American Journal of Health Promotion
1-3

DOI: 10.1177/0890117120924531
journals.sagepub.com/home/ahp
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Social Capital in the Response to COVID-19

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Abstract

Social capital provides a number of benefits during crisis scenarios, and high social capital communities respond more efficaciously than those with low social capital. With this in mind, we argue that the response to and recovery from the COVID-19 pandemic may be hampered in many American communities by deficiencies or disruptions in social capital brought about by physical distancing. Drawing on evidence from past crises, we recommend individuals, communities, and government institutions work to strengthen and expand social networks. A failure to do so will exact a toll in terms of human morbidity and mortality and exacerbate the current disaster.

Keywords

health policy, opportunity, strategies, community, specific, settings, social support, supportive, environments, culture change, COVID-19, health disparities

A robust body of evidence supports the importance of social capital in the crisis management process, in contexts ranging from natural disasters[1] to pandemics.[2,3] Networks of strong and weak ties benefit individuals and communities facing crisis scenarios, both in the short-term response phase and in the longer-term recovery process, and communities that possess high levels of social capital perform better in disaster scenarios than those that do not.[1,2,4] Given the importance of social capital in this context, we believe it is important to recognize that the response to and recovery from the COVID-19 pandemic may be hampered in many American communities by deficiencies or disruptions in social capital. Drawing on evidence from past crises, we recommend that individuals, communities, and government institutions make efforts to strengthen and expand social networks. A failure to do so will exact a toll in terms of human morbidity and mortality[2,3] and exacerbate the current disaster.

Social Capital

Szreter and Woolcock[5] articulated a 3-part framework, distinguishing between various types of social capital: bonding ("trusting and co-operative relations between members of a network who see themselves as being similar," p. 654), bridging (relationships "between people who know that they are not alike," p. 655), and linking ("norms of respect and networks of trusting relationships between people who are interacting across explicit, formal or institutionalized power or authority gradients in society," p. 655). Although they are related, bonding, bridging, and linking social capital are distinct and represent different elements of the social environment.[6]

In their highly influential work, *Bowling Alone*,[7] Putnam detailed evidence of a decline in social capital in postwar American society. Citing (among other things) decreased voter engagement, religious adherence, and civic group membership, Putnam argued that an American culture emphasizing individualism and reliance on mass media for entertainment caused a widespread decline in heterogeneous bridging relationships, while simultaneously reinforcing a smaller number of largely homogeneous bonding relationships. Such a shift disrupts the type of intergroup communication that is necessary to thrive under normal conditions, and to respond in a crisis situation.[1,7]

Impacts of the COVID-19 Pandemic on Social Capital

Unfortunately, many of the necessary protective practices instituted in response to COVID-19 further undermine social capital in American communities. Specifically, extensive and prolonged physical distancing and isolation may accelerate and exacerbate the decline documented by Putnam. Bridging and linking relationships, already on the decline in postmodern American culture, will be subject to further strain; concomitantly, existing homogeneous bonding relationships will be reinforced.

As individuals in impacted communities are asked to curtail the activities of daily life, and increasingly spend their time at home, they are necessarily cutoff from most normal face-to-

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face interactions with all but the members of their immediate household (if any exist). The casual interactions with a mixture of heterogeneous individuals which would usually take place in schools, workplaces, parks, and other public spaces are an unintended casualty of these practices. Meanwhile, a variety of digital media (eg, phone, chat, email, social media) have taken on an increasingly central role in communications with individuals beyond the home. This reliance on digital communication reinforces existing relationships and makes meaningful bridging and linking interactions more difficult and less common.

Although digital communications, in particular social media, generate social capital,[8] 2 important caveats must be considered. First, previous research investigating social media and social capital took place under normal circumstances, when individuals had access to *both* online and offline forms of communication. Although social media has been linked to social capital in that context, existing research does not address that connection in the current context of reduced face-to-face communication. Second, online and offline social capital, while related, are distinct phenomena.[9] Whereas offline social capital has been the subject of decades of inquiry, online social capital is a relatively new phenomenon and has not (to date) received the same level of scholarly attention.

The Role of Social Capital in COVID-19 Response

In crisis response and recovery, all 3 forms of social capital are necessary for an effective response and sustainable recovery. In a series of case studies of communities recovering from earthquakes, those with higher levels of social capital responded more quickly in the short term and recovered in a more satisfactory and sustainable fashion over time.[1,4] Similar results have been observed in pandemic scenarios, where higher levels of social capital correlate with efficacy in overall response.[2,3]

Simply having access to social capital is not sufficient however. While the presence of 1 or 2 forms of social capital may provide a partial safety net for individuals and communities, social capital provides the greatest benefits when all 3 forms are present in a community for individuals to draw upon.[4,10] Further, the different forms of social capital are interdependent, and a strong base of bonding social capital is a prerequisite—but not enough in itself—for the development of bridging and linking social capital.[10]

In addition to reductions in community capacity, evidence points to negative outcomes arising from imbalances in bonding, bridging, and linking social capital.[1,4] For example, in a case study of tsunami-impacted Indian communities,[1] those with a preponderance of bonding social capital were able to get by in the short term but had less satisfactory long-term recoveries. Recovery was hampered by between-community resource disparities, as strong within-group ties discouraged the sharing of scarce resources or vital information and lead to indifference or even hostility between groups impacted by the same disaster. Competition for limited supplies of personal protective equipment such as N95 respirators and face shields illustrates this point in the current context, as states bid against one another, the federal government, private industry, and foreign actors. Conversely, communities without sufficient bonding social capital may be unable to come together and engage in collective action on their own behalf[1] or form the necessary bridging and linking social capital.[10] As such, the impacts of physical distancing and isolation on social capital cannot be ignored: As bonding social capital is reinforced and bridging and linking social capital are reduced, community capacity for pandemic response and recovery will be diminished.

The deficiencies in social capital documented by Putnam, and exacerbated by physical distancing, also have direct implications for adherence to specific protective behaviors that are critical to flattening the COVID-19 epidemic curve. During the H1N1 pandemic, social capital (measured through trust in government and interpersonal contacts and feelings of mutual obligation, reciprocity, and social cohesion) emerged as a predictor of behaviors such as intention to vaccinate, handwashing, and wearing a face mask.[2,3] Because protective measures during the COVID-19 pandemic rely on adherence by symptomatic and asymptomatic individuals alike, the same features of social capital are integral to adherence. Unfortunately, trust in government, which was already at historic lows,[11] has been further undermined during the pandemic.[12] This lack of trust in government—the result of misinformation and missteps at the federal level[13]—reduces adherence to protective measures and ultimately weakens the public health response to the pandemic.[2,3]

Recommendations

Although the current pandemic stands alone in recent history in terms of its geographic scope and impact on daily life, many of the same recommendations from previous crises likely hold true. We make 3 specific recommendations with regard to social capital:

1. Individuals, communities, and government institutions should focus on building and maintaining a variety of social ties during the present crisis. Social capital, of all forms, will increase adherence to, and improve the efficacy of, physical distancing and other protective behaviors.[2,3] Recognizing the extended length of this disaster, with no discrete end in sight, sustainability of response and recovery efforts is also a paramount concern, which if past disasters are any indication, will hinge to some degree on social capital.[1,2,4] Social connections—with immediate household members, fellow members of the local community, and Americans from diverse and disparate backgrounds—will be critical in our collective response to COVID-19.
2. Digital mediated communication tools must play a larger role in generating social capital during the current pandemic.[8] Although the effects of social media–based social capital are less well understood,[9] digital and other mediated forms of communication must be utilized as a means of creating and nurturing social

connections. Platforms such as Facebook, Twitter, and Instagram are already using their reach to spread curated, factual information about the pandemic and actively removing potentially harmful misinformation. Schools and workplaces are also turning to remote connections in an unprecedented fashion. With limited access to social environments such as schools, workplaces, parks, and other public spaces, we must effectively leverage the digital commons as never before. This dependence on digital communication also provides a powerful context for further examination of the effects of social media-based social capital, specifically in this unique context where face-to-face interactions are necessarily limited.

3. Finally, we must learn from the effects of the current crisis and prepare for future disaster scenarios. The impacts of COVID-19 on social capital, and the role of social capital in responding to COVID-19, must be the subject of rigorous, ongoing research. Just as previous epidemic and pandemic scenarios have provided critical information in use today,[2,3] lessons learned from COVID-19 must be incorporated into the disaster response cycle. It is not a question of if future pandemics will arise, but rather when. A more thorough understanding of effective strategies for building and maintaining social capital during periods of social isolation using digital communication tools, will be a valuable tool in future crises. As confirmed by the current crisis, and countless others before, the time to prepare is before the water begins to rise, rather than when the levee breaks.

Declaration of Conflicting Interests

The author(s) declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

Funding

The author(s) received no financial support for the research, authorship, and/or publication of this article.

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