Think global, act local: using a translocal approach to understand community-based organisations' responses to planetary health crises during COVID-19

Geordan Shannon*, Parabita Basu*, Laura E R Peters, Aaron Clark-Ginsberg, Tania Minka Herrera Delgado, Rajkumar Gope, Maga Guanilo, Ilan Kelman, Lilian Noelli, Eija Meriläinen, Katie Riley, Chloe Wood, Audrey Prost

Little is known on how community-based responses to planetary health crises, such as the COVID-19 pandemic, can integrate concerns about livelihoods, equity, health, wellbeing, and the environment. We used a translocal learning approach to co-develop insights on community-based responses to complex health and environmental and economic crises with leaders from five organisations working with communities at the front line of intersecting planetary health challenges in Finland, India, Kenya, Peru, and the USA. Translocal learning supports collective knowledge production across different localities in ways that value local perspectives but transcend national boundaries. There were three main findings from the translocal learning process. First, thanks to their proximity to the communities they served, community-based organisations (CBOs) can quickly identify the ways in which COVID-19 might worsen existing social and health inequities. Second, localised CBO actions are key to supporting communities with unique challenges in the face of systemic planetary health crises. Third, CBOs can develop rights-based, ecologically-minded actions responding to local priorities and mobilising available resources. Our findings show how solutions to planetary health might come from small-scale community initiatives that are well connected within and across contexts. Locally-focused globally-aware actions should be harnessed through greater recognition, funding, and networking opportunities. Globally, planetary health initiatives should be supported by applying the principles of subsidiarity and translocalism.

Introduction

The COVID-19 pandemic and responses to it have shown the connectivity of human and natural systems in a fragile supersystem, which frequently undermines rather than supports planetary health.[1,2] Supersystem risks (eg, pandemics, environmental hazards, and financial crises) manifest locally, and tend to fall unfairly on communities in areas where geographical remoteness, social inequity, and under-representation in political decision-making structures create an extreme environment of vulnerability.[3]

Globally, community-based organisations (CBOs) working in these settings must navigate interlocking supersystem challenges. The COVID-19 pandemic revealed how localised experiences of health and social inequity intersect with, and are exacerbated by, environmental crises, regional geopolitics, and globalised extractive economic systems.[4–6] Despite these challenges, CBOs might be able to develop highly contextualised pandemic responses that revitalise diverse local, social, and environmental resources. Small-scale initiatives, such as those led by local CBOs, often face challenges linked to the scarcity of large-scale funding and networks of knowledge and support, but are effective alternatives or complements to centralised large-scale initiatives, as they can adapt and respond to changes and community priorities more rapidly.[7,8]

Studies of successful sustainability initiatives have found that these initiatives are often translocal (ie, rooted in place-based solutions), but also connected to global knowledge and practice networks;[9] examples include energy cooperatives, transition towns, indigenous guardian networks, and sustainable urban food networks.[8] The UK Sustainable Food Cities Network developed an effective model through enhancing "cross-scalar, collective and distributive agencies"[10] across different urban foodscapes. Translocality in urban food networks was achieved through knowledge sharing, coproduction, common imaginaries, and collective action.[10]

Although many small-sized to medium-sized CBOs pioneer novel approaches to social and systems changes, they often implement them without a forum to share their innovations globally. To our knowledge, no examples of translocal initiatives with an explicit focus on global or planetary health have been articulated in the literature. CBOs from low-income and middle-income countries, or those operating in extreme settings where high social inequality, political marginalisation, and geographical remoteness overlap might not have the infrastructure to assemble the necessary resources and engage in translocal network building. Insights on how CBOs are responding to planetary health crises, such as the COVID-19 pandemic, are needed to identify practical strategies to support them, centre local perspectives in global health policy, articulate common visions for sustainability and health, and build networks for social change.

In this Viewpoint, we aim to use a translocal learning approach anchored in place-based case studies to understand how CBO responses to COVID-19 could link livelihoods, equity, health, wellbeing, and the environment to address current and future planetary health crises. We first offer an outline of translocalism, define a translocal learning approach, and describe our use of this term. We then present five CBO-led case

studies on responses to the COVID-19 pandemic. Given the paucity of previous work on this topic and the low profile of the many groups involved, the organisations included in our study were selected from our existing networks. We conclude the Viewpoint with proposed ways forward to support CBOs in addressing future crises.

Approach

Translocal CBO network

Through the translocal health project, we worked with five CBOs from eastern India (Ekjut), Andean Peru (Casita Huaran), western Kenya (Sauti Dada), southern and northern Finland (HOPE), and southeast Alaska (Sitka Conservation Society). The translocal health project was initiated during the COVID-19 pandemic to better understand and support the work of small-scale CBO partners affected by the pandemic. All CBO partners were engaged in pandemic responses and were identified though our existing research networks. The translocal health project was facilitated by a team of academics in the UK and USA. The academic role was not to lead but to promote translocal connections through bringing together partners and providing a platform for mutual learning. The translocal health project was supported by a small grant from University College London Grand Challenges.

All five CBOs were working in settings where place-based social and health inequities have been exacerbated by COVID-19. Ekjut (Jharkhand and Odisha, India) is a recipient of WHO India's Public Health Champion Award and works with marginalised and tribal communities to improve women's and children's health, nutrition, and wellbeing through community engagement and participatory learning and action. Sauti Dada Africa (Kenya) works with Pokot pastoralist communities in western Kenya to promote the health, welfare, and economic empowerment of girls and women through health campaigns, advocacy, mentoring, education, and outreach. The CBO also offers education for boys and men to tackle gender and social inequity. HOPE Yhdessä & Yhteisesti ry (Finland) works primarily in urban settings and supports children through goods donations to low-income and crisis-stricken families, and funds leisure activities for children and young people. Casita Huaran is based in the Sacred Valley of Peru and provides systems-based alternatives to developing livelihoods for young people and supporting local economies and agriculture. Casita Huaran's work is informed by indigenous knowledge and approaches to land management. The Sitka Conservation Society (Alaska, USA) works to protect the Tongass National Forest. The society also supports the development of economically, socially, and environmentally sustainable communities in southeast Alaska through projects on the ground, including projects targeting youth, local food production, livelihoods, storytelling, and advocacy, with a focus on systems change.

Translocalism and a translocal learning approach

Translocalism or translocality refers to the "socio-spatial dynamics and processes of simultaneity and identity formation that transcend boundaries—including, but also extending beyond, those of nation states".[11] This term has also been used to describe a composite of place-based social movements that facilitates the exchange of knowledge, resources, and practices through linking up localities in a network of networks.[10,12] Through creating new spaces of agency, solidarity, and reflection, translocalism is recognised as a tool of resistance, emancipation, and transformation of social norms beyond standard community, institutional, and geographical constraints.[12–14] As Banerjee suggests, translocalism "… both transgress[es] and transcend[s] locality and [has] the ability to change the local spaces from which [it] emerge[s]".[14] Translocal movements tend to operate through three mutually reinforcing processes: knowledge and resource sharing, shaping collective identity, and implementation of emergent tools and strategies.[10] These three processes were used as a framework for translocal learning through the translocal health network.

Translocal learning draws from translocalism, with a focus on shared learning across multiple communities using diversity of experiences as a resource for learning rather than something that impedes analysis or requires controlling for.[9] Translocal learning involves collective knowledge production across different localities in ways that value local perspectives and action, but transcend national borders.[9] This type of learning is underpinned by social learning theory, where an individual's learning is shaped by their interactions with peers, neighbourhoods, communities, and other social networks.[9,14] Translocal learning expands social learning through iteration of ideas, valuing diversity of perspectives, and accepting multiple boundaries of analysis, as opposed to a singular process, population, or learning objective;[9] translocal learning is useful when the types of challenges that communities face are complex and emergent, such as those catalysed by COVID-19.[9] A translocal learning approach can help uncover new solutions to global challenges by creating a space to reinterpret local realities, co-create knowledge, and identify actions together.[9,11] Translocal learning has been used to support ecological community actions and ecosystem-based disaster risk reduction[15] but has yet to be used in global and planetary health.

We used a translocal learning approach to understand the colliding health, environmental, and livelihood challenges confronted by five CBOs in the wake of the COVID-19 pandemic, and their responses to these challenges. Although translocal learning has typically been used through a process of shared fieldwork activities, we adapted this approach to suit the activities of the CBOs as they responded to emerging community needs in the wake of COVID-19. We applied a three-step approach to the translocal learning process grounded in translocal action theory. First, we focused on knowledge and resource

sharing by working directly with CBO partners to gather, process, and share local relevant information, including five CBO-specific interviews, stories, videos, and photographs. Second, we focused on shaping collective identity through two online workshops and sharing spaces, where each CBO was invited to share their perspectives, listen to others' experience, and reflect on the commonalities and differences. Third, we implemented the emergent tools and strategies, with a focus on developing locally relevant coproduced media and activities. The process of translocal learning occurred between March 24, 2021, and July 4, 2022. As a result of COVID-19 restrictions, all our meetings and analyses were done online through web calls, emails, and group chats.

To formally interpret information gathered through the translocal learning process, we collated data from case studies provided by each CBO to understand whether and how these organisations responded to COVID-19 in ways that linked livelihoods, inequity, health, wellbeing, and the environment. In addition to group discussions, we used a case study synthesis approach to compile diverse information from each CBO site and explore similarities and differences in experiences responding to complex community challenges during COVID-19. We designed topic guides for each CBO, with prompts about the local health and social effects of the pandemic, challenges to community health and development, local responses to interlocking pandemic and planetary health risks, ways in which CBOs connnected their actions across local, national, and international levels, and the role of partnerships, external links, and networks in supporting CBOs' impact. The case studies served as primary data and were collaboratively analysed to identify emergent themes within and between each context. Results of the case study synthesis were also collectively validated and discussed. We did most of our work online and built a network supporting local CBO-led initiatives through information exchange and dissemination events. A range of non-academic outputs were generated in parallel to the academic findings, including videos and photo-stories of community-led initiatives.

Learnings

The main learnings across the three steps of our translocal approach were knowledge generation and resource sharing, shaping collective identity, and implementation of emergent tools and strategies. First, CBOs quickly understood the ways in which COVID-19 would amplify intersecting social, health, and wellbeing vulnerabilities in the communities they serve (knowledge generation and resource sharing). Second, the translocal health project reinforced the crucial role of localised CBO actions in the face of systemic planetary health challenges (shaping collective identity). Third, CBOs were able to develop rights-based, ecologically-minded pandemic responses focused on young people and equity (implementation of emergent tools and strategies).

CBOs at the front lines of COVID-19: understanding local complexity

The interaction of COVID-19 with other diseases, social and structural determinants of health, and broader supersystem risks enhanced the overall negative effects of the pandemic, creating a powerful syndemic.[16,17] Insights were shared by partners as part of a knowledge generation and resource sharing process, which revealed cross-contextual similarities in the ways that COVID-19 affected livelihoods and access to services, and in turn exacerbated intersecting social and health vulnerabilities created by ongoing social and environmental changes.

In the eastern Indian state of Jharkhand, where Ekjut works, droughts have recently been occurring every 2–3 years, due to changing rainfall patterns. These droughts make subsistence and making an income from agriculture difficult. Droughts also increase migration within and between districts and states, especially in areas where communities often combine agriculture, forest produce collection, and other forms of migrant labour to diversify income sources. Ekjut witnessed how the employment and food security of families dependent on daily wage labour were deeply affected by the COVID-19 pandemic. Migrants from many states, including Jharkhand, were left without work, and stranded in different states with no transport or food to return home.[18]

In Baringo County, Kenya, where Sauti Dada works, pastoralist communities were confronted with a long drought followed by heavy rainfall and flooding during a period with military-enforced pandemic restrictions. The drought reduced livestock numbers (that pastoralist communities depend on). The restrictions on mobility left many people unable to undertake market trading or purchasing essential to their livelihoods. The flooding around Lake Baringo affected agricultural lands and displaced thousands of people, who were unable to reconstruct adequate accommodation because of the pandemic. These environmental and pandemic disruptions were further exacerbated by armed conflict in the region, which was met with a heavy-handed government response further affecting local infra-structure and exacerbating insecurity.

The Sacred Valley of Peru, seen as the breadbasket of the country and where Casita Huaran is located, has also been weakened by changes in rainfall patterns and extractive, resource intensive, and profit-maximising approaches to agriculture. Food systems have long been affected by a combination of loss of local farming knowledge, imposition of energy-intensive, high-yield farm crops, poor natural resource stewardship, and changing weather patterns. The depletion of local, nourishing food sources was unmasked by the pandemic, when national and international supply chains were abruptly interrupted, leading to acute spikes in hunger and malnutrition in the region. Internal migration for employment in mining and tourism sectors put many locals at risk of economic exploitation and exposure to COVID-19 and occupational

health risks. Many were stranded away from their homes due to heavily enforced national lockdown.

The Tongass National Forest in southeast Alaska is home to 32 communities including the Tlingit, Haida, and Tsimshian people. These communities have historically relied on abundant populations of salmon, deer, and other natural resources for their livelihoods and to supplement their diets, as 95% of the food imported to southeast Alaska is shipped by barge. Climate change has affected the natural resources in the region. Warming waters and ocean acidification have caused a decline in fish harvests[19] and the unrestored clear-cut timberlands have negatively affected local deer habitat and populations.[20] The COVID-19 pandemic caused suppliers to shut down, and the disruption in barge services caused many communities to run out of supplies as grocery store shelves emptied. The COVID-19 restrictions also disrupted tourism, commercial fishing, and food service industries, which exacerbated food insecurity through loss of livelihoods and income.

HOPE supports mainly urban areas in Finland, where food security relies on transnational food supply chains and supermarkets. During the pandemic, families' poverty and food insecurity increased, and they began asking for food aid. Corporate and private donors and CBOs, such as HOPE, saw food aid as an effective way to support families in need when their work was disrupted.

Beyond syndemic effects on livelihoods and food security, the pandemic also amplified gendered and social inequalities in health and wellbeing. For example, Sauti Dada witnessed how COVID-19-related food insecurity led to an increase in domestic violence cases: "…Men and women were home all the time…What happened is that most women did not have anywhere to get food because the schools were closed, there was no church, and there was no local economy buying or selling firewood to the school, caring for cows at the compound, or selling at the market. Because there was a lack of food in the family, men could not tolerate this and there was a rise in cases of gender-based violence." (LN; Sauti Dada Africa; Tangulbei, Rift Valley, Kenya). In Sitka, Alaska, where approximately 30% of people live below the poverty line, people living in economically or socially precarious situations were disproportionately affected by the pandemic and the associated responses. Throughout Alaska, there was evidence of an increase in domestic violence, mental health challenges, and drug use due to loss of livelihoods and stress caused by the COVID-19 pandemic. Restrictions also forced people to stay at home with their abusers. As schools closed and classes were moved online, families faced increased caregiving and related economic pressure as child care is scarce in southeast Alaska. Some women were forced out of the workforce as they took on child-care duties, or had to risk exposing their children to COVID-19 by putting them in collective daycare settings to maintain a livelihood. In Finland, COVID-19 exacerbated food insecurity in ways that affected impoverished families' diets and thereby contributed to low self-esteem of children. Many children from economically-pressed families gained weight during the pandemic, which exacerbated bullying. These examples echo research documenting increases in gender and social inequities and violence against women and girls during the pandemic in diverse settings globally.[21–23]

Shaping collective identity: the crucial role of CBOs for planetary health

COVID-19 simultaneously increased awareness of globalised structural forces and revealed that there is power to act at the local level in the face of larger systemic challenges. During the initial stage of the pandemic, some CBOs reported feeling incapacitated, overwhelmed, powerless, and unsure of how to proceed. Drawing on their strong community relationships, each CBO was soon able to establish their role, pivoting to address immediate local needs. Many CBOs stepped outside of their usual scope of practice to incorporate a multipronged approach at the intersection of health, climate, and livelihoods. For example, Casita Huaran and Ekjut pivoted from a long-term capacity-building model towards immediate actions that addressed food security and livelihoods. Sitka Conservation Society and HOPE expanded their scope of action from environmental activities towards a model more strongly oriented to health and social support. Through their experiences of effectively adapting to a crisis, each CBO was able to use their power to respond locally to complex systemic issues. This assistance persisted beyond the initial stages of the pandemic and seeded new ideas for how CBOs can be key actors for their community.

CBOs' actions uncovered pathways to possibly more sustainable and long-term initiatives. Through the translocal health network, localised CBO actions were framed in terms of their relationship to people, place, planet, position, peace, plurality, and progress.[24] Regarding people and place, the nature of CBO activities being responsive to and guided by local community members and grounded in place allowed for improved effectiveness and sustainability of work. For example, Sitka Conservation Society attributed the success of their work to relationships of trust with the Indigenous Sitka community and knowledge of the local environment built over many years. This local knowledge influenced the scale and cadence of CBO responses to tailor them to communities' needs, and provide the assistance at the right time in the right place. Regarding peace, organisations such as Sauti Dada focused on peace-building through addressing complex livelihood needs. Sauti Dada also explicitly tackled preexisting local conflicts (eg, cattle hustling and tribal tensions in the region) through a pandemic-inspired education model that focused on women and children as catalysts of change. Despite their strong local focus, CBOs recognised the importance of a plurality of perspectives. This approach was most notable in CBOs with close ties to Indigenous communities, such as Casita Huaran, who

adopted an Indigenous-informed approach to regenerating their local agricultural economy. These qualities of local CBO responses showed how effectiveness and sustainability of localised actions could be improved when tailored to the right scale. Beyond sustainability objectives alone, CBO actions were regenerative, focusing on community flourishing beyond the pandemic.

The translocal health network created a space to reflect on and reinterpret CBOs' value. Despite the challenges identified, there was a growing recognition of the importance of CBOs in addressing planetary health crises. First, CBOs showed the value of small-scale high-impact work that was tailored to the local situation. CBO approaches valued cultural knowledge and local ownership in ways that larger-scale initiatives did not, which represented a shift away from the assumption that small actors do not have the power and effectiveness of large-scale initiatives. Second, connection across initiatives at scale was recognised to be a way to unlock the potential of CBO actions: sharing local projects, connecting with others, and building a sense of community identity were powerful in amplifying CBOs' influence. Although communications and networking opportunities were disrupted by the COVID-19 pandemic, the organisations were able to access the resources and networks they needed with the use of technology. For example, HOPE was able to use web platforms to meet other activists and keep their operations going, and Sauti Dada was able to share their experiences on webinars and other fora. Ekjut used technology to facilitate online training in human rights and photography to enhance their local work. Third, the ways that CBOs addressed simultaneous health, environmental, and livelihood issues speak to the inherent innovation that is possible through these actors; CBOs' responses and reflections on how to support CBO innovations are outlined in the insights section.

Localised actions: CBOs developed rights-based, ecologically-minded pandemic responses focused on young and vulnerable people

Beyond generating early warning signals, CBOs responded to intersecting health and ecosystem challenges in ways that linked livelihoods, inequity, health, wellbeing, and the environment. CBOs were not only able to anticipate and identify challenges, but they also acted quickly and earlier than international institutions to minimise some of the pandemic's effects by using their understanding of community needs and local networks of resources. CBOs were also able to foster new networks by linking-up the resources available to them through various responses to the immediate crisis.

Several CBOs used their local understanding of communities and the environment, and a rights-based lens they normally applied in their pre-pandemic work, to better identify and serve vulnerable groups during COVID-19 relief work. Sauti Dada expanded access to food banks for vulnerable girls, checked on girls and women at risk of gender-based violence and took them to a safe house if needed, and established a kitchen table savings scheme so that small groups of women would have access to cash safety nets. Casita Huaran organised food baskets for Peruvian highland communities who had lost jobs in the tourism industry due to the COVID-19 pandemic and initiated mutual aid and local market networks bridging different communities.

Ekjut reached out to people living with psychosocial disabilities, families of people with severe mental illness, people without ration cards for food, older couples with no assured means of subsistence, daily wage earners, and families returning to villages with no income. The organisation provided these people with dry rations of food, hygiene kits, livelihood support, and medicines. Ekjut also provided hot cooked meals to rickshaw pullers, older couples, homeless people, people in shelter homes, and migrant workers. HOPE organised contracts with local stores so that beneficiaries could shop directly observing social distancing principles. The Sitka Conservation Society responded to local food insecurity by starting a mutual aid network that provided direct grocery assistance through flexible gift cards, implementing a Summer Food Service Program to feed 400 children and teenagers a week during the summer school holidays, and delivering boxes of food aid to those with reduced access. When the US Government provided stimulus checks, local fundraising campaigns asked for donations from those who were less economically affected to redistribute the funds to people into the community who struggled to buy groceries. With the understanding that local businesses were also negatively affected, Sitka Conservation Society looked for solutions that would put money back into the community, including leveraging grants to hire local restaurants to prepare free meals for food-insecure families, or using locally-caught and donated seafood products from local partners.

Many CBOs also reoriented some of their existing processes to support government disease control efforts by promoting physical distancing, mask use, and COVID-19 testing. Ekjut worked with the National Health Mission (Jharkhand) to establish an app and community surveillance system to support the work of community health workers called accredited social health activists. The CBO rapidly repurposed the app and workflow to support government disease control efforts and assisted the front-line health workers to reach their targets by improving management of their responsibilities. In addition to their programme of distributing sanitary pads to the community, Sauti Dada began distributing masks and initiated community hygiene and COVID-19 prevention education in collaboration with the sub-county health management team.

Beyond immediate relief, Casita Huaran, Sauti Dada, and Ekjut all worked to repair local economies and restore food security to limit immediate risks to rights, health,
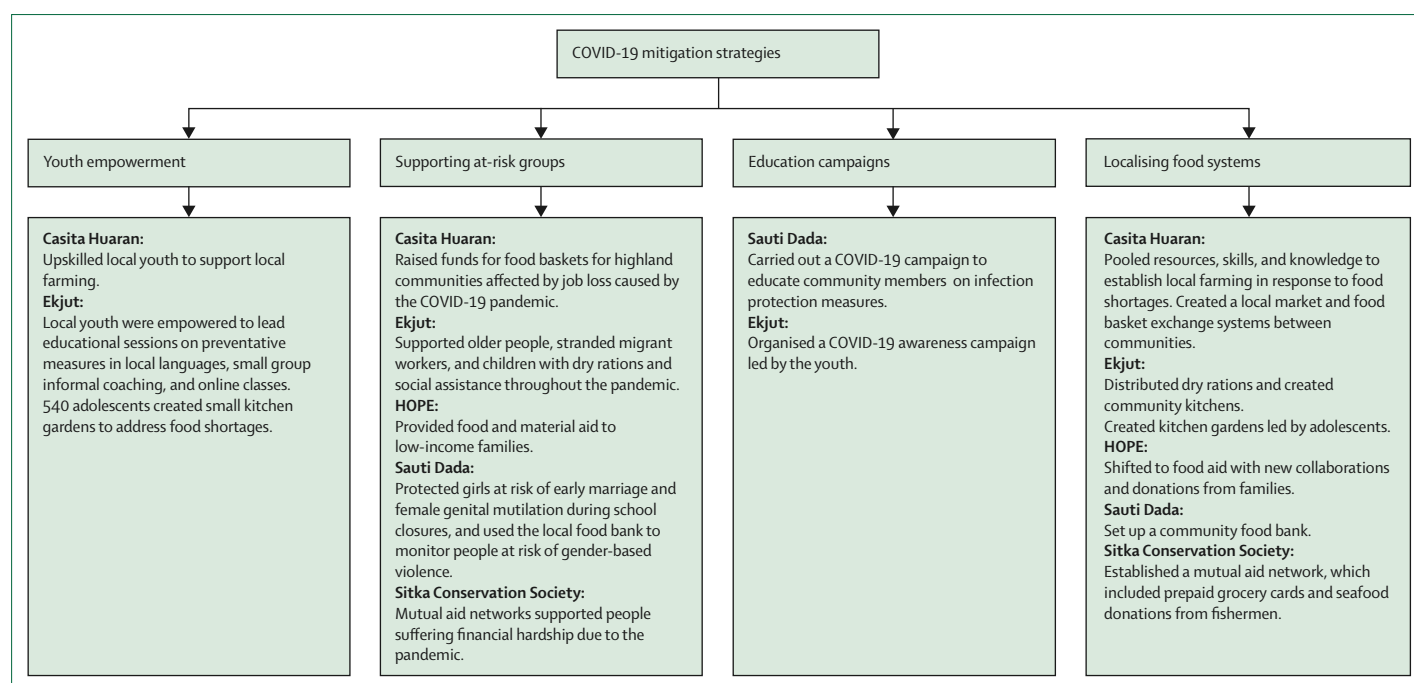
COVID-19 mitigation strategies			
Youth empowerment	**Supporting at-risk groups**	**Education campaigns**	**Localising food systems**
Casita Huaran: Upskilled local youth to support local farming. **Ekjut:** Local youth were empowered to lead educational sessions on preventative measures in local languages, small group informal coaching, and online classes. 540 adolescents created small kitchen gardens to address food shortages.	**Casita Huaran:** Raised funds for food baskets for highland communities affected by job loss caused by the COVID-19 pandemic. **Ekjut:** Supported older people, stranded migrant workers, and children with dry rations and social assistance throughout the pandemic. **HOPE:** Provided food and material aid to low-income families. **Sauti Dada:** Protected girls at risk of early marriage and female genital mutilation during school closures, and used the local food bank to monitor people at risk of gender-based violence. **Sitka Conservation Society:** Mutual aid networks supported people suffering financial hardship due to the pandemic.	**Sauti Dada:** Carried out a COVID-19 campaign to educate community members on infection protection measures. **Ekjut:** Organised a COVID-19 awareness campaign led by the youth.	**Casita Huaran:** Pooled resources, skills, and knowledge to establish local farming in response to food shortages. Created a local market and food basket exchange systems between communities. **Ekjut:** Distributed dry rations and created community kitchens. Created kitchen gardens led by adolescents. **HOPE:** Shifted to food aid with new collaborations and donations from families. **Sauti Dada:** Set up a community food bank. **Sitka Conservation Society:** Established a mutual aid network, which included prepaid grocery cards and seafood donations from fishermen.

Figure: **Examples of COVID-19 mitigation initiatives taken by community-based organisations**

nutrition, and the environment. For these organisations, starting small-scale organic farming activities was a key strategy to improve food security and increase income, especially for the most vulnerable (youth, migrants, and people with psychosocial disabilities). For example, Sauti Dada supported kitchen garden activities to improve food security and address the economic issues faced by families who had lost their livelihoods when market trading was shut down. Casita Huaran experimented with Indigenous land management and farming techniques to diversify local crops. Examples of some of these initiatives are shown in the figure. Efforts to restore food security and strengthen local livelihoods were seen as key to restoring wellbeing and averting the harms of gender-based violence, child labour, and outmigration: "At least this time around with the food security, it could reduce the issue of domestic violence caused by men's rage for lacking food" (LN; Sauti Dada).

CBOs often placed young people at the heart of both immediate COVID-19 responses and long-term efforts to develop sustainable livelihoods and support planetary health. In the communities served by Casita Huaran, the COVID-19 pandemic caused a drop in tourism and disruption in food systems, leading to local families having no income or food. The CBO recognised that it was important for young people and other community members not to migrate out of the area: "There was a need for children and community to remain local and to develop health and wellbeing through local actions" (TP; Casita Huaran; Huaran, Peru). HOPE's explicit focus before the pandemic was supporting children from low-income backgrounds. The organisation's initial focus on material aid (clothes and hobby gear) evolved into an approach that was pro-environmental and prosocial through setting clothing recycling within a circular economy model. HOPE's approach focused on ensuring that children from low-income backgrounds had opportunities for inclusion in society. The Sitka Conservation Society understood that local youth were suffering from many major upheavals in their lives, and prioritised supporting youths facing food insecurity by organising a USDA Summer Food Service Program, which provided free breakfast and lunch to all people aged 0–18 years during school holidays in the summer months. In the later months of 2020, as economic decline continued to negatively affect Sitkans, the society hosted a transitional employment programme that created jobs and taught participants new skills to boost their employment prospects. Many of the people employed through this programme were aged under 30 years, local to Sitka, and had been employed in the tourism and fishing industries.

We also observed context-driven differences in CBOs' responses. For example, the relative importance of commercial actors played an important role in determining CBOs' abilities to support local economies and food systems through efforts to promote sustainable livelihoods. CBOs based in India, Kenya, and Peru found ways to build communities' capacities; Finland's context presented other challenges. Since World War 2, Finland has transitioned from being a largely agricultural society with highly decentralised land ownership, to a post-industrial society

where food procurement and distribution are managed by large retailing cooperatives. These cooperatives maintain strong control over local suppliers and prices, while also buffering these against disruptions caused by the globalised food system.[25] During the pandemic, HOPE found that efforts to restore food security were largely focused on short-term aid to individual beneficiary families, and that cooperatives were strongly involved in devising support schemes. Here, the focus was on supporting temporary individual access to food as a consumer, especially for children and young people, rather than on building sustainable, community-led food production systems that would alleviate long-term dependencies on transnational supply chains and commercial actors.

Insights

Strengthening community-based organisations' responses to planetary health crises: funding and networking

The supersystem risks highlighted by COVID-19 produced many interlocking planetary health challenges requiring urgent CBO action. However, CBOs were aware of the benefits to their communities conferred by access to a globalised system. On the one hand, strengthening capacity and local responses provided CBOs with an avenue to disengage—to an extent—from these super-systems and adopt polycentric systems that are more sustainable, and incur less risk through diversification, decentralisation, and localisation of approaches and resources. On the other hand, CBOs took opportunities to seize some benefits from the wider system without being enmeshed within it. Benefits might include financial resources (external grants and donations), improved regulations and laws (eg, supportive of environment and health), knowledge (eg, from researchers and other NGOs elsewhere), and information (eg, about pandemic rates globally).

Using this insight, two opportunities emerged to support CBOs through globalised networks, while encouraging their sovereignty and supporting local resources.

The first opportunity is for governments and philanthropic organisations to keep CBOs funded during such crises rather than reallocating funding disproportionately to new initiatives. Despite the initiatives described in this Viewpoint, CBOs reported that their ability to respond to the COVID-19 crisis in ways that supported planetary health had been deeply challenged. Their longer-term programmes were often negatively affected as governments and philanthropic organisations preferentially allocated resources to emergency disease control measures and away from longer-term multisectoral sustainable livelihoods and development initiatives. CBOs felt their dependency on fundraising acutely during the pandemic; shortfalls in funding paired with increased operational stressors led to job insecurity for staff, and travel and representation opportunities being curtailed.

The second opportunity is for research and programmatic funders seeking to monitor and bolster planetary health to support local and translocal networks. During the pandemic, all five CBOs discussed were able to connect in different ways with national and international communities, often through digital technologies. For Sauti Dada and Ekjut, digital platforms helped by allowing community-based health workers and community members to share their experiences during webinars and other fora as the pandemic unfolded. Digital connections also provided new opportunities for training (eg, human rights training for Sauti Dada, and photography and online education for children at Ekjut). Sitka Conservation Society used online platforms to enable people to report needs and connect them with volunteers and resources. They were also able to create new partnerships and strengthen their existing relationships with other CBOs, the community, and the region, and cultivate new networks of local action and care within the community. People found it meaningful to help each other, support the local fishing industry, and provide food to the local community: "Gratitude and [a] feeling of protection is absent" (AK; Sitka Conservation Society; Sitka, AK, USA) when the government alone provides services (Sitka Conservation Society). Building on digital technologies to continue enhancing existing local work and creating translocal networks of like-minded organisations responding to similar challenges in different contexts could strengthen the CBO response to planetary health crises.

Pathways forward

Based in local communities, CBOs rapidly saw and anticipated how COVID-19 and related restrictions would affect livelihoods and access to health, nutrition, and education services, often well before governments took action.[26] Although planetary health rightly places emphasis on developing early warning surveillance systems based on routinely collected quantitative data, our case studies suggest that CBOs are often able to anticipate or pick up early warnings of syndemics and forecast how they will affect the most vulnerable in their locality, which also shows the importance of qualitative data. CBOs can therefore play a role in people-centred and qualitative surveillance to detect and address planetary health crises.[27]

Several of the examples we have given highlight the need to challenge the political economy that privileges exchange value alone. As Mair[28] has argued, drawing on feminist and ecological frameworks, effective responses to COVID-19 need to prioritise health and life, even if this means undermining the exchange value privileged by neoliberal capitalism. Preparation for future planetary health crises requires building economies that support multiple forms of value, including non-exchange value forms, such as health and other forms of natural capital;[28] CBOs are in a strong position to articulate and support such values.

During the pandemic, CBOs drew on diverse local social and environmental resources to develop contextualised pandemic responses that cut across interlocking planetary health crises. These approaches to building community resourcefulness begin to highlight pathways towards achieving sustainable, community-rooted, planetary health.[29] For example, local CBO actions that used local knowledge and food systems, and prioritised local people as agents of change, also provide a bridge towards longer-term changes in livelihoods by reducing dependence on external food systems and the need to engage in unsafe and unsustainable livelihood options. These actions had further supportive knock-on effects. By boosting young people's skills and livelihood opportunities, CBOs' actions increased local ownership over decisions and safeguarded cultural and natural resources contributing to community and planetary health. Community-based initiatives that mobilise local resources and value local knowledge provide a promising pathway towards health agency and determination, where community members can define their own health and livelihood objectives, shift power and resource imbalances, and nurture ecologically sound relationships with the local environment.[29,30]

Abimbola reminded global health researchers of the principle of subsidiarity, which implies that "decisions about efforts to help others and to attain the common good [...] should, by default, take place at the smallest or most proximate level/scale of organisation possible, and only when necessary at a larger or more distant level/scale of organisation."[31] Rather than reinforcing connections back to the supersystem—thereby reinforcing dependencies and inherent risks—subsidiarity embraces the diversity and modularity that these case studies exemplify.

Hyper-localised initiatives have their own challenges and might lead to divergent long-term pathways to sustainability,[32] but translocalism might arguably help to overcome some of these limitations by connecting and coordinating diverse small-scale actors globally. In summary, it might be time to apply the principles of subsidiarity and translocalism to support planetary health initiatives around the world.[32] Planetary health research is often concerned with large-scale quantitative surveillance systems and big data. Although these resources are important, the role of small-scale and contextualised responses built on local resource systems is often overlooked. Rather than scaling-up or linking back to the supersystem, we argue that CBOs can strategically disengage from it, and in doing so can revive local economies and resources. Connections do not have to be up, they can be out (ie, translocal). Networks of CBOs were able to share early learnings, build contextually-appropriate responses, and stimulate translocal learning. Strengthening translocal CBO networks thus enhances diversity and de-escalates supersystem risks through a polycentric approach.

The analysis presented in this Viewpoint is limited by the relatively small number of CBOs approached, the fact that these were purposively selected through investigator networks rather than from a wider set, and absence of long-term evaluation data about the effects of CBOs' pandemic responses. It remains to be seen whether the translocal network we co-developed will remain active over time and prove useful for addressing future planetary health challenges. Nevertheless, our analysis provides an illustrative example of the value of a translocal approach for planetary health.

Conclusion

Using a translocal learning approach, we outlined how CBO responses to addressing the COVID-19 syndemic could lead to long-term opportunities for community and planetary health. These insights were generated from a translocal learning approach across knowledge generation, identity formation, and localised action stages. Beyond generating early learning signals, CBOs responded to complex supersystem challenges in ways that linked livelihoods, inequity, health, wellbeing, and the environment. CBOs were able to develop pandemic responses that were rights-based and ecologically minded, cutting across intersecting challenges and providing a bridge to sustainable livelihoods. Although the focus of planetary health has often been on large-scale or high-level responses, our work has shown how solutions to planetary health might come from small-scale but connected-out community initiatives. The potential of locally focused globally aware actions should be harnessed through greater recognition, funding, and networking opportunities for small-scale to medium-scale CBOs as part of efforts to strengthen planetary health: "Everything you do here can be replicated and done elsewhere—local ideas can help other places" (TP; Casita Huaran, Peru).

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