disaster preparedness and its consequences’ (*Standardy psychosociální pomoci a spolupráce* [Standards of Psychosocial Assistance and Cooperation], 22 and 31).

71 Cf. iDNES.cz, ČTK; Nvyužitá polní nemocnice stála 100 milionů Kč, vyčísli náklady Bulovka, iDNES 1. 2. 2021, https://www.idnes.cz/zpravy/domaci/covid-koronavirus-polni-nemocnice-letnany-bulovka.A210201_184503_domaci_baky.

72 For an understanding of thought shortcuts and distortions, cf., for example: Alena Plháková, *Obecná psychologie* (Praha: Academia, 2007), 271f.; Ariel Rosenfeld, Sarit Kraus, ‘Predicting Human Decision-Making’, in *Predicting Human Decision-Making: From Prediction to Action*, ed. Ariel Rosenfeld, Sarit Kraus (San Rafael, CA: Morgan & Claypool, 2018), 21–60, <https://doi.org/10.2200/S00820ED1V01Y201712AIM036>; Daniel Kahneman, ‘Heuristics and Biases’, in *Scientists Making a Difference*, ed. Robert J. Sternberg, Susan T. Fiske, Donald J. Foss (New York: Cambridge University Press, 2016), 173.

73 Accessed on 16th December 2020 at <https://www.seznam.cz>.

expect more. A testimony from pub owners.]

Německo může očkovat už několik dní po schválení vakcíny. A Česko? [Germany can vaccinate in several days after the vaccine is approved. And Czechia?]

Going around the rules and threats brings hope and humour.⁷⁴ There is a lack of critical thinking. Among the articles on Seznam.cz on 16th December 2020 was also an article entitled 'Proč zemřelo tolik lidí v domovech důchodců? Švédsko přiznalo chyby v boji s pandemií' ['Why did so many people die in retirement homes? Sweden has admitted mistakes in the fight against the pandemic.']. It states:

The Swedish authorities have adopted few restrictions on closing schools, restaurants, or other businesses, but have also called on people to reduce contacts and comply with hygiene measures. When the government released the tactic against Covid-19 in the spring, it mostly linked it to the protection of the elderly. But then deaths began to increase, especially in retirement homes.⁷⁵

The article is probably taken from the Reuters agency. In it, the Swedish government seeks to reflect without blaming anyone other than itself. The downloaded article ends with an overview of numbers: 'Sweden, with a population of 10 million, has reported 341,029 cases of coronavirus since the start of the pandemic. 7,667 infected people died, which is significantly more than in neighbouring Norway, Denmark or Finland.' In conclusion, the author added a comparison with the Czech Republic: 'In the Czech Republic, which has a comparable population to Sweden, over 9,700 infected people have died since the spring.' My head automatically reaches for totalitarian memory and the best practice of reading between the lines. I still do not understand. How can an article with the title *Švédsko přiznalo chyby* (Sweden admits mistakes) result in the statement that there are (considering a comparable number of inhabitants of the Czech Republic) a fifth more dead in our country? And this is happening in the strategy of restrictions and threats, without reflection and admitting of mistakes.⁷⁶

The prevailing and unchanging tone of intimidation and devaluation⁷⁷ along with a lack of critical thinking, were major parts of the problem with media strategy. Critical thinking means, among other things, understanding sources and statistics, that is, dealing with numbers. Every day, everyone could find out how the number of infected, sick, dead people had increased. Rarely one could see 'instructions for use' or text explaining 'how to understand these numbers' in these reports. For example, the more people were tested, the more infected people were documented; any increase can be compared only in comparable samples and in time series, etc. The public

74 For example, a headline from the news on www.seznam.cz from 10th December 2020: 'Striptýz ano, mše ne. Dva kalifornské kostely se kvůli vládním opatřením označily za strip kluby [Striptease Yes, Mass No. Two Californian Churches Redefined Themselves as Strip Clubs Due to Government Measures]'.

75 Novinky, ČTK, 'Švédsko přiznalo chyby v boji s pandemií', Novinky.cz, 16th December, 2020, <https://www.novinky.cz/clanek/zahranicni-evropa-proc-zemrelo-tolik-lidi-v-domovech-duchodcu-svedsko-resi-chyby-v-boji-s-pandemi-40345353>.

76 For me, the credibility of politicians, like other people, is largely determined by the skill of self-reflection. On 6th January 2021, an article with the title 'Hamáček: Dělal jsem vše, ale odpor byl velký' was published on Seznam.cz. The head of the Central Crisis Staff 'admits that although the government is trying to do what it can to fight coronavirus, the mood in society is deteriorating due to various measures'. Also, 'He recalled the heated debates in the House over the prolongation of the state of emergency and also over the behaviour of people who followed the measures in the spring, but not in the autumn.' (<https://www.novinky.cz/koronavirus/clanek/hamacek-delali-jsme-vse-ale-odpor-byl-velky-40346940>)

The Czech media offered a picture of a Czech politician who does not see his own actions and responsibilities, but rather blames others. What strategy did the two stakeholders (journalist and politician) pursue? What and why did they want to present information and to whom?

77 'Vláda kapitulovala. Nad pandemií prý zvítězí zdravý rozum [The Government Surrendered. Apparently Common Sense Will Prevail over the Pandemic]' announces the headline at a time when the government has tried to count on the personal responsibility of citizens. (15th December 2020, <https://www.seznamzpravy.cz/clanek/komentar-vlada-kapitulovala-nad-pandemi-40346940>).

understanding of statistics was not supported by the Czech media in any way.⁷⁸ To think critically or to reflect means to doubt and distinguish, to acknowledge uncertainty, and to deal with it creatively. For complex situations with many present and conflicting interests and poor shared memory, critical reflection should be considered a mandatory ‘package leaflet’ when trying to address these situations.

5. Volunteering as an Example of Civic Virtues, Personal Responsibility, and Solidarity

Civilian organizations and associations with close relations to communities may often increase awareness about the given issue, transmit the necessary information, rebut false and untrue information, provide necessary services and cooperate with the government during the crisis. [...] They may, for example, reinforce organizations in other sectors such as by providing support to family members of patients being cared for at home. [...] Individuals, especially those who have already recovered from pandemic influenza, may consider working as volunteers for organized groups helping other members of the community.⁷⁹

In the Pandemic Plan of the Czech Republic, in phases 1–3, one counts on the preparation in the area of intersectoral cooperation:

- deployment of students in the study programme of general medicine, starting in the 3rd year onwards, in nursing;
- measures in social services facilities and health and social services facilities;
- non-profit organisations aimed to help ensure the provision of health care and social services to the population;
- volunteers aimed at helping provide health care in inpatient facilities where patients will be hospitalised, etc.⁸⁰

In the autumn pandemic mood, I wrote to Ing. Richard Smejkal, Commander of the Central Crisis Team of the Czech Red Cross: ‘For a whole year, I have been frustrated with the media and government frustrating pandemic communication. When I learned from a colleague that the CRC was training volunteers in the basics of nursing for use in hospitals and social facilities, I rejoiced. It was really a light in the dark for me, something that gives hope. And this was also something that the Pandemic Plan of the Czech Republic wanted. [...] So: THANK YOU! – And at the same time, I ask why volunteering and the CRC are not all over the newspapers?’

I think that R. Smejkal answered in a similar mood, but he improved mine though: ‘It was very difficult to push the course through and it was quite hard in September. I had designed the course before the numbers started to deteriorate, so it was then even more difficult to convince them about it. But in the end it worked out and we are happy with everyone who signed up. And I am also glad that the idea about several benefits of the course (i.e., firstly, it does not necessarily benefit only health and social institutions, but also the public – individuals, families

78 On 14th October 2020, an adopted article appeared with the research findings of the Cambridge study: People who resist disinformation about coronavirus have a high level of mathematical literacy. Mathematical literacy is described as the ability to ‘digest and widely apply quantitative data’. In conclusion, we read that ‘more emphasis needs to be placed on the development of critical thinking and the ability to navigate oneself in the world of digital media’. Cf. <https://www.novinky.cz/zahranicni/clanek/dezinformacim-o-koronaviru-veri-lide-s-nizkou-matematickou-gramotnosti-zjistili-vedci-40339221>.

79 ‘Pandemic Plan of the Czech Republic’, 6.

80 Ibid., 22–23. In the stage of a developed epidemic, we no longer find a mention of volunteering.

and communities, secondly, caring for our loved ones is more than a ‘moral imperative’) has not disappeared.⁸¹

6. Let's Ask and Learn; Let's Beat and Correct Later (Discussion and Conclusion)

The issue of pandemic preparedness is not the responsibility of a single department – it should be the responsibility of society as a whole!⁸²

If you want to learn, ask; if you want to correct, beat.⁸³

I have dealt with the soft emphases of the pandemic plan typical of psychosocial crisis cooperation. I have mainly focused on communication. The main output is a warning about the lack of an intersectorally shared vision that would give a unified direction to the long-term government and media communication strategy in the direction of European emphasis on human rights, freedom, and solidarity, and for cooperation with involved people and organisations: a vision that would emphasise equality, partnership, and civic responsibility. Each of us is a citizen who has a responsibility to protect himself in order to take care of himself and others.⁸⁴ Among the effects of the pandemic, I hope, will be the strengthening of civil society. Volunteers have reached hospitals, residential facilities have revealed their (power) limitations, and a new self-definition of the elderly is beginning to be asserted.⁸⁵

The pandemic, with its inclusive threat of disease and death and selective threat of poverty, is not over. General impact, that is, the multitude of interested groups and individuals, represents an opportunity. The Winston Churchill's and economists' slogan ‘Never let a good crisis go to waste’ applies also to other areas of social practice. It means, among other things, to reflect on pandemic learning and to face paradoxes in topics: the general impact loosening and sharpening the interface between social systems;⁸⁶ online literacy bringing together people of the same values and distancing social strata;⁸⁷ an ethics of balancing calling for critical thinking, media literacy,

81 On 9th January 2021, I asked R. Smejkal if I could use our email exchange. He agreed with publishing on condition that I put it into context, that is, ‘that it was our friendly correspondence, so the language is not academic’.

82 ‘Pandemic Plan of the Czech Republic’, 1.

83 Isidor Hirsch, *Rabínská moudrost. Dle Talmudu*, Malá Díla (Olomouc: Votobia, 1997), 66.

84 ‘Citizens very often forget that they have a shared responsibility for protecting the life and health of both themselves and their loved ones,’ in *Koncepce ochrany obyvatelstva do roku 2020 s výhledem do roku 2030* [The Conception of the Protection of Inhabitants up to 2020 with a View to 2030] (Praha: MV – Generální ředitelství Hasičského záchranného sboru ČR, 2013), 9.

85 In February 2021, I participated in the meeting of the working group called ‘Budoucnost EU v sociální a zdravotní oblasti’ [‘Future of the EU in the social and health area’]. The group works under the leadership of Vladimír Špidla and Karel Schwarz. The original stereotype ‘Europe is getting older, multimorbidity is increasing’ has changed into ‘the huge possibilities of a strong age group of active and healthy seniors must be used’ in the discussions.

86 In the honeymoon period of the spring wave of the pandemic, people quickly networked. Interpersonal networks responded more quickly, unambiguously, and consistently than state systems. The usual sharp interfaces between systems have been blurred in a pro-human way even in the state system: ‘Contact with people is a prerequisite for social work. In the office, its usefulness is often hindered by the bureaucratic nature of the process. On the one hand, the pandemic has led to the closure of the office, on the other hand it has improved contact with applicants for extraordinary immediate assistance related to COVID-19. Thanks to the relaxed rules created for this assistance, it has been almost pleasant for a long time to provide clear and comprehensible information to applicants. The crisis has partially removed the paper screen that sometimes obstructs the view: the office is also primarily about people’ (20th May 2020, social worker at the labour office).

87 For many people, it is easier to attend church services online, including the ‘meeting’ after them, than to show up in person. ‘Paradoxically, this extraordinary situation brings us a little closer to each other,’ remarked the curator of the Evangelical Church of Czech Brethren in Kolin after joint online services with a church in Poděbrady (10th January 2021). I have the same experience from a meeting of European psychologists. Colleagues who previously did not participate in European ‘meeting tourism’ meetings for financial reasons could join online. However, as soon as the subject of an online meeting is not a shared value, the online environment probably leads to distancing of different social classes (see the example of education).

and doubt, as well as a society-wide strategy of trust and mutuality; normalisation of the fear of touch⁸⁸ and also an opportunity to normalise the degrowth movement.⁸⁹ The pandemic and its effects represent huge sources of learning that can be used in the direction of the desired changes. For the field of psychosocial crisis assistance and cooperation, for example, it is shown that the media need to be more consistently perceived as stakeholders, and also that the goal of cooperation is indeed mutuality of one with the other, not inclusion of one by the other.

This learning can be used to strengthen preparedness. If we take into account the cyclical phasing of disasters, we are now (in June 2021) in the phase of mitigating the consequences of the disaster and creating preventive countermeasures. That is the period in which the SHIELD model⁹⁰ of crisis management places the involvement of interested people and groups (engaging stakeholders). The authors offer follow-up questions such as: 'Have you ensured that the mutual benefit of participating in networks, platforms and events is communicated to stakeholders?' In March 2021, I received a similar question in a summary form: 'How can fellow citizens who "sit behind the stove" or are not educated in critical thinking be engaged?' I answered using several points, which were based on the principles of psychosocial crisis assistance and cooperation, and adhering to the basic assumption of contemporary psychology, that is, that every person is interested (intrinsically motivated for action) – it is just that everyone is motivated by something else. Here are examples from top to bottom procedure:

- Do not assume that it is a homogeneous group or definable target groups with definable reactions and needs. Anticipate diversity and use it. Systematically communicate uncertainty, for example, use the lesser evil principle. Principle: Diversity is primarily a diversity of values (as well as strengths and resources and ways of coping with situationally activated needs).
- Use the sensitivity of topics and the sensitivity of times. An example is that it would be ideal to train volunteers in the first six weeks (i.e., at the time of masks sewing), because spontaneous solidarity can be counted on, or subsequently at the time of growing autumn scepticism (when an action like 'you will help yourself and your loved ones' would be an antidote to helplessness). Principle: Let's use spontaneous energy!
- Use everyday phenomena for targeted education. It means knowing what I want to learn and following it consistently every day. For example, published numbers of infected, dead, etc., should be used to learn statistics. Principle: Communicate the vision and use opportunities in a flexible way to achieve it.
- Use symbols and rituals to communicate values related to the vision. The pandemic created powerful symbols (mask and disposable protective suit) and action heroes. Now it is about symbolising (the heroes of patience, cooperation, humour, etc.) Principle: There are many

88 I am watching detective stories from the 1970s where clouds of cigarette smoke are covering the detectives. My eyes accepted the slogan 'It is normal not to smoke'. The same eyes are surprisingly watching the footage older than 2020 in which people hug each other in public so easily. My perception normalises social distance, even though I do not consciously want it. This is happening at a time when the helping professions are gradually embracing the paradigm of embodiment. The pandemic emphasis on distance re-sensitises perception – for example, the touch that accompanies working with a client within an organisational context. Cf. Lorraine Green, 'The Trouble with Touch? New Insights and Observations on Touch for Social Work and Social Care', *British Journal of Social Work* 47 (2017): 773, <https://doi.org/10.1093/bjsw/bcw071>.

89 On 7th January 2021, I asked the pastoral and social work students at ETF UK what good things the pandemic had taught them. The expressed emphasis on relationships was not at all surprising. One student offered 'restriction' as a benefit: he found out that reducing consumption was okay. He touched on the policy of degrowth (reduction) as one of the ways of sustainable development. However, a newspaper headline from 1st January 2021 mocks the emerging gain of restraint: 'Návrat do pravěku? V Česku bují výměnný obchod.' ['Back to prehistoric times? Barter trade is booming in the Czech Republic.'] At the same time, the content of the article describes one of the appraised reduction policy strategies.

90 Albris, Cedervall Lauta, Raju, 'Strengthening Governance for Disaster Prevention', 3.

opportunities for symbolising and ritualising the vision every day, for example, when choosing clothes.

- Document success. Principle: Success arises only by comparing with the previous state.

If I were to organise the individual principles into a book, it would be called *Implementing Desired Change*. Changes are also unwanted and inevitable. Disasters are disasters precisely because they represent sudden, unwanted change. The pandemic, on the other hand, brings unwanted change in a stealthy and long-term manner. This is perhaps its main insidiousness, because we have no sensitivity or memory for the stealthy events. We do not capture duration in memories as precisely as peak intensity. We do not remember if we suffered for a long time, for example. Memory will offer the experience of the greatest suffering and then its end.⁹¹ It may happen that we will remember the pandemic joyfully, because we will mainly remember the euphoria of the end. We forget that some emergencies and crisis situations can take a long time. It is the risk of forgetting that should motivate us to cooperate. Complex and ambiguous topics are usually answered by (intersectoral) cooperation, that is, cooperation across fields, generations, groups, with their full involvement at the same time. What is clear from my point of view is that cooperation is impossible without participation. I know clearly that I do not want to be the object of protection and the favours of someone who does not ask me. I would like to live and die in a networked world of cooperation and civic responsibility, including the dignity of risk,⁹² that is, in my natural environment. And I think that any future crisis plan of the Czech Republic could also help me in this. I would also like to help it. It will come as no surprise that this requires mutual communication as a condition of cooperation.

Thanks

I would like to thank the reviewers for important suggestions which helped me to improve the clarity and coherence of the text.

Contact:

PhDr. Bohumila Baštecká, Ph.D.

Charles University

Protestant Theological Faculty

Černá 9, 115 55 Praha 1

Bastecka@etf.cuni.cz

⁹¹ Daniel Kahneman, *Myšlení, rychlé a pomalé* (Brno: Jan Melvil, 2012), 406, 431.

⁹² 'Dignity of risk' is a concept recalled in the context of the Convention on the Rights of Persons with Disabilities. Cf., for example, Magenta B. Simmons, Piers M. Gooding, 'Spot the difference: shared decision-making and supported decision-making in mental health', *Irish Journal of Psychological Medicine* 34, no. 4 (2017): 281, <https://doi.org/10.1017/ipm.2017.59>.