Check for updates

International Journal of Qualitative Methods
Volume 20: 1–8
© The Author(s) 2021
DOI: 10.1177/16094069211050164
journals.sagepub.com/home/ijq
SAGE

Overcoming Limitations for Research During the COVID-19 Pandemic via the Communicative Methodology: The Case of Homelessness During the Spanish Home Confinement

Sandra Racionero-Plaza[1], Ana Vidu[2], Javier Diez-Palomar[1], and Nerea Gutierrez Fernandez[2]

Abstract

Research on homelessness is a field of study in social sciences with a long and solid history. Several pieces of research have let us understand the life experiences and trajectories of these individuals, the challenges that they have faced, and the interventions conducted with them to address this inequality. Nonetheless, the research methodologies in those studies prove short in a situation such as the current COVID-19 pandemic. If we, researchers, are to prioritize social impact, we cannot wait for the pandemic to be overcome to employ those methodologies to investigate homelessness. If so doing, we would meet the needs of homeless people too late. Because social impact is at the forefront, if those methodological resources are not sufficient, then it is necessary to introduce additional ones. This article presents how to address this challenge via the employment of the communicative methodology of research, with the example of a qualitative investigation on how homeless people were attended during the lockdown in Spain in March 2020. The researchers could not meet these individuals on the streets by that time, yet their experiences during the lockdown and how they were being transformed were examined via on-line interviews with individuals voluntarily serving homeless people during home confinement. This methodological innovation in qualitative research is at the service of social impact and can be helpful to researchers investigating vulnerable groups in difficult times.

Keywords

communicative methodology, homelessness, COVID-19 pandemic, methodological innovation, social impact, home confinement

Introduction

From its emergence in December 2019, the COVID-19 outbreak has influenced people's lives in many different spheres. The number of individuals infected by the virus is continuously increasing worldwide together with social, political and economic consequences. Globally, as of 30 September 2021, there have been 233.136.147 confirmed cases of COVID-19, including 4.771.408 deaths, reported to WHO, 2021. Together with the health crisis, the pandemic has revealed some very harsh social realities that we were previously facing in our environments. For already disadvantaged groups, the COVID-19 pandemic has turned their situation of vulnerability worse. An existing reality of dehumanization have manifested in many countries (Merodio et al., 2020), included the empty streets during confinement (Matulič-Domadzič et al., 2020).

[1]University of Barcelona, Barcelona, Spain
[2]University of Deusto, Bilbao, Spain

Corresponding Author:
Racionero-Plaza, University of Barcelona, Diagonal Avenue, 690, Barcelona 08034, Spain.
Email: sandraracionero@ub.edu

Creative Commons Non Commercial CC BY-NC: This article is distributed under the terms of the Creative Commons Attribution-NonCommercial 4.0 License (https://creativecommons.org/licenses/by-nc/4.0/) which permits non-commercial use, reproduction and distribution of the work without further permission provided the original work is attributed as specified on the SAGE and Open Access pages (https://us.sagepub.com/en-us/nam/open-access-at-sage).

People who were already experiencing poverty and discrimination found themselves in greater need of help, and, often, official mechanisms were not there to assist (Florence et al., 2020; Jones et al., 2020; Schiff et al., 2020).

Once strict domiciliary confinement was established, already in the first wave of the pandemic, the news about people who, already in a situation of poverty and exclusion, did not have a house to confine themselves suddenly emerged. It was required to stay at home to be safe, but some people had no house. Thus, the homeless arose as a group at particular risk, of infection from the virus, of higher social exclusion, of violence victimization on the street or to get ill because of isolation and absence in receiving the regular help from social services and other volunteer actions (Almeida, 2020; Barker & Russell, 2020; Intermón OXFAM, 2020).

Research on Homelessness with Social Impact and Times of Home Confinement

The field of research on homelessness has now a long trajectory and has provided a rich and fruitful body of knowledge. The methodologies employed in these studies have been diverse and, often, complementary. In 1994, Baker published a study conducted by using survey data, showing for instance, the profiles of people living on the street (Baker, 1994) and focussing on individual factors rather than structural risk reasons for the homeless, which had also been an important approach in this field (Snow et al., 1994). Years later, research on homelessness started to be based on qualitative methods, placing their focus on individual experiences of deprivation (Philippot et al., 2017). The study carried out by Shibusawa and Padgett (2009) used qualitative methods to conduct interviews and qualitative case studies in order to highlight the personal narratives of individuals with homelessness experiences and their mental health status, using a method called 'person-in-context'. Other research on the relationships between homelessness and mental health was carried out using interviews and a technique known in visual sociology as 'photo-elicitation' (Hodgetts et al., 2007), which consists on showing concluding images to the homeless, provided either by the interviewees or by the researchers as a tool to inquiry into meanings constructed by the homeless. All these methods have been important in showing how social inequalities manifest as health inequities in homeless people.

The employment of personal experiences of homelessness has also been central in showing their reality as a public issue (Finley & Diversi, 2010). Along these lines, de Espíndola et al. (2020) interviewed homeless people employing a timeline instrument, and this helped them evidence homelessness as a form of social exclusion and a public health concern. Particularly, these life story methods have been important in showing how interpersonal relationships change over the life cycle of the homeless person due to conflicts and negative experiences, and how this same issue relates to, among others, experiences with drugs and alcohol, which intensifies social exclusion.

Other researchers have focused on combining research methods from a qualitative approach (Patterson et al., 2012), mainly interpreting reality based on people's experiences of homelessness from a person-centred approach (Herbers et al., 2019). With this methodological perspective, the topics examined in recent years have focused on health (Pendyal et al., 2021), economic inequality, poverty, and a whole trajectory of negative events that ended up making these individuals homeless. At present, mixed methods are also currently used to deepen into the harsh situations that the homeless suffer and their relation to the mental health problems that they develop (Marshall et al., 2019) or their suicide attempts (Bommersbach et al., 2020). Some of these studies have used the retrospective cross-sectional study perspective, examining referrals to psychiatry, collecting data on gender, age, employment and housing, among others.

Some of the most recent research continues to use face-to-face interviews, such as the focus group methods (Salem et al., 2021), to inquiry into a concrete situation affecting the homeless. For example, focus groups have been successfully used to examine the incarceration of homeless women and their reinsertion in society (McLoughlin et al., 2021).

Today, the experience of confinement due to the COVID-19 pandemic has posed new challenges for the homeless, worsening their already very vulnerable situation (Abraham, 2019). Likewise, research addressed to improve their condition has been also challenged methodologically for obvious reasons: the home confinement did not allow researchers to be on the streets to work with these individuals. The methods reported before and that had been used traditionally in researching *on* and *with* homeless were not an option during the COVID-19 lockdown. Likewise, for research to achieve social impact in this area, waiting for the home confinement to end was not a possibility, so doing would mean prioritizing certain methods over social impact. Therefore, the employment of new modes of qualitative inquiry emerged as necessary.

This article reports a methodological innovation in this regard, employed to investigate on the supports received by homeless individuals during the Spanish home confinement that took place in Spain during March 2020, during the first wave of COVID-19. The prioritization of social impact modified our methods to ensure that the results obtained could contribute to social improvements that could benefit homeless people during the COVID-19 pandemic.

Methods

When entering the dialogue with the affected people cannot take place due to a *force majeure* such as the pandemic, and the priority is social impact, then we use a process of methodological innovation. This article explains how the communicative methodology of research was used during the strict domiciliary lockdown in Spain to investigate the needs of homeless people, as well as to identify the help that these vulnerable persons were receiving to face the difficulties

posed by the pandemic. The methodological contribution comes from the prioritization of social impact, that is in this case to conduct research during home confinement that could aid addressing homeless people's needs during the COVID-19 lockdown in Spain.

Study Design

The researchers contacted key informants that could provide names and contacts of individuals who were caring for the homeless during home confinement. The first contact gave five names of persons who were serving vulnerable groups during home confinement, and this group gave one more name. All six subjects were supporting people suffering from social exclusion during confinement, including homeless, on a volunteer basis. It was via interviewing these subjects that we could know the reality experienced by the homeless during the COVID-19 home confinement in Spain.

The study followed the communicative methodology of research (Gómez González, 2019), which has been recognized for its success in achieving social impact, also when applied in research with vulnerable groups (Plaja Viñas, 2019). In the communicative methodology, researchers share scientific knowledge about the reality under study, and the people interviewed contribute their knowledge arising from their own experience of that reality. In this case, the researchers developed a list of open questions grounded in the literature on homelessness and COVID-19 and engaged in the dialogue with the interviewees from that knowledge, and the participant subjects shared their own experiences of serving the needs of homeless people during the confinement caused by the COVID-19. The results from that dialogue between the researchers and the participants explain both how the homeless were in such situation, and what the people interviewed were doing specifically to mitigate the damage suffered by the lockdown in the street.

During its development, the study took into account all the ethical criteria for conducting research with humans. Likewise, the researchers were always aware that the research topic was sensitive and employed the appropriate measures in this sense when interacting with the participants, when elaborating the interview protocols and when analysing the data. The interviewed subjects participated in the study on voluntary basis, after receiving the information sheets and signed consent forms. At all times, people had the necessary information to continue participating in the study or to abandon at any moment, without need to give any explanation. Participants were also informed that the content of the study would only be used for this research purpose and following the confidentiality principle. The research conformed with the European Commission's Ethics Review Procedure (2013), the Data Protection Directive 95/46/EC, the EU's Charter of Fundamental Rights (2000/C 364/01), as well as the Declaration of Helsinki (World Medical Association, 2014), among other research ethics directives. The study was fully approved (reference code number: 20210109) by the Ethics Committee of the Community of Researchers on Excellence for All (CREA), at the University of Barcelona.

Data Collection and Analysis

The researchers asked a first key informant (Gilstrap, 2007) who was related to individuals who could potentially be helping vulnerable groups during home confinement. This first key informant gave the researchers five names and their email addresses to contact them, and a sixth name was given by one of the first five participants. In all cases, the contact was established via email, in which the researchers gave a summary of the objective of the study. Once the contacted person manifested interest, the researchers replied with the information sheet and the consent form to sign, always being available to answer any questions about the research that the potential participants could have. After the consent had been signed and archived by the researcher in charge of the data collection, the day and time for the interviews was agreed with every participant.

The interviews took place during June and July 2020, once home confinement had finished but still during very difficult times of the health crisis in Spain. Given confinement, the interviews took place on-line, using audio and video camera. All interviews were audio recorded, lasted about 1 hour each, and were carried out in Spanish or Catalan, depending on the language chosen by the interviewees. The recordings were later transcribed and translated into English. To better assure anonymity, the same researcher conducted all six interviews.

Following the communicative methodology, the researcher had a script of questions grounded in the literature and in line with the research objectives, although this was quite open, with the participants being able to contribute with more details if they wanted, beyond the proposed questions. Our aim was to understand the situation of some homeless people during home confinement in Spain, as well as the actions of solidarity carried out by some individuals to help them in a very difficult moment of the pandemic. The interviews made possible to shed light on transformative actions that were already taking place with this vulnerable group. Deciding to examine this via the interviews was central from the perspective of social impact; we wanted to investigate what could be already improving the social situation of the homeless, i.e., what was already having impact. When the participants provided knowledge beyond the questions proposed by the researcher and such knowledge deepened into the object of the study, it was always welcome, and the researcher engaged in *egalitarian dialogue* with the participant to explore all new topics of interest. In egalitarian dialogue (Flecha, 2000), interactants communicate according to the validity of arguments and not to power based on status or any other power condition. What matters is what every individual brings to the dialogue to reach a consensus on the best solution or knowledge. In the communicative methodology of research, egalitarian dialogue is

based on the principle of equal epistemological level and the lack of an interpretative hierarchy.

Study Participants

The participants in this study were six men, currently residing in Spain. Their ages ranged from 33 to 51 years old. All were men with a broad trajectory in social action and social service, and all were Jesuit priests. They were placed in different geographic locations in Spain, served vulnerable people voluntarily, often belonging to different social foundations dedicated to covering social needs. Among the six participants, four of them were mostly attending homeless people.

Data Analysis

When analysing the information, we focused on: (A) The situation of the homeless during home confinement because of the COVID-19 pandemic in Spain, attending to aspects such as the risks they assumed in the street those weeks, the meeting of their basic needs, health problems and other several vulnerabilities related to their situation in a time of pandemic; (B) The actions carried out by some individuals to help the homeless face the adversities of the moment, and the impact of those actions on the improvement of the situation of the homeless helped. The categories of analysis for each of these themes were debated among the research team, while being informed by the literature. The topics under dimension B of analysis were the most important in the research, as they could inform others what kind of actions were making a difference in the life of homeless people during the lockdown. The potential social impact of this study comes from the examination of those topics using a dialogic stance in the interaction between the researchers and the interviewees. This dialogic stance was also reflected when conducting the data collection, as the researcher provided feedback and asked questions to the participants to make sure an accurate interpretation of the explanations, an interpretation that was constructed intersubjectively, over the dialogic interaction itself.

Results

Risk Situations Attended and Solidarity Actions Performed

The participants explained that some of the actions carried out focused on distributing food for the homeless, visiting them to make sure that they were fine, all this on the streets, and opening hospitality services when necessary.

One of the participants, Ignasi, right in the beginning of the home confinement in Barcelona decided to visit every day the homeless staying in the empty streets of the very centre of the city. The objective was to give them food, to see how they were doing, talking to them, ensuring they were not victims of violence and just to be there for them to transmit them that they were in the mind of others, that others wanted to take care of them. The public dining rooms were closed during confinement, so the distribution of food was essential to meet basic needs of these people. In Ignasi's own words:

> I also started going out on Wednesday evenings with a friend (…), who since 5 years ago, goes out to distribute sandwiches to the homeless in the areas of Montjuïc and Drassanes. In a pandemic situation when the dining rooms were all closed or, at the most, were giving a bag with snacks, being able to be there in the evening with a hot soup and a conversation, was a meaningful moment of recognition that the homeless were still there and that we wanted to take care of them.

This quotation does not only inform about Ignasi's action, but also about the vulnerable situation of the homeless, worsened because the services that they attended regularly were closed during the lockdown. The public dining rooms were closed, so they had no food to eat. Thus, the voluntary service of this person was as essential as ensuring the homeless' ingesting because they were starving.

Another basic need necessary to meet for the homeless was having a place where to sleep in adequate conditions and where to be safer. The questions asked to Ignasi, made possible not only to come to know this need, but also the initiatives that were responding to it. Often, those initiatives, had transformed themselves to meet the needs of the moment; some were not offering those services for homeless before or not with the same characteristics, but they committed to help the most vulnerable and recreated themselves. Ignasi explained the case of a reception service for homeless people at night, which also began to host people during the day at the time of confinement because some homeless were stopped on the streets by the police and required to get confined at home, a 'home' that did not exist for them:

> After a week and a half of confinement I was collaborating on a small-scale project, caring for homeless people (...) the place was already used as a night centre, and we made it possible for people to be there also during the day because the police stopped them in the street and told them to go to their house (...) it was a ground floor of the parish with four residents living there.

In addition, among those without home during confinement were illegal immigrants and unaccompanied minors. They were also needing help, more than in other occasions. The country they had arrived to, got into lockdown, neither they could not return home, nor they did have a place to confine themselves in the host country. Three of the interviewees explained this reality and its connection with inequalities related to race and ethnicity. As José shared:

> The young people were vulnerable because they were immigrants, and they are like a mousetrap (…) … illegal, without money, their friends are in the same situation, they cannot return to their country either do anything here.

Also, Xavier pointed out that this situation was not new, but the COVID-19 pandemic had made it very evident, both the problem and the lack of response to this vulnerable group:

> We have been like this for 25 years (no response from the institutions). Covid-19 has shown this. There is an institutionalized racism here, which should be highlighted, a very subtle racism... it doesn't hurt to see that there are black people here sleeping on the street.

Actions were developed to support this collective and help them meet the basic needs of diet and hygiene. Xavier explained that in his city, actions were undertaken to open community places, such as school pavilions and youth hostels, as community houses for the homeless:

> We have 80 people sleeping on the street, so what can we do? School pavilions, youth hostels, we have to place these people somewhere, so they sleep there, have a shower, have food.

José also referred to an existing initiative, called 'Hospitality', which reinforced its actions during confinement to give a house to newly arrived immigrant and unaccompanied minors, many of them, very young:

> Our community belongs to the 'Hospitality Networks', which are trying to provide home help for homeless people (...) this now has become a program for unaccompanied minors. They are people who have done a very nice process in juvenile centres, and when they turn 18, they are forgotten by everyone and go to sleep on the street. And they don't have any kind of educational or family support. Boys from Syria, Yemen, Ukraine who are 19–20 year-old.

Even some spaces which had been used for other activities, were transformed into a 'Hospitality' community, opening their doors to vulnerable immigrants without a house. In this regard, Ignasi explained his direct involvement in opening a new house with this precise objective during the pandemic:

> We are starting the Casal A. Reception and Hospitality Community so that people have free access to that space (…) There are 5 sheltered boys, refugees and vulnerable immigrants. We have built a group of volunteers and most of us offering our presence. We are not specialists, nor do we have social workers, but we care for people who come through difficult homelessness situations and need support and to rebuild social relationships.

These actions made a real difference. Via the interviews we could see that not responding to the homeless' need for a place where to spend the night during confinement, would have meant the homeless risking their life, as violence on the streets remained unattended those day because the streets of the city were assumed to be totally empty. As Ignasi explained:

> The risks for life were objectively high, in that period one person was arrested, a person suspected of having killed four homeless on the street. That is to say, that living on the street and sleeping on the street in a confined city has objective risks.

Impact on the Homeless

Many were the benefits of these actions for the homeless that the interviewees gathered of their engagements in the form of testimonies. Some have been pointed before, such has having food, a place where to sleep, get basic hygiene and having someone to talk to. When asked, most of the time, the participants claimed that the impact on the homeless was very difficult to measure, that it was not even visible but the gratitude for 'being there' was always noticed.

Along these lines, Xavier explained that it was a very basic and important benefit having a place where to have some intimacy and express the stressful emotions of the moment, something that was very difficult to occur in other public spaces that opened those days but were overcrowded:

> They notice the kindness with which we do it. Because, for instance, the spaces of the Town Hall, 200 people are sleeping there and they do not have a moment of intimacy, a moment to cry...

José shared that, for homeless who were immigrants with diverse cultures and religions, staying in these shelters also meant a way to communicate and nurture new relationships. He points out even the importance of joining the applause that took place every day at 8 p.m. all over Spain in recognition of the work of health workers. In those moments, the homeless saw their neighbours, were on a terrace like them, were part of the community, they felt union:

> Day by day, the pandemic helped that a Berber get along with a person from Tangier. Our job is to give them a place to live. And support on language learning and what is appropriate (...) It was nice for them to arrive at the 8 p.m. moment to applaud, they were on the terrace and saw the neighbours.

As these quotations manifest, the fact of asking these participants about the impact of their actions implied two benefits at a time. On the one hand, it made possible getting to know both the benefits for the homeless, as well as the volunteers' own interpretations of what was relevant for that vulnerable group those days. This is 'not talking for the homeless', but it is a complementary view that emerges from the direct experience of communicating with them during those difficult days.

Discussion

The COVID-19 pandemic has severely affected all humanity. The WHO and all world governments are looking for solutions to this enormous health and social crisis. Beyond the impact

on health, this crisis is having both a strong economic impact as well as a severe social impact; especially for those who already were vulnerable, excluded and discriminated (Abraham, 2019; Malgesini, 2020). Since the beginning of the pandemic, different people were aware of this inequality and decided not to sit idly by (Almeida, 2020) and to urgently respond to the emerging social needs (Tremblay et al., 2021). The volunteers interviewed in this study were such people. Their commitment to social transformation and their involvement in improving people's lives led them to help, among others, one of the groups most affected by home confinement in Spain, those without a house when we were required to stay home: the homeless.

Qualitative researchers working with the communicative methodology and committed to the social impact of research, also aimed at improving the situation of the homeless during home confinement. But we could not do so doing research on the streets. Yet moved by the priority of social impact, waiting for the home confinement to finish was not an option; it was clear that a methodological innovation was required. If we could not meet the homeless in person, we decided to interview those who were there with the homeless, face-to-face, helping them during home confinement. We selected individuals in dialogue with key informants. This dialogue provided a list of names of people who were out on the street during home confinement helping those in most need, even when assistance public offices or social services were closed.

Thanks to in depth interviews conducted with a communicative orientation, we could know that the pandemic brought to light some of the problems that our society already had; that those who before were invisible, the homeless, suddenly became visible during the lockdown when the streets were empty. The homeless testimonies our participants shared with us highlighted the needs of the homeless during home confinement. But guided by social impact, our methodological approach moved us beyond. Our selection was of individuals who were directly engaged in actions of support to the homeless (Matulič-Domadzič et al., 2020) and who, in some cases, led the creation of some initiatives. This way, we could get to know transformative actions that were overcoming very exclusionary situations. Identifying these actions that transform exclusion, and analysing them, can contribute to social impact.

Conclusions

The field of research on homelessness has a long trajectory of qualitative research which has advanced the state of the art on the life trajectories of individuals who end up living on the streets. Those studies have employed very diverse, innovative and complementary methods (Baker, 1994; Finley & Diversi, 2010; Hodgetts et al., 2007; Marshall et al., 2019; Patterson et al., 2012; Philippot et al., 2017; Snow et al., 1994) that have made possible to capture the reality of homelessness in deep ways. Yet the new reality that we have experienced since March 2020 all over the world has posed new challenges for the study of homelessness with social impact. Those traditional methodologies are thought to be used in face-to-face interactions with the homeless on the streets or other social settings, but that turns into not possible in a situation of a pandemic, such as the COVID-19 pandemic and, more particularly, during home confinement. Nonetheless, when qualitative researchers prioritize social impact, it is possible to contribute to improve the life conditions of the homeless even in that difficult circumstance. Doing on-line qualitative research with the communicative methodology, with individuals who are serving the needs of the homeless in first person, engaging in egalitarian dialogue with them, constitutes a possibility to not only capture the very harsh reality of homelessness during a pandemic but also to shed light on transformative actions that are already making a difference in the life of the most vulnerable. This is one more way of doing research with and for society (Gómez González, 2019) even in the most difficult moments for the humanity.

Declaration of Conflicting Interests

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

Funding

The author(s) disclosed receipt of the following financial support for the research, authorship, and/or publication of this article: This study is funding by the Gran Research Agency of the Government of Catalonia for the research group Sociological theory and Social Impact of Research (2017 SGR 1589)

ORCID iDs

Sandra Racionero-Plaza https://orcid.org/0000-0002-8347-5794
Ana Vidu https://orcid.org/0000-0001-9844-6809
Javier Diez-Palomar https://orcid.org/0000-0003-4447-1595
Nerea Gutierrez Fernandez https://orcid.org/0000-0001-8752-9692

References

Abraham, M. (2019). Power, violence, and justice: Reflections, responses and responsibilities: Presidential Address – XIX ISA World Congress of Sociology, July 15, 2018. *International Sociology*, *34*(3), 243–255. https://dx.doi.org/10.1177/0268580919839649.

Almeida, F. (2020). The CONCEPT of Human2Human in the response to COVID-19. *International and Multidisciplinary Journal of Social Sciences*, *9*(2), 129–151. https://dx.doi.org/10.17583/rimcis.2020.5524.

Baker, S. G. (1994). Gender, ethnicity, and homelessness: Accounting for demographic diversity on the streets. *American Behavioral Scientist*, *37*(4), 476-504. https://dx.doi.org/10.1177/0002764294037004005.

Barker, M., & Russell, J. (2020). Feeding the food insecure in Britain: Learning from the 2020 COVID-19 crisis. *Food Security*, *12*(4), 865–870. https://dx.doi.org/10.1007/s12571-020-01080-5.

Bommersbach, T. J., Stefanovics, E. A., Rhee, T. G., Tsai, J., & Rosenheck, R. A. (2020). Suicide attempts and homelessness: Timing of attempts among recently homeless, past homeless, and never homeless adults. *Psychiatric Services*, *71*(12), 1225–1231. https://dx.doi.org/10.1176/appi.ps.202000073.

de Espíndola, M. I., Bedendo, A., da Silva, E. A., & Noto, A. R. (2020). Interpersonal relationships and drug use over time among homeless people: A qualitative study. *BMC Public Health*, *20*, 1746. https://doi.org/10.1186/s12889-020-09880-2.

Finley, S., & Diversi, M. (2010). Critical homelessness: Expanding narratives of inclusive democracy. *Cultural Studies ↔ Critical Methodologies*, *10*(1), 4–13. https://doi.org/10.1177/1532708609351142.

Flecha, R. (2000). *Sharing words: Theory and practice of dialogic learning*: Rowman & Littlefield.

Florence, A. C., Miller, R., Bellamy, C., Bernard, P., Bien, C., Atterbury, K., Bragg, C., Diaz, A., Gardien, E., Guy, K., Hansen, C., Maclean, K., Milton, B., Nelson, L., Samoskevich, J. J., Smith, S., Stanojlovic, M., Wexler, T., Zorzanelli, R., & Davidson, L. (2020). When reality breaks from us: Lived experience wisdom in the COVID-19 era. *Psychosis*, *12*(4), 363–367. https://dx.doi.org/10.1080/17522439.2020.1817138.

Gilstrap, D. L. (2007). Phenomenological reduction and emergent design: Complementary methods for leadership narrative interpretation and metanarrative development. *International Journal of Qualitative Methods*, *6*(1), 95–113. https://doi.org/10.1177/160940690700600107.

Gómez González, A. (2019). Science with and for society through qualitative inquiry. *Qualitative Inquiry*, *27*, 10–16. https://dx.doi.org/10.1177/1077800419863006.

Herbers, J. E., Cutuli, J. J., Keane, J. N., & Leonard, J. A. (2019). Childhood homelessness, resilience, and adolescent mental health: A prospective, person-centered approach. *Psychology in the Schools*, *57*(12), 1830–1844. https://dx.doi.org/10.1002/pits.22331.

Hodgetts, D., Radley, A., Chamberlain, K., & Hodgetts, A. (2007). Health inequalities and homelessness: Considering material, spatial and relational dimensions. *Journal of Health Psychology*, *12*(5), 709–725. https://dx.doi.org/10.1177/1359105307080593.

Intermón OXFAM (2020). *Una Reconstrucción Justa es Posible y Necesaria. Report*. Retrieved from: https://cdn2.hubspot.net/hubfs/426027/Oxfam-Website/oi-informes/informe-pobreza-desigualdad-pandemia-covid-19.pdf.

Jones, N., Byrne, L., & Carr, S. (2020). If not now, when? COVID-19, lived experience, and a moment for real change. *The Lancet Psychiatry*, *7*(12), 1008–1009. https://doi.org/10.1016/S2215-0366(20)30374-6.

Malgesini, G. (2020). *The impact of COVID-19 on people experiencing poverty and vulnerability. Rebuilding Europe with a social heart*. Report for EAPN. European Anti-Poverty Network. Retrieved from: https://www.eapn.eu/wp-content/uploads/2020/07/EAPN-EAPN_REPORT_IMPACT_COVID19-4554.pdf.

Marshall, C. A., Davidson, L., Li, A., Gewurtz, R., Roy, L., Barbic, S., Kirsh, B., & Lysaght, R. (2019). Boredom and meaningful activity in adults experiencing homelessness: A mixed-methods study. *Canadian Journal of Occupational Therapy*, *86*(5), 357–370. https://dx.doi.org/10.1177/0008417419833402.

Matulič-Domadzič, V., Munté-Pascual, A., De Vicente-Zueras, I., & León-Jiménez, S. (2020). "Life Starts for Me Again." The social impact of psychology on programs for homeless people: Solidarity networks for the effectiveness of interventions. *Frontiers in Psychology*, *10*, 3069. https://dx.doi.org/10.3389/fpsyg.2019.03069.

McLoughlin, C., McLoughlin, A., Jain, S., Abdalla, A., Cooney, J., & MacHale, S. (2021). The suburban-city divide: an evaluation of emergency department mental health presentations across two centres. *Irish Journal of Medical Science*. Manuscript submitted for publication. https://dx.doi.org/10.1007/s11845-020-02496-w.

Merodio, G., Ramis-Salas, M., Valero, D., & Aubert, A. (2020). How much is one life worth? The right to equity healthcare for improving older patients' health infected by COVID-19. *Sustainability*, *12*(17), 6848. https://doi.org/10.3390/su12176848.

Patterson, M. L., Markey, M. A., & Somers, J. M. (2012). Multiple paths to just ends: using narrative interviews and timelines to explore health equity and homelessness. *International Journal of Qualitative Methods*, *11*(2), 132–151. https://dx.doi.org/10.1177/160940691201100202.

Pendyal, A., Rosenthal, M. S., Spatz, E. S., Cunningham, A., Bliesener, D., & Keene, D. E. (2021). "When you're homeless, they look down on you": A qualitative, community-based study of homeless individuals with heart failure. *Heart & Lung*, *50*(1), 80–85. https://dx.doi.org/10.1016/j.hrtlng.2020.08.001.

Philippot, P., Lecocq, C., Sempoux, F., Nachtergael, H., & Galand, B. (2007). Psychological research on homelessness in Western Europe: a review from 1970 to 2001. *Journal of Social Issues*, *63*(3), 483–503. https://doi.org/10.1111/j.1540-4560.2007.00520.x.

Plaja Viñas, T. (2019). Un paso más en la investigación en Trabajo Social: Aportaciones de la metodología comunicativa. *International Journal of Roma Studies*, *1*(2), 144–158. https://dx.doi.org/10.17583/ijrs.2019.4312.

Salem, B. E., Kwon, J., Ekstrand, M. L., Hall, E., Turner, S. F., Faucette, M., & Slaughter, R. (2021). Transitioning into the community: Perceptions of barriers and facilitators experienced by formerly incarcerated, homeless women during reentry-a qualitative study. *Community Mental Health Journal*, *57*, 609–621. https://dx.doi.org/10.1007/s10597-020-00748-8.

Schiff, R., Buccieri, K., Schiff, J. W., Kauppi, C., & Riva, M. (2020). COVID-19 and pandemic planning in the context of rural and remote homelessness. *Canadian Journal of Public Health*, *111*(6), 967–970. https://dx.doi.org/10.17269/s41997-020-00415-1.

Shibusawa, T., & Padgett, D. (2009). The experiences of "aging" among formerly homeless adults with chronic mental illness: A qualitative study. *Journal of Aging Studies*, *23*(3), 188–196. https://dx.doi.org/10.1016/j.jaging.2007.12.019.

Snow, D. A., Anderson, L., & Koegel, P. (1994). Distorting tendencies in research on the homeless. *American Behavioral Scientist*, *37*(4), 461-475. https://dx.doi.org/10.1177/0002764294037004004.

Tremblay, S., Castiglione, S., Audet, L.-A., Desmarais, M., Horace, M., & Peláez, S. (2021). Conducting qualitative research to respond to COVID-19 challenges: Reflections for the present and beyond. *International Journal of Qualitative Methods*, *20*. Published online. https://dx.doi.org/10.1177/16094069211009679.

WHO (2021). *Coronavirus disease dashboard*. World Health Organization. Retrieved from: https://covid19.who.int/.

World Medical Association (2014). World Medical Association Declaration of Helsinki: Ethical principles for medical research involving human subjects. *The Journal of the American College of Dentists*, *81*(3), 14–18.