Implications of the Marginalisation of Social Sciences in the Fight against the Covid 19 Pandemic: A Humanities Perspective

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Abstract: In the history of pandemics that plagued humanity, COVID-19 represents a catastrophic global health crisis. The pandemic has placed a huge burden on health care systems around the globe. Due to its easy transmission from one individual to the other, COVID-19 prevention require large scale behaviour change. Through the recommendations of the WHO, governments across the world have enacted policies of social distancing, national lockdown, wearing face mask, release of inmates from prisons, temporary citizenship to migrants and refugees. In fostering the contingent measures to manage the pandemic between March and December 2020, most governments have consulted epidemiologists, public health experts, virologists among other pure sciences disciplines. However, notably absent, or poorly represented were the insights from social and behavioural scientists. The researchers argue that the absence or marginalisation of social sciences in the battle against the pandemic creates a myriad of gaps among the mechanisms crafted to manage the pandemic. The aim of this paper is to provide the entry points of social scientists in the fight against the pandemic. Through the use of insights of sociology and social work disciplines, the researchers noted that social scientists are involved in behaviour modification, compacting fear and anxiety, promotion of human rights, psychosocial support to vulnerable populations; and understanding the pandemic in the scope of globalisation. In terms of recommendations, we suggest that social workers and sociologists need to depend on the repertoire of their disciplines in order to effect change in different communities during the pandemic and its aftermath.

Keywords: COVID-19, Humanities, Social Sciences, Sociology, Social Work.

INTRODUCTION

The novel coronavirus disease (COVID-19) originated from Wuhan, Hubei Province of China in December 2019 and spread across the globe infecting and killing millions of people. The number of the infected and the death tolls increased rapidly resulting in the World Health Organisation (WHO) declaring COVID-19 a pandemic on the 11th of March 2020. By then, the number of affected countries had reached 114 across the globe (WHO, 2020a). The effects of COVID-19 resulted in the closure of borders, business activities and industries as countries were implementing the lockdown measures under the recommendations of the WHO. The departure point of this study is that the contingent response strategies implemented to curtail the ravaging effects of COVID-19 were informed by professionals such as Epidemiologists, Virologists and other public health experts. The authors of this paper being from the landscape of the social sciences argue that there hasn't been evidence of the involvement of social scientists such as sociologists, social workers, anthropologists and criminologists in the devising and implementation of COVID-19 response measures (Porterfield 2020). This is attributed to the colossal disregard of the social impact of the pandemic and the importance of behaviour change as the hallmark of the successful implementation of health precautionary measures. In light of the foregoing, social scientists have a commendable mastery of the social dynamics of pandemics and how behaviour change can be fostered accordingly (Van Bavel et al. 2020). As such, the systematic exclusion of social scientists in the early response strategies implemented by many governments across the globe created some vacuums in these strategies.

In support of the above exposition, it should be noted that while other countries introduced lockdown measures coupled with health precautionary measures such as hand sanitizing, physical distancing and wearing of face masks, countries such as Sweden were making advancements towards herd immunity where normal business continued with citizens maintaining the social distancing mechanism responsibly (Regalado, 2020). In other words, herd immunity advocates for countries to allow the pandemic to run its course, once enough people get affected, the disease will stop spreading on its own (Porterfield, 2020). What should be deduced from this development is that the successful implementation of this strategy was hinged on behavioural change among the Swedish
citizens which most social scientists can champion (Van Bavel et al. 2020). In most countries particularly within the Southern African region, the efficacy of the policies introduced between March and December 2020 were animated by gaps because they were running short of the social dynamics of the pandemic including mental health conundrums dovetailed by the pandemic. The avalanche of problems associated with policies that were implemented by various governments across the world has prompted the researchers to discuss the composition of stakeholders invited by the various government to address the effects of the pandemic between March and December 2020. The arguments to proceed from this study are intended to guide most governments in mainstreaming all disciplines in the wake of disasters and pandemics. Also, this study is poised to have an epistemological significance where social sciences disciplines would ramp up their significance during health pandemics in collaboration with other disciplines.

SOCIAL SCIENCES ROLE DURING A HEALTH CRISIS

This study ignites the need for the involvement of humanities (social sciences in particular) in curtailing the pandemics. As hinted, the researchers note that caring for mankind is the responsibility of the medical profession, but the prevention of the disease is a social process, which takes a lot of actors and social behavioural scientists to play a critical role (Fan et al. 2020; Van Bavel et al.2020). From the viewpoint of Fan et al. (2020), during the difficult periods in Chinese history, the western missionaries provided medical education and services. This signals the importance of a multidisciplinary approach in the battle against the pandemic. What should be noted is that apart from the Epidemiologists and Virologists the humanists have always played a critical role in understanding socio-cultural, economic and political dimensions of disasters and pandemics. In light of this, Jones, Corbett and Trostle (2012) notes that the involvement of social sciences remains delayed, inconsistent and distant from decision-makers. This trend was observed in the battle against Ebola where scholars noted that the medical humanitarian agencies education and containment efforts were often neither scaled up nor scaled up (Van Bavel et al. 2020).

In their study on the role of anthropologists in the wake of pandemics, Abramowitz et al. (2015) noted that France, Sweden and UK have sought direct consultation with regional and area studies experts and mobilised the support of social science researchers in the battle against Ebola and yet in the USA the engagement with Social Science researchers remained sluggish. The study by Abramowitz et al. (2015) reveals the need for more involvement of social sciences fields in the future pandemic surveillance, response, or community preparedness. According to Stellmach (2018)’s study entitled “Anthropology in public health emergencies: What is anthropology good for, social scientists have been recognised as crucial players in responding to disease outbreaks. This is due to their ability to provide a fair assessment of social, economic, and political factors in our local context. This would shape the way interventions are made. Farmer (1996) began to ask for more understanding of social pathways regarding disease transmission and barriers to prevention. As such, Anthropology was credited for being able to analyse the local context this includes understanding social-cultural factors and these play a critical role in how the factors influence people’s behaviour (Napier et al. 2014). In this case, understanding the role of anthropology is also important as it overlaps with History, Economics, Sociology, Psychology and Social work hence, these disciplines’ contribution is important in understanding how social science can contribute to the fight against the pandemic (Stellmach 2018).

Stellmach (2018) further identified three intervention categories in which humanists’ sciences can provide their expertise depending on the needs at the time and the character and specialisation, firstly, program design and formative research, second, interpretation, investigation, and response; and event analysis and post hoc assessment. Jaffre (2012) states that disciplines such as anthropology define possibilities for action on population health. That is foretelling why public health inventions fail to construe what is planned and what is realised. This may include intended consequences and unintended consequences. Extrapolating from the above inferences, it is worth mentioning that in the wake of pandemics, people are not only affected by the pandemic but by socio-economic conditions which render other groups within the communities vulnerable (Van Bavel et al. 2020). All these insights are important when considering programme design, interpretation, investigation and response, and interpretation. In the case of social scientists, this would involve an understanding of the local norms regarding the dimensions of international responses to epidemics/ pandemics. The lack of understanding of the local context led to the refusal of
services, non-compliance, and other irrational reactions by the community members.

In a study conducted in Western Africa, by Abramowitz et al. (2018) entitled ‘lessons from the West African Ebola Epidemic: A systematic Review of Epidemiological and Social and Behavioural Science Research Priorities’ where they delved into the priorities set for social and behavioural sciences in the wake of pandemics. The study found out that epidemiological models and forecast and clinical treatments were unable to capture the complex socio-cultural conditions and the fragile health systems whereas the socio-behavioural scientists failed to translate their knowledge of local conditions into epidemiological relevant insights. However, the collaboration between the two disciplines would result in communities learning how to think like epidemiologists, while epidemiologists learned how to think like communities.

CURRENT STUDY

The current study is motivated by the observations made by Matthews (2020) on European and African countries’ response to COVID-19, where the scholar notes that there is a marginalisation of social sciences or behavioural scientists in general in the creation of policies to respond to the impact of COVID-19. The study by Matthews (2020) notes that Germany in contrast to other countries like France (i.e. had two social scientists, a sociologist, and an anthropologist), UK and the US, the Germany advisory team included philosophers, theologians, historians, and jurist. This contrasts with other nations such as South Africa, Botswana and Zimbabwe that relied on epidemiologists, virologists, and public health experts. This begs the question of what social scientists can offer in the face of the current global COVID-19 pandemic. However, before delving into detail provided by the key informants who were informally reached out to, the study by Matthews (2020) provides insights on the importance of this study. Further, the informative observations by Jurgen Renn, director of the Max Plank Institute for the History of Science, points out “the crisis is a complex one, it’s a systemic crisis and it needs to be dissected from every angle”.

METHODS

This study adopted the Interpretive Phenomenological Analysis (IPA) to have a clear understanding of how sociologists and social workers make sense of the current COVID-19 pandemic. According to Smith and Osborn (2007:53) when using IPA “the participants are trying to make sense of their world and the researcher is also trying to make sense of the participants trying to make sense of their world”. This was a useful tool in our quest to understand different entry points for social science disciplines in the battle against the COVID-19 pandemic. What should be noted is that the authors of this paper are academics from the social sciences fields at different institutions in South Africa. As such, insights for this study were gathered through informal conversations with fellow colleagues in the disciplines of the social sciences within the Southern African region. Criterion purposive sampling was utilised to select key informants who consisted of social workers and sociologists for this research. Open-ended interview questions were distributed through email and Whatsapp platforms. The conversations were mainly ignited by the concern sparked within the corridors of the social science where there has been a paucity of the humanist’s flare in the early contingent COVID-19 response measures. The gathered data were analysed through the Discourse Content Analysis.

INSIGHTS FROM THE SOCIAL WORK PROFESSION IN THE WAKE OF THE COVID-19 PANDEMIC

The eruption of the COVID-19 pandemic serves as a litmus test for the significance of many disciplines offered at Institutions of Higher Learning in the fight against the pandemic. Notwithstanding the acknowledgement that the pandemic requires collective efforts and broad-based interventions from all disciplines, the genesis of contingent measures to combat and manage the disease and its impacts disregarded the contribution and the roles to be played by social workers and other social and behavioural scientists. From this, what should be noted is that, despite the pronouncements of precautionary measures aimed at curtailing the transmission of the disease, the success of these measures is hinged on social governance which social workers and other behavioural scientists can champion by virtue of the description of their professional roles. These roles shall be delineated in the forthcoming subsections. Before the authors delve into the roles of the social work profession in the fight against COVID-19, it is worth mentioning that the omission of social scientists from the onset planning and implementation of the management modalities of the pandemic sets a wrong precedent in the event of future epidemics because the role of these disciplines would have been rendered ineffective.
In support of this claim, the CEO of the Human Sciences Research Council (HSRC) in South Africa, Professor Crain Soudien was quoted by the Sowetan newspaper of 10 May (2020) lamenting that the National Coronavirus Command Council designated to preside over the management of the pandemic is dominated by medics. From this, what should be underscored is that despite, the lethality, uncertainty and unpredictability of the disease, efforts to fight the pandemic through scientific mechanisms will be futile without the social component choreographed by the social scientists. On this note, it is vital to register that though the pandemic might not infect everyone as people are implored to observe the precautionary measures such as physical distancing, wearing of face masks and hand sanitizing, the pandemic stands to affect everyone through the manifestation of multifarious impacts such as stress, inequalities, human rights infringements and discriminations among other things which social scientists such social workers can manage (Ife 2012).

In continuation from the above, historically, social workers have been involved in the management of disasters where they thrive to enhance human wellbeing, adaptation, resilience and disaster rescue planning and recovery (Alston 2019). The COVID-19 pandemic which is new in its features and impact is within the province of the disasters which social workers can manage using an array of professional principles, values, ethics, skills and knowledge base premised on enhancing human wellbeing (Garbarino 2017). Basically, what this means is that social workers can make interventions downstream, midstream, and upstream in fighting against the pandemic. In social work literature, disasters are defined as events and circumstances causing human suffering and loss, suffice to cause social disruption (Coates and Gray 2012). This definition blends with the nature of the COVID-19 pandemic which points to why it was declared a state of disaster around the globe. To extrapolate from this, though social workers were ambushed by the eruption of the COVID-19 pandemic, this does not mean that they cannot make broad-based interventions. Considering this, social workers constitute the highest percentage of trained disaster volunteers and they are well equipped with ideas and plans of healing, mutual aid, and self-care (Shokane, 2017; Nyahunda et al. 2020). In support, Dominelli (2018) opine that social workers have the professional expertise to address many disasters related catastrophes and, in this regard, COVID-19. Against this succinct background, it is worth mentioning that while the process of developing pharmaceutical interventions is still ongoing, social workers can provide important insights for managing the pandemic and its impacts. The roles to be played by social workers are as follows.

BEHAVIOUR MODIFICATION

As mentioned earlier that pharmaceutical processes to discover the cure or vaccine are still ongoing amidst the harrowing onslaught of death and infections caused by disease that is transmitted through human contact, the success to minimize the toll of its impacts is through behaviour modification which can be inculcated by social workers and other social scientists such as Psychologists. At the time of writing of this paper in June 2020, 9.24 million cumulative cases had been confirmed with 477, 000 deaths and 4.61 million recoveries worldwide (WHO 2020a). From this, South Africa accounted for 111,796 cumulative confirmed cases with 2205 deaths and 56, 874 recoveries as of 10 June 2020 (Nkengasong and Mankoula 2020). The galloping of the infection rate in South Africa surpassed the prognosis given by the epidemiologists and public health experts. However, this boomerang effect is stemming from how the importance of behaviour modification fostered by social workers and other behavioural scientists was not considered from the onset.

Considering this, Hochman et al. (2020) view behaviour modification as the process of changing or reforming patterns of human behaviour through motivation to change the behaviour where good habits are reinforced, and negative ones suppressed. From this, it is important to mention that the successful management of COVID-19 requires a behavioural change in sync with the precautionary measures provided by the epidemiologists and public health experts. On that note, social workers are on record of embracing social and cultural aspects to influence behaviour change within the areas of their operation (Dominelli 2013). Based on this, behaviour change can be achieved or influenced by social norms where social workers disseminate public messages that approve positive practices about the importance of following the precautionary measures among people with shared identities and values. Furthermore, social workers can coordinate rules that may help people to cooperate and survive in the wake of disasters. This can be achieved through allaying of information about the consequences of behavioural practices that could weaponize the
disease while imploring practices that can help in combating the infection rates.

**COMBATING OF FEAR AND ANXIETY**

In the history of other disasters which social workers have dealt with before, there has been a proliferation of fear and anxiety among disaster victims (McKinnon 2013; Powers 2016). The COVID-19 pandemic serves no difference from other disasters characterised by fear and anxiety. Considering this, Van Bavel et al. (2020) posit that anxiety is the dominant response to the pandemic and is becoming excessive because of multifarious misinformation. Most of the affected people are in the rural areas where there are high information gaps. As such, there is high rumour-mongering and a lot of falsified information igniting fear and anxiety. Rajkumar (2020) aver that misinformation is contributing to mental morbidity, stress, and stigmatisation in the wake of COVID-19. Further, anxiety is leading to mistrust stemming from fears of contracting the virus. In response, the centrality of advocacy among other social work roles connotes that social workers can ensure that correct information is disseminated for people to devise appropriate means. It is important to note that, accurate health decisions are a product of accurate perceptions which social workers stand to inculcate through availing of adequate information that combats fear and anxiety. Social workers play a major role in distributing information to dispel myths and fears by reaching out to agencies to assist with preparedness. This will go a long way in reducing the stigma associated with the disease.

**PROMOTION OF HUMAN RIGHTS**

Social workers have been involved in the advancement and promotion of human rights and social justice in their operations (Lompard 2017). The eruption of disasters means that the rights of the weak and vulnerable populations such as women, children, the elderly, the homeless and people with disabilities are on the onslaught. In South Africa and beyond, the pronounced lockdowns which shattered many livelihood activities has seen high levels of frustration being projected on the weak. A report released by WHO (2020a) reveal that domestic violence against women trebled, the rights of children are being infringed and people with disabilities and the homeless are being placed in a precarious position due to hunger. In other instances, the process of enforcing the lockdown restrictions has seen many cases of human rights abuse by law enforcement agents where people were assaulted for defying the lockdown regulations. On the same note, the eruption of disasters before such as floods and cyclones has seen social inequalities being widened between those with the ability to adapt to the disruptions and those who cannot owing to their low socio-economic statuses (Benson et al. 2016). The COVID-19 pandemic bears the same effects on heightening social inequalities. Sadly, there have not been swift measures to disseminate COVID-19 information in braille and sign language for the deaf especially those in marginalised communities (Singh and Moodley 2020). In the same vein, the predominance of women in the informal sector which was disfigured by the lockdown measures is accelerating their vulnerability at all levels. In response, social workers are human rights workers and social justice advocates (Dominelli 2018). For that reason, they help individuals realise their rights every day.

Social workers can help ensure that the pandemic is managed in a manner that promotes human rights and social justice. As such, social work practitioners can ensure the safety of vulnerable populations by advocating for measures that promote and protect their rights in the wake of COVID-19 and other social problems. What should be underscored is that the COVID-19 pandemic amplified the impacts of other social problems which were already serving as a threat to human rights and social justice such as inequalities and poverty. In response, social workers have the professional expertise to redress and provide possible remedies when human rights are infringed. The centrality of the advocacy role in the social work practice implies that social workers can enhance inclusivity in the planning efforts of managing the pandemic and lobbying for increased government support.

**PSYCHOSOCIAL SUPPORT TO VULNERABLE POPULATIONS**

The outbreak of the COVID-19 pandemic is associated with psychological distress and high symptoms of mental illness. Considering this, the uncertainty of the pandemic and its devastating impacts on people’s livelihoods has brewed wanton levels of distress and emotional malaise (Van Bavel et al. 2020). What has emerged in the management of the pandemic is the focus on adherence to the safety precautions disregarding the importance of mental health which can be foregrounded by social workers. The other daunting factor identified by Van Bavel et al. (2020) is that testing is not complemented by real
counselling for those who would have tested positive of COVID-19 including support to their caregivers for those required to self-isolate. In response, social workers play a key role in promotive, preventative and treatment services to ensure the health and wellbeing of the people. They ensure that people have access to the needed services, providing remote counselling and organising ways to overcome isolation. In light of this, McKinnon (2013) denotes that social workers are prominent figures in providing psycho-educational teaching about the clinical stress response and effective coping mechanisms to families, individuals and communities when confronted by traumatic events and in this regard COVID-19 and its related impacts.

To add on, social workers can develop mental health interventions that are culturally sensitive. Social workers can build facts and evidence that is tangible in ensuring that people’s felt needs are met, and the interventions being made make a difference. Basically, social workers have the expertise to deal with psychosocial distress for victims of mental health shocks owing to the repercussions of COVID-19. The psychosocial support from social workers will help people to remain resilient in the wake of COVID-19. Resilience is central to the social work practice where people are moulded to remain optimistic to their circumstances and repose progressive adaptation with the hope that they will bounce back to normality (Grant and Kinman 2014). From this, the dissected roles bear evidence to the importance of the social scientist flare missing in the management of COVID-19 at the national level across the region. What this means is that the gaps which social scientists can close remain unattended to and people remain trapped under unpleasant circumstances during the COVID-19 novel because the impacts of the disease go beyond the issues of infection and deaths.

UNDERSTANDING THE COVID-19 PANDEMIC FROM A SOCIOLOGICAL PERSPECTIVE

The advent of covid-19 in late 2019 has seen the re-emergence of infectious disease as a public health threat in an increasingly globalized era. Insights from sociologists are essential in the provision of knowledge and expertise in planning for a crisis, alongside medical knowledge, and logistic expertise. Moreover, it is also important to consider the role of the sociology of health, which encompasses disease, mental health, and disability. The central argument of this study is that it is costly to leave out the disciplines of the social sciences in dealing with the COVID-19 pandemic. In that regard, one needs to take into consideration the principle insights of sociology, which stresses that health and illness should not be limited to the biological or medical disciplines.

WHO (2014) define health as “a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity”? The definition of health by WHO gives an insight into the significance of the social sciences in dealing with epidemics. As such, the fight against covid-19 would only be successful when there is a comprehensive approach between medical sciences and social sciences to achieve a state of complete physical, mental, and social well-being. The proposed collaborative approach to covid-19 is understood by sociologists as one of their main theoretical perspectives in the discipline known as the functionalist perspective. The functionalist perspective focuses on the way in which all aspects of society are integral to the continued health and sustainability of the whole. In that regard, a consideration of the functionalist perspective would suggest that it is costly to marginalise the disciplines of the social sciences in the fight against COVID-19.

THE SOCIAL CONSTRUCTION OF HEALTH

The social construction of health is another concept from sociology that emphasises the importance of not leaving the social sciences out in the fight against COVID-19. While COVID-19 can be analysed from a medical science and public health perspective, it is important to note that from a broader perspective it constitutes socially produced risks (Lavell et al., 2020). Essentially, the risk is argued to have accumulated through the interaction of a range of economic, social, and territorial processes that initiated the spread of the virus from Wuhan to the rest of the world. Sociology, by definition, is the systematic study of human behaviour in society. Consequently, medical sociology becomes a systematic study of how humans manage issues pertaining to health and illness, disease, and disorders. As such, the social construction of health emphasises the socio-cultural aspects of the sociological approach in the fight against the pandemic.

Moreover, a plethora of medical sociologists are of the opinion that illnesses have both a biological and an experiential component, which exist independently of each other. In that regard, embracing the social sciences in the fight against COVID-19 will be considered essential because biology cannot dictate which illnesses are stigmatized and which are not
(Conrad & Barker 2010). Consequently, sociologist Erving Goffman (1963) emphasise that the stigmatization of illness has the greatest effect on the patient and the kind of care he or she receives (Conrad & Barker 2010). As such, the social construction of illness deals with the way patients control the ways in which they disclose their illness to cope and heal. Furthermore, categorising the pandemic as a catastrophe implies that it is more than the simple materialization of the virus. As such, there will be a need for a social study of risk construction and accumulation of the disaster which would imply that disasters associated with the COVID-19 sickness represent the materialization of pre-existing and underlying risk conditions in the affected societies.

THE GLOBALISATION OF THE PANDEMIC

Reinado and Hernandez (2015) emphasise the importance of incorporating the social sciences in eliminating epidemics through their work on the globalisation of pandemics. The central argument by the authors was that the globalisation process has different dimensions namely economic, political, social, and ecological all of which have a significant impact on global health. Further, Reinado and Hernandez (2015) posit economic globalization through the internationalization of trade and the communications revolution has resulted in the globalization of risks and of certain diseases. That explains the rapid spread of covid-19, which started in the Chinese city of Wuhan in late 2019, and by March 2020, it had spread throughout the world. This suggests that the global emergence of COVID-19 is greatly related to the globalisation process. Hence, the role of sociologists and other social scientists in the elimination of the epidemic will be essential because they will be able to establish the relationship established between globalization and global health and establish a possible remedy. In that regard, it can be argued that the role of social scientists is of paramount importance in the fight against COVID-19 and their marginalisation becomes immensely costly.

THE ROLE SOCIAL SCIENCES IN THE COVID 19 PANDEMIC AFTERMATH: THE WAY FORWARD

Social scientists are not responsible for coming up with vaccines or cures for the pandemic as noted throughout this paper, however, one can note that social scientists can both be proactive and reactive in curtailing the effects of COVID-19 pandemic. The COVID-19 pandemic is a behavioural virus, its transmission, and prevention depends on human behaviour, for instance, social distancing, wearing a mask, spotting symptoms of the virus in one's self and making a decision to self-isolate; to make a decision to take the vaccines that will be made available. These are all behavioural actions that require decisions of both individuals, communities or nations. This creates space and entry points for social sciences to actively contribute to the eradication of the COVID-19 pandemic. Scholar Middlemass (2020:1) argues “There are no point devising lockdowns that nobody will follow or developing a vaccine that nobody will take.” The role of social scientists is to provide an intermediary role between the provider (Lab scientists’ vaccines; government policies’ ie lockdown, isolation and wearing of masks) and the recipients, the communities. In the aftermath of the COVID-19 pandemic, sociologists and social workers as the central focus of this study would be involved in tackling mental health issues; actively socialise and conscientize people on vaccines and the necessity of lockdown measures adherence; and collaboration between Social Scientists, government policymakers as well as civil society groups.

Tackling Mental Health

Mental health-related illnesses emerge as one of the conditions that are of interest to social scientists during the pandemic as well as in the aftermath. In previous studies conducted following a health crisis mental health illness has emerged as one of the challenges facing the most vulnerable groups in society. A study by Kamara et al. (2017) and collaborated by Cenat et al. (2020) on Ebola report that most patients reported depression, anxiety disorders and other social problems. This reveals a pertinent job social scientists have to engage in to heal the people of Post Stress Traumatic Disorder (PSTD) and social workers are at the forefront in tackling mental health illness. Brennan et al. (2020) in a study of old people and mental health in the context of COVID-19, note that old people already suffered from mental health problems, for instance, grief and loss, isolation, depression, safety concerns, and social justice. The COVID-19 exacerbate such problems. In the aftermath, social workers have the role to play in helping the old people and other vulnerable groups in the society to adjust. WHO (2020b) argues that each country has to set person-centred long-term care systems which promote human rights prioritize each person’s needs and provide the necessary resources and support. These activities are spearheaded by social scientists ie. social workers, sociologists and psychologists.
Actively Socialising and Conscientizing People on Vaccines and Lock Down Policies Adherence

COVID-19 was noted as one of the deadliest pandemics in history, vaccines were noted to be very important to prevent the continuation of the pandemic. Research can review that since 1924 vaccines have kept alive and protected over 1000 000 cases caused by contagious disease (Anderson, 2014). However, the reception of vaccines has always been poor in some places with people refusing vaccination, and purported incomplete vaccination. The refusal of vaccines in some areas was attributed to culture and religion. Physicians need to acknowledge people’s concerns and respectfully address them and attempt to correct any misconceptions. However, physicians’ lack of understanding of the societal norms and values as social workers, sociologists and social workers leads to doom and failure of such programmes. Social workers can fill the gap left by the physicians and advocate in favour of vaccines and the adherence to government policies and initiatives to prevent further losses.

SOCIAL SCIENCES COLLABORATION WITH INDUSTRY, COMMUNITIES, ORGANISATIONS, AND POLICY MAKERS

Social sciences have been isolated in fighting health issues, whereas the field has a lot to offer in the battle against pandemics. Armocida et al. (2020) advocate for the institutionalisation of robust partnerships between the public and private sector, in response to public emergencies. Social workers will provide leadership and advocate for effective services among organisations and institutions as they respond to the COVID-19 pandemic. The virologist who works in large pharmaceuticals may identify the vaccines but the job to deal with the society, explain the pandemic vaccine in simple terms belong to Social scientists. Every intervention made in response to COVID-19 has to pay attention to the cultural, social, spiritual, emotional, psychological, developmental, and physical needs of the affected (Brinkerhoff, 2014). In most cases, vaccines are made and distributed without making consultations with the recipients. The Social Scientists provide an intermediary role whereby they conduct research in different communities and gather the perceptions of people and present them to policymakers and industry managers who in turn provide feedback which is relayed by social scientists on the ground.

CONCLUSION

The study established the battle against COVID-19 pandemic is led by epidemiologists and virologists, however, social sciences disciplines have a critical role to play despite them being systematically excluded in the early management of the pandemic. What should be highlighted is that every disease causes an imminent threat to the health of an individual, however, each outbreak triggers socio-economic consequences which require the valuable insights of social scientists. This study managed to get insights from social workers and sociologists. Thus, social scientists understand the social norms of the society as well as factors that reinforces behavioural change without causing negative consequences on the communities. This helps in compacting fear and anxiety through the work done by the social worker. Involving social workers in policymaking during the pandemic will help in crafting sensitive policies that do not trigger anxiety or fear among people. Desperate times led to desperate policies, this can result in the infringement of human rights namely; the rights of children, women, the elderly and people with disabilities. It is the role of social scientists to provide valuable insights on such factors to protect marginalised and vulnerable groups within the society hence their roles remain pertinent in the current and future pandemics.

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