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**Special edition:
Recovering from the COVID-19 Pandemic**

Recovering from disasters or crises: What can we learn from prior research to help us recover from the COVID-19 pandemic?

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The COVID-19 pandemic has been an unprecedented crisis from which we are in the early process of recovery. In order to maximise the recovery journey, it is important to see what can be learned from recovery from previous disasters or crises. Is there learning that can help us determine how best to recover from this pandemic?

Recovery is the process of providing for the needs of the community following a disaster or crisis, while also dealing with the consequences. It involves restoring, or improving, people's livelihoods and health, as well as the economic, physical, social, cultural and environmental assets, systems and activities of an affected community. The aim of a recovery effort is to 'build back better', and to avoid or reduce future disaster risk. In coming to terms with the impacts of an event, people can find new ways of living or working. The impacts of a disaster or crisis can be profound, long-lasting and life changing. Disaster recovery is just one part of 'emergency management', which includes also the broader components of prevention, preparedness and response. But emergency

management is not simply a linear process where we pass from one phase to the next; indeed recovery processes are best considered even before a crisis occurs and should continue to be a focus during the response and rebuild phases.

Within this paper we aim to summarise existing literature on effective community-led recovery approaches, and features that may enable communities to recover to a better state than before a crisis. Within Her Majesty's Prison and Probation Service (HMPPS), the term 'community' could mean individual prisons, probation areas, a cluster of prison or probation teams, or the entire estate or service. The community could include HMPPS staff and partner agencies (e.g. healthcare, education providers and faith services) and their families, as well as the people in our care and their families.

We have drawn on fourteen papers in relation to recovery, published between 2004 and 2019, which included research studies, literature or outcome reviews, and handbooks, operational materials, special features or descriptive pieces.¹ The majority of the

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1. Aldrich, D. P., & Meyer, M. A. (2015). Social Capital and Community Resilience. *American Behavioral Scientist*, 59(2), 254-269.
Australian Emergency Management Institute. (2011). *AEMI Master Class Report. Facilitating community-led recovery.*
Australian Institute for Disaster Resilience. (2018). *Australian Disaster Resilience Handbook Collection. Community Recovery Handbook 2.*
Bradbury, S., Buchanan, J. (2008). Communities Campaign for Resident-Led Recovery. Bringing Human Rights Home with the Gulf Coast Civic Works Act. *Social Policy Special Feature*, 20-29.
Coles, E., & Buckle, P. (2004). Developing community resilience as a foundation for effective disaster recovery. *The Australian Journal of Emergency Management*, 19(4), 6-15.
Cretney, R. M. (2018). Beyond public meetings: Diverse forms of community led recovery following disaster. *International Journal of Disaster Risk Reduction*, 28, 122-130.
Dibley, G., Mitchell, L., Ireton, G., Gordon, R., & Gordon, M. (2019). Government's role in supporting community-led approaches to recovery. *Department of Health and Human Services, Victoria.*
Gibbs, L., et al. (2014). Core principles for a community-based approach to supporting child disaster recovery. *Australian Journal of Emergency Management*, 29(1), 17-24.
Leadbeater, A. (2013). Community leadership in disaster recovery: a case study. *Australian Journal of Emergency Management*, 28(3), 41-47.
Lisnyj, K. T., & Dickson-Anderson, S. E. (2018). Community resilience in Walkerton, Canada: Sixteen years post-outbreak. *International Journal of Disaster Risk Reduction*, 31, 196-202.
Owen, C. (2018). How can governments enable and support community-led disaster recovery? *Australian Institute for Disaster Resilience*, 33(1), 66-69.
Ramsbottom, A., O'Brien, E., Clotti, L., & Takacs, J. (2018). Enablers and Barriers to Community Engagement in Public Health Emergency Preparedness: A Literature Review. *Journal of Community Health*, 43, 412-420.
Ryan, R., Wortley, L., Ni She, E. (2016). Evaluations of post-disaster recovery: A review of practice material. *The Australia and New Zealand School of Government. Evidence Base* (4), 1-33.
Tambo, E., Chengho, C. F., Ugwu, C., Jonhson, J. K., & Ngogang, J. Y. (2017). Rebuilding transformation strategies in post-Ebola epidemics in Africa. *Infectious Diseases of Poverty*, 6, 71-77.

papers come from Australia, but there were also contributions from New Zealand, the United States, Africa, Canada and Europe. The majority focused on natural disasters, but two looked at recovery from health events (Ebola in Africa, and E-coli in Canada).² No research from prison or probation settings was found.

What emerges is that there is no set way to do 'recovery', as every crisis and its impacts are different. However, the evidence we have drawn on and synthesised, from various settings and across different types of extreme events, points to some common principles for how to conduct community-led recovery.

We could not find any solid evidence-base for 'building back better', however, there are individual areas of research related to this concept that we could draw on. For this part of the review, we drew on six additional papers, published between 2010 and 2020 that included research studies and literature reviews,³ together with the aforementioned community-led recovery research,⁴ and an organisational learning/reflection tool.⁵ These resources collectively provide an evidence-informed view for how organisations may make changes for the better, in particular after a crisis.

What is community-led recovery and what do we mean by 'building back better'?

Historically, models of recovery proceeded through a series of set phases; these have been heavily criticised for their assumption of linear progression through time and a presumed orderly and inevitable rollout. Participatory and community approaches have become the main focus of recovery efforts in recent decades. It is now generally accepted that communities recover best from disasters when they manage and lead their own recovery, with support and help from central Government. This approach enables a community to

reach an understanding of their own needs, what they want to achieve and how they will go about it. It is an opportunity for connectedness and builds capacity for a community to do what they need and want to do, which in turn, builds resilience. The term 'building back better' was coined by technical experts some decades ago in relation to natural disasters; initially it was meant literally, for example, adopting better engineering standards so buildings were less likely to crumble in earthquakes. 'Building back better' has since become a term applied to organisations and communities too. In this context it describes what they ultimately want to achieve as they recover from a crisis and how they might do this. It means that instead of snapping back, organisations can create a 'new normal', taking the opportunity to be better than they were before (such as

having less inequality, being fairer, or being more productive or effective), and in doing so make themselves less vulnerable to future crises. The overwhelming impacts of a crisis, despite being fraught with anxiety and uncertainty, can create a break from the past, enabling us to abandon status quo behaviours, and creatively transform our systems and processes into something that has the potential to work better for all.

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Principles of Community-Led Recovery

Recovery following a crisis is complex, involving multiple players with competing priorities and expectations acting in highly stressful situations. In such times, people may want a step-by-step 'template' or 'blueprint' for how to recover, however, the evidence suggests that this is not the best approach to take. Instead, as recovery will look and happen differently for individual communities, 10 principles for guiding and facilitating community-led recovery have been identified from the evidence-base (table 1 provides

2. See Lisnyj, et al. (2018), and Tambo, et al. (2017).

3. Annulis, H., McDonald, J., Higgins, G., Ritchie, J. B., Stout, B., & Thompson, R. (2013). Change Leaders' Reflections of Hurricane Katrina: A Qualitative Review. *Change Management: An International Journal*, 12(2), 1-10.
Dibley, G., Mitchell, L., Ireton, G., Gordon, R., & Gordon, M. (2019). Government's role in supporting community-led approaches to recovery. *Department of Health and Human Services*, Victoria.
Duchek, S. (2020). Organizational Resilience: a capability-based conceptualization. *Business Research*, 13, 215-246.
Helliwell, J. F. (2011). Institutions as enablers of wellbeing: The Singapore Prison Case Study. *International Journal of Wellbeing*, 1, 255-265.
Leong, L. (2010). The Story of the Singapore Prison Service. From Custodian of Prisoners to Captains of Life. A case study. *NS World*.
Ntontis, E., Drury, J., Amlôt, R., Rubin, G. J., & Williams, R. (2020). Endurance or decline of emergent groups following a flood disaster: Implications for Community Resilience. *International Journal of Disaster Risk Reduction*, 45, 101493.

4. See footnote 1.

5. Collaborate CIC (April 2020). Learning from COVID-19: A tool for capturing insights now to shape the future.

recommendations for how these principles may be translated into practice).

1. Taking time

People, organisations and governments can feel under pressure to 'do something' and recover quickly. Speed and efficiency may be needed in the immediate aftermath of a disaster (e.g. to get services up and running again), but the recovery phase is more complex. Recovery seems to happen best when communities are given the opportunity, time and support to determine when and how they make decisions about their future, rather than decisions or priorities being imposed or rushed. People need time to take stock and make sense of what they have endured, individually and collectively. The process of recovery, once it begins, should also not be rushed. Recovery can be a long process. There is no clear indication in the evidence-base for how quickly progress can or should be made, however, imposed benchmarks and timelines are unlikely to be helpful.

2. Active and deliberative community engagement

Community-led approaches to recovery require the active engagement of the community, to identify needs, consider a range of actions and solutions, and empower the community to make decisions. Successful processes to community engagement appear to be characterised by: *influence* (the engagement process should be able to directly influence policy and decisions, rather than be tokenistic), *inclusion* (the engagement process should be representative, inclusive and encourage equal opportunity to participate), and *deliberation* (the engagement process should provide open discussion, access to information and movement towards consensus).

For example, 'open house' meetings, focus groups and surveys were used in the aftermath of disasters such as Hurricane Katrina and the Cedar Rapids floods, enabling the community to be firmly at the heart of recovery planning. This type of engagement work can also help build community resilience by strengthening social networks and partnerships (see later principle on social capital), knowledge sharing, and understanding risk and vulnerability. Whilst there may be an overarching and agreed framework for planned arrangements, the timing, shape, range and

commitment to activities should be determined by the community, and be flexibly altered as needed. Recovery that is determined or fixed externally should be avoided; this is likely to be shaped by external priorities, rather than those of the specific community. There is evidence of continuing stress, resentment and disempowerment experienced when some form of deliberative engagement process is not applied.

3. Effective interaction between government and community

The interaction between government and communities needs particular attention. In previous research, the arrival of 'help' from government has been perceived by communities as an interference which can potentially fracture relationships, albeit inadvertently. Government and central teams need to develop their own capacity to engage with communities in ways that maximise community leadership, self-efficacy and capability.

The evidence suggests that governments should provide the 'scaffolding' for community-led recovery, offering experience and expertise but recognising that communities will be better informed about their own needs and relationships with local support providers, and so they should be the ones driving recovery. Government and central help may be best offered

and accepted when it 'sidles up alongside the community', and where proactive collaboration helps develop trusting relationships between parties. Trust is a prerequisite of community engagement; if community leaders lack trust in central staff, they may decide to disengage, and if central staff lack trust in community leaders they may become more directive rather than collaborative and empowering.

Establishing a centrally located dedicated taskforce that brings together different departments to improve knowledge and coordination between existing services, may help communities access services and support. There is a need for real clarity on decision-making authority, accountability, and availability of funding where needed. Reporting processes and policies that are overly bureaucratic may slow progress and cause frustration.

4. Building local recovery capacity and capability

Although communities will already have existing knowledge, skills, credibility and connections vital for

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their recovery, they may need additional support and guidance during the recovery process. They may need training to become owners and advocates of the recovery process, and implement practical supports to enable their participation. Government and agencies may helpfully serve by facilitating access to consultation, training and logistical support rather than delivering the services themselves. It will be important to identify the knowledge or skills that are needed, be sensitive to the distress that people are feeling, offer support, and help the community develop structures so they can begin to deal with the broader issues themselves.

The effectiveness of mechanisms to engage people within the community (such as by forming community recovery committees) may also depend on their capacity to mobilise the community to provide information about views and needs, discuss ideas and make shared decisions. Good governance (such as being inclusive, having authority to act/make decisions, and accountability), resourcing (including financial and staffing) and sufficient time and space are important.

5. Developing local leadership

A community's recovery appears to be best facilitated when local leaders are central to this, as they are more knowledgeable about their own community's needs, perspectives, resources, connections and initiatives. Their pre-existing relationships with the community also mean their relationships may already be more trusting and legitimate. Leaders come in many forms, including those within existing leadership structures. However, as recovery needs are identified, bespoke roles may be best filled based on people's experience, skills or other relevant qualities, rather than pre-existing formal positions.

The evidence suggests it is vital that leaders receive support and help to foster their personal resilience. Not only have they also endured the crisis but during recovery they can be faced with other community members' grief, anger and stress, and may themselves face blame. Leaders can also face ethical and moral dilemmas when faced with decisions or being unable to prevent actions that may go against their values, which they will need space and support to discuss. Good leadership during these times appears to rely in part on

perceptions of their empathy, availability, and supportive attitude; their own resilience; and their vision of the restored community they are helping all to work towards.

6. Ensuring diversity, inclusion and representation

Community engagement will need to take into account the span of people affected and allow for potential differences in the effects felt by different groups within communities. Community diversity appears to have an important influence on how communities recover from crises, use resources to best meet their needs, and their ability to develop their resilience. As such, it is important that the voices and perspectives from all parts of the community are heard, to inform decisions about the priority needs and interests of the community, and how best to respond to them and ensuring equality. Establishing a community advisory group, and using existing practices that hear people's voices, are two ways to bring together a range of people, generate discussion, understand and acknowledge the embedded community culture and values, and work through how to meet individual and collective needs.

7. Collaborating with community organisations

Small non-government agencies and emergent organisations may be better suited to providing adaptive support services post-disaster, as long as they are supported with technical and financial resources. International research on recovery highlights the importance of both strong local government capacity, and a cohesive system of public, private and volunteer groups integrated into the community. A strong network of local contacts can help to maintain routine service delivery, to activate and empower a range of groups to work collaboratively and effectively use community resources. Local community organisations may also have greater ability to remain adaptable and flexible in response to changing needs and growing insight into community problems.

8. Developing social capital and focussing on people

Social capital refers to the relationships, social support and networks that people have to draw on. Social capital can help recovery in bonding people together, promoting a shared sense of belonging and

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identity, and it has important implications for people's health and wellbeing.

Research into disasters suggests that communities with higher social capital and community leadership showed the highest satisfaction with community rebuilding and quickest recovery. From the available evidence there is some indication that this plays a greater role in recovery than some other features, such as infrastructure damage, or the amount of aid received. Activities that help to develop social capital, that develop social cohesion and trust within communities and with those in power, may have positive consequences for the resilience and recovery of individuals and communities.

It can be a challenge to keep the focus of recovery on people when it may be easier to focus on getting *things* 'back to normal', but the needs of the community are central to the recovery process. The most successful recovery will integrate physical infrastructure recovery with the social and emotional recovery of the people.

9. Effective communication

Communication in recovery needs to be consistent, honest, trustworthy, and readily available through a range of channels and media that reflect the impacts and loss of infrastructure that can be caused by a disaster, and the challenges created by trauma and grief. Importantly, communications need to cater for the

different rates at which people will move through the various stages of recovery and be more or less receptive to the communications coming through to them.

Drawing on a wider evidence-base, communications about decisions that are made, or processes that are applied, that are perceived to be procedurally just are more likely to be trusted, respected, and accepted by recipients.⁶ Decisions are more likely to be perceived as being procedurally just if recipients have had a voice in the decision, understand how the decision was reached, believe the motive behind the decision was trustworthy, and feel they are being treated respectfully.

10. Building in flexibility and review

The recovery process is more of a 'journey' than a step-by-step linear process. The evidence suggests that communities need the 'adaptive capacity' to enable recovery. This is achieved by having flexible governance arrangements, institutional learning before and after disasters, strong community engagement, and building good relationships between the institution, government and community. There needs to be a continuing review of needs, issues, capacity, activities, effectiveness, governance and so on as recovery progresses, as this enables changes to be made as needed and approaches to be adapted over time. Ideally this will be a collaborative process between communities and agencies or regional and central government.

Table 1: Evidence-informed recommendations for community-led recovery

Taking Time	<ul style="list-style-type: none"> ● Take time to regroup, come together, take stock and make sense of the experience ● Avoid rushing decisions or the recovery process ● Take time to understand the community's needs and best way to meet these, keeping in mind the long-term vision of what the community wants to achieve
Active and deliberative	<ul style="list-style-type: none"> ● Establish a community recovery committee
community engagement	<ul style="list-style-type: none"> ● Encourage people to identify their own needs and priorities ● Empower everyone to take an active role in their own and each other's recovery
Effective for interaction between government and community	<ul style="list-style-type: none"> ● Recognise that different communities, and groups within these, will have different needs and may require different responses ● Actively listen to, respect and draw on everyone's views and expertise ● Avoid a pre-defined 'blueprint' and instead create an overarching and flexible strategy community recovery ● Collate and share the services and support available for communities, and be ready to respond to requests for help ● Avoid mandating actions, and instead empower communities to make their own decisions, supported by central teams ● Consider modifying existing audit, benchmark or policy requirements during recovery phase

6. Fitzalan Howard, F., & Wakeling, H. (2020). People in Prisons' Perceptions of Procedural Justice in England and Wales. *Criminal Justice & Behavior*, 47(12), 1654-1676.

Building local recovery capacity and capability	<ul style="list-style-type: none"> ● Develop mechanisms for identifying community strengths, and knowledge gaps ● Central teams can facilitate access to consultation, training and logistical support, rather than service delivery ● Establish good governance processes, and provide relevant resources and time for communities ● Devise proactive, not just reactive, plans, and encourage community members to take responsibility for these
Developing local leadership	<ul style="list-style-type: none"> ● Identify suitable recovery leaders, based on their knowledge, skills and relationships within the community ● Leaders can be those already in formal hierarchies, as well as new emerging leaders identified as having the right capability to meet identified needs, and who are trusted by the community ● Recognise the strain placed on leaders, and ensure support is in place to protect and develop their resilience and wellbeing
Ensuring diversity, inclusion and representation	<ul style="list-style-type: none"> ● Include all groups in understanding needs and deciding on recovery activities, for example, staff and service users, vulnerable and disadvantaged groups, and families ● Ensure an inclusive and representative approach is taken; take care not to only hear the loudest voices in the community ● Establish community advisory groups, and use existing schemes (such as staff and resident forums, or feedback systems) to hear people's voices
Collaborating with community organisations	<ul style="list-style-type: none"> ● Identify local partners and stakeholders who are able to offer support ● Involve community partners in collaborative planning, and continue this as recovery progresses and needs alter
Developing social capital and focusing on people	<ul style="list-style-type: none"> ● Ensure communication and collaboration with those inside community, their wider community networks (e.g. family and friends) as well as with leaders and decision-makers ● Include multiple people in decisions as much as possible ● Keep the focus of recovery on people, rather than just trying to get things 'back to normal'
Effective communication	<ul style="list-style-type: none"> ● Ensure people have a voice in decisions, understand how decisions are reached, believe the motives behind decisions are trustworthy, and feel they are being treated respectfully ● Ensure communications are getting to the right people at the right time ● Use verbal and written communications, that are tailored to the literacy and cognitive needs of recipients
Building flexibility and review	<ul style="list-style-type: none"> ● Ensure governance arrangements are flexible and learning is made along the way ● Remember it is ok to change direction or decisions if they are not achieving what was hoped for ● Make review processes a collaborative activity between communities, partners and central teams/government

Features of Building Back Better

As with community-led recovery there is no research evidence on what building back better looks like specifically in a prison context, but there are areas of research related to the concept which we can draw on (see footnotes 3-5). This evidence tentatively suggests that building back better following a crisis may be achieved by focusing on four features (table 2 provides ideas for how these principles may be translated into practice):

1. Leadership and Vision

Leadership is a key driver of an organisation's ability to cope and adapt to change, including building back better after a crisis. Leaders can support a shift in culture to spot and create opportunities for development and togetherness, and trigger sustainable change.

2. Shared Identity and Togetherness

The evidence suggests that constructive and supportive new community identities can be formed through experiencing a common fate and collective

trauma. A positive shared identity can foster communication and togetherness, aiding recovery, well-being and social capital. However, after a crisis this shared identity and unity can sometimes dissipate, old problems and divisions can re-emerge, and the benefits of collective identity can disappear; it is therefore important that action is taken to protect against this, and to sustain the unity that the crisis has prompted.

3. Organisational Resilience

We know how important it is that we safeguard and promote the resilience of individuals in our communities; but the evidence is growing that the resilience of the organisation itself is critical — in coping with the unexpected, bouncing back from crises and fostering future success. The evidence suggests that

with enhanced organisation resilience, we can expect to emerge from a crisis stronger and more resourceful, with more efficient and effective processes and capabilities.

4. Learning and Reflection

Organisations with a commitment to learning, that protect time to reflect and encourage innovation are more likely to develop successfully. This is particularly important during recovery from a crisis, where some previous ways of working may have been challenged or restricted, and innovative solutions to problems emerged. The evidence suggests that experimenting with new approaches helps people and organisations to think more creatively, imaginatively and resourcefully, and readies them to adapt to new ways of thinking and behaving.

Table 2: Evidence-informed recommendations for communities building back better

<p>Leadership and vision</p>	<ul style="list-style-type: none"> ● Be completely and repeatedly clear about purpose and vision. Using this as an opportunity for renewed purpose and hope, clarity and direction for the future. ● Communicate clearly, honestly and authentically, and demonstrate credibility, to build trust between leaders and staff and bring everyone with them. ● Demonstrate willingness to change themselves and the way they lead, and listen to people in many roles as to what changes will improve the organisation, and positive changes that have been made during the crisis should be retained. ● Demonstrate a commitment to recovery and belief that the organisation can flourish, whilst acknowledging that this will take time and should not be rushed. ● Celebrate success and when innovations don't work as hoped, use these as learning opportunities, avoiding blame. ● Encourage staff autonomy to make necessary decisions, empower people to share ideas, and resist solely relying on traditional hierarchical structures for decision-making.
<p>Shared identity and togetherness</p>	<ul style="list-style-type: none"> ● Plan moments to come together. Put energy and effort into finding times routinely for the community to gather or connect. Keep up the provision of social support and reinforce those systems put in place during the crisis that showed the care and concern people have for each other. ● Do things for each other as this can improve well-being and social engagement. ● Celebrate the community, connections, achievements and anniversaries, and commemorate the lives lost or trauma experienced during the crisis. ● Actively share experiences and concerns about the recovery process to enhance a sense of unity. Provide opportunities and forums for people to share their stories. ● Ensure equality and fairness in the support provided, activities offered, and decisions made about people, leaving no group behind, in order to avoid triggering resentment and prior group divisions re-establishing. ● Maintain a climate of trust, through the way we communicate decisions with everyone in our community, and in how we treat each other. Trust matters enormously, and trustworthiness tends to be underestimated.

Organisational resilience	<ul style="list-style-type: none"> ● Identify and sustain the positive changes made during the crisis, to develop and strengthen a new 'norm' for future practice. ● Question and reflect on our past ways of working, in a way that's open, free of denial and nostalgia. ● Use to best effect the skills and knowledge throughout the organisation, by creating new networks of learning, innovation and ideas. ● Overcome resistance to change and new ideas through good communication, engagement and respect, based on the principles of procedural justice. ● Effectively coordinate services, changes and their implementation, as well as the resources required in order to achieve better outcomes.
Learning and reflection	<ul style="list-style-type: none"> ● Carefully and critically reflect on past practices, decisions and policies as well as emerging changes that have been implemented to cope with the crisis. ● Listen to and collaborate with as many people as possible to gather learning and prompt reflection on positive changes made, and those still needed. True collaboration goes beyond simple consultation exercises, and involves actively engaging different parts of the community so that they work together effectively. ● Capture the changes that have happened in one place, identify those that work, share success stories so that local changes become national learning. ● Be alert to unintended consequences, such as changes that were intended to do good potentially backfiring, or changes that we expected to create possible difficulties actually providing benefits. ● Ensure the learning and reflection gathered translates into action, or we miss the opportunity to build back better.

Conclusion

Whilst the evidence within this summary is not specific to a prison or probation context, the principles of community-led recovery and features of building back better are all relevant when considering recovery within HMPPS. Recovery following a crisis is complex, involving multiple players with competing priorities and expectations acting in highly stressful situations. Recovery will look and happen differently for different communities. The evidence suggests that approaches to recovery that are led by communities themselves are likely to be most effective. A number of principles for

guiding and facilitating community-led recovery have been identified, although we do not yet know the best way to operationalise these or have rigorous evidence for the impact of these on eventual outcomes. Crises also provide an opportunity to develop ways of working and being that can be better for everyone in the longer-term; the evidence suggests that features of leadership and vision, shared identity and togetherness, organisational resilience, and learning and reflection can help with this. Whilst our synthesis of evidence has not been specific to criminal justice context, it would be prudent to consider this in our recovery from COVID-19.