

# Community Responses to COVID; what's been going on?

A lot has been said about how people have come together in their communities to support each other during lockdown. This paper shows what some of those responses have been (and continue to be), what's being learned, who's involved and what we need to improve. It draws on the experiences of a number of established community programmes (*Invest Local; Llechi, Glo a Chefn Gwlad* and *Local Conversations*), the work of a number of other well-established local groups and some informal groups (many, but not all, identifying as Mutual Aid groups) and a number of CVCs.

Information has been collected over the last month in informal network meetings and then discussed more widely in an online workshop with around 35 people from groups across Wales on 26 June. (We estimate that overall some 60-70 organisations have contributed to the information used in this paper).

In writing this we also acknowledge that some community bodies have simply closed their doors during lockdown, mostly where their volunteers felt too vulnerable (usually on age grounds), but in some communities this has left large gaps. In communities with no established community groups, Mutual Aid groups have often stepped in (as well as their work alongside established groups) but it is currently not possible to tell if there has been a community response in every part of Wales.

#### Overview

There have been massive inequalities in the impact of lockdown. People already in poverty, people in unstable or temporary employment, self-employed people without savings and small local businesses/social enterprises have been particularly badly hit. And emotionally, people whose physical and mental health were already compromised have also been badly hit. Inequalities around access to the internet and IT equipment have also come into sharp relief.

Nevertheless there has been a huge community response with ultimately many more people wanting to volunteer than have been able to find opportunities to do so, and a vast (and still growing) range of support activities being put in place and new relationships and ways of working developing.

### **Support Provided**

### **Basic Needs**

The first priority was food for people who were vulnerable, isolated or simply short of money. This has come in many forms; new foodbanks, growth of existing ones and other free food initiatives have been set up by communities, as well as providing volunteers for delivering council food packs.

There have also been electronic networks developed to promote local shops and food producers, with many delivering to vulnerable people, and both large and small food retailers providing additional significant pro bono support. In many cases the act of providing and delivering food has also reduced isolation and helped spread the word about other available support.

A lot of this support was provided rapidly before Welsh Government support became directly available. Food parcels for shielding people were limited; they failed to cater for dietary needs and normally covered one person, whereas often there was a whole family self-isolating that needed food one way or another. There have also been problems providing appropriate food for some BME communities, whilst in one other area the local authority food box was described as a "middle class fantasy" with contents that recipients had never seen before.

The other practical priority from the start was delivery of medicine. Mutual Aid groups have proved critical here, with large networks of volunteers available to swiftly collect both prescriptions and medicine, as well as offer wider services like dog walking and shopping.

## **Tackling Isolation**

Lockdown has inevitably led to social isolation for very many people, and while support in this area was slightly slower to take off, it has become a major priority. Activity packs for older people and children have been developed and distributed; 'door step' play schemes have been run by some youth workers, as well as online activities for young people. Some older people have used IT to keep social groups going, but 'ring arounds' have been more practical for those struggling with technology. A lot of community groups report how critical local knowledge has been in identifying vulnerable people, including those who may not be on official lists.

## A Volunteer-led Response

The majority of this community-based work has been done by volunteers. Some has been done through volunteer-led groups (mostly Mutual Aid) and some by volunteers working with established community organisations (in addition to a smaller number of people directly volunteering for councils, mostly delivering food parcels). Almost everywhere there have been more volunteers than needed.

A different age group of volunteers has come to the fore during lockdown, with far more people of working age stepping in. It seems likely that as lockdown ends, the majority of them will step back, though local surveys in a couple of areas suggest around a quarter will be keen to stay involved.

There has also been a sense that in some cases volunteers have been 'thrown in at the deep end', finding themselves asked questions they couldn't answer around things like benefits, housing, or mental health. And in some cases volunteers have been out and about providing essential support, while employees of public bodies and housing associations have been working from home.

Employers in this situation face very difficult challenges due to insurance and issues around duty of care, but in some areas local feelings are strong around the absence of paid staff while volunteers take risks.

#### Communication

Mass leafleting was often the first activity in any community, trying to ensure that local people know of all available support, and subsequently widely accessible platforms like Facebook have been widely used. For some groups who are often physically isolated but IT-confident, the switch to a more digital approach has actually reduced their isolation, but those who are not have suddenly become very isolated and in some cases they were very hard to identify.

These groups include the very old, people with certain disabilities, many minority ethnic groups, and people in rural Wales where the basic infrastructure remains very poor, as well as those who can't afford computers (phones are often a reasonable substitute, but have more limited functionality).

And while many BME community groups have been very active during the lockdown, isolated individuals from BME backgrounds with low English language skills, who are not linked into community groups, have been especially vulnerable and short of accurate information and support. It has also been reported that migrant worker populations, who are often employed in jobs with poor worker representation and cannot socially distance, feel very vulnerable to workplace (and landlord) bullying and are vulnerable to both catching and transmitting COVID.

### **Education**

The widespread educational inequalities caused by lockdown and the move to home learning have been widely discussed, but are a significant concern raised by community groups. Lack of access to IT for some families (or one computer in a house which is being used for work) and the difficulties of managing home schooling and care for very different aged children were widely raised. In some cases, community groups have worked with local schools to provide online resources (e.g. a film to help with transition from primary to secondary school and coding sessions) to try to address these challenges.

### Collaboration

In the majority of areas collaboration between county wide organisations (councils and CVCs) and community groups has been rated as good. Community organisations have reported an atmosphere of trust and easy information sharing that hasn't been there before in some areas. There has often been a very clear delineation of tasks and clarity of communication between the key organisations which has allowed grass roots bodies to get consistent information and provide key support when requested. Some groups have also benefited from additional volunteers who had come forward centrally (i.e. at county level) though that placement seems to have worked better where CVCs had

undertaken volunteer recruitment and placement than where councils have done it. Additionally, in many cases, individual local councillors have provided a critical link and led local volunteer actions.

The most obvious immediate area of difference has been in attitudes towards who 'needs' support; most community groups working in this environment quite deliberately operate on a basis of trust: if someone says they need support they are believed, whereas public bodies often require some proof of need. This has led to community foodbanks responding to requests rather than requiring referrals, small cash payments being made without formal checks, community organisations lending money to individuals going short, and unpaid carers being provided with some PPE.

However there have also been a minority of counties where collaboration has been poor and councils made no attempt to work with existing community groups. This has led to a limited provision of minimal central support and a patchwork of isolated local work.

### The Social Problems in Lockdown

The negative social impacts from lockdown, mental health problems and domestic abuse have been widely discussed. There is also a major concern being raised about impending spikes in indebtedness, with many payments – for utilities and rent in particular – having been deferred rather than cancelled, leading to many families facing great financial pressures at a time when support reduces and unemployment rises. It is highly likely that this will, in turn, have further impacts on peoples' mental health and wellbeing.

The lockdown has also exposed deep longer term financial problems. People on very low incomes were relying on friends (or more normally relatives) to keep them afloat, and when the relatives themselves starting struggling, they were left virtually destitute. One group reported feeding people that were previously being supported by others and said that many residents felt that their support network had been impacted by the current situation and that was contributing to them struggling to make ends meet.

Worryingly some groups are already preparing for enhanced local community food provision as they see poverty getting worse after lockdown, not easing.

## **Funding**

Funding for community action has been plentiful and diverse. No groups have mentioned being unable to access money for their emergency work, though many have mentioned that their costs have reduced due to a number of activities being stopped. Groups strongly welcomed the widespread availability (and flexibility) of funding for 'recovery activities' but expressed concern that much of it feels very short term. For newer groups, funding for food and necessities, PPE and volunteer expenses is fairly easy, but little is available for the infrastructure to continue to deliver (staff, shelving, space, vehicles), which will probably be needed in the medium-term. However, for

groups which couldn't open at all, funding has been more limited and this may prevent some from re-opening.

# **Learning from Lockdown**

Many groups have been thinking about what they will do differently during Lockdown 2.0 when it comes (no one is saying if it comes). Many will be using the period out of lockdown to do digital audits and try and work out exactly who doesn't have access to IT and how else they can be supported. The other big concern is around what they can do differently about children's mental health.

As authors of the report we did not seek comments on wider policy, but many were forthcoming; in particular there was a lot of feeling that schools were providing too little support to learners and that guidance to those shielding was unclear or went to the wrong people. For some CVCs in particular, sorting out confusion over who should be shielding and what support they could get made up a large proportion of their work.

#### What's next?

The community organisations who have helped us pull this together are suggesting that they are focusing on six main concerns now.

- Preparing for coming out of lockdown most community groups are built around working face-to-face with individuals and groups, so they need to know how to do this safely, balancing the risk of contact and the risks of isolation, and planning how to continue to support people who could be shielding for another year.
- A big spike in unemployment, with all the misery that entails.
- Preparing for a second lockdown (as above); many of them will be planning based on what they have learned and they hope that others they work with will be doing the same.
- A desperately uncertain future for working age people who are shielding, with people faced with choice between quitting work (to shield their partners) or facing financial ruin. This choice becomes even more acute for those families with school age children.
- There has been ample funding to community groups responding to the current crisis. There
  is less confidence about what happens in the next lockdown and even less confidence about
  what happens for funding for community action outside COVID. Many recovery funds are
  only focusing on the short term and the challenges following COVID are likely to be deep
  and enduring.

How do we ensure we capture the learning from COVID? A lot of community organisations
are keen to continue playing a more active role in their communities and want local
authorities in particular to retain the same willingness to work with them that has been
displayed during lockdown.

The emergence of a high level forum in Pembrokeshire to discuss this shift has been welcomed locally, but it is clear that this is the kind of initiative community organisations would like to see elsewhere and argue that it is even more important than ever: they can offer critical support and opportunities within their localities at a time when councils will be under even more financial pressure than they were before lockdown.