

Article

Hope during Crises: A Thematic Analysis of a Podcast on Hope in Amsterdam during the COVID-19 Pandemic

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Abstract: While crises, like pandemics, have a negative impact on mental health, hope may affect it positively. However, hope during COVID-19 has hardly been explored. In this study, we explored the hope of interviewees in a podcast on hope in Amsterdam during the COVID-19 pandemic, which sought variations in the gender, spiritual backgrounds, and places of work of the interviewees. Underpinned by hermeneutic phenomenology, we thematically analyzed the six transcribed episodes. We found that the present was sketched as closed down, while hope related to (the potential of) spaces and the future opening up. Sources of hope were the vaccine, good weather, faith and trust, and the history of Amsterdam, which was characterized by resilience. Several participants appreciated their everyday life in a new way: COVID-19 made them slow down and aware of what really mattered, which was a source of hope. Frequently mentioned sources of hope were connections with others, and especially solidarity. Also, showing solidarity was identified as a way of offering hope to others. We conclude that both in our study and in several religions, the link between hope and solidarity is common, and that hope is a spiritual topic that is worth addressing in mental health care.

Keywords: COVID-19; hope; psychotrauma; spirituality; qualitative; theology



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1. Introduction

When colleagues or friends refer to COVID-19, we see that bystanders prefer to avoid the topic. “Let’s look at the future,” is a common response. We ourselves do not like to look back either; we remember the fears reinforced by witnessing how COVID-19 hit people, including one of us. We also witnessed our teenage children missing their friends and peer support. Several review studies were conducted during the outbreak of the virus. One of them, focusing on longitudinal cohort studies, compared mental health before versus during the pandemic in 2020, and reported an increase in mental health problems just after the outbreak in March 2020 that decreased in the summer of that year. Increases in mood disorder symptoms and depression nevertheless remained higher in May until July of that year (Robinson et al. 2022). The situation affected medical staff as well. A systematic review and meta-analysis study suggested that frontline workers especially, compared to non-frontline workers, had a higher prevalence of insomnia, depression, and anxiety (Zhu et al. 2023). Indeed, it is not a joy to look back at these experiences. But why, then, publish an article on how we perceive the pandemic in retrospect?

We believe it to be worthwhile for at least two reasons. First, it teaches us something about how Western societies deal with shared experiences that have features of psychotrauma. During the first year of the pandemic, some authors predicted that COVID-19 would not only affect people’s lifestyles and lead to acute stress, but also affect health care providers, rendering them at great risk for contracting PTSD (Soloveva et al. 2020). A special issue of the European Journal of Traumatology tried to understand the impacts of the pandemic on mental health through a trauma lens as well (O’Donnell and Greene

2021). In an existential way, COVID-19 shattered three of our basic assumptions, namely that the world is (1) benevolent and (2) meaningful, and (3) that the self is worthy (Janoff-Bulman 1992). For example, “How can a world be benevolent when you contracted the virus through a person who was not adhering to the safety measures during COVID-19?” (assumption 1). Or, “Why did the virus hit my beloved one, who has always been so grateful towards others?” (assumption 2). Or, “I feel ashamed because I have probably transmitted the virus to one of my clients, who later died from the virus” (assumption 3).

Hope in health care in general has been described as (1) expectation, which is an appraisal of a future outcome, (2) resilience, referring to the endurance of adversity, and (3) desire, which is an expression of meaning (Olsman 2020). A second reason for the current study is that hope often plays an important role within the context of crises, including crises that have a severe impact on mental health. A literature review of empirical studies found that hope within the context of mental health is a multidimensional concept that could facilitate recovery, and in several studies, it was future oriented; in many studies, it was anteceded by hope engendering relationships, especially with peers (van Veluw and Olsman 2023). Within the context of palliative care, in addition, hope engendering interventions significantly increased spirituality and decreased depression (Salamanca-Balen et al. 2021). The focus on hope is appropriate in this regard, since it could be seen as a central topic in spirituality and spiritual care. For example, several authors have used hope as a central topic to describe their approach to spiritual care, either with a strong focus on pastoral psychology (Capps 2001; Lester 1995), or to describe the work by chaplains in palliative care (Nolan 2012; Olsman 2022).

Since many people in Amsterdam, like elsewhere in the world, felt the impact of the virus during the pandemic, the mayor of Amsterdam, Femke Halsema, asked the Protestant Church of Amsterdam (part of The Netherlands Protestant Church), “Please give hope to the citizens of Amsterdam!” Then, one of us, being the secretary-general of the Protestant Church of Amsterdam [R.I.], approached the other [E.O.], because the latter had expertise on hope. Both of us are ministers of the Protestant Church in the Netherlands, and one is a PhD candidate in the field of faith-based communal living [R.I.], while the other is professor of chaplaincy studies [E.O.]. Hence, it was the mayor of Amsterdam taking the initiative and the one who addressed hope. Nevertheless, we responded to this call because given the evidence on this topic, we believe hope to be an important topic in the lives of human beings, especially when they are facing crises (Olsman 2020).

Given the contextual restraints during COVID-19, the Protestant Church of Amsterdam decided to develop (and fund) a podcast on hope in times of COVID-19, and asked us to design it together with podcast maker Harmen van der Veen (H.V.) who has worked at the national radio and developed several podcasts. Together [H.V.; R.I.; E.O.], we discussed possible guests (also see, Section 2) but we, as authors of this paper, had no influence on the podcast’s content or the questions H.V. asked. Also, the selection of fragments for the episodes was performed exclusively by H.V. While the podcast was developed and published between January and May 2021, it was not until 2023 that we decided to analyze the episodes’ content. The objective of this study was to explore the hope of participants in the podcast, which focused on citizens of Amsterdam.

2. Material and Methods

A qualitative study was conducted, in which the Amsterdam podcast ‘Hope in times of corona’ was analyzed. The theoretical underpinnings of this study were hermeneutic phenomenology, the latter emphasizing that the lived experiences of participants are central (Sundler et al. 2019). Hermeneutics refers to the interpretation of and through language, which is of central importance in how participants give meaning to their experiences (Ricoeur [1984] 2012). Different from descriptive phenomenology, which aims to offer pure descriptions of the experiences of human beings, hermeneutic phenomenology tends to emphasize the interpretation of these experiences (Sundler et al. 2019).

2.1. Research Ethics

This was not a qualitative study in the sense that we collected data with participants in a study. The podcast episodes were already publicly available, and participants were aware that this would be the case. Nevertheless, we critically reflected upon research ethical issues. Asking participants in podcasts to give consent for the podcast to be used in an empirical study in retrospect seems uncommon when we observe the few studies conducted within this field (Lindgren and Bird 2024; Slakoff et al. 2022). The main guests of each episode, we concluded, were not vulnerable, but rather had leading positions (see Section 2.2), which deviates from, for instance, a study that focuses on the grief of co-victims of crime or violence, where no consent was asked in retrospect either (Slakoff et al. 2022). We discussed if the current study could do harm in another way; our concluding answer was ‘no’. Our approach was not a critical content analysis, like others have performed (Lindgren and Bird 2024), which means that we did not critique participants afterwards, but rather explored their understandings of (sources of) hope. Rather than causing possible harm, the reverse seemed to be the case: what participants found it important to tell (unknown) others, now found its way into the academic world as well. This is in line with the finding that podcasts empower participants and their listeners, especially those belonging to vulnerable groups (King 2009; Mădroane and Cărlan 2023).

2.2. Recruitment

The interviewees of the podcast were not participants in research. They agreed to be interviewed for the podcast by the podcast maker, and they were aware that it would be available publicly. In retrospect, we decided to analyze this podcast, and therefore we deem it to be important to sketch some of its backgrounds now. The inclusion criterion for participation in the podcast was that the interviewees took a role in which they had an influence on their environment, wider than only their family members and friends. We sought variation in terms of gender, spiritual/religious background, and district of Amsterdam lived/worked in. Since we and the podcast maker were embedded in Amsterdam in many ways, we were able to make a list of possible interviewees, which we checked with some colleagues living in Amsterdam as well.

2.3. Data Collection

The podcast maker first wanted to do a short interview with one of us, being an expert in research on hope [E.O.]. This episode was excluded from the current study, since it would represent too much of a mixture of roles, and it would mean that we, as researchers, would analyze our own contribution to the study as participants, which we deemed to be undesirable. The podcast maker approached interviewees and made final appointments. In each podcast episode, he also had short interactions with people outdoors in Amsterdam, for example on the streets, or in parks. The podcast series consisted of six episodes lasting each an average of 21 min (range 17–25 min). The episodes were transcribed verbatim.

2.4. Data Analysis

The transcripts were thematically analyzed using Atlas.ti. We first summarized interviewees’ central understanding of hope. After that, we used a double approach when analyzing the data (Braun and Clarke 2006). On the one hand, we used themes based on earlier review studies on hope, which described the concept of hope, including its sources (Olsman 2020). On the other hand, we wanted to be open to what appeared in the data, which led to new themes. We also used code ‘striking’ to include fragments we were not able to label with a code immediately, but that seemed important for answering our research questions. E.O. analyzed all the data, looking for similarities and differences between codes and refining them. R.I. and E.O. discussed the analyses until consensus was reached. Since an analysis of a podcast in some ways deviates from a semi-structured interview study, saturation was only found on the topics presented in this paper.

3. Results

There were six episodes. Fred Salomon (FS; I), a retired judge, had a Jewish background (district: South), and emphasized that doing things for fellow human beings was important to Jewish people, which may offer hope to others. Iman de Ruijter (IR; II) was Muslim and led a foodbank for around 130 households (district: North). Talking about hope, she referred to the importance of sharing love and material things with others, while she critiqued the government for not guaranteeing a higher minimum of income for its citizens. Geeske Hovingh (GH; III) was Christian and managed an organization for people without asylum status (district: West). She linked hope to the experience that in spite of the hardship of the COVID-19 pandemic, people were able to treat each other with dignity. In their spare time, Hanoeh Limaheu and Gerrick Croes (HL and GC; IV), who had no religious background, offered free haircuts to homeless persons (district: parks in different parts of Amsterdam). In doing so, they offered hope. Efraim Hart (EH; V) was Christian and a member of the political party Christian Union. He worked as a physician and researcher for 'Health Activism' (district: New-West = West end of Amsterdam). Like Salomon, he stressed the link between hope and looking after others. During the last episode, the mayor of Amsterdam Femke Halsema (FH; VI) was interviewed, who saw herself as Humanistic (district: City Center). While she had to impose COVID-19 measures on her fellow citizens, she urged religious institutes, including the Protestant Church of Amsterdam, to give hope to Amsterdam's citizens.

3.1. Conceptualizations

Hope was often sketched against the background of a narrowed down present, or closed space and closed future. Many participants related hope to the opening up (again) of this space and future, and some of them used metaphors like 'looking forward' to it. Protest against the closed present, which impeded an open future, coalesced with hope in some instances.

Efraim Hart (EH) alluded to his hopelessness when the future was still unknown and closed [*italics ours*]:

EH: It [the virus] is something new, you don't know very well. There was no vaccine yet. So, you don't only think about the person that is dying but about the whole society, the people you know, who are older, vulnerable, who may contract the virus.

HV: Did it make you feel hopeless?

EH: At that moment, yes. There was *no prospect yet*, nothing like: there's a vaccine coming our way. We didn't know at all, what was going to happen. (V.185-9)

The mayor of Amsterdam spoke about her own teenage kids who hoped that the pandemic would be over as soon as possible, while protesting against (her) measures.

FH: Sixteen, seventeen, eighteen are of course the years during which you try out things, and when you are bit naughty, flirting massively and fall in love. Well, and actually that's hardly possible now. So, for young people that's very complicated and it means that teenagers, including mine, struggle with feeling low, while looking for fun, and they hope fiercely that it'll be over as soon as possible. Also, rebellion.

Harmen: Rebellion, yes of course, and they also mention it to you as mother? Like: 'Do something about it, you're the mayor!'

FH: Well, they always say in retrospect, 'That curfew, was that your proposal?' Or, 'Was it you introducing that [measure]?'.

HV: Or 'Weren't you able to block it, or something?'.

FH: Like yesterday with Kings Day, 'Mom, you're not going to do anything, right? [laughs a bit]. (IV.136-40)

One Israeli woman, being interviewed in the street, referred to things ‘opening up’ again in her country:

P [= Participant interviewed in the street]: Well for me, it’s a bit different. I live in Israel and I’m here because my dad is ill right now and in Israel, I believe 60, 70% of the inhabitants have been vaccinated and everything opens up a bit again. In daily life, that gives me hope. I must confess that, here in Amsterdam, I’m quite shocked about the situation. It’s all closed down, and it’s all, well, the hope is, sorry to say so, is more difficult to find. (...) Thanks to the vaccination I feel much happier, and movies are opening up again, cafes are slowly [opening up again].

HV: And you’re talking about Tel Aviv now, or Jerusalem?

Participant: I live in Jerusalem. But here in the Netherlands, well the hope, I think we need to be patient for a while. (II.76-96)

A few participants responded to questions about hope by expressing that they did not ‘see’ much hope, sometimes related to and sometimes unrelated to COVID-19.

P: I see things quite gloomily, I must admit, the situation of our world, I mean. So, that’s not very hopeful. But that has no relationship to corona.

HV: Overall, you see little hope?

P: Yes, yes.

HV: Why is that?

P: Well, all these idiots reigning the world: Putin, Bolsonaro. Trump has left, thankfully. The guy in Turkey: Erdogan. Netanyahu: this annoying arsehole. So, when it comes to that, I don’t see much hope.

3.2. Sources

Interviewees did not always make sharp distinctions between descriptions and sources of hope. Nevertheless, in terms of sources of hope, they referred to seeing that the future ahead of them was opening up, and/or they recognized its potentiality. Other sources of hope were the vaccination against COVID-19, the good weather that literally opened up the sky, and a few believers, speaking about hope, referred to their faith and trust being sources of hope. Frequently mentioned, and emphasized by some participants, was the connection with others, and especially solidarity, as a source of hope.

Seeing that an open future ahead was starting, and/or recognizing the potential (of the) future, were conceptualizations of hope (see Section 3.1), but at the same time, they were sources of hope [*italics ours*]:

HV: What gives you hope?

P: The *potential* to travel again. I’m just really *looking forward to that*, and going back home and seeing family [in New York]. (I.42-3)

Another source of hope was the vaccination against COVID-19, which was about to happen at the very moment of the making of the podcast. The good weather, with the sun which literally opened up the sky, was referred to by participants as well.

HV: I’m creating a podcast on hope. What gives you hope in these times?

P: The vaccine. That’s what I’m waiting for (...). I’m part of the vulnerable groups.

HV: Why?

P: Due to lung cancer.

HV: Oh, that’s serious. How are you doing now?

P: I’m okay. Thankfully.

HV: And the vaccine offers you additional certainty, extra hope?

P: Yes. (III.29-45)

HV: Where do you draw hope from?

P: Well, from this lovely weather at least. Also, I draw hope from the fact that we will be vaccinated at a certain moment. (I.35-6)

For some believers, faith and trust were related to their hope. When asked about their source of hope, one of them asserted:

P: The Lord Jesus. I'm Christian and I believe that He will guide me through this time, whatever happens. Keep trust: it'll be okay someday! (IV.68)

Several of the main guests of the podcasts spoke about connections with others.

P: What gives me hope? Ooh, boy, quite a difficult question at the moment. Personally, my family gives me hope. Well, and also my friends, acquaintances around me. That's what nourishes my hope at the moment. (II.29)

One special way of connecting with others as a source of hope was solidarity.

P: I draw hope from being together, and being ready to help each other. So, the solidarity, that's what I draw hope from. (II.16)

GH: What we find very hopeful, and we're very happy with that, is that the municipal authorities have decided to create places to sleep for the night for homeless people in town, so also for our target group of people without legal documentation (...). We've seen how it made people feel better, because when you've got a bed to sleep, you'll overcome the survival mode and are able to think about your future in a more realistic way. (III.158-62)

3.3. *Offering Hope*

Expressing one's solidarity was also a way of offering hope to others. This became even more important against the background of (increasing) inequalities in Amsterdam. In her speeches, the mayor also referred to the history of Amsterdam, including its massive resilience in response to hardships, in order to offer hope to Amsterdam's citizens.

Fred Salomon emphasized that doing things for others, not hope itself, was most important in his faith, as these actions could offer hope to others. He was even civilly disobedient to express his solidarity:

FS: Once a week, we play bridge with four persons, at the house of one of us. Everyone is allowed to receive only one guest, but we go there with the three of us. Actually, that's not allowed. But the reason I'm doing it, join them, is that one of the participants is a lady of ninety years old, who's all alone, and hardly has any social network. So, she's looking forward to three hours of good company. So, well, I'd like to contribute to do that, and I'm willing to ignore the extreme corona measurements for three hours, so for social reasons. (...) Obviously, we do social distancing, as good as we can, but fully adhering to the rules: no, we don't do that. I don't think that's justifiable because of social reasons.

HV: But you also look forward to those meetings in that room?

FS: I like it. But I do it for her mostly.

HV: You're offering her hope because she has the visit to look forward to.

FS: It's incredible how much she desires it, because it's something I've been thinking about, which has been published in the media these days: the loneliness of people. (I.115-23)

Later during the podcast episode, he discussed solidarity as not only a (possible) source of hope, but also expressed hope for solidarity.

FS: You've got to hope that this [being solidary with others] is broader than only that [Jewish people helping each other]. But well, primarily it's the case of course,

that Jewish people do try to support each other indeed, since we are with so few. (I.139)

Offering hope by expressing solidarity was even more important as the virus shed light on inequalities that already existed in Amsterdam's society, but that became more visible due to the virus. Alternatively, it could be the case that the virus reinforced the inequalities:

EH: Not the virus itself is unequal but it sheds light on the inequalities of our society. That's comprehensible of course, but if we look at the explanations during press conferences on the corona measures, to understand such conference, it's necessary to speak Dutch (. . .). That's already such a simple thing as language, leaving aside understanding messages at all. So, there are so many factors that hinder the understanding of a simple message, but that meanwhile increase the risk of contracting corona. (V.141)

The mayor of Amsterdam, Femke Halsema, expressed something similar. Also, she introduced another way of offering hope and/or pointed at another source of hope: the history of the city.

FH: I'm very conscious that if you live with a larger family than mine, in a little apartment, with only a small balcony, or even without one, and the walls are closing in on you, life is really much heavier. Even more, when you lose your job as well, facing income related uncertainties, not knowing what the future will bring. I'm having the massive advantage that my income is certain in this period, which offers me, my partner and children rest.

HV: What do you want to tell those people in Amsterdam? For the next period or the longer period after corona? What kind of hope do you want to offer them?

FH: Well, what I've often told inhabitants of Amsterdam, also during speeches over the past year, is something about the history of our town. Our town, with its almost 750-year history, has, of course, faced horrible hardships. Also, other pandemics, wars, crises, societal troubles, conflicts. Well, this town, and also its citizens, are extremely resilient. Currently, it's being hit severely, and people face a decrease of income, their hopes for the future, their uncertainties. But Amsterdam is a city that recovers quickly. That won't apply to each citizen in the same manner and at the same time. But, if you look at our history, there is much reason for hope. (VI.143-5)

3.4. *Appreciation of Everyday Life*

Participants associated hope with a different appreciation of everyday life. They sketched it against the period prior to COVID-19, in which they were busy focusing on other things. The effect of COVID-19 made them slow down and realize what really mattered to them.

P: It gives me hope to see that there's a world after corona, so that we're currently exploring what we can do after it. But also, the things we do more, like being in nature, while living in town. So well, enjoying those little things much more and seeing that we're getting out of this situation.

HV: Do you enjoy these little things more than before?

P: Yes, I believe so. Before, I was in a hurry more often and always dealing with my schedule, often like, 'Oh, what's my plan this weekend? Sorry, I won't make it. I can meet up with you next month.' While the case is now: I make little call, 'Shall we . . .' So, and now we're walking here with the baby.

HV: You're walking together [Friend, P and her baby].

P: That's right. We are just happy, walking together, accompanied by the baby. Well, yes, you enjoy those little things. (III.100-8)

P: What gives me hope? Well, faith gives me hope. It's pure faith that gives me hope, you know, faith that this will be over some time, you know? Especially that things turn normal again because it is a period to learn things, you know.

HV: What do you learn?

P: Well, I'm contemplating things I normally wouldn't do, because normally I'm so busy with work, challenges of everyday, you know. Then, you're so busy with things that you forget to realize what's so important in life [She exemplifies that later: family; playing an instrument; gaining insight into things]. (IV.40)

4. Discussion

The objective of this study was to explore, in a podcast during the COVID-19 pandemic, interviewees' hope. We found saturation of the following themes. The conceptualizations of hope, as the findings suggest, often consist of a sketch of a narrowed down space and closed future, and hope relates to (the potential of) this space or future opening up (again). Hope is also associated with protest against the 'closed present'. Sources of hope, the findings indicate, are the vaccine, good weather, faith/trust, and solidarity. The findings of our study highlight that expressing one's solidarity with others is also a way to offer hope, which is even more important against the background of growing (visibility of) inequalities. The mayor of Amsterdam offered hope to her citizens by pointing at Amsterdam's history, characterized by resilience. The last finding suggests that people may appreciate their everyday life in a new way when facing a crisis like COVID-19: participants viewed their past as a time of hurry, during which they had focused on things that now seemed less important. The findings suggest that COVID-19 makes them slow down and more aware of what really matters.

We found that relationships with others, and especially solidarity, were an important source of hope, or alternatively, that people try to offer hope to others by showing their solidarity and acting on it. This is in line with an overview of review studies on hope in mental health care, in which relationships with others were a main source of hope, especially relationships with peers ([van Veluw and Olsman 2023](#)). Several participants saw their everyday life in another, more positive way, caused by or coming along with a period of hardship or adversity caused by the pandemic. This is in line with the literature on factors promoting posttraumatic growth, which included the sharing of negative emotions, positive reappraisal, and resilience, among others ([Henson et al. 2021](#)). The first two factors may be similar, respectively, to solidarity and the positive reappraisal of everyday life. Resilience was also one of the definitions of hope, as described in several review studies on hope in health care ([Olsman 2020](#)). Hence, it seems helpful to understand hope in times of COVID-19, in terms of growth during a collective crisis with psychotraumatic dimensions. Still, it should be noted that adverse events in early childhood and neuroticism ([van Zelst et al. 2003](#)), or trauma severity, additional life stress, and lack of social support ([Brewin et al. 2000](#)) may better predict posttraumatic problems, such as PTSD.

Our findings suggest that hope can be tied down to neither the process of (posttraumatic) growth nor its outcome. While this may be problematic in developing quantitative research with statistical (factor) analyses, this finding may be rather helpful clinically. For instance, mental health care professionals may ask their patients open ended questions about hope, which in turn addresses patients' spirituality ([Gijsberts et al. 2019](#)). Asking these questions offers them insight into the processes their patients are going through and into the outcomes that patients desire. While our study focused on hope, we have elsewhere pointed at the clinical importance of not only addressing positive themes, such as hope or recovery, but also their opposites, like fear, loss, despair, or depression ([van Veluw and Olsman 2023](#)). This is in line with the critique of the CHIME model, an acronym for connectedness, hope and optimism, identity, meaning and purpose, and empowerment ([Leamy et al. 2011](#)), which tends to exclude negative experiences, like traumatic experiences or grief ([Schrank et al. 2012](#); [van Weeghel et al. 2019](#)). Clinically, this means that mental health care providers should be willing to witness both hope and hope's op-

posites, which represents the basic attitude required to provide spiritual care (Nolan 2012; Olsman 2022).

Another finding of this study is that several participants appreciated their everyday life in a new way: they viewed their past as being characterized by hurry, during which they had focused on things that they deemed less important now. The findings suggest that COVID-19 made them slow down and aware of what really mattered, and what really mattered to them became a source of hope. We see a parallel with a study in hospice care, where patients are confronted with suffering and hardship; we may even hypothesize that owing to that confrontation, they expressed a growing receptivity for little things in life, like hearing the singing of birds, and their connections with significant others (frequently mentioned) (Olsman and Versteeg 2024). While most of these patients (thankfully) did not find joy in suffering as such, and while most people struggling with (the consequences of) COVID-19 did not enjoy the pandemic as such, this struggle and suffering may cause or come with a deepened sense of what really matters in everyday life. How a focus on what matters in daily life relates to hope for the future, and also how both can play a role during clinical encounters, is worth further investigation. Again, connection with others seems to be important in this regard.

The importance of connection with others, and more specifically, solidarity with one another, was a central finding in our study. Participants referred to solidarity as a source of hope, and they expressed solidarity to offer hope to others. While the possibilities for expressing solidarity were restricted due to COVID-19 measures, paradoxically, many participants saw solidarity as paramount. Fred Salomon, for example, who was a retired judge, was civilly disobedient in order to express his solidarity. Interestingly, the link between hope and solidarity has been referred to in several spiritual/religious traditions, including non-religious ones. For instance, neo-Marxist Bloch ([1959] 1986) developed a (somewhat utopian) hope that Marxism would come true, and Freire ([1992] 2004) described the importance of solidarity with, and social justice for, those people who had been denied the possibility to flourish and obtain a proper education. Another example is the work of Moltmann ([1964] 2005), who synthesized neo-Marxist thinking and Christian theology, in which solidarity and hope became connected as well. Hence, hope, including its relation to solidarity, can be seen as a spiritual topic that is worth addressing in various worldviews and/or religions.

One limitation of the qualitative analysis of the podcast 'Hope in times of corona' was that the podcast maker (H.V.) had already selected fragments for the episodes, which implied the deletion of some content that may have been important to better understand the context. However, it should be said that he selected all of the fragments in which hope was a topic, together with other fragments. A second limitation was that we, as researchers of this study, were also involved in the beginning of the development of this podcast. This is not necessarily a limitation since, for instance, interviewers also co-create their data, together with their interviewees, but we felt that we had to exclude the first (short) episode, in which one of us, with expertise on hope, was interviewed. A last limitation relates to the focus of our study: analyzing a podcast on hope, we explored interviewees' hope. Beyond the scope of this study is the listeners' perception of the study. We as researchers were touched by the podcast's content and it functioned as a source of hope for us. Still, it is worth investigating in future studies how podcasts, for instance those on hope, affect listeners.

5. Conclusions

This study has offered insights into hope in times of a pandemic that affected mental health in a negative and perhaps even traumatic way. The findings suggest that hope during the pandemic related to the future opening up, contrary to a narrowed down or closed present. Among the sources of hope, solidarity with others was emphasized, which is a topic that deserves attention in future research and clinical practice. The podcast shed light on, among other aspects of solidarity, protest or being civilly disobedient because of measures that hindered the establishing of connections. We conclude that the link between

hope and solidarity, including protest against measures or structures that hinder (the expression of) solidarity, is an established link in several worldviews, both religious and non-religious ones.

We also conclude that hope could be seen against the background of posttraumatic growth, especially when we approach hope as a positive reappraisal and when linked to one particular definition of hope: resilience. Furthermore, we saw that hope cannot be restricted to the outcome or the process of (posttraumatic) growth, which may be clinically helpful. Namely, mental health care professionals, we conclude, can ask their patients questions about hope, which offers them an understanding of patients' thought, action-oriented and emotional processes, the outcomes patients hope for, and patients' spirituality. Meanwhile, they need to pay attention to hope's opposites as well, like losses, traumatic experiences, hopelessness, depression, et cetera.

This study also reveals topics that deserve attention in future studies. One relates to confrontation with suffering and hardship, which coalesces with or perhaps even causes a deeper appreciation of little things in daily life, like enjoying nature, appreciating friendship, et cetera. Similar findings have been reported in studies on palliative care. Future studies should further explore the relationships between hope, suffering/hardship, and this deeper appreciation of things. This study focused on the content of a podcast, and taking into account the growing popularity of this medium in our country ([Commissariaat voor de Media 2023](#)) and probably other countries, future studies should be conducted that explore the effects of podcasts like these on their listeners. Finally, our own hope is that podcasts on hope against the background of crises are able to foster hope in their listeners, especially when they face mental health issues.

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Informed Consent Statement: Asking participants, in a podcast that is already publicly available, to give consent for the podcast to be used in an empirical study in retrospect is uncommon and not necessary. For details, see Section 2.1.

Data Availability Statement: This was the analysis of a publicly available podcast. The audio files of the episodes of the podcast 'Hoop in tijden van corona' [Hope in times of corona] can be found via several servers, like Open Spotify.

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