COMMUNITY 360°

Together We Thrive

North East Essex Communities responding to Crisis

COVID 19, social action and our local neighbourhood

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University of Essex

Research leader biographies

Alix R. Green is Senior Lecturer in History at the University of Essex. She works on histories of contemporary Britain, and focuses on the uses of the past in government and organisations. She adopts a collaborative approach to her research and has worked with many company archivists, including at the John Lewis Partnership, Marks & Spencer, Transport for London and The National Theatre. Partnership working with Community360 began with student placements and moved into research with this project. Green is a Fellow of the Royal Historical Society and the founding convenor of the Public History Seminar at the Institute of Historical Research.

Dr Rebecca Warren is a Lecturer in Accounting at the University of Essex. She works on research that explores the role of accounting and accountability in exacerbating social issues, inequalities and inequities, and the way that accounting and accountability can be used by communities in a transformative manner. Warren has worked with organisations, charities, social enterprises and community groups to explore and evaluate their work through collaborative community-based research with a qualitative focus. She has also developed an award-winning module on community organising at the University of Essex. Partnership working with Community360 began with an evaluation project and has moved into research on this project.

Foreword

Community360's vision is for a less unequal society. Throughout the course of the last eighteen months, inequality has been exposed ever more starkly through the pandemic. As leaders and providers in Colchester Borough, we wanted to understand more about the experiences of charities and community groups working to improve the lives of local people. We identified a need to gain further insight and partnered with the University of Essex to achieve this.

I would like to thank everyone who has contributed to producing this report. It is inspiring to hear from people, in their own words, about the ways in which they have adapted to achieve their goals. It is also challenging to learn more about the difficulties that they have faced and the lessons that they impart, to address the inequalities that exist.

Once completed, we knew that the research would be used to shape local strategies, provide evidence to influence positive action in the area, and develop practice that could be replicated or adopted in the future, or in other parts of the county, as maybe appropriate.

Now, it is our commitment at Community360 to make this happen. We will work with colleagues from across different sectors to achieve this. We view the publication of this report as a first step towards a longer-term ambition of strengthening the philanthropic sector, which has supported so many, and is one of the most important assets we have to embed resilience, equity and innovation into our society.

Tracy Rudling

Chief Executive Officer

CHAPTER ONE

Introduction from C360

Community360 (C360) exists to work together with members of the public, voluntary and community organisations by providing passionate, intelligent leadership in Colchester, Essex and beyond. Our vision is for a more equal society. We serve as a supporter of non-profit organisations, working with more than 550 every year to achieve the aims of each, and to engage with local people to help them to realise life opportunities.

We prioritise ensuring that the experiences of community groups and those of the people they work with, or represent, are listened to, understood and influence future action.

In March 2020, individuals, groups and partnerships, guided by local leaders, responded to the dramatic changes sweeping across society in the wake of the pandemic. They used their time, skills and assets to their best effect to reach out to people who needed them.

We recognise that we occupy a privileged position in being able to witness first-hand the commitment, challenges and achievements of the voluntary and community sector in Colchester Borough.

In August 2020, we agreed that the stories of the people who contributed so much to our neighbourhoods should be captured and the lessons that they have to share must be heard. An outline was designed which affirmed that research would:

- **Capture the experience of citizens and community leaders following the first stages of the COVID-19 pandemic**
- **Prioritise the experiences of our local place – Colchester**
- **Consider how circumstances and the local environment (prior to the pandemic) may have impacted upon people's experiences and will influence 'recovery'**
- **Recognise that language and culture have been impacted by the pandemic (i.e. categorisation of risk through terms such as shielding) and provide relevant context. However, research will consider longer term issues, particularly those connected to inequalities, health and wellbeing and diversity**
- **Work in partnership with individuals, organisations and projects which share these objectives**
- **Acknowledge the value of existing community assets and the strengths that exist, reflecting Asset Based Community Development (ABCD)**

ABCD focuses on what is working well and learning lessons from it to apply to existing or future activities. ABCD encourages innovation and partnership working to manage resources to their greatest potential. It empowers individuals to take charge and determine change.

A community asset is defined as *"any factor or resource which enhances the ability of individuals, groups, communities, populations and/or institutions to maintain and sustain health and wellbeing and to help reduce health inequities (Morgan and Ziglio, 2007). Community assets can take a variety of forms including activities, support groups, social networks, and community spaces/places. A defining feature is that they have their roots in the community with the aim of benefiting community members."*

This report does not sit alone but is part of a set of materials being developed across North East Essex to explore the role that is played by the voluntary and community sector. In March 2021, Community360, Healthwatch Essex and CVS Tendring published a review of the assets managed across Colchester and Tendring to begin to explore the breadth, depth and scale of community action. Further research will be undertaken to ensure that there is an ever evolving picture of the contribution of local groups, the resources they provide and need to operate.

In partnering with the University of Essex to produce this report we have sought to ask questions of how community members responded to the threat of COVID-19, who they worked with (if they worked in partnership), how they developed solutions or encountered challenges and whether they were short term, or will be impacting work in the future. We wanted to explore the adaptability and flexibility of our community. We wanted to learn more about how the organisations and individuals have changed, their own power to manage this change (whether positive, negative or neutral) and whether they have been exposed to difficulties or potentialities as a result.

In reviewing the research, we hope that readers can begin to see more, learn more and consider more the experience of community leaders during such an intense moment in history. Their voices raise questions and offer solutions as we move into the next phases of activity.

Position statement from the researchers: Inequality and lived experiences of the COVID-19 pandemic

The COVID-19 pandemic has exposed and exacerbated profound social and economic inequalities in the UK. We know that existing economic and social inequalities produced disparities in people's experiences on several fronts. Children from the poorest 20 per cent of families were getting over an hour a day less on educational activities than those from better-off households and had much lower levels of access to active learning, such as online classes. People in low-income work were also less able to work from home; for keyworkers, this meant security of income but an increased risk of contracting COVID-19, while those in shutdown sectors faced furlough or loss of work. Low-income households spend over half their earnings on necessities and are therefore less able to reduce expenditure even in so-called 'normal times'.

We know that people from ethnically diverse backgrounds have faced higher death rates from the virus; the reasons are complex but reflect existing inequalities such as being more likely to live in deprived areas and in overcrowded households and to work in jobs that expose them to high risk. More than a quarter of people from a Black background are employed in health and social care and other keyworker roles, public-facing work that had to continue through lockdowns that kept others at home.

We know that women have lost or given up work during the pandemic, one reason being they are disproportionately employed in sectors shut down by the pandemic, for example hospitality, retail and tourism. Mothers were 1.5 times as likely as fathers to have lost or left work; they were more likely to be furloughed and had fewer uninterrupted working hours. Real-time analysis is tracking the gendered dynamics of the pandemic, and peer-reviewed research is already documenting a gender-regressive pandemic response, including the increased care burden borne by women.

There are many other examples of inequalities deepened by the pandemic, such as those experienced by people with learning disabilities. And all of them predate the current crisis. The Institute for Fiscal Studies has, for example, identified a 'long hangover' from the economic crisis of 2008, with a lack of pay growth and sustained austerity policies leaving UK households in a 'precarious position' and the state less able to act as an 'insurer against future shocks'. We also have to recognise that inequalities are inescapably intersectional. For example, women from diverse ethnic backgrounds are twice as likely to be in insecure employment as white workers. This picture of complex, persistent and structural inequalities is the backdrop against which the pandemic and the pandemic response must be seen.

The impacts on mental health and wellbeing, in particular, are striking. People have faced financial uncertainty and worries about access to food, medicine and other essentials; they have dealt with social isolation and experienced strains on personal relationships as well as feeling the fear of contracting COVID-19. Data on mental health have been collected throughout the pandemic and make for troubling reading. In early April 2021, for example, 32 per cent of adults reported high levels of anxiety; for those aged 16-21, the figure was 43 per cent.

In this context, central government policy has come under scrutiny. We support calls for a transparent, public process of holding the government to account for decisions taken, not taken and delayed. However, we recognise that recovery from the pandemic is as much about the local as the national. In conducting interviews with 22 leaders in the Voluntary and Community Sector (VCS) from the Colchester area, we heard from those who – alongside NHS staff and other keyworkers – were the main source of immediate, human support for many, many people.

The testimonies of these community organisers were generously given at a time when the interviewees and their families as well as their staff, volunteers and service users were under great pressure. Their words inspire and inform this report and our principal concern has been to do them justice.

The research team, which also included Dr Daisy Payling, and C360 shared the hope that this project would not only capture these experiences but also learn from them. We outline in the final chapter the implications for C360, for VCS organisations and for statutory services, as well as for all those involved in funding decisions.

This report is, however, a milestone not an end-point. As the country emerges from a succession of lockdowns and faces an extended period – a complex, multi-faceted 'long COVID' – of recovery and reorientation, this process of gathering and analysing evidence must continue. If we are serious about the human dimensions of recovery, we must ensure that the data we draw on are 'stories' as well as 'numbers'. We hope that one of the many powerful messages this report delivers is about the value of lived experiences as *evidence*, as an indispensable resource for organisational and sectoral learning.

Research Approach

Researchers responding to the pandemic

Researchers beyond the medical field began investigating the many dimensions of the COVID-19 pandemic early on. They have begun to demonstrate the impact of the pandemic in the UK, exploring issues of accountability, local authorities' financial resilience, budgeting in the public sector, and the impact on charities and local community organisations.

In particular, The 'Value of Small' in a Big Crisis set the scene of community response across the pandemic by identifying that small and local charities (with an income less than £1 million) were at the heart of the community response through the first wave of the pandemic:

> They **demonstrated tremendous energy, flexibility and professionalism** to understand the implications of the crisis and continuously adapt their provision in response to the ever-changing needs and circumstances of their local communities... In essence, smaller charities **'showed up'** and then **'stuck around'**, using their position of trust within communities experiencing complex social issues to support people when they were needed most. **This is in contrast to parts of the public sector**, who were slower to react, and to informal support and mutual aid, which has dissipated over time.

Other publications have supported these findings. In Nonprofit Advocacy Coalitions in Times of COVID-19, researchers reported that organisations worked together to identify innovative practices and solutions to support the vulnerable during lockdowns, diversifying their activities. At the same time, charities have had to manage many financial difficulties (Are You Ready: Financial Management, Operating Reserves, and the Immediate Impact of COVID-19 on Nonprofits). The impacts of the pandemic on the VCS are many; loss of income; increase in demand and in complexity of demands on their services; and the inability to deliver the face-to-face services that are commonly at the core of their work.

Our approach differs from prior research in focusing on the lived experiences of the pandemic on the VCS in NE Essex through in-depth oral history-based interviews with community organisers. This approach allows us to cut across these different themes, and demonstrate the importance of capturing and learning from these experiences for the future. Our aim, shared with C360, is to ensure that we capture these many impacts of the pandemic at the local level as resources to support reflection, processing and organisational learning.

Dr Alix Green

Dr Rebecca Warren

Oral histories and their value

The decision to record in-depth interviews with community organisers using oral history methods was taken jointly between C360 and the research team. An Oral History approach was chosen to explore community organisers' own interpretation of the pandemic and the pandemic response, creating a personal memory, an organisational memory and a community memory simultaneously.

Oral historians emphasise the importance of hearing people's testimony in their own words, rather than relying on an assumed narrative. This approach is particularly important in community-focused projects as the evidence produced diversifies historical records beyond those produced by powerful groups. In the context of COVID, we were also all committed to ensuring human stories were a form of evidence available for analysis – not just statistical data.

Interviews were focused on the participant's community group/organisation, their role within that body and on them as individuals. The interviews were conducted by researchers from the University of Essex as loosely structured conversations, with participants provided with a list of areas for discussion prior to the interview. We asked people to talk about their organisations pre-COVID, their response to the pandemic through the various stages and to look towards the future. We also asked for their reflections on their community organising roles and personal lives throughout the pandemic, encouraging them to bring in any topics or issues that they felt were relevant. It should be noted that these interviews were conducted between November 2020 and February 2021, and therefore reflect different moments and phases in the pandemic and pandemic response.

For some interviewees, the conversations provided a form of relief, allowing them to speak openly about their experiences, both within and beyond their organisations, and of the pandemic. As one put it: 'It's been like therapy for me, to be honest'. While oral history interviews are not a form of therapy or emotional support, in some cases they may be beneficial to interviewees when processing their experiences of the pandemic.

About the report

The main part of this report is structured around key themes that emerged from the 22 interviews with community organisers:

- **Chapter 2 describes the impact of the pandemic on the people in this sector, exploring the lived experience of service users, volunteers and staff.**

- **Chapter 3 focuses on issues of place and space, which includes how organisations have used digital platforms and online spaces.**

- **Chapter 4 explores the impact that the pandemic has had on funding and the creation of partnerships and networks within and across the organisations**

- **We offer a final discussion of our findings and suggest some implications for different parties in Chapter 5, alongside C360's response.**

For clarity, we have tended to use the term 'community organiser' and 'community organisation' throughout this report to refer to our interviewees and to the bodies on whose behalf they work, respectively, as well as 'VCS' for the broader sector. We recognise that this is a shorthand and inevitably covers a wide range of paid and voluntary work for a wide range of groups, networks, charities and other organisation types.

Where we quote from an interview or where we make a comment that's drawn from one or more interviews, we use acronyms to identify the relevant organisations. Sometimes, we use a particular quote and also give the acronyms of other organisations where similar views were expressed.

We have chosen not to use the personal names of our interviewees but to refer to the groups or organisations which they lead or represent. This is to help readers connect the quote or the point to the organisational context from which the interviewee is speaking. A list of all interviewees with their organisations and organisational acronyms is to the right. We are extremely grateful for the time each of them gave to share their experiences.

List of interviewees

(Interviewee, Organisation, Acronym used throughout the report)

- **Julie Atkinson, Action for Family Carers, AFC**

- **Patricia Bennett, Affected Group, AG**

- **Lawrence Walker, African Families in the United Kingdom, AFiUK**

- **Steve Brown, Beacon House, BH**

- **John Price, Breathe Easy, BE**

- **Jo Blyth, Citizens Advice Colchester, CAC**

- **Peter Dutch, Colchester Anti-Loo Roll Brigade, ALB**

- **Mike Beckett, Colchester Foodbank, CFB**

- **Tom Tayler, Colchester United Football in the Community, CUFitC**

- **Councillor Powling, Town Mayor, Mersea**

- **Elizabeth Akinyemi, DAM Boaz Project, DAM**

- **Josh Greenwold, Eight Ash Green Hub, EAGH**

- **Sue Sullivan, Futures in Mind, FiM**

- **Pernille Petersen, Haven Project, HP**

- **Nicola Button, St. Helena's Hospice, StH**

- **Dean Jeffreys, MS-UK, MS-UK**

- **Lorna Preece, Next Chapter, NC**

- **Jacquie Russell, The Outhouse, TO**

- **Alex Berwick, Re-engage, R-E**

- **Maria Wilby, Refugee Action, RA**

- **Johnno Casson, Warm & Toasty Club, W&TC**

- **Alistair McGarry, Youth Enquiry Service, YES**

People > Place > Funding

The impact of the pandemic restrictions and the changing of support services on service users, volunteers and staff

Most of the VCS saw increased and changing demand across their service offering during the pandemic. Some, however, experienced a drop-off due to lockdown policies and issues with accessing services remotely. Action for Family Carers (AFC), for example, has seen referrals for befriending calls doubling from 100 to 200 a month as people feel the impact of lockdown and isolation. A similar picture emerged at Next Chapter (NC) with a doubling in referrals for victims of domestic abuse.

There were also some unanticipated increases in demand. For example, The Outhouse (TO) received higher numbers of inquiries from young people wanting guidance on transitioning:

> *What's taken us by surprise is the amount of young people that have come forward that have decided to transition. And we feel that's because, and this is just us surmising... we've had these conversations as a team that we feel that the young people that have been worrying about their sexuality and their gender have had time at home to think things through. I don't think it's been overthought. I think they've genuinely had the time to be able to think things through... and they've come to us [TO].*

Specific COVID-response policies have led to a reduction in demand for some community groups, at least for the short term. Furlough schemes and eviction bans have removed the immediate risk for some people of losing their homes. Beacon House (BH) has been able to secure accommodation for many of its current service users. However, these are temporary measures, and BH warned of a surge in demand as eviction bans lift:

> *As you know at the moment it's very difficult for landlords to evict people for non-payment of rent... as soon as landlords are able to evict those people I think there's going to be a tsunami of people on the streets. I don't think there's any doubt about that. There's going to be a lot of people on the streets. And more concerning I think there's going to be people on the streets for the first time who are, if you like, very ill prepared for where they're going to find themselves [BH].*

Other community groups have seen service users fall out of touch because they don't want to or cannot engage with remote services provided on digital platforms. While some interviewees anticipated that older service users might be less comfortable with engaging virtually, other groups have also struggled:

> *For us really the worry now is we are not providing an inclusive service still, and there are members of the public who, for whatever reason, are really gonna fall through the safety net because they can't access, if they've got no email address, it costs to phone in, so we're very mindful of that [CAC, also RA, AFC]*

Support needs have differed across the community. Older residents were more vulnerable and often shielding, so needed practical support for day-to-day tasks. In Mersea, the Town Mayor reported that working-age community members had concerns about their financial situation. Colchester Foodbank also saw a shift in demand with an increase in requests for family boxes but fewer requests from elderly households, further demonstrating the differential needs across the community.


Service users: The impact of COVID on mental and physical wellbeing

Social isolation was a key issue raised by many community organisations in the context of face-to-face provision shutting down. For African Families in the UK (AFiUK), isolation is an issue across the community, especially among older and younger cohorts. Befriending calls have alleviated some of this isolation, with volunteers reporting they were often the first person the service user had spoken to that day or week. DAM Boaz Project (DAM) provided food deliveries to international university students who were unable to return home, but also gave them reassurance there was someone local who cared:

> *Because of the feedback we've been getting from the students... some of them wrote back to us and said that 'we felt like that we have a family nearby because we've had to cancel our plans to go home and we know that we're going to spend the day alone but to have been able to have been given something so nice. It makes us feel like we have families nearby looking after us' [DAM].*
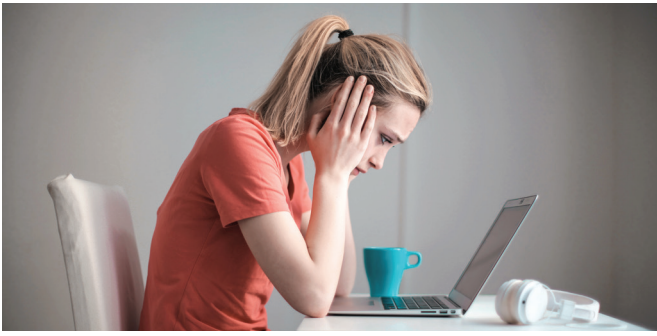
In the context of isolation, intensive news coverage and social media misinformation surrounding the pandemic have had serious consequences. The Haven Project (HP) found that users are fatigued by the constant media coverage and are often in danger of becoming overly preoccupied by it:

We have Zoom groups for it every week and we talk a lot about how to protect yourself against news, how to be very circumspect about what media you use, how to challenge views that you don't understand or don't believe are correct. And also we do tell people to be lean on their media and news diet because there's a lot of things you can do to protect yourself. You can develop some interests, you can stay calm, you can get into meditation, you can do all sorts of different things like that but... there's a lot of stuff that's going on that you can't actually do anything about [HP].

These service users are vulnerable to conspiracy theories, as many people with personality disorders cannot filter them out. Exacerbating this situation, their standard support mechanisms, such as grief recovery groups, have been affected by restrictions:

Of course people are bereaved, we've got one lady who's about to lose a stepmother to cancer and so anybody who is in that situation now is going to be deprived of a proper process of grief. They're gonna be deprived of seeing the person for the last time, they're going to be deprived probably of going to the funeral... They're going to be deprived of what we do best when we're bereaved and grief-stricken, that's hugging and cuddling each other. What other medicine would you recommend? I don't recommend anything other than that, there's no substitute [HP].

DAM highlighted other adverse effects of social media misinformation:

...we've had faith leaders telling people not to take this injection, telling them it's going to be something from the devil, it's not good for you, it's going to mess you up and now people are not prepared to take it. This is something that needs to be urgently looked at. How can we tell people it is not so? The people that are peddling this wrong information, how can they be stopped? It is something that is important currently [DAM].

Such misinformation has also affected people's relationship with primary health services, creating distrust in the NHS:

It's that bad people are being told that unless you're dying don't even go to the hospital because they won't look after you. So people have lost trust [DAM].

Physical and mental health have been closely interlinked. Breathe Easy (BE), for example, saw the health of its members deteriorate during the pandemic. Lacking the motivation to exercise, they tended to feel out of condition. At the same time, with planned medical treatments postponed and primary care teams losing touch with those with existing conditions, they have felt abandoned by and distant from the NHS as patients.

MS-UK made similar observations. Virtual services have been well received by many of their service users but those with higher-level needs cannot replicate physiotherapy services at home, so, when day centres closed, they lost access to the physical aids they used to improve mobilisation, as well as to in-person socialising. This has negatively impacted their physical wellbeing. Other partners have now taken on their equipment so there may be opportunities for clients to access it in future.

While all the community organisers interviewed raised the issue of social isolation, some specifically mentioned the impact of shielding. Breathe Easy encapsulated the experience for those who have had to shield for prolonged periods as follows:

...on a personal note and I speak for me but I think for some of the members I've talked to I found it quite hard. It's actually as if I've gone in a black hole really, I'm coming out of it but it's been really... you find you're incarcerated and your decision making goes to pot. You can't make decisions all of a sudden...

I found it very difficult 'cause I'm a bit of a socialite. I suppose if you're used to living on your own, I'm not saying it's not hard but the fact that you're on your own isn't new, that's what I'm trying to say, you're used to that. And at the moment I think this lockdown's been worse because in some ways it's been more restrictive and people have been more worried because it's more serious this time round. It all looked quite hopeful when everything dropped away, the cases and the death rates dropped to quite low figures. Yeah, so I found it quite difficult I must admit and I don't think I'm unusual in that [BE].

It is worth highlighting at this point that support groups, such as Breathe Easy, which are often run by people with the same condition or living in similar circumstances as their members, faced particular challenges during the pandemic. These community organisers were dealing with the same restrictions and anxieties and did not have the scope to reorganise resources and adapt services in the same way as organisations.

Overall, the pandemic has been a difficult time for those with existing health problems; they faced balancing the daily demands of their existing conditions with the need to protect themselves from the virus, acutely aware

that they were vulnerable. For those with high-risk pre-existing conditions such as lung disease, this worry can lead to significant problems such as panic attacks. These experiences are likely to resonate with other clinically highly vulnerable people and those who have shielded or self-isolated for long periods:

> *People have been wary of going out, they've been wary about having stuff brought to their house as well. They've been wary about some of the delivery people not protecting themselves enough so there's been quite a few concerns. So one or two people who started isolating in February last year, they have now come to a state of mind where they feel really really scared to leave the house. So to keep themselves safe they have given themselves agoraphobia [HP].*

It will take time to restore trust in the outside world for many service users; for some, it will also be a process of rebuilding confidence in providers, one that involves acknowledging and responding to the mental strains the pandemic has placed on service users as well as reestablishing the logistics of a face-to-face offering.

Volunteers: Shifting patterns, shared experiences

Volunteers' time and energy are indispensable resources for many community organisations. Interviewees were divided on the effects of COVID on volunteering between those that had programmes that promoted digital-based activities and those that did not or could not. Some organisations, such as The Outhouse and Citizens Advice Colchester, were able to switch volunteers to different tasks (for example, befriending calls) so they could continue to work. For others, the volunteering body itself changed significantly during the pandemic:

> *It depends on the service really, so, for example, with our day centres we have a lot of older people that were volunteering that are still not comfortable, understandably, with coming back to volunteer in those centres. Whereas I think with befriending, for example, it's been really good, because I would say we have got more people coming forward to volunteer because they may have more time on their hands. They may have been furloughed themselves, so doing telephone befriending from home is something that is easy to do and it's accessible. People have said they probably wouldn't have thought of volunteering before, but because of the pandemic it made them realise that people needed that. So they then volunteered as a direct result of the pandemic, so that has been really good [AFC].*

While there were fewer pre-pandemic volunteers available, Action for Family Carers saw a surge in new volunteers coming forward, which benefited both their online befriending scheme and their day centres. Other organisations made similar observations, such

as Re-engage (R-E), who received approximately 1500 new volunteer applications in April and introduced a befriending scheme called 'Call Companions'. Indeed, there has been for some organisations a "changing of the guard" in their volunteer body; large numbers of existing older volunteers had to shield or had caring responsibilities, but new (furloughed) volunteers came on board. At the Foodbank, for example, 100 of their 150 volunteers had to withdraw but new volunteers from their waiting lists filled the gap quickly. There is, however, some uncertainty about what will happen as restrictions ease and people return to work.

A concern for many community organisers was keeping the morale high of those volunteers who stepped back to shield. Citizens Advice Colchester, Beacon House and Breathe Easy all identified social isolation as an issue for volunteers, who would usually interact face-to-face with service users and staff. When Re-engage's tea parties could no longer go ahead, many of the volunteer drivers and group coordinators switched to phoning the guests in their groups. This helped to combat isolation and loneliness among service users, as did the telephone befriending service, Call Companions, which the organisation developed during the period. One potential concern identified was that some tea party volunteers might miss the emotional support of a face-to-face chat with the other fellow volunteers over a cup of tea after a difficult interaction with a guest.

Action for Family Carers also spoke of the challenges of providing remote support. Their volunteers were missing going into the office to make befriending calls as this was an essential source of company and social contact:

> *...a lot of our volunteers that do befriending calls, would come into the office once a week to do their befriending calls and stay for most of the day or till they finished their calls. And a lot of them do that because they are lonely and would otherwise be at home on their own. And now they are at home on their own, having to make calls to other people that are home on their own so that's been quite difficult especially for the older volunteers [AFC].*

Some expressed the worry that volunteers would become future service users given the now well-evidenced impact of the pandemic on mental health, but, despite the concerns, there are some positives worth mentioning. Volunteering and supporting the community has gained prominence in the public mind and many of our interviewees reported increases in applications to volunteer. Volunteering also had a positive impact on the volunteers themselves, allowing them to meet new people and make local friends as well as giving them a sense of achievement and purpose.

Staff: Adapting, responding, caring

For VCS staff, interactions have become highly formalised due to COVID restrictions. The pressure on staff time has increased with demand, with community organisers speaking of the many additional hours staff are working and the negative impact of overwork on wellbeing. At St Helena's Hospice (StH), staff had mixed feelings regarding furlough, and those working have struggled with maintaining work-life balance:

> *Even the staff who have been furloughed, I think some of them have really rejoiced in having that opportunity to perhaps have the time at home and support the organisation because they're understanding that actually them being furloughed means that we can reclaim that money. To some being very frustrated because they want to be helping, they want to be part of the offer and to people who aren't furloughed who really would have liked to have been because of work-life balance...*

> *You've got a job to do but you've also got a personal life, and you've got changes to that depending on what your personal circumstances are; a child that you know isn't able to go to school, or caring responsibilities for elderly relatives, or living alone and then spending all day working at home alone. That's been another challenge as well. It impacts on people's mental health and people don't just go to work to earn money, you know that's the other factor isn't it? People go for pride in their role, giving something back, making things better for patients but also social interaction [StH].*

Many have struggled with working from home, so they try to make sure they can be on-site once a week. Staff at Next Chapter have also found maintaining a good work-life balance difficult because they could not switch off, for example by going out or by accessing leisure activities. More than just increasing capacity to meet needs, many staff reported feeling a deep sense of

personal responsibility for the wellbeing of their service users – sometimes to the detriment of their own – as demonstrated in the following comments from Refugee Action (RA) and the Warm and Toasty Club (W&TC):

> *It's that huge responsibility of being the only group who's involved with them, and who's supporting them. We tried to track how many texts and phone calls we get outside of hours, during the week, and it came back as 27 hours. That's outside my normal office days, so it's a lot. That's largely because, I do sometimes initiate those texts because we are worried about people who have said they're feeling suicidal or not sure how they're going to cope. You go home at the end of the day and you worry about that because there aren't the services here to deal with them [RA].*

> *That was another one, a big sort of learning curve in terms of time management, and included in that was ensuring there was a work-life balance. Initially I was doing 7 days a week. I wasn't getting paid for 7 days a week, I was doing 7 days a week, myself personally, and I had to in the end... I had to sort of stop working at the weekends like most office-based people. That's because it was initially making me unwell just caring a bit too much and to do that you really need some down time. You need to recharge your batteries [W&TC].*

The founder of the Warm & Toasty Club described feeling a personal responsibility to keep people connected, a sentiment echoed by DAM Boaz Project:

> *Personally I think I've been running on autopilot, it feels like we can't stop. It's difficult to not do what we're doing. Not because of any personal feeling, it's just knowing that stopping means that some people go without. And so we can't stop. So it's been a case of running on autopilot and hoping and praying that this horrible COVID goes away [DAM, also YES].*

The commitment to 'not stopping' meant staff – who often commit volunteer hours to their organisations in addition to paid work – consistently placing their service users' wellbeing ahead of their own. For example, at the start of the pandemic, three individuals came into the Beacon House clinic with COVID symptoms. With no testing available at that time and nowhere for these people to go, Beacon House's assessment rooms had to be pressed into use and the chief executive slept in his office for four nights so there was a staff presence. For the founder of the Anti-Loo Roll Brigade (ALB), this sense of responsibility led to a decision not to return to work after being furloughed. He felt he could not walk away, as this would have meant, for him, letting those people down for whom the ALB had offered a coping mechanism.

In this context, staff morale was a critical issue raised by many of the community organisers. For The Outhouse, staff members were missing the social support they needed and would have gained from being in the office.

There was also the frustration of knowing the staff team was working so hard, while stories of people breaking the guidelines were everywhere in the media:

> *I'm trying to support a community that are really vulnerable and you're sitting on a beach thinking life is grand. So it didn't, for me, equate to what was going on properly. So yeah it was a difficult time to be honest... I think the staff team felt it as well [TO].*

Leaders often sought to protect their staff:

> *...they were exhausted so it was ensuring their wellbeing as much as anything else because you're looking after your community. However it is about looking after yourself at the same time. Making them take a day off, making them take a week off, ensuring they're not working over their hours. Because they all work over their hours, they all do volunteering for this place as much as they do general day-to-day with wages involved as well [TO].*

At Beacon House, regular morning meetings, which were in place before the pandemic, were refocused to help support staff emotionally. Many organisations used online sessions to provide similar kinds of support to staff during the pandemic, with good communication as an important and meaningful way to raise morale. For example, Futures in Mind (FiM) introduced chats and catch-ups alongside team meetings and Re-engage used a system of check-ins with staff members.

Above all else, the VCS response put people first; 'At the end of the day, the very human activity of extending the hand and saying "we're here to support you" didn't require a special qualification, it just required us to be there [and] we did' [YES].

Looking towards the future

No-one is untouched by the pandemic. The lines between staff, volunteers and service users blur as we try to understand the human impact of the crisis – all will need support as the shape of 'long COVID' emerges over the following years. Deterioration in mental health and wellbeing is a particular concern. The return to the so-called 'new normal' is clearly not just about re-opening day centres and scheduling in-person appointments, but also about an extended period of mental recovery and reorientation, in which attention to staff and volunteers' wellbeing is vital. They have often felt tired, frustrated, isolated and abandoned, much like those they support. They are also, rightly, proud of what they have been able to achieve and of the adaptations they made under extreme pressure, some of which will be retained as part of the post-COVID landscape. There is much to be learned, at organisation level and across the region, from these experiences if space can be created for reflection.

CHAPTER THREE

People > Place > Funding
Adapting provision and responding to community needs in person and online

'Place' is vital to understanding the VCS, informing funding, provision, volunteering patterns and people's sense of identity. Community assets are themselves fundamentally shaped by place. In the context of the pandemic, all organisations had to rethink questions of place and space; some remained in their physical location, adapting the space and adopting new organisational practices to ensure the safety of staff and service users, while others shifted their services completely online.

Digital solutions have become an essential part of most organisations' practices. They rapidly trialled new platforms to continue their services or increased their use of existing ones. It will take time to understand how these virtual spaces relate to place-based communities, and these connections will continue to shift as more organisations return to some form of in-person work. For grassroots groups, which coordinated support for local people in need, digital spaces may well complement, even enhance, community services and activities in the post-pandemic world.

Physical places to virtual spaces

Where groups were unable to continue their traditional service offering, they adapted to the pandemic with a mix of digital strategies: they shared case files and administrative documents on Google Drive and other platforms to aid homeworking; they used Facebook, Twitter and other social media to fundraise, update volunteers and share information; they held meetings with partners and offering support to service users on Zoom and MS Teams. The availability of digital solutions, often free of charge, enabled many community groups to transform their ways of working. Some adaptations met a temporary need, while others have the potential to shape practices in the longer term. The picture is mixed and the move online had exclusionary effects for certain groups, but we can recognise that digital tools became new assets as the pandemic response closed in-person services and sent staff and volunteers home.

Widely-used platforms such as Zoom took service provision into an online world. Zoom and MS Teams provided virtual spaces for a range of social and practical activities [R-E, CAC, FiM, YES, NC, TO, AFiUK, AFC, HP, BE]; examples include AFC's weekly carers' cafes and counselling sessions and AFiUK's online courses:

> *We launched a campaign within the organisation to start to do a variety of different types of communication with all the people that we were working with and the usage of virtual media. A lot of us suddenly found ourselves taking crash courses in Zoom and Microsoft Teams and several other platforms that are out there. Facebook became ever so much more popular with the thought of what we were doing because a lot of that within social media, we're reaching mostly the young people. But then we have been able to bring in a lot of adults in on that. I can truly say that there have been a lot of people who have now learned a lot of new skills with the idea of developing technology and being able to communicate. To our surprise the virtual meetings have worked very, very well because of the need of a lot of people, not only just simple loneliness but being out of touch. It created an opportunity for people to want to be in those virtual conversations [AFiUK].*

Moving online was not always straightforward for staff, volunteers or service users but one benefit was that it allowed organisations to extend their reach:

People went into a slight panic mode about how we are going to do this, how are we going to make sure that we can still operate, look after our clientele? All of that sort of stuff and it just felt like quite a natural process. I know it wasn't...but it did feel like quite a natural process. The staff were all given the ability to work from home which they did automatically, so they all had their own IT equipment. We had a weekly catch-up as a team. We then started to ensure that we'd got everything put into place so we could still have contact with our client group... We'd always wanted it face-to-face and our clients always wanted it face-to-face, however that wasn't going to happen. We ensured that the whole counselling service could be offered in a completely different way which has absolutely worked for us. People are still having the option now to be able to have counselling on a face-to-face basis or they can have it by Zoom or they can have it by telephone call, which for us has been an added bonus because it means that we can go across the whole of Essex instead of just Colchester [TO].

Interviewees were largely positive about the adaptation process. Working online allowed social interactions, such as befriending and volunteer networking to continue and being able to see people's faces on video calls helped bridge the physical divide of lockdown and mitigate social isolation for both staff and service users:

I think initially we weren't used to talking to each other virtually and the systems didn't operate very well to begin with... But then I think we all became much more familiar with the virtual meetings, the Teams meetings... I increased those to once a week to make sure that we were keeping in touch. They could of course access me any time that they were struggling with anything, so we made very good use of Teams.

It did help to see people, we all found it was better than being on the phone. It meant we could have team meetings where we all got together, and our service as a whole did a lot of work around that. You know the service manager recognised that you know staff morale was difficult. So we did do a lot of meetings around just a chat and a catch up, just to try and have some fun not just meetings to do deal with the agenda, but actually just to come together – the same as you would in the office and that you were missing those chats and conversations with people [FiM].

The two most clear-cut benefits of digital tools identified by the community organisers were in making administrative work more flexible through file-sharing [StH, FiM, W&TC, RA] and in boosting connectivity to partners in county, regional and national networks through online meetings [BH, RA, R-E, FiM]. Some interviewees did note that Zoom/MS Teams meetings don't allow for social and incidental interactions. In in-person co-working settings, these interactions are valued not just

for resolving issues (the 'quick question at lunch' [StH]) but also for staff and volunteers staying connected. Overall, however, interviewees emphasised the benefits of digital tools and platforms from an administrative perspective. With flexible working patterns, multi-professional staff meetings, case conferences, partnership-building, coordination of provision and development of joint funding bids all facilitated by these tools, they look set to become established organisational features of the long-COVID and post-COVID landscape for the sector.

Digital Divides

Digital platforms largely did the job of maintaining contact between organisations and their service users, even if interviewees recognised the limitations:

It hasn't been as difficult as I would've thought with the technology. I think where we are now with the technology we're using is brilliant. I obviously have a lot of online meetings, Zoom meetings and Teams meetings, but I think it's not the same. I think especially what I do and some of my colleagues do, you do sometimes need the support of the people around you and it's not the same just picking up the phone really. It's nice being in the office [AFC].

There seem to be two main issues here:

First, all arrangements, including in-person settings, have their own issues around inclusion that need to be identified and addressed. Digital exclusion is a core concern in an online world but our interviews complicated any preconceived notions of where digital divides might lie. Confidence with IT was certainly one of the factors contributing to digital exclusion, but it wasn't a simple divide between 'old' and 'young'. Beyond digital literacy, interviewees identified access to kit (laptops, tablets, smartphones etc.) and to wifi/data as challenges – with cost the key barrier – and also flagged language support, stability of living environment and personal safety. We explore this in more detail below.

[Hosting virtual events] wasn't really an option, because a lot of people hadn't got what can I say, a very settled place to live. It really wasn't an option at all because you know some things, you could have business meetings, can't you, virtual business meetings or my daughter does, she's a Pilates teacher and a physiotherapist, you know she does Zoom meetings and I join those. But the type of group we had and it wouldn't certainly be suitable to do any kind of meetings, it just wouldn't be appropriate [AG].

Second, digital spaces cannot replace in-person interactions for some forms of provision, often for the most vulnerable and marginalised groups. The specific needs that call for in-person support vary. For women experiencing domestic violence or for some refugees, for example, it may be a matter of going to a physical space with support workers on hand and a computer

available in order to accomplish digital tasks (such as apply for benefits or access online banking). Those same service users may also need the physical space for safety reasons or because accessing support depends on trust established with staff. As indicated in the **'Value of Small'** report, communities and charities are closer to this reality than statutory services, and often better able to respond and interact with service users in a flexible way to meet their needs.

Refugee Action highlighted the direct impact on their clients who did not have a fixed address or access to computers, wifi, or their own transport, meaning that they needed face-to-face assistance. Access to technology was a concern voiced by other organisations because there was no way of knowing who had been lost touch in the move online:

> It's not just people not being used to it, it's people having the capability to do it, so maybe some of our older participants are not as tech-savvy as maybe some of our younger ones. Or perhaps there's families that we work with, and we know this for a fact, that come from a more deprived background, they might not have a laptop, they might not have an iPad at home to maybe log onto a Zoom call. Whilst our programmes, we like to think, are fully accessible to everyone, perhaps when we went online and went digital that wasn't the case... maybe it put up barriers for those who were most in need, because they couldn't access it [CUFitC].

For organisations that offer physical therapy with specific equipment the move online brought its own difficulties. In the first lockdown, MS-UK had to close their Colchester wellness centre. Support for exercise activities continued over the phone or video call to motivate clients and encourage them to stay active. However, as with Beacon House and Refugee Action, there was no digital alternative for service users who needed face-to-face support:

> I think it really depends on maybe where our clients were prior to the original lockdown in terms of their condition. I think those that were already independent and let's say mobile, probably in many ways have been able to adapt and manage their condition in different ways. And in some ways that's been a benefit as in they're doing more at home and maybe they've learnt of ways of managing their condition more independently in that respect. But in terms of the clients that are what we would class in the higher level of need, for example some clients that spend the whole of their day seated in a wheelchair when they were coming to the centre [had] been able to stand for example in the standing devices we had but they can't replicate that at home. Equally one piece of equipment we've got in the centre is a FES bike which is to do with electrical stimulation that is provided via electrodes on various muscle groups which help the clients to activate the muscles and provide that movement in

the legs or upper body – again that isn't replicable at home. So those higher level clients, talking to the clients firsthand, talking to their carers and family, unfortunately there has been a reduction in their capabilities and mobility as a direct result. Certainly this 8 month period or so that we've been in has had a dramatic impact on their physical wellbeing undoubtedly. As I say for the smaller number of clients that kind of fall into that category and I guess for people's overall well being, mental wellbeing, it's very hard to say... I think most people seem to be managing well in that regard but I think as for us all, I guess we won't really know until another few months, another year possibly more of that impact for our clients [MS-UK].

Access to services throughout the pandemic was also influenced by the availability in the local area prior to lockdowns, with mental health services particularly stretched:

> The reality is that there is no coherent provision. There is a tapestry, well I would say a bit more of a spider's web because there's lots of gaps in it of provision that you know if you're a young person with challenges you'll get good support for schools because schools are generally good but beyond that and beyond what they can provide it's a lottery really. It depends what mix of services are available in your local area and then the accessing of services such as mental health services for young people is so overwhelmed. Well it doesn't matter how you repolish it, there is too much demand and of course the reality of this [is]... in a horrible way it's taken COVID for people to recognise mental health is something more than a bit of a, bit of an illness. Unfortunately I think there is an iceberg of need that is going to come out over the next year or so [YES].

Guidelines and restrictions on face-to-face activities changed through the pandemic, which meant several phases of adaptation for VCS organisations. Digital platforms could not always offer a suitable alternative to face-to-face activities [AG, RA, BH, CFB]. However, it is important to note that community organisers were still active during periods of effective shutdown, even in cases where, as individuals or households, they were required to shield or self-isolate. They kept in contact with staff, volunteers and service users and re-evaluated their position with every change in the government advice:

> I've kept in touch with the founding members so, if and when the restrictions are lifted, we're all ready to try and pick up and start again. We are definitely in contact but just feel like we can't do anything at the moment to plan. But I feel sure that we'll hopefully be able to regroup and start again where we left off or trying to achieve our goals that we were setting ourselves. And the whole membership used to say how we were people from all different walks of life and all different stages of life but I feel sure that when we contact our members we will be able to regroup [AG].

Continuing face-to-face services in a pandemic

Organisations that were unable to shift their core provision online continued to provide face-to-face services where possible while observing the government's health and safety guidance [BH, RA]. They introduced new operational practices to ensure the safety of staff, volunteers and service users and to ensure the continuity of service. Where possible, adapted how those services were delivered, for example, offering takeaway food, using service hatches and giving staff PPE [BH, CFB, RA, NC]. These were makeshift and temporary in the first lockdown but soon became more established [RA, BH].

> So in the early days of COVID, it was absolutely ok... I suppose three things really: what do I need to do from a safety perspective – safety as it applies to my staff and safety as it applies to the guys and girls we serve – so what do I need to do from a safety perspective, number one. OK, having done that, what impact does that have operationally? How do I carry on or how do we carry on doing what we're doing – what do we have to change operationally in order to do that and then how do we pick up the slack that has been created by another number of organisations for whatever reason ceasing to operate? [BH].

Once statutory services and other organisations moved staff to remote working, the pressure was keenly felt by those community organisers maintaining a face-to-face presence:

> To a degree we were a little bit of 'last man standing' so we suddenly had a whole different number, we had reduced people, we had reduced facilities because we couldn't be indoors but we had increased demand, so it was kind of like a perfect storm really [BH].

All those who continued with in-person provision stressed the importance of safety, explaining how they had implemented government guidelines in their physical locations. Frequent changes to those guidelines created confusion for service users, however, and it was often hard to explain the implications of lockdowns, bubbles and tier systems:

> I think it's very muddled... it's not clear enough, there is not enough clarity around it. They need to say what they mean and mean what they say. I think for our family house the rules around lockdown, and going away...they are single women with children so they're going, "well we're a single household, we're allowed to go for a support bubble". Then we've had to explain to them, but their support bubble is in the house with the other 11 households, "but they're not my support bubble they're just in a house that I live in, if I lived in a block of flats and I had lived on the top floor, I'd be using the communal" but you wouldn't be sitting in the lounge with them, you wouldn't be sharing washing machines with them. So it's been very, very sketchy. I think people read into it what they want, they will make it fit their circumstances, and that's what ours tried to do [NC].

Some organisations experimented with creating opportunities for their staff, volunteers and service users to engage in outdoor activities that observed all safety guidelines:

> The first thing we re-opened was the allotment and we got PPE equipment and we'd had all the guidance and it was all risk assessed which is a big piece of work. We talked to service users who wanted to access it. We had just obviously just a small number going so that had to be managed with a register and carefully planned and organised. We weren't able to collect people as we had done before but the allotment opened and that was hugely successful, very popular. And that felt like a good step to get back out and people able to come out to something that they really enjoyed. Then gradually we started to look at maybe a walk...

> So, in Chelmsford they really wanted to walk, they'd done that in the past, so we got that going again. The difficulty was of course having only six, if you've got a member of staff, you've only got five clients, if you've got a volunteer you've only got four clients.

So if you had twelve people want to do it you had to go out twice and those logistical things were quite difficult to manage but you know that's what we did. We looked at it, we had rotas, waiting lists and tried to accommodate everything people were asking to do that was allowed. The boxing reopened because the boxing people we worked with said they could do something outside so we started doing that and just kept our eyes open as to what was available to people [FiM].

Changing seasons presented challenges for outdoor activities and, for Futures in Mind, led to a return to phone support rather than in-person activities. For other organisations, the risk assessments necessary to restart in-person activities were time-consuming. Some were part-way through completing the requirements before heading into the second lockdown [BE]. Time-intensive risk assessments and frequently changing government guidance became barriers to some organisations which prevented them from resuming any face-to-face activities between lockdowns.

Creating new communities

Digital platforms not only served as virtual alternatives to physical spaces. They could also help to strengthen existing and form new communities as people came together in a context of crisis. Colchester United Football in the Community saw the first lockdown period as having created such a sense of community, which was also reflected in the influx of volunteers received by some organisations noted in the previous chapter. There was also a significant push from the government to get people involved in supporting their local community through volunteering to aid the NHS **(Your NHS Needs You)** but also more broadly with a focus on the wellbeing of the older population:

I think this has been highlighted so many times during COVID but it has been one of the genuinely most amazing things that has come out of it, just the number of people that have actually put their names down to volunteer or to help their community. I think obviously there was an awful lot of awareness locally that elderly people were potentially going to struggle because so many of them were shielding and in the original lockdown, just weren't able to get out and see family or anything like that even if they weren't shielding. So I think people were perhaps looking particularly to volunteer with older people and we definitely benefited from that as a charity. We were really fortunate [R-E].

Some organisations reoriented their services to support other local partners in the area. Colchester United Football in the Community partnered with the Colchester Foodbank to help with deliveries to the local area, as well as with other organisations to ensure that people had the provisions that they needed:

I think the biggest change in respect of our activities and organising our programmes and projects is firstly capability to deliver. So whether the environment that we're delivering in is not accessible or whether the staff we use is no longer accessible that's been a real change and therefore we've had to try and adapt the work we do to make sure it fits restrictions and whilst still fitting the need of the community and trying to address the main aim of what our project is. So we've tried to be quite flexible around it but I'd definitely say it's more place and people based, is what we've really been impacted by [CUFitC].

The pandemic also saw residents creating new grassroots groups offering a sense of community and mutual support outside pre-existing organisational structures [EAGH, ALB]. These groups began informally, led by new community organisers who had identified unmet local needs. Facebook groups became a place-based anchor to connect people who needed help (such as food parcels or medication) to others who could provide it, to recruit volunteers, and to signpost residents to relevant services and information.

The community organiser from the Eight Ash Green Hub (EAGH) was usually involved in the planning and running of the village festival:

At the meeting in February, it was decided that we would shelve this year's festival on the grounds that there was a lockdown threatened. It hadn't actually been formally evolved but as sort of any other business really at the end of the meeting my wife said 'well, the demographic of the village is quite advanced in years and was anything being planned for the assistance of people who may well not be able to get out during the lockdown?' So it started from there really. Just a couple of voices round the table saying 'oh well if you're doing anything put me down for it' and so that was the springboard that started what's been nicknamed the 'Village Hub' and we've been running it ever since [EAGH].

Eight Ash Green Hub used two existing village Facebook groups but also delivered notes through residents' doors. Initially coordinated by one community organiser, a wider group of volunteers is now in place to keep the Hub running. The Anti-Loo Roll Brigade (ALB) was created as a new group on Facebook and grew to cover Colchester and the surrounding areas. The platform proved highly effective in mobilising people:

What it is, it's if these posts come on the page, where people are so desperate to help, or not desperate to help, they enjoy helping, they'll say, 'I'll pay for that, I'll pay for that, I'll give this', there's been posts on there before where there's kids who have got nothing, and people say 'I'll buy this, I'll get that'... we almost are a permanent Go Fund Me page that can just step in as and when, just instantly... A perfect

example: we got approached last week by one of our members, who we know very well, her crying because she had gone to school and one of the mums [it] was her boy's 10th birthday, he had nothing, he had two presents from Poundland for Christmas, they had no food, so we went and got her this essential shop, we got the boy loads of presents and we sent him round a big Kaspa's Ice cream in the evening, and that's just a small example of just being able to put a positive influence in straight away, with no red tape, and then we sort of made a post and said 'look you know, if you have contributed then...you helped a little boy get very happy', and people are just like 'oh, I am so glad my donation and my money goes towards this', and it's just great, my feet don't really touch the ground, but occasionally I do get a little moment where I just sit there and think wow, it's just incredible that we are in this position.

You know, Christmas we gave out 30 hampers which just had everything for Christmas that you could need for two days and possibly more, to 30 families that have been identified as needing help. I dressed up as Santa and we turned the van into a mobile grotto and we went round dishing out presents, and yeah it's great. I do get a bit blown away at how fortunate we are to be able to do so much in such a short time really, and that's purely because of the amount of support we've had, where people sort of get what we're trying to do, sort of trust us, and believe in us [ALB]

The Anti-Loo Roll Brigade continued to grow and chose to become a Community Interest Company to ensure that their community support and response could continue to the same standard.

Building trust within these Facebook communities was important to organisers; it gave people confidence to ask for and offer help, fostered a genuine sense of community, and also allowed organisers to post links to reliable medical information when 'fake news' was in circulation. To help build trust, organisers put in measures such as approving new all requests for membership or requiring all posts to be approved by a moderator – but Facebook settings were clearly not enough and the sites needed constant investment of organisers' time and energy to function as safe, secure spaces.

Facebook not only provided a platform for local coordination. The Warm & Toasty Club's use of Facebook Live allowed them to continue their service and to expand their community, reaching national and global audiences nationally:

People love the show, we've had over 14,000 viewers. We have viewers of all ages, we have people not just in Colchester but across the country. We've had people from America and Australia tuning in [W&TC].

Looking towards the future

Digital platforms have enabled many organisations to work more efficiently in terms of 'back-office' functionality, to deliver certain services effectively online and to connect with a wider network of partners. These successes point to a potentially enduring shift in operational practices, for example using video calls rather than travelling to meetings [BH, FiM] and continuing services such as befriending phone calls that reached people who would not previously have engaged [R-E, MS UK]. An increase in mobility issues was noted by organisations such as Re-engage and Breathe Easy, which could complicate a return to face-to-face interaction in the future. An ongoing remote service would be beneficial to those groups:

I think our call companion service is going to continue so that will be a permanent addition to the service which is a really positive thing as... we are able to reach people that we weren't able to reach with the social gatherings [R-E].

Other organisations voiced concern about the longer-term implications of replacing in-person interactions with virtual ones. The permanent loss of its physical space means this issue is keenly felt for MS-UK, despite the successes of their online offering. YES emphasised that the extent of the difference between the physical and virtual interactions may not yet be fully appreciated and some people may struggle with in-person situations in the future.

The pandemic has made ideas about place and how they define VCS organisations' focus and remit more complex, but there are positives to be taken from the experience of rapid adaptation and experimentation. Sharing those experiences and working through what can be learned from them within and across organisations is one potentially productive part of a longer process of evaluation and recovery.

CHAPTER FOUR

People > Place > Funding
Navigating financial challenges and partnership working during a crisis

COVID emergency funding

The pandemic has affected organisational funding in a range of ways. COVID-specific funding streams have created opportunities for some, while others have seen financial pressures increase. Lockdown demanded VCS organisations adapt not just their service provision but also their funding plans. For example, Refugee Action had been about to submit a 3-year funding bid to the Big Lottery Fund just as the funder changed their approach to respond to the crisis situation. Organisations had to put together rapid responses to emergency funding calls, and/or identify ways to continue fundraising. The Clinical Commissioning Group (CCG), the Essex Community Foundation and C360 were often cited by the interviewees as local sources of support and funding [RA, R-E, CAC, DAM], alongside national organisations such as The Postcode Lottery and The National Lottery. Uses of COVID emergency funding included creating safe environments for working from home, PPE for face-to-face interactions and other adaptations to ensure service continuity.

Some organisations emphasised the importance of flexibility from existing funders when they were unable to complete planned activities:

At the moment, because we are in lockdown, there are some projects that we cannot run, that we are funded to run, we are still waiting to hear from some funders how that will impact us. If we will have an underspend, some funders are letting us reallocate that funding, so whether that be for an extra year, for example, after our initial term's finished, or some funders have let us put some of that towards work we are doing with the community. So it changes with different funders, but I guess... until there is an end, a clear end point... our funders will probably wait for that from us [CUFitC, also YES].

Many of the COVID-specific funding opportunities were welcomed by interviewees, with quicker decision processes and more equal power relations between funder and applicant. The flexibility to cover base costs – rather than needing to develop new and innovative projects to secure funding – was particularly valued:

It's been more difficult in the sense that we have had less time, because I have been stretched. Although a lot of the forms that we have been offered are much more simple, because they're being constructed to be simple, and they have been constructed for food provision so we have got some more from that. But there have been times when we have decided not to go for a certain thing because of the time and effort it would take to do that compared to what we are already doing [CFB, also YES, DAM].

Fundraising during a pandemic

During the pandemic, many organisations have faced major reductions in fundraising income. MS-UK, for example, saw a drop in regular donations, compounded by being unable to hold fundraising events, which had serious consequences for their provision:

I can say it has had a very significant impact for the future certainly. We had to unfortunately announce at the end of September that Josephs Court would no longer be offering face-to-face services going forward in the future, and that was just a simple direct result of the pandemic affecting our overall income via fundraising for the charity. So we had a significant shortfall for this year and obviously predicting again for next year just based really on the financial income from the fundraising, which like many other charities we rely on heavily. We are now going through a transition where we're moving everything we do locally, online, to deliver an online service that is not just for our local clients but it will be national now. So yes it's very much changed, a complete almost 180 from what is local face-to-face service to delivering something now that is going to be delivered remotely, online, so it's had a dramatic impact. So for our clients it's had a devastating impact in terms of longer management of their condition and also certainly staff as well from their job role perspective [MS-UK, also BH, HP].

While COVID-specific grants filled funding shortfalls for some organisations as charitable giving declined, other organisations benefited from targeted fundraising efforts launched by local communities and businesses to help them keep working [R-E, ALB, NC]. Heightened media attention also boosted donations:

> ...we are in the fortunate position as a charity of focusing mainly on individual donors who provide the money for us to continue rather than to be grant funded, or contract funded, and we are very grateful for the individuals who support us and think that what we do is necessary... Awareness helps more people want to give their time, more people want to give their support on social media or wherever, more people want to give their money and more people want to give their food and more people need it [CFB, also NC].

The impact of unsustainable funding environments

COVID-specific funding streams are, of course, only short-term; while they addressed an immediate need, they deferred rather than resolved concerns about financial sustainability:

> We are being told that at some point that additional need will hit us, and we are starting to see our waiting list creep back up again very slowly. I mean it feels nervous, you know sort of nerve-wracking because we do feel very fortunate to have had that additional funding from our local commissioners, but we know that that's going to stop at a point and I've got some letters to write to try and ask for the remaining money to be spent over a few months but after that I don't know if they will commit to any further funding or if there will be any push nationally to support bereavement services. We are working with Essex County Council at the moment on some additional sort of bereavement capacity but again we don't know how long that will be for, or to what level yet or how much funding they have available. So it feels to me as a manager overseeing those services that at some point we might have to revert back to pre-COVID levels and then if there's that demand out there, we might not be able to meet that. That doesn't sit comfortably with me [StH].

The emergency funding options were generally welcomed, but they also served to exacerbate the instabilities and uncertainties of a hugely challenging VCS funding environment:

> We were very lucky... we had some really good funding pots, so we got one from the Big Lottery, one from the Police Crime Commissioner, and we had some from Essex Community Foundation. However, all of the funding at the moment is all short-term. You can have 6 months, which means that everybody that works here are all on like 6-monthly contracts,

> which doesn't give us any sustainability. And when it comes to February, we're still looking for additional funding to make sure that we can still continue to offer that service. So for us, well for me, it's been quite a worrying time because we definitely need to make sure that we have got some sustainable funding. But there is nothing out there because everybody's working towards supporting people during COVID... and if there are big pots of funding available, like we were turned down for a Comic Relief one today, it's because there are so many people that are going for those pots of funding. We're quite localised and I think they're looking at work that cuts across the whole of a certain area rather than being localised, so I am finding it a difficult thing [TO, also CAC, YES, StH].

This idea that organisations with a local focus are less fundable is prevalent but, according to **'Value of Small'**, a misperception. Nonetheless, many of our interviewees reported having to apply continuously for multiple funding bids:

> Funding is a difficult thing and I think I am probably writing at least 2 funding bids a week... it's not my best, my favourite task... because you have to write it, you can't put the same sort of passion into it, so it's quite difficult [TO].

> It's a tougher sequence, people want more out of you than you probably can give. However, you feel that you have to do it because you need the funding for just being able to work on a day-to-day basis... They're not giving you enough time either, to be able to apply for it and to get things sorted and in place, you might find out that actually you have got two days for this funding bid, well I can't, I haven't got enough time to be able to get all of that in place in two days... You know the questions that they are asking you for a £10,000 bid, you just think to yourself 'is it worth it?'. Because you're literally laying your life down on the line and maybe you'll get it and maybe you won't, and you spend two, three days writing that funding bid. And you just feel sometimes that, I don't think people appreciate just what you're doing on a regular basis to enable you to keep the practice going [TO, also CAC, StH].

Many organisations do not have the resources for these labour-intensive funding bids and instead have to reduce their overheads. Citizens Advice Colchester, for example, have terminated the lease on their commercial property to help fund their work. For CAC, access to more resources would have allowed them to apply for more funding and so offer a better service:

> I think if I had unlimited resources I would have applied for more short-term funding that was available because it was so easy to get funding. The long application forms weren't there, it was literally what do you want the money for, how much do you need, can you send us some reports on how the

funding's going to be used and literally that money would be in your bank within a couple of weeks and then you're up and running... I've lost out on some funding because we literally didn't have the resources because of the restructure the previous year. We hadn't lost staff, but we've had to reduce hours, and at that point I think the staff weren't really prepared to increase hours short-term for whatever reason so... yes I would have applied for more money [CAC].

Uncertainty about long-term security of funding is particularly concerning for organisations that are trying to build trust with their communities, as there is a fear that they will not be able to continue. The Outhouse described the impact of this adverse funding environment in great detail, giving rich insights into the day-to-day experiences of VCS organisations:

I have thought about that all the way through the whole lock down... the majority of staff haven't even had proper holidays through this time, and we're still putting out funding bids to enable us to continue doing the work that we're doing, because we don't have a regular amount of money coming in... I think sometimes the charity sector has been really overlooked because of the type of work that we do on a regular basis... but it's been exacerbated by what's going on in the world...

...I always feel slightly nervous about the future, because it always worries me that we are never going to get the funding in to keep us the way that we are and how I would deal with that and having to say to staff I am sorry we haven't got the funding for you, and I can't keep you on. That's my biggest fear. But I do feel really positive about it. I do feel that we are coming into a phase where people need charities, they will need the support networks of all of us being out there, so I do feel quite positive about it, only from the work side of things. So I think that as long as we can offer something that is going to be regular and consistent, I feel quite content about our future... It's changing how we are perceived as an organisation, to ensure that people start to believe we are long-term, going to be here forever, or as

long as we are needed, and that we will always offer consistent services. Because that's what's happened, they've had four, five years of services, haven't got the funding, then it's all shut down again, and then it starts up again and then it's all shut down again. And we can't work like that, it's got to be a consistency, and that's what we're aiming for [TO, also W&TC, CAC, StH].

These fears about continuity of provision are exacerbated by the increasing concern that statutory services will not be sufficient [RA]. The recurring question for these organisations is about how to plan for the future – in terms of keeping staff, securing provision and building trust with service users – when the funding policy is geared to short-term injections of project-based cash. One of the strongest messages to emerge from the interviewees was about the need for systemic change post-pandemic so that core costs of VCS organisations are fundable:

In terms of [the] system, and it's the funding thing I've got to come back to it and particularly for small charities because it keeps them small. There has to be a more realistic funding or grant aiding... With organisations like ours, the idea of going from hand to mouth year-on-year when the multi-million-pound companies such as Virgin walk in and get a 7-year contract is a disgrace. And to be fair to Virgin... of course they need a 7-year contract, 'cause it's big stuff, well, actually, our work is big stuff for the lives of those young people as well... If I could guarantee our core income, around our core services, like fundraising, business development, the core administration, because it has to be there, and the easy bit is actually designing the services, because they're needs-led, but what we constantly are fighting is trying to compete at the level where you can't stand... people don't want to fund that stuff because it's not sexy is it? What's sexy about 'I've funded an administrator!' ... it's not the same as a counsellor on the front line, so that's what I would like changed, with the funding [YES].

Some community organisers expressed the view that, in order to survive, they will need to look at shared objectives and applications:

Critically we realised that we can't just stand alone ourselves and apply for funding, it's going to be a bigger picture now, or collaborative working which we're working with very well. We've actually got an impact brochure we've produced now so we can actually share the value of our work with stakeholders, so we have a stakeholder plan, a communication plan in place now which we've never had. So I think for us COVID has really been a winner for us because we had all these plans back in October, how we needed to rebuild and refocus our business model but actually COVID has made us do it a lot quicker [CAC].

Partnerships during the pandemic

The creation of partnerships emerged as one the most positive aspects of the pandemic. Digital platforms enabled community organisers to communicate more easily, enhancing existing relationships and facilitating connections with potential new networks and collaborative partners. Indeed, many of the interviewees listed each other when asked who they'd worked with during the pandemic [NC, TO, ALB, CUFitC].

We found that smaller organisations were more likely than larger ones to list all of their partnerships, and to report that they were engaged in a wider range of partnerships. This may reflect the greater reliance of small organisations on partnerships due to their limited in-house capacity; they may also be more integrated in the communities that they are supporting and so routinely working closely with other groups.

Partnership working helped with local profile and recognition. Colchester United Football in the Community, for example, was able to better position its community work:

> As an organisation we are fairly well connected within the community, especially in Colchester and Tendring... we had some really good contacts across the Borough Council, I know that they were running a slightly separate outreach program, but we linked in with them and they helped us, but it was mainly through the partnerships we'd had previously, so Barnardos, Colchester Food Bank, some smaller charities we have worked with before, we were just able to revisit our contacts and those relationships we had and kind of go from there really...

> I think this is kind of a misconception of us across the board is that a lot of people, a lot of organisations, think that because we are linked to Colchester United Football in the Community that all we do is football... but we are the charity of the football club, so for us to be reaching out to organisations, to help and support them, I think strengthened our relationships, I think they have certainly made them stronger... We are still working with all of those partners now [CUFitC].

The development of partnerships has not been without its problems. Some groups have been unable to continue partnerships where these depend on access to physical space, or they have needed to refocus their service offering to remote access. Others may have not had the time or resources to devote to partnership working during the pandemic:

> Pre-COVID, there were more interactions with other groups and agencies and a lot of it was our services: can they help some of their service users and vice versa? Pre-COVID, there were things like Age Concern Colchester and Tendring that we'd be linked in and if something came up we would talk to them. FaNs Network in Essex, they're really good at working

> with older folk and, and certainly musically, lots of different artists' groups that we would work with... during COVID where we are now, less interaction, just because I think people are just so tied up in surviving as a group and as individuals. There's been less opportunities for agency work, though we have become a member of Colchester Befriending Group, which is of people across the board from theatres, to mental health teams and I think people are starting look beyond now so we've organised meetings in the new year to talk to other agencies in how we can help each other. [W&TC, also AFC, BE]

Partnerships were not always the solution to the problems of the pandemic. For Beacon House, it was a mixed picture; partnerships may not have helped to support service users, but they did give organisations a context in which to reflect on the issues they were facing and to work together on ways to tackle them. Some partnerships did not function particularly well during the pandemic; Refugee Action, for example, pointed to the difficulties of working with statutory agencies, which were no longer offering face-to-face support to service users, leaving organisations such as RA covering essential support for vulnerable people:

> It's not what we are trained to do, we've become very expert in lots of things because we've had to do them, but I feel very resentful at the fact that other agencies that are just taking this as a holiday, a lot of people, I've spoken to so many people who are working from home, and they're clearly not doing anything like the amount of work that they were doing before... and these are statutory agencies... it's letting our clients down, it's prolonging pain and suffering for them and it's unforgivable...

> I think the thing I just wish I could transmit to every other agency is 'you're services and you've forgotten that and you should be working for the people' and I would love to hold them all to account on that, and we do... That's another thing that we have done, as part of our projects, we have started doing a project which is about lobbying and recording and holding to account some of the problems that have gone, so it's about complaints, telling our councillors, telling our MP, writing complaints, following them through, doing freedom of information requests, publicising it if needs to. We don't have enough time to do it as much as I would like to, but that kind of thing is another aspect that we didn't do before but we've felt that we have to chase these things up [RA].

One concern with partnership working is the potential for competition, particularly relevant when – as during the pandemic – organisations are applying to the same, limited, funding sources:

> One of the significant issues is the cost of introducing a contractual framework into funding for charities, particularly for smaller ones, is problematic. First of all, it's done as much to break up partnerships

as it's ever done to form them. Partnerships used to be people just working together for the sake of the work. Now partnerships are full of people waving and smiling across the table whilst sizing each other up for the amount of pie, that little pie that's available and so everybody's shrewder these days and just things needed managing tighter... and there are real issues around that about the level of trust that is eroded in that environment... Who manages that, who facilitates that and how do the facilitators operate that? At the same time competing with those very charities that they're supposed to be facilitating and they're difficult areas. We're a little charity on the edge and we've survived by not engaging a lot with that but our ambition is great so we are looking to engage more [YES].

So, the mechanisms for allotting funding through competitive processes can be unhelpful in terms of creating the trusting collaborative partnerships on which effective delivery of the funded service will depend. YES' forward plans to engage more with partners aligns with those of many interviewees. For some, a positive experience of working together to apply for funding during the pandemic was informing longer-term plans for joint bids. These organisations thought that there was less competition during the pandemic and so they were more able to work more effectively with others [TO].

With regional meetings being conducted on online platforms, interviewees noted that attendance had increased. This enabled community organisations to make better connections not only across North Essex but the whole of the county, networking that has been crucial for information sharing and support.

There is a lot of partnership working in the community because obviously signposting, we work with mental health, we work with social services. We do a lot of partnership [work], we partner with the Refugee [Action], with the Food Bank, with Open Road, so there is a lot of partnership working, and I think if anything COVID's really bonded partnership working more... Because we all understand the need of everybody else and the importance to keep people safe, for us anyway [NC, also FiM].

Partnership working has also happened informally, with organisations 'teaming up' to meet the needs of the local community, but it is not always clear how long this approach will last [AFC]. Such joint action has arisen from shared conversations between community organisations in North Essex and beyond, which allowed the various parties to coordinate their efforts, avoid duplication and signpost service users more effectively:

I think if you were to be looking for a silver lining that's come out of a COVID cloud, top of the list would be enhanced relationships and operational working partnerships with other organisations. I think that would be absolutely top of the tree. Often, and I've seen it in life and in business, when a crisis occurs,

people step up and people recognise... and accept and maybe articulate 'we can't do this on our own, we need help'. So there's been a number of forums created within the town that have meant – albeit they've all been online, they've been digital forums rather than real-life forums – but there's been sharing of information, there's been communication, there's been offers of help and acceptances of help [BH, also FiM, YES, CFB, ALB].

Looking towards the future

In terms of finances and resources, VCS organisations had very different experiences during the pandemic. Shaping these experiences were factors such as the public prominence of their particular part of the sector, their capacity to apply for emergency funding and the extent to which they could connect with others to access support and coordinate activity. Behind the many challenges in keeping organisations active during a crisis lies the systemic issue of how the VCS is funded, with the reliance on short-term, project-based funds that undermine core priorities such as strategic planning, continuity of service, the building of trusting relationships with service users, and staff job security and morale. Systemic change will come back on the agenda as the country emerges from lockdown. The potential prize is refocusing community organisers' time, energy and creativity from continual bid-writing to those core tasks.

Experiences of partnership working were mixed, but overall the balance was tipped towards the positive. Digital platforms facilitated a new level of cross-sector, cross-district (and beyond) connectivity, which, even if it didn't yield immediate returns for some organisations during the pandemic, nonetheless holds promise for the future. Existing partnerships were enhanced and new contacts were made, which will provide a valuable platform for the VCS in NE Essex on which recovery can be built.

CHAPTER FIVE

Discussion and Implications

Discussion

The COVID-19 pandemic and the response to it have created a complex, uncertain and still-shifting context in which to explore the specific impacts on the Voluntary and Community Sector in North Essex. No-one is untouched. Acknowledging that these impacts reach beyond people using VCS services to leaders, staff, volunteers, partners, donors and supporters is an important step. The discussion and the implications that follow should be read with this recognition in mind.

Our interviewees revealed the changing patterns of demand on and access to their services during the pandemic - and expressed uncertainty about what the post-COVID picture would look like. People who had never accessed VCS services before are seeking support, while some existing service users have lost touch as services moved to remote access. Identifying who the service user community is now, what mix of support it needs and how to re-engage those who are out of contact will take each VCS organisation time. Reflection on the pandemic and pandemic response at organisational level can help shape strategic conversations about future service, resource and funding plans.

In reflecting on the impacts of the pandemic, it is worth emphasising that social isolation has been a feature of the pandemic experience for many service users, volunteers and staff. As various forms of familiar care, support and human interaction have been withdrawn or shifted to remote access, feelings of dislocation, abandonment and distrust have emerged for many people, the consequences of which we will be trying to unpick and understand long after lockdown is over.

The interviews demonstrate that community organisers have sought to respond to the loss of or changes in access to services and to mitigate the impact on people wherever and whenever they could, sometimes at significant cost to their own wellbeing and personal relationships. They reacted quickly to new conditions, including through repurposing existing resources in consultation with funders and applying for new COVID-specific pots to keep services running.

The use of digital platforms was an area where community organisers saw particular success, whether it was using cloud storage to share files efficiently between home-working colleagues, video-calling software to stay in touch with staff, volunteers, and service users and to connect with regional partners, or social media to coordinate social events and support.

Not all services can be replaced by digital alternatives; where the transition from in-person to online has been made, establishing trust between organisation and client has been difficult in some cases. People have, however, generally responded well to the increased use of technology and there is much that can be learned from this experience as part of a process of organisational reflection and learning. Digital tools, including social media, have served to draw communities defined by place more closely together – connecting neighbours and coordinating local-level support – but they've also broken down some of the boundaries of geography, with audiences and participants far beyond the immediate area. We will now need to develop a more dynamic understanding of 'place' that allows for different, changing and context-specific 'mixes' of geographic and digital space to co-exist.

Some services remained face-to-face, and community organisers rapidly adapted offices and other rooms to keep people as safe as possible. Those that did remain physically open were not only continuing their support for people often living in the most insecure circumstances – they were also maintaining access to shared space as other settings and public areas closed. Voluntary and community action have gained wide public attention during the pandemic. Even as some people have had to step back from their volunteering to shield, others newly on furlough or working to a more flexible remote schedule have come forward; many organisations have seen increases in applications to volunteer. Are these temporary alterations or seismic shifts in the volunteering landscape? Our research suggests that the sector – alongside its funders, partners and stakeholders – has an opportunity to shape a changing landscape by integrating volunteers and volunteering into those strategic conversations about the future, building on and engaging with this new public awareness of and interest in voluntary and community action.

Using an oral history-inspired approach has been hugely valuable and we hope it is now a model that will be used by C360 and its partners not only in the context of response to and recovery from COVID, but also as a standard tool in their strategic toolbox. An open, reflective style of interviewing has enabled us to document how community organisers were making sense of the pandemic as it unfolded, giving us access to their feelings and reactions, adaptations and decisions – insights that may otherwise have remained unarticulated and unshared. The *process* of giving testimony also

served for many interviewees a kind of therapy during a time of crisis, a moment in which they could step away from immediate demands to talk through their experiences – and be heard. Oral histories are a time-consuming and intensive experience for interviewees and interviewers, but these efforts are well-rewarded with the quality of the insights gained. As terabytes of numerical data are collected during and after the pandemic, this report shows the value of human testimony as part of the evidence mix to inform the sector's analysis of the pandemic response and its plans for the future.

C360 asked us to capture these testimonies not just to record but also to put them to use. The pictures painted and stories shared are complex and the potential implications, which we suggest below, are far from straightforward either to define or to translate into actions. From our interviewees, we get a powerful sense that recovery from COVID-19 will be an extended process; there are social, economic and political as well as clinical symptoms of 'long COVID'. It is equally clear that the way the VCS in NE Essex has responded to the pandemic is cause for optimism. This report is, among many things, a testament to the sector's commitment, creativity and resolve. We need to keep listening.
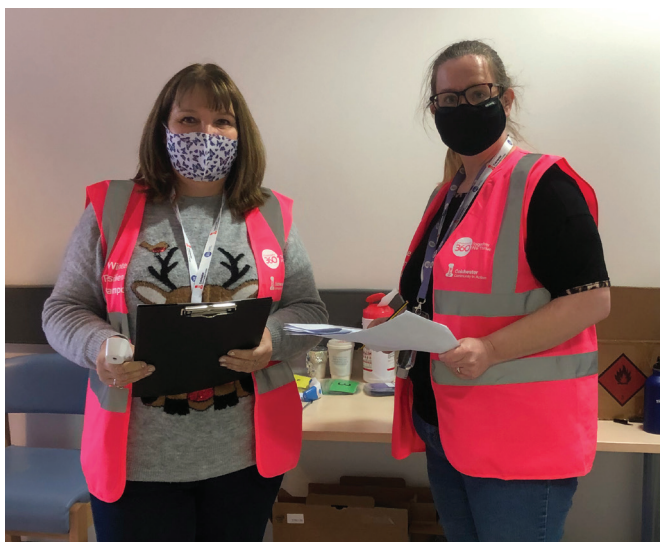
Implications

In this section, we draw out some potential implications of our findings for different constituencies: for C360 as an infrastructure body; for VCS organisations; for statutory services; for funders; and for researchers. They can only be suggestions: starting-points for discussion, questions to raise and ideas to consider. We hope they will be used in any way and to whatever extent is helpful for individuals, groups and organisations.

Running through our report and so also through these implications is a concern with people's wellbeing and capacity. If everyone has been affected in some way, then any strategic conversation should, we suggest, centre on people and how they can be supported to do what they need to do.

For C360:

- Are there any adaptations needed to the asset-mapping process to capture the status and needs of community assets as the sector emerges from lockdown and through 'long COVID'? This may include how the more complex needs that emerged during the pandemic can be addressed, as well as those of the first-time service users.

- More broadly, how can research be best used to map and meet changing patterns of need in the NE Essex VCS, whether it is reviewing and refreshing this particular project or designing future projects? This may include extending the exploratory work on the use of Facebook by local residents to set up and coordinate a fast community response to crisis.

- How are funding decisions best made through 'long COVID' period, recognising that there are likely to be some ongoing forms of pandemic demand, others persisting or resurfacing from before the pandemic as well as emerging new demands?

- Successes in moving to (some) remote working, service provision and partnership working mean there is likely to be a new digital 'normal'. What can be done to share learning between organisations on the use of technology and social media? Given there is no single, simple 'digital divide', can C360 help establish how service users did use technology during the pandemic and the support, workarounds and adaptations they found, to help inform efforts to address gaps in access to kit, wifi and skills for the long- and post-COVID world?

- How can C360 help keep the new volunteers, who came forward during the pandemic, engaged in the VCS? Can a new 'culture of volunteering' be cultivated?

- How can C360 best facilitate the sharing of learning from the pandemic response and help to strengthen the partnerships formed?

- The local VCS responded with speed and compassion, stepping in to meet demand. As we start to emerge from the immediate crisis, what support, training or advocacy do organisations want, whether it's to hold authorities to account, assess their organisational response to the pandemic, access new funding streams or something else?

- What is the role for C360 in contributing to audit and accountability processes to assess the pandemic response?

For VCS organisations:

- VCS organisations have necessarily been in reactive mode through the pandemic, with capacity stretched to the very limits. Those experiences are a potentially valuable resource to aid planning for recovery and healing. What support is needed to be able to fully capture and use this resource and who can supply it? What form could an organisation-level reflection and learning process take to be most beneficial?

- What are the mental health and wellbeing needs of volunteers and staff in a period of reflection, recovery and healing?

- Many interviewees highlighted the increasing complexity of service users' needs and a rise in first-time service users. Meeting these needs is likely to involve partnership working in some cases, and adding new in-house capacity in others. What's the best way of determining the mix and balance of specialist support to meet these needs?

- Our interviewees spoke about the many creative ways they used digital platforms during the pandemic, whether it was cloud-based file-sharing, video calling or social media. Reviewing these experiences – alongside staff, volunteers, service users, stakeholders and supporters as appropriate – for practices to continue, adapt, experiment with or set aside would be a valuable exercise in itself, but also provide a platform from which to address the digital gaps relevant to each organisation.

- For some interviewees, there was an imperative to hold authorities to account for policy failures during the pandemic that had catastrophic human consequences. What kinds of evidence should be captured to support those efforts and who can contribute?

For statutory services

- As part of the pandemic response, a diverse range of organisations and groups have proven their ability to adapt services quickly to meet community needs and to spend more flexibly-defined funds effectively. What does 'good bureaucracy' – with proportionate demands on the VCS in terms of risk management and governance – look like post-COVID?

- Relationships between statutory services and the VCS will need to be reconfigured in a 'long-COVID' and post-COVID context. Reconnecting with VCS partners is a first step towards redrawing those arrangements, building trust and working effectively together. The potential prize is a strong community development ecosystem that makes the most of the full range of local assets.

- Some interviews will make challenging listening for statutory services staff, with community organisers expressing their frustrations in having to offer forms of care and support during the pandemic that should have been delivered by public services, even as their own capacity was under extreme pressure. Any post-COVID learning process will have to engage with questions of accountability, including ensuring that the VCS does not, by default, assume permanent responsibility for the gaps in provision left by Statutory Services.

For funding arrangements

- Interviewees acknowledged the way some funders moved quickly to allow organisers to adapt existing funding streams to pandemic needs and apply easily for new funding (the NE Essex Clinical Commissioning Group received particular commendation). What can be learned from these experiences to ensure funding is flexible, sustainable and with lower administrative burden, while still providing funders with assurance that public money is being effectively spent? This should include a review of the level at which funding was injected into the system to ensure money reaches the organisations closest to community need.

- Applying for short-term grant funding occupies a disproportionate amount of community organisers' time and puts them under pressure to propose new initiatives when continuity of existing services may be more important. Organisations need sustainable funding streams for core running costs to tackle persistent need, disadvantage and inequality, which should not be accepted as 'business as usual'.

- Government restrictions may be easing but demand for many VCS services remains at a pandemic-level high, so careful planning is needed to create appropriate transition arrangements between 'emergency' funding regimes and those that will be designed to serve the post-pandemic VCS.

- Not all activities have an online alternative. For those organisations that need to deliver services face-to-face, how can funding streams help support those costs?

- Every statistic is composed of individual human beings; to understand need and to design and support effective responses, the process needs to be humanised. How can you build qualitative, experience-based evidence into the design of funding frameworks alongside numerical evidence?

C360 response

In introducing Communities responding to Crisis: COVID 19, social action and our local neighbourhood, we said that we wanted people to see more. We commissioned research to encourage others to learn more and consider more – listen to what voluntary and community sector leaders have to say.

They have made clear that the long shadow of COVID will continue to impact upon residents in the Borough in significant ways for some time. There are complex challenges inherent in the inequalities within communities and the structure of society. There are complex challenges being faced by individuals with multiple needs on a daily basis.

There are also dedicated, caring, skilled and creative people responding to these challenges. Their voices are powerful. Their achievements are profound. Many volunteer their time freely with no financial reward. Some have taken on new roles. Others have used a lifetime's experience to inform their work.

Look at what we can do and how much more we can achieve. Now that people have seen more, we want more. More opportunities for individuals and groups, more action and more partnerships. We ask everyone to join with us, work with us and shape the future we need.

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