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Keywords

rural; resiliency; Community Capitals Framework; health communication; COVID-19

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Abstract

Key informant interviews with extension-supported community coalition members in five rural communities during the COVID-19 pandemic were used to examine the unique characteristics of rural community resiliency in the face of a crisis based on the community capitals framework. Using a thematic analysis, seven different human and material capitals were examined in community members' reactions to a "black swan" event. Rural community coalition members shared their perspectives on the vitality of their community in the face of adversity which revealed obstacles extension professionals can support through community development efforts focused on building resiliency. The analysis identified three emergent themes: (1) juxtaposing restrictions and uncertainties with unexpected successes; (2) demonstrating resiliency through connectedness; and (3) correlating community health with changing perceptions of COVID-19. Additionally, each theme was juxtaposed with the interplay of community capitals as they related to coalition efforts in a pandemic that can assist in further developing health communication and extension education efforts within rural communities across the globe in times of crisis.

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Introduction

Extension professionals have provided community development-focused education on a global scale for decades. It is acknowledged that to ensure sustainable development and capacity building in communities across the globe, a community must be brought into the process to inform extension programs or other cooperatives of current needs (Rasmussen et al., 2017). Extension services support communities in building their own sense of self by not only improving information dissemination, and rural infrastructure, but also by encouraging and facilitating community change (Vreyens, 1999). Extension persists as a vital institution for supporting rural livelihoods and sustainable community change. For example, extension professionals engaged in the Global Forum for Rural Advisory Services were successful in contributing to many international sustainable development goals (Davis, 2016).

Strengthening community vitality as it relates to resiliency, adaptation, and innovation in community development (Dale et al., 2010) relies on individuals supporting change (Holling, 2001). Vitality and sustainability fall under the purview of resiliency when a community is faced with a disaster or a crisis, bringing about immediate and unexpected changes that may result in negative social and economic impacts (Imperiale & Vanclay, 2016). Community resiliency is defined as the ability to maintain or improve a community's subjective quality of life (Peters, 2019). Internationally, it is becoming more common to define community goals broadly, yet there is not a common strategy for quantifying achievements even though community-level evaluation is often a favorable method of measuring vitality and resiliency. However, such efforts are commonly based on social,

economic, and environmental outcomes (Etuk & Acock, 2017), as well as providing information to community members to mitigate for resilient environments in case of disaster (Imperiale & Vanclay, 2016).

One example of examining vitality and resiliency is in the aftermath of Typhoon Haiyan. Post-disaster recovery in the Philippines was captured through participants' perceptions of strength, self-regulating, and maintaining a positive attitude (Almazan et al., 2019). Additionally, there is a connection between vulnerability in social networks and a community's ability to withstand a natural disaster (Fath et al., 2018). For example, in a Jamaican farming community, depending on the resident's level of vulnerability in their community's social network and livelihood, they reacted differently to fluctuations in rainfall. As such, these Jamaican farmers reported various obstacles related to financial resources, access to materials, land ownership, and government assistance as they considered their level of resiliency during this natural disaster (Fath et al., 2018).

Community resiliency is intertwined with the resiliency of the community members, through education, intervention, and support (Hossain et al., 2010). An Australian community demonstrated this when, faced with an extended drought, they relied on extension professionals to address added pressures and uncertainties to prevent further social repercussions such as mental health issues. The first priority was to better educate extension professionals on mental illnesses, creating more positive attitudes and support for these farmers in difficult times to advance the likelihood of more positive outcomes (Hossain et al., 2010). A more recent disaster, COVID-19, emerged as a pandemic with social and economic repercussions (World Health Organization, 2020), which in and of itself presents a

global stage to examine community vitality and resiliency.

Communities, leaders, and governments need sufficient systems to handle the catastrophes associated with a black swan event: a large-scale event that shocks the economy, social dynamics, and political stability of the circle in which it occurs (Antipova, 2020). There is an opportunity for extension professionals, in partnership with other players, to provide services in mobilizing and supporting communities (Davis & Place, 2003) during an event like COVID-19. In the U.S., Extension is operationalized statewide, with capacity to navigate through existing cultural characteristics and structural norms at the local level (United States Department of Agriculture, 2020) and can react in crisis by leaning on extension professionals' knowledge of community-level capitals (such as social, human, political, and financial). When community members demonstrate teamwork, social capital is enhanced during disaster recovery and community resiliency (Pfefferbaum et al., 2017). Community resiliency has gained traction in rural studies, which are often viewed as more vulnerable (Herman, 2015; Imperiale & Vancley, 2016; Scott, 2013). A community identified as more resilient is stronger at linking social capital (Peters, 2019); therefore, communities where social capital is strong, and supported by extension professionals, should be more resilient when their capitals are jeopardized.

A coalition is a level of community linkage where community members come together strategically to serve a purpose for a minimum of three years (Perkins & Borden, 2004). Often comprised of key community members, city officials, and faith leaders invested in the coalition mission (Carter et al., 2019), a coalition provides space for diverse organizations to collaborate and encourage change (National

Opinion Research Center, 2011).

Community coalition development has been used by extension professionals as a method for strengthening communities (Homel et al., 2019). Coalitions have also been formed on an international level to strengthen and expand funding and partnerships for cohesive goals, such as addressing health issues (Williams et al., 2018). Even on an international scale, community engagement is a driver in coalitions focused on community resiliency (Bromley et al., 2017). Coalitions are frequently used in community development, yet much is unknown on how well coalitions support one another during disasters or if the presence of a coalition within a community helps in times of crisis (Anderson & Crowder, 2000), such as during the COVID-19 pandemic.

Conceptual Framework

This study was guided by the Community Capitals Framework (CCF). Communities are complex and multifaceted, and one way to conceptualize the many components of a community is to use the CCF. Community capitals provide an abstract interpretation of the community systems (Flint, 2010). It has been shown in communities around the world that, through the community capitals lens, the more capital a community has, the stronger their ability to face adversity, deploy agency, and generally improve (Haggard et al., 2019). In addition, the capitals provide insight into community norms and resiliency, as well as provide a strategic way of evaluating the factors shaping community systems and sustainability (Holling, 2001).

To examine community resiliency levels through the CCF, community assets are often measured when trying to examine the impact of outreach and community development efforts of extension professionals (Borron et al., 2019). CCF evaluates community development efforts

from a systems perspective by examining seven types of capital – natural, cultural, human, social, political, financial, and built (Emery & Flora, 2006). *Natural capital* includes all environmental assets, *human capital* is understood as the skills and abilities of people to develop and enhance resources and access outside resources or knowledge to increase their understanding, *social capital* represents networks among people and groups, *cultural capital* is how communities understand and interact with the world, *political capital* is the availability of personal and structured power, *financial capital* is monetary support, and *built capital* is the infrastructure of a community (Emery & Flora, 2006; Fey et al., 2006; Flora & Bregendahl, 2012).

Understanding community capitals assists in community planning and development (Sseguya et al., 2009) and can guide extension education efforts. The presence of certain capitals creates unique distinctions between rural and urban contexts, which points to the value of evaluating them overtime, considering conditions before and after a disaster (Freshwater, 2015). COVID-19 presents an opportunity to examine the impact of existing community coalitions on community resiliency during a crisis using the CCF. The approach enables a more holistic description of individual communities (Gutierrez-Montes et al., 2009) with implications for international extension professionals.

Purpose & Research Questions

The purpose of this study was to explore the impact of COVID-19 on rural communities in Georgia and how extension-supported community coalitions played a role in community resilience during a crisis. The study was guided by the following research questions:

RQ 1) How has COVID-19 impacted rural communities in Georgia from the perspective of local leaders?

RQ 2) How does the work of community coalitions striving for health and wellness within a rural community change when a black swan public health event, such as COVID-19, occurs?

Methods

The research presented here is part of a larger study. The Healthier Together Community Coalition project or High Obesity Program (HOP) Cooperative Agreement is a collaborative project between the CDC and the University of Georgia. As part of the project, the University of Georgia Cooperative Extension system has been working in five specific rural counties to bring together key community members, building a coalition, that meets regularly and is focused on improving the lives of the county residents through improved physical activity, access to healthy food options, and developed food policy that will encourage life-long healthy eating (e.g., only health-conscious meals served by churches, nursery homes, or schools). Coalition efforts have included developing walking trails, placing playgrounds in central locations, improving and connecting sidewalks to important locations within the community, physical activity programs such as exercise classes, community and school gardens, providing healthy eating options at church gatherings and nursing homes, and additional health initiatives.

The community coalitions were originally organized and continue to be supported directly by extension professionals already present in their communities. In addition, the community coalitions have access to, and their efforts

are supported by extension specialists and faculty in four of the University of Georgia colleges: The College of Agricultural and Environmental Sciences, the College of Public Health, the College of Family and Consumer Sciences, and the College of Environment and Design. The community coalitions themselves were made up of volunteers. Members included elected officials, grocery/convenience store owners, restaurant owners, schoolteachers, administrators, church administrators, Master Gardeners, Chamber of Commerce members, Historical Society Board members, local business owners, and active community members. For this research, a rural area was defined as one that was sparsely populated, has low housing density, and was distant from a metropolitan area (America Counts Staff, 2017) with the five counties selected for the project all having an adult obesity rate over 40%.

In the second year of the project, COVID-19 emerged, presenting itself as a global pandemic on March 11, 2020 (Bavel et al., 2020). In an effort to assist community coalition members in staying connected and to identify the impact of the work that was already implemented, as well as the barriers presented by COVID-19, in-depth one-on-one phone interviews were conducted with coalition members in all five counties. The researchers developed an interview guide consisting of 19 questions. The guide was peer-reviewed by faculty with expertise in extension education, community development, and health

communication for content and validity (Lincoln & Guba, 1985). IRB approval was obtained from the University of Georgia. Two of the questions in the interview guide were specific to how COVID-19 had impacted their community and their work as a coalition. Responses to these questions were the focus the study: (1) How do you believe COVID-19 (Coronavirus) has affected your community? (2) How has COVID-19 impacted the work of your community coalition? Probing follow up questions included: How have things changed? How do you think COVID-19 will impact the work of the coalition in the future?

Three interviewers were trained in the community capitals framework and familiarized with the interview protocol via a virtual meeting. The interview protocol was written out in detail and the document used consistently by all three while conducting interviews. Interviewees were randomly assigned to the three interviewers. Because the size of the coalitions varied, between three and 13 interviews were conducted with coalition members in each county. Each of the 65 potential interviewees were contacted no less than four times. A total of 35 interviews were conducted between April 14 - May 27, 2020 when the participants were under an executive shelter-in-place order announced by the Governor of Georgia. See Table 1 for the characteristics of each county and the number of community coalition members interviewed in each.

Table 1***Characteristics of Counties***

Pseudonym	Total County Population	Total # of adults living below poverty	# of interviews conducted
County1	1,537	31%	9
County2	6,189	33%	13
County3	2,834	40%	3
County4	6,621	41%	5
County5	13,390	24%	5

All interviews were recorded, and notes were taken during the process as a secondary form of data. Interview recordings were transcribed verbatim. Responses to the questions related to COVID-19 were extracted and analyzed separately using MaxQDA™ (a qualitative analysis software). Participants were given pseudonyms to ensure confidentiality with the number in the pseudonym representing the county where they resided (see Table 1).

The data was initially analyzed by a single member of the research team using Strauss's (1987) open coding method where the data is categorized based on units of analysis (e.g., words and phrases). Additionally, structural coding was used to quickly identify the COVID-19 data responses that were most relevant from the larger data set to better compare segments and relationships (Saldana, 2013). Peer debriefing was then conducted with two additional research team members to ensure accurate and consistent coding along with theme development. The strategy organized the repeated ideas and identified the themes based on capitals emerging within the data. In previous research, built and financial capitals have been demonstrated as closely interconnected (Borron, et al., 2020; Flora & Bregendahl, 2012). Therefore, for the purpose of this study, the data was analyzed in the context of capitals with built-financial capital serving as an integrated capital. The

primary coder had previous experience with extension and rural community development. She grew up in a rural community in the central U.S. and this perspective may have influenced her interpretations. Peer debriefing was utilized to reduce this effect (Lincoln & Guba, 1985).

Results

Three major themes emerged in regard to the coalition members' perceptions of the effects of the COVID-19 pandemic on their rural communities: (1) juxtaposing restrictions and uncertainties with unexpected successes; (2) demonstrating resiliency through connectedness; and (3) correlating community health with changing perceptions of COVID-19.

Juxtaposing Restrictions & Uncertainties with Unexpected Successes

Collectively, participants' shared obstacles included the availability of technology, food, transportation, stores, schools, and COVID-19 testing, which contributed directly or indirectly to local economic or social shifts. While there is not a fluid delineation among all the community capitals, common relationships between or among capitals were addressed appropriately. Human and built-financial capitals and social and built-financial capitals were combined respectively for this

theme primarily due to the strong linkages between capitals.

Human & Built-Financial

The rural communities involved in this research reflected an attempt at altering personal interaction within the existing infrastructure similar to the reactions of the rest of the world to the developing pandemic and its associated restrictions. Online courses were offered covering various topics, such as nutrition and healthy living to maintain some of the initiatives sponsored by the coalitions. Participants explained it was rewarding to acknowledge the effort of the community to still provide social events, but they also realized these alternative events met a pre-existing and significant roadblock, specifically, the lack of infrastructure or internet access for individuals to participate. This roadblock was exacerbated by COVID-19. For instance, if a participant relied on community access points, such as the library to participate online, access was prohibited or limited. Judy (County1) stated, “I resent libraries are closed because, for many people, that's a place where they can have access to a computer. [CITY] has a Wi-Fi hotspot that people can use. But again, that's if you have a computer.” Other participants acknowledged that low technical skills among community members contributed to this roadblock.

Participants also shared that needed supplies were either not readily available in their community or, if they were, the price points were too high. Angela (County2) stated,

I think our challenges are worse because we don't have a lot of resources, because we only have one grocery store...But as with any small hometown grocery stores, their prices are already a little higher than if you drove to [CITY] and went to

Walmart or Sam's. So, the challenge for all of us, because nobody wants to go to [CITY], it's a COVID-19 hotspot, you couldn't pay me to go to [CITY].

Budgets and reduced options left residents eating less nutritious, processed foods. Participants mentioned the restaurants in the community were closed or restricted to carry out, which affected community members who enjoyed these offerings and hindered economic success of businesses.

Participants were also limited by what could be delivered to them. In their rural communities they faced limited delivery services, which were often marketed in urban and metropolitan areas. This was described by Angela in County2,

We see the commercials on TV for Grub Hub and all those things or pizza delivery; we don't have that, so even if you wanted a hamburger from Hardee's or if you wanted whatever from wherever, you still can't get it. You still have to get in your car and drive somewhere because they're not going to deliver here.

Alternatively, if differentiating between immediate needs, such as meal or perishable food items, and planning ahead, Larry from County3 described how their transition to shopping online had helped his family and allowed him to be more budget conscious and reduce spending. He stated, “We use Amazon and whatever anyway, but we actually kicked it up a notch. It's reduced our spending, which is kind of an unintended consequence. Because those impulse buys, you don't buy. That's how it's affected us.” Additionally, without community events, community members were able to reduce spending. Johnny (County5) stated, “I know just, like in my budget, I didn't have to buy stuff for baseball, so now I'm going to have extra

money for, maybe buy a new lawnmower or a tractor or something.”

While resource access and options varied, many participants acknowledged the small-town grocery stores were generally negatively affected. However, the reverse was the case in County3, which also hosts a lake and ultimately experienced an influx of individuals who were temporarily leaving city life during the shutdown. The result was a noticeable increase in disposable income and a boom for select rural businesses, such as hardware stores. Larry (County3) explained a conversation with a local business owner,

The owner told me they had had the best week of their career within the last 30 days. People are evacuating the larger towns and coming to the lake, to their lake houses or wherever, and they're doing honeymoons and projects that have been needed to do for years. And they've got time to do it. And they were coming into town and buying hardware and lumber and whatever. So, that's kind of an irony right there... restaurants are hurting. I would say, our little locals... One little grocery store, and their businesses is booming because people can't go to the large, or won't go to the larger Walmart's...

Social & Built-Financial

Other than those residing in County3 who had the lake, participants indicated COVID-19's repercussions devastated small businesses and the overall social wellbeing of the community. Small businesses and non-essential employees had gone nearly two months without a paycheck, resulting in a rising number of individuals filing for unemployment. Participants expressed concerns for the economy and its ability to recover if individuals on employment settle

into a mode of not working. With fewer household paychecks, there were additional worries about maintaining livelihoods. While some employees continued working in production and health-related fields, the loss of others and heightened restrictions on social gatherings led to the cancellation of events, closure of schools, and a decline in revenue. Carl (County3) mentioned,

If they draw more money on unemployment and stuff than they can get working, then why do you want to go back to work...some things that's killing our economy and killing our things, because we're forking out more than they normally would have gotten to stay at home... So, we give them extra, and now they don't want to go back to work.

Despite such anticipated negative social repercussions, participants did note a rallying of community connectedness. Much of this stemmed from the reliance on, and activation of, established social networks and trust. Participants explained they relied heavily on strong existing social ties to make phone calls and interact because of their pre-existing trust with residents. One participant shared a success story of how strong social networking pulled a group of community members together for a social event online. Sam (County1) stated, “every month we had big social events and activities, driving events... We've moved all of our events online, adapted them to online. We're using Zoom meeting. We had 300 people in a meeting Saturday”.

Demonstrating Resiliency Through Connectedness

The second theme that emerged highlighted the presence of community resiliency in the face of adversity and how coalition leadership was affected. Human and cultural capital were combined in this

theme due to the linkages between the capitals and the participants' responses.

Social

Overall, an emergence of the participants exhibited hopes and prospects for their community post-pandemic. Participants discussed challenges they faced but also motivations to persevere. Even in the spirit of perseverance, participants recognized that as churches and other community organizations continued to host more events online, they were concerned that people may get used to not being involved and quit coming in the future.

Face-to-face communication was highly valued. A participant expressed how it was more difficult to attract members without face-to-face synergy and team building. Tracy (County3) detailed their strategy, "We've done call trees...contacted and put together, rallied volunteers... I have volunteers that'll keep the log sheets of who they talked to, when they talked to them, when social media is blasted out, when text messages are blasted out." Social networks were strong for those who were intertwined in the community, but there were a few who expressed the struggle to be an outsider in a rural community. Roger (County4) stated,

I have a hard time knowing what anybody thinks around here. I'm sort of an outlier and not many people really confide in me and I don't... I still, in this community, I don't have any close friends that I would consider really close.

Some community members were resisting changes brought about by the COVID-19 pandemic but recognized and valued the connectedness of small-town life. Donna (County4) recalled her experience on the walking trail during social distancing. "We keep ourselves six feet apart. You can turn around to somebody here and say, 'Gayle, back off some'. Or say, 'Diane, go

faster.' I mean you can do that in a small town."

Human & Cultural

While some participants did not exhibit sentiments of strong community resiliency, others expressed how they had hope for their towns. Individuals displayed their understandings of the community and their own acceptance of hope. Participants highlighted community members' feelings during the pandemic. While some insisted on returning to normal, a few participants identified that it was time to embrace the new normal and appreciate what this time was bringing in a positive way. Amelia (County2) shared, "I have faith that the people that pull through will think about what happened and what could have happened. I believe they're going to show more love because love is what we actually need in this world."

The positive energy was evident as participants discussed the continued momentum on coalition projects. It was mentioned that one project had so much awareness, community residents would be disappointed if it did not happen again. Their access to each other and resources, along with the learned small-town communicative traditions strengthened their resiliency. Donna (County4) shared, "We'll figure out a way. In a small community you can actually talk to each other, you know each other, you know where they work, what their hours are, you know everything about them."

As participants discussed their own access and proficiencies within their community during the pandemic, they also discussed their assumptions of how the rest of the world may be reacting at this critical time. Participants discussed how they had hope for their own counties and other towns as well. Ryan (County1) shared,

Hopefully it will bring us all together, believe it or not, COVID-19 is going to draw us all together because it's going to take the team to make us all successful... not just here in [County1] but the society. We're going to have to work together and get back to basics.

Political

Participants discussed how the pandemic could bring the community together as they worked as a team to get back to a thriving society. Participants noted how the coalition goals slowed and partnerships were limited. Carl (County3) stated, "We weren't able to collaborate with partners, because the state parks shut down for a month." Face-to-face meetings and collaborative work were placed on hold. Due to ongoing government regulations, there was confusion on how to move forward. Carl (County3) described it as, "Confusion on coming down from the higher ups." Despite regulatory and administrative obstacles, participants noted positive movement for the community coalition's initiatives. Amelia (County2) shared,

It has somewhat brought some togetherness because you will find people now that wouldn't have thought of another person. People are constantly on the phone trying to check on them, because if they can't get to this person to do what they can, we try to reach out, see if there's something, how we can help, other than our presence being there.

Correlating Community Health with Changing Perceptions of COVID-19

The final primary theme emphasizes perceived health conditions during the pandemic in rural Georgia. As the theme was analyzed, political and built-financial

capitals shared a strong relationship and were addressed together.

Social

There was not much concern within the communities until COVID-19 cases started to affect them personally. Some participants were not troubled at all, and some expressed fear and concern about COVID-19. While feelings toward the pandemic varied, it was universally understood that the sizes of gatherings were different in a rural community. Larry (County 3) exclaimed, "Hell, I've been socially distant for 20 years. Didn't bother me at all." For him, such a sentiment correlates with the small rural population, and that all residents are very aware of each other. Therefore, the decision to gather as a group of six or eight people for coalition work, according to Larry, means they easily social distance and wear masks to work together.

Political & Built-Financial

Without adequate infrastructure, COVID-19 mitigation and response efforts were lacking, which, as many participants indicated, resulted in increasing COVID-19 cases and related deaths in certain counties, especially among the elderly and those with underlying medical conditions. Some participants concluded rising rates were due to poor diets. Glen (County2) explained, "Deaths are going up, especially among the elderly. Those with medical conditions, and a lot of these medical conditions come from poor diets." Several participants discussed how their populations are elderly or have pre-existing health conditions making the pandemic a concern, whereas others had minimal concern. Tracy (County3) shared,

You've got people walking around with the coronavirus that aren't doing anything... But we've not had a lot

of testing in this community. You can do it by appointment at the health department, but [CITY] did come in and did one testing of 30 people, and that's all that's been done. We haven't had any massive testing.

According to the participants, it was evident that the regulations imposed by the government had repercussions in the community. Sam (County1) said, "Until the people feel comfortable, they're not going to patronize anyplace that they don't feel safe or any activity that they don't feel safe." Rather than concern, negative attitudes were also expressed toward the government mandates. Judy (County1) stated, "I disagree with a lot of the concepts where people were demanding masks and all that. I think it diminishes our community."

Human

In one county there was not much fret over the virus as individuals had not learned of the repercussions until an event that brought it to the county and residents began to get sick and die: especially those in the black community. Marvin (County2) said,

The black community has an overwhelming number of people who are contracting and testing positive for this virus and sadly, most of the people who are dying are black, and that's sad but everything is pointing to the fact that there are endemic health issues involved in the black community, diabetes, asthma, and high blood pressure.

Tracy (County3) stated, "If COVID-19 doesn't hit you personally within your community, it's like it's not there. We're at a point where people just kind of... If it is not happening, it's like they're just living their daily lives." She explained only half of the residents followed regulations and

faulted the community for not providing more testing. While some participants did not believe in COVID-19, many were scared and living in fear. Many residents were not leaving their homes because they feared the virus. Lacy (County2) shared her worries, "People are scared. And you can't, and really not getting people to come out and do the walking trail because they're scared. People are just staying at home because they're scared."

Conclusions, Implications, & Recommendations

The findings demonstrated the relevance and unique interplay of various community capitals when extension-supported community coalition members are in crisis. Noticeably, social capital was significant in all three themes. A strong willingness to share and speak about community dynamics was evident. The ease of communicating with each other and the willingness to reach out to fellow community members was repeatedly mentioned, demonstrating the robust nature of social capital in all five rural counties examined.

A unique aspect of the data, exhibited in the first two themes, was the presence of both social and human capital as a lens through which other capitals were situated. In the first theme, built-financial capital was assessed through human and social capital lenses, specifically related to resource access. The human capital lens emphasized residents' inability to access monetary resources and infrastructure, portraying a negative sentiment in rural communities. In contrast, the social capital lens focused on interpersonal reliance for emotional or material support.

Again, in the third theme there was evidence of social and human capital—this time with political capital. Through the social capital lens, political capital identifies

how regulations compromised social networks from what had previously been the norm. The human capital lens highlighted fear based on imposed regulations or restrictions, resulting in individuals not wanting to leave their homes or shop in neighboring communities, reducing access to resources. The resulting overlay of capitals demonstrated a significant interplay of human and social capitals among the other capitals. Previous literature positioned social capital as essential, permeating all aspects of community dynamics (Pfefferbaum et al., 2017). In this study, the described context of access or regulation indicated social and human capital do not just characterize individuals' access and social ties but catalyze the degrees to which other capitals function.

In the second theme there was a strong correlation between social capital and community resiliency, supporting previous research that social capital is a key pillar in communities and disaster management (Pfefferbaum et al., 2017), emphasizing hope and prosperity in a time of uncertainty. At the time the interviews for this study were conducted the COVID-19 pandemic was becoming globally recognized. With the extent and duration of the ramifications of COVID-19 unknown, the use of existing social ties and networks supported by extension efforts created a sense of comfort and trust during a time of unpredictability (Williams et al., 2018).

Additionally, in the second theme a relationship between human and cultural capitals emerged. Participants juxtaposed personal experiences with those elsewhere, suggesting a fostering of more resilient attitudes as community members critically examined their own competencies in comparison to the world around them during the pandemic. Such a comparison demonstrated increased morale, understanding, and overall resiliency based

on the coalition already being in existence. Therefore, extension professionals should emphasize supporting development of coalitions in their communities to better prepare them to be resilient in crisis.

One key limitation of this study is that the data represents a particular snapshot in time, primarily the forefront of what is now considered an enduring event. COVID-19 caused the coalitions to pause their work because of their inability to meet in person, however the communities still benefited from the established social networks and communicative practices already in place. In this instance, the participants did not seem to react to the full effect of the COVID-19 pandemic and should be further explored as the pandemic continues.

Coalition members seemed to be unsure of their role during the pandemic. The future of the pandemic was uncertain, and members seemed to be waiting for direction from the government and Centers for Disease Control on what to do moving forward to help their community. As such, participants' responses resembled qualities of community resiliency enacted immediately after a short-term disaster, such as a flood, or tornado. To truly consider the ramifications of the COVID-19 pandemic on rural communities, data should continue to be collected to see if enduring events shift the dynamics of the CCF and work of the community coalitions as extension professionals are allowed to open their offices and begin to work more closely with community members on their initiatives while social distancing.

Despite the lack of long-term data, the value of this point-in-time snapshot indicated key strengths and weaknesses that existed at the community level. Based on how participants viewed their current circumstances, there is a significant opportunity to capitalize on known social networks that are situated within the access

limitations of community members. Based on the coalitions' current project efforts, extension professionals should capitalize on mediated dialogical spaces to manage anxiety and assist communities in coping with uncertainties associated with the COVID-19 pandemic. Community understanding and morale is dynamic and will shift, therefore the intent is to determine how to engage to ensure sustainable resiliency.

Another opportunity is the role of the local extension professionals, who are already part of the existing coalition efforts. When local efforts involve implementing adaptive measures, the presence of extension professionals and their expertise in various subjects fosters intentional community development for long-term sustainable initiatives (Raczkoski & Edwards, 2018). However, while extension professionals are trained experts in a given program area, which is essential for addressing specific community needs and formulating solutions to existing and specific challenges, this does not necessarily translate to holistic approaches to community development and overall community vitality. Therefore, professional development in areas such as community capital development can contribute to the larger discussion of the extension system and its host of extension professionals engaging more holistically and purposefully with the communities in which they serve and work.

Regardless of whether it is an extension professional or community coalition member, there is significant value in collecting data, such as that collected through these interviews, and feeding the results back to the community so they can identify instrumental strengths and weaknesses of existing capitals within their communities (Lamm & Lamm, 2018). When presented with findings specific to their own community, coalition members would be

able to capitalize on existing strengths and weaknesses, and even shift and pivot in the face of unexpected events, such as the COVID-19 pandemic, purposefully enhancing existing community capitals. There is value in extension-supported community coalitions, and their ability to leverage social capital in their communities, therefore this should be a priority for extension professionals all over the world.

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