

**COVID-19  
IMPACTS ON THE ACCESSIBILITY OF COMMUNITY ORGANIZATIONS**

# Staying in Touch with Populations during a Crisis

**IN THIS REPORT:**

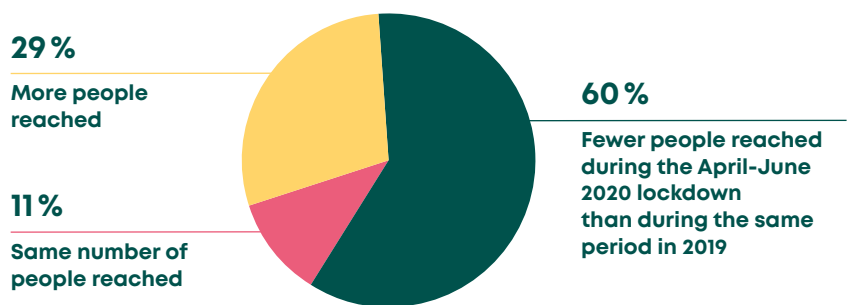
- Ability to Maintain In-Person Activities ..... 2
- Diversified Strategies to Maintain Regular Contact ... 3
- Increases in the Number of Requests ..... 5
- Reductions in the Number of People Reached ..... 7
- Opportunities and Challenges in Developing Remote Activities ..... 11
- Community Organizations' Strengths in Reaching Populations during a Crisis .. 13

The COVID-19 pandemic had significant impacts on the health and living conditions of numerous populations (see the [Impact on Populations reports](#) by the Observatoire de l'ACA). The crisis also affected the internal operations of community organizations and presented major challenges to maintaining existing links with those populations. Community organizations were also confronted with an **apparent paradox** between, on the one hand, increased community needs and requests and, on the other, a reduction in the actual attendance in certain sectors of autonomous community action (ACA).

Indeed, as mentioned in our report [Actions from Community Organizations in Times of Crisis: Essential, Yet Unrecognized](#), many community groups (60%) reported reaching fewer people during the lockdown from April to June 2020, as compared to the same period in 2019, while another significant portion (29%) reported reaching more people. The present report offers a detailed consideration of the **factors that led to an increased use of resources** for some and the **obstacles that led to reductions** for others in an effort to better understand the actual changes that affected the relationships between community organizations and the populations they serve during the crisis.

Using data from a survey conducted by the *Institut de recherche et d'informations socioéconomiques* (IRIS) in the fall of 2020 and from focus groups with community organizations in the winter of 2021, this report covers the impact of the COVID-19 crisis on the accessibility of community groups, based on data collected directly from community groups as well as their umbrella organizations.

**Individuals reached during the April-June 2020 lockdown in comparison to the same period in 2019**

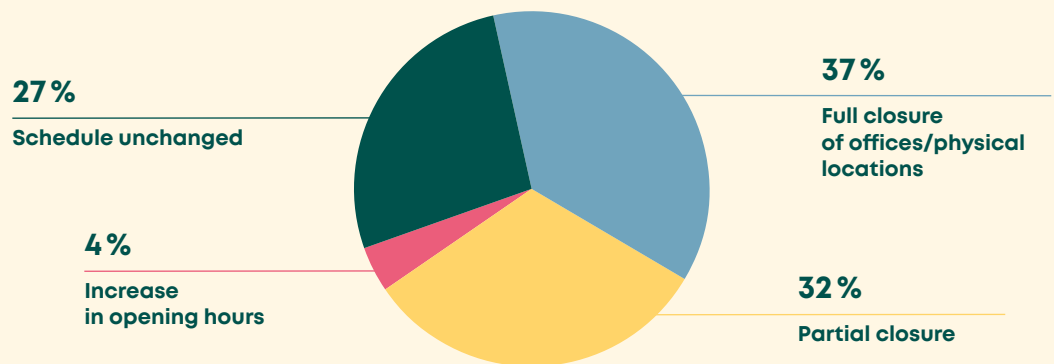


## ABILITY TO MAINTAIN IN-PERSON ACTIVITIES

The early days of the COVID-19 pandemic were marked by the absence of guidance from the government specifically concerning community organizations and their activities. As such, they were left on their own, without any relevant guidelines, to determine whether their activities were **essential** or not (and could therefore be maintained in-person) even as this decision could result in risks to both their employees and members (see our report [Heath Risk Management Within Community Organizations](#)).

### Impact on the Accessibility of Community Group Activities During the First Lockdown (April to June 2020)

51% of organizations determined that their activities were considered essential services according to the government-issued definition (continuing in-person activities).



According to the survey by IRIS, 69% of community groups had to close their **offices** between April and June 2020 (37% did so completely and 32% partially). As discussed in our report [Actions from Community Organizations in Times of Crisis: Essential, Yet Unrecognized](#), the ability for community organizations to access their premise also had an impact on their ability to maintain in-person activities. Many organizations with offices in municipal buildings or buildings within the health and education systems found themselves barred from accessing that space without any consideration as to whether their activities were essential or not.



## DIVERSIFIED STRATEGIES TO MAINTAIN REGULAR CONTACT

The first instinct among most community organizations was to find **new ways to reach** their members and the individuals who participate in their activities.

Teams spent a significant amount of energy **brainstorming** the best ways to reach people and develop activities that met their needs and realities. Each community organization adopted methods developed for the specific populations they serve that considered the impacts the crisis was having on their living conditions.

Many community organizations conducted **phone chains** to try and re-establish contact and explain that they were still operating (even at a distance). This contact was also an opportunity to reassure people, provide them with information on the health crisis and measures in place, and to identify their needs. Afterward, calls were shifted to focus more on given individuals to maintain contact or to identify specific needs. Community organizations were also ready to go and meet people in their own **spaces and environments** whenever necessary to see what they needed and offer support.



We were really creative. I'm so proud of my team! We did a bit of everything. We began by making a list of every family we were in contact with, each intervention worker. We determined who had an Internet connection, those that were more vulnerable or more likely to experience violence or things like that. After that, we made individual calls to the families we identified. For others, we told ourselves we'd have to go and see them and get a sense for how things felt. \*

**Group in Laval**



In order to maintain regular contact with those they reached, community organizations reinforced or developed **a number of strategies**:

- **Phone and text messaging** (e.g., friendly calls, conference calls)
- **Virtual contact** (e.g., discussion groups on Zoom, online workshops, interventions with youth via video games)
- **Mail and other deliveries** (e.g., school materials, food assistance, injecting equipment)
- **Outside with social distancing** (e.g., balcony visits, accompanied walks)
- **Inside with protective equipment**, respecting social distancing and public health measures, especially for isolated individuals (e.g., home visits for elderly individuals or to support caregivers, meetings at the organization by appointment for individuals or family “bubbles”)
- **Social media**
- **Local media** (e.g., radio segments, community newspapers)



We did a lot virtually and over the phone, but budget consultations require a lot of documents. Some people come to see us with two years of unopened mail. Lots of people don't have access to the Internet or a phone. So how do you reach them? We were open, we were offering our services, but there was a period of time in which we couldn't have anyone present. So, we held meetings outside to make sure we could still be available to people! \*

**Group in Montérégie**



Many of the health measures in place were relaxed in the **summer** of 2020, allowing for more in-person contact with the individuals being supported. In order to benefit from this reopening as much as possible, after months of isolation, many community workers chose to take on additional work at this time. This led to increases in their summer workloads and a reduction of their usual vacation time. This is significant for a period in which community workers normally take crucial time off to recharge and recuperate from the overtime hours they've worked in the year up to that point.



We began going to people's homes in June. The weather was good, so we'd be out on the grass. People would be out on their balconies, and we would talk with them. Every month we celebrate that month's birthdays. It's important to our members. If we skip over their birthday without celebrating it, they let us know! We took advantage in June to celebrate all of the birthdays from March to June. We went around to all of the participants' homes and brought them a small gift and a little Vachon cake with a candle. \*

**Group in Gaspésie**



## INCREASES IN THE NUMBER OF REQUESTS

Several community organizations had to **reach out to new people** and respond to an **increase in the number of requests for support** related to a worsening of existing issues or new challenges resulting from the crisis. For example, from the very beginning of the crisis, many different populations experienced isolation that negatively affected their mental health and income loss that threatened their access to food (see the [Impacts on Populations reports](#) by the Observatoire de l'ACA). According to the IRIS study, a significant number of community groups (29%) reported assisting more people during the lockdown from April to June 2020 than they did in the same period in 2019.



Since May, I've received 62 referral calls from the CIUSSS, intervention workers and social workers that didn't have time to provide care for elderly individuals. When these people call me, can I just say, "Oh, sorry, I don't have time for you?" No! It became a lot. \*

**Group in Estrie**



In general, with few additional resources available, it was **difficult to respond to all of the requests they received**. While some requests were made by individuals directly, many were the result of an **increase in referrals** from other actors in the area, especially from within the health and social services sector as it struggled to fulfill its mission. For many community organizations, the increase in requests **exceeded their capacity to act**, leading to burnout among employees and delays for those seeking support (waiting lists).



We don't respond to every request. I have over 100 people on a waiting list to receive services, for just 4-8 hours a week. I'm not able to offer it, I don't have the funds. I'm still waiting for the damned emergency funds, and I just got an email saying that I won't get an answer before December 15. It's nonstop, they keep coming in, as much for service employment paycheques as requests for in-home respite services. We've never had requests coming in like this before. \*

**Group in Laval**



Faced with so many new requests, several community organizations also chose to **expand their activities**, requiring them to adjust their internal operations. For example, a group that normally works with children decided to expand its support to include adolescents; another developed a new day camp with academic objectives for youth with special needs, based on referrals from schools, etc.



It was a request from the CISSS. Parents were having trouble managing everything 24/7 because the schools were closed. Normally we work with people aged 21 and over, but we lowered it to include people as young as 13 with an Autism Spectrum Disorder. Normally, we work with intellectual disabilities and physical disabilities, and it's completely different; it was more than a little chaotic! We had to completely review our ways of doing things. \*

**Group in Laval**



**Development of New Activities by Community Organizations during the First Lockdown (April to June 2020)**

**39%** of community groups developed at least one new activity among the four following types: accompaniment and referrals; welcoming and listening; support and mutual aid; and emergency materials support (food, supplies, etc.).

Some community organizations even had to **hire additional staff** to support these new activities. According to the survey by IRIS, 18% of community groups reported hiring new staff on either a temporary or permanent basis during the first lockdown (April to June 2020).

**Impact of Activity Development on Staff in Community Organizations during the First Lockdown (April to June 2020)**

**75%** of community groups had to **reorganize** tasks and activities for some or all of their staff.

**17.5%** of community groups had to **increase work hours** for some or all of their staff.

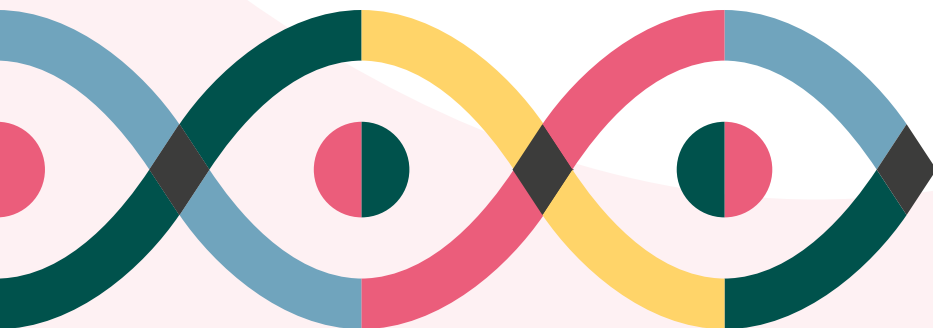
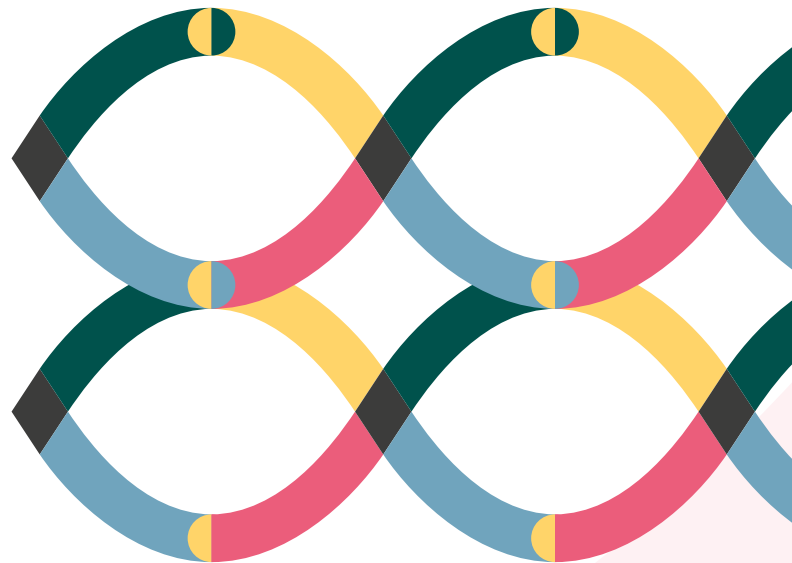
**18%** of community groups had to **hire additional staff** on either a temporary or permanent basis.

Faced with an increase in requests, many **umbrella organizations** developed direct contacts with various populations, even though this type of activity wasn't included in their missions. As such, among the umbrella organizations that responded to the IRIS survey, 17% began offering new accompaniment and referral services to meet community needs and 12% added new welcoming and listening services during the first lockdown.



Between the services offered by the government and those offered by community organizations, we reach less than 10% of caregivers. We began talking with caregivers directly through our Facebook page and organizing dedicated webinars for them, which we've never done before. In the past, it was our members that did this kind of work. \*

**Quebec-wide umbrella organization**



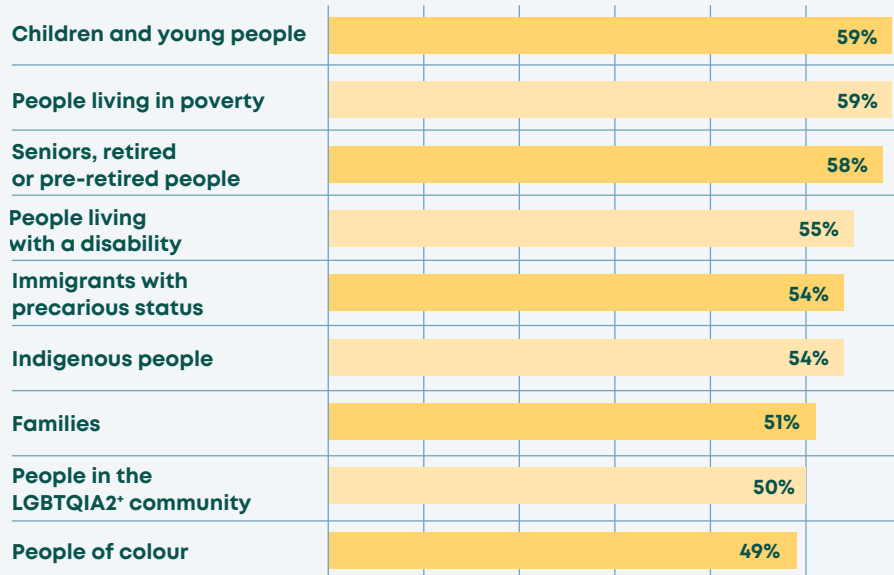
## REDUCTIONS IN THE NUMBER OF PEOPLE REACHED

Even as the number of requests grew, many community organizations also **lost touch with certain populations** that were more difficult to reach as a result of the crisis. Overall, according to the IRIS survey, more than half of community groups reported difficulties reaching their target populations between April and June 2020, with a variance of 49% to 59% according to the type of population.

### Challenges Reaching Populations

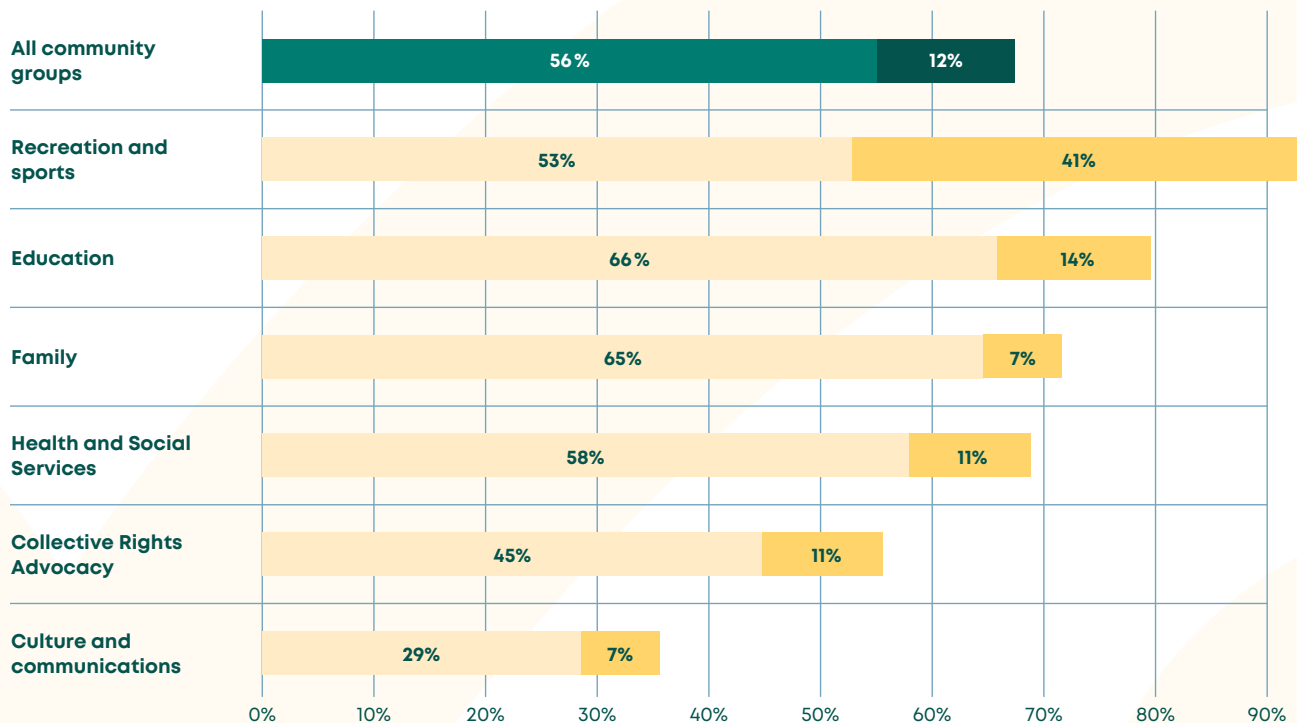
**61%** of community organizations experienced **increased difficulty reaching their target populations or communities** during the April-June 2020 lockdown.

Percentage of community groups who experienced more difficulty reaching the following populations during the April-June 2020 lockdown



Individuals who participated in the focus groups attempted to **quantify the drop in the number of individuals reached** for their organizations during the first lockdown. Estimates for the exact reduction varied between **15% and 60% of the number normally reached.**

**Proportion of Community Organizations that Reduced (light bar) or Suspended (dark bar) their Activities between April and June 2020, by Sector**



According to the survey by IRIS, 68% of community groups **reduced or suspended their activities** between April and June 2020 (56% reduced and 12% suspended).

In addition to the digital divide, which is discussed below, **several factors** help to explain this reduction in the number of people reached by community organizations.

The size and configuration of community organizations' **offices** represented an obstacle to maintaining in-person activities, since the public health measures in effect limited the number of people who could be present while respecting social distancing. Several community organizations were therefore forced to rent larger spaces to maintain their activities with the appropriate distancing. In the end, given the space it requires, in-person activities with social distancing were accessible to fewer people than normal.

« We had to cut down on the number of young people we saw. We had to reduce the size of groups to make sure they could all fit in our space for activities. \*.

**Group in Laval** »

Focus group participants also highlighted **specific situations** that reduced the number of people reached. For example, certain community organizations that work with incarcerated individuals lost access to penitentiaries. For other groups, the individuals they normally work with had fewer needs for support, such as young people who normally experience bullying but weren't going to school.

« About a third of our program is in a federal prison and the doors shut and we weren't allowed in anymore. They don't have access to Internet. They have been basically locked down 23 hours a day. We can mail in some activities but we don't know if they get it.

**Region not shown to preserve the group's anonymity** »



**Fear of transmission**, especially for individuals with a higher risk of complications from a COVID-19 infection, also led to a reduced use of certain resources, such as day centres for people experiencing homelessness, shelters for women experiencing intimate partner violence or home visits by external intervention workers.



We had to reassure a lot of our members: “Yes, we’ll take all necessary measures. You won’t be at risk. It will always be the same orderly who comes to your home, she always goes to the same families”. We had a huge number of calls from people who were afraid, who wanted to stop, who we had to reassure, who wanted our services. \*

**Group in Laval**



Some community organizations also faced **specific challenges** maintaining their contacts **with children and youth** (under the age of 35). In total, 71% of the community groups that work with these age groups reported having more trouble reaching them during the lockdown from April to June 2020 (compared to 61% of all respondents to the IRIS survey). Further, 73% of these groups reported having reached fewer people as compared to the same period in 2019 (compared to 60% of all respondents to the IRIS survey). Despite the fact that young people seem to be the most well-connected and familiar with technology, community organizations faced numerous challenges in reaching them virtually, including:

- **Trouble finding the right platform** in an ever-expanding virtual environment, especially to reach girls;
- **The importance of in-person time** in developing a relationship of trust and a feeling of belonging for certain youth. Phones did seem to provide an adequate connection to allow for a support relationship in cases of distress;
- **Reduced access to children in elementary school and early high school** via a dedicated phone, tablet or computer that makes them autonomous and reachable virtually;
- **Digital divide** for some young people (ability to pay for a plan that lasts all month);
- **Digital fatigue** that set in as the crisis continued, especially for young people who also had to attend school remotely.



We have a “workplace” available to maintain contact among the members of our youth committees. It’s a pilot project and the youth don’t respond that much. Where are they? They aren’t on Facebook. We’re starting to think that we’ll need Instagram. I thought it was a simple formula: young people are on Facebook. But it turns out, that’s not the case. \*

**Group in the Laurentides**



A [survey](#) run by the *Regroupement des maisons pour femmes victimes de violence conjugale* between July and November 2020 found that the **obstacles to accessing resources for women who experience intimate partner violence** included the presence of a partner who wouldn't allow them to seek help (43%) and public health recommendations that discouraged such requests (21%). A lack of access to transportation and concerns about finding housing after their emergency accommodations also contributed to discouraging certain women from seeking help. As a result, community organizations that support women experiencing intimate partner violence reported a reduction in calls. For many women, their residence is not a safe place and interventions have to occur outside of it. Additional measures that were put in place, such as raising awareness in pharmacies about intimate partner violence, don't always seem to be effective. Finally, there were limited resources available to receive these women. With reduced access to external support, many women were forced to remain confined with their abusers. The [Statement from Québec Women's Centres in Favour of a Feminist post-COVID Recovery](#), published in February 2021, stated that 15,000 requests from women experiencing intimate partner violence had been refused over the previous year due to a lack of space.

It's difficult to keep in touch with women experiencing intimate partner violence, since their partner is in the house with them. There were challenges in how we could reach these women. \*

**Group in Montréal**

For many adults (ages 18-50), the crisis meant a significant **reduction in their ability** to participate in community organization activities, given the increase in their **professional and family responsibilities**. This was particularly true for women, as they experienced an increase in their invisible labour and mental load (see the [Increase in Isolation and Distress](#) report by the Observatoire de l'ACA).

The announcement of a **curfew** in early 2021 also limited access to community organizations. Many groups were forced to cancel events normally held in the evening, which is often the only time at which certain individuals are available. Even for community organizations that provide essential services and could emit passes to be out after curfew, the risk of encountering law enforcement was too high for the populations they serve, especially since many of them already experience forms of social and racial profiling (e.g., racialized individuals, those experiencing homelessness, individuals without legal status, etc.).

With the curfew, we decided to stop holding our support group. We could have given the women letters, but do we really want these women to find themselves facing legal issues, especially for them? If they have to go out, and they get stopped by the police, and then they need to insist on their letter, and what if they end up in prison... We were constantly watching the news and saying "Is this damn curfew ever going to end so we can restart our groups?" \*

**Group in Montérégie**

## OPPORTUNITIES AND CHALLENGES IN DEVELOPING REMOTE ACTIVITIES

The development of **new remote activities** allowed many community organizations to reach new people. The virtual aspect increased geographic accessibility (e.g., for individuals located away from urban centres) and physical accessibility (e.g., for those with reduced mobility). It also allowed for more collaboration between different organizations and a chance to share the costs of activities.

On the other hand, the development of remote activities presented **numerous challenges** for community organizations hoping to stay in contact with their target populations. Certain activities are quite simply impossible to hold at a distance, such as support for administrative processes.



The general impact was that the people we reach don't have access to the Internet. We began working over the phone. Imagine trying to help someone who's received a letter from the government and doesn't understand anything on it. \*

**Group in the Capitale-Nationale Region**



The use of virtual means of communication, particularly the increasing use of virtual tools for meetings such as Zoom and Google Meet, can also create **accessibility challenges** related not only to the digital divide but also to physical accessibility, such as for certain people with a motor impairment.

For many community organizations, especially those working with older populations, the transition to a virtual environment required a great deal of support and training.

The **digital divide** is a major obstacle to accessing resources for a large number of people (see the [Loss of Access to Information and Resources](#) report by the Observatoire de l'ACA). Indeed, it presents accessibility challenges related to finances, technology, physical accessibility and literacy. In some cases, we could even speak of a communications divide, as certain individuals don't even have access to a telephone to maintain contact.



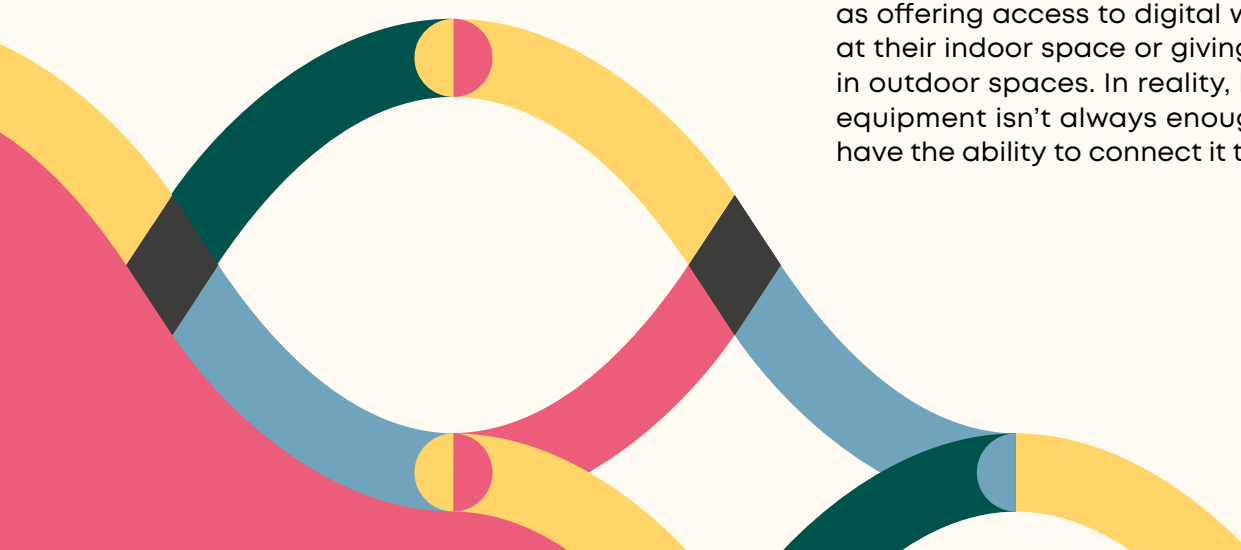
We organized a system to call people every two weeks to make sure everyone was doing okay. Of course, our members include individuals who don't have access to a phone, so there were people we simply couldn't reach at all. It's a serious issue. \*

**Group in Montréal**



The digital divide seems to have been a particularly serious issue for community organizations working in the **education** sector. Indeed, according to the IRIS survey, 77% of these groups reported difficulties reaching their target populations during the lockdown from April to June 2020 (compared to 61% of all respondents to the survey) and 74% reported reaching fewer people as compared to the same period in 2019 (compared to 60% of all respondents).

In addition to medium and long term loans of material, community organizations also put a **diverse set of strategies in place to address the digital divide**, such as offering access to digital workstations in person at their indoor space or giving access to their Wi-Fi in outdoor spaces. In reality, loaning out computer equipment isn't always enough when people don't have the ability to connect it to a network.



We did sort of a hybrid method as well. We never closed. We allow people, maybe in groups of two to three, to go to a community center where it would be connected online there if they didn't have access themselves and somebody would be there to provide one-on-one support.

**Group in Montréal**

Increases in the number of people reached via new activities held at a distance were therefore limited to a specific type of person, those who could be qualified as “connected”. This can result in questions regarding the **profile of the individuals reached** by the community organization, as it de facto excludes those who are the most economically and socially marginalized.

Finally, in the hopes of benefiting from the advantages these new means of communication provide to reach certain populations, while also maintaining accessibility for others, several community organizations mentioned their interest in maintaining virtual spaces **in addition** to in-person activities in the future (the use of a **blended model** between virtual and in person).

Virtual activities also posed **challenges for individual support and counseling**. A virtual environment makes it more difficult to develop a relationship of trust with intervention workers and a feeling of belonging within the organization. Community organizations that work with people who have a mental disability (MD) or an autism spectrum disorder (ASD) explained how meeting in person and having a warm physical presence is critical to their work. There are also issues in ensuring the confidentiality and intimacy of discussions when individuals are connecting remotely from home without a dedicated and closed space to meet in. Finally, each of these obstacles are even more impactful for **new people** with whom a relationship of trust hadn't been developed prior to the pandemic.

What's interesting to us was realizing that most of our services can be given at a distance. We're very attached to our region, but we've realized that the training we provide on sexual and gender diversity in different contexts doesn't need to be limited! That allowed us to open up, which is really interesting, since the foundation of our organization is to demystify and build awareness. \*

**Group in the Capitale-Nationale Region**

70% of the people we reach are people who need to be in person; they need hugs and to be present with everyone. \*

**Group in Estrie**

## COMMUNITY ORGANIZATIONS' STRENGTHS IN REACHING POPULATIONS DURING A CRISIS

The COVID-19 crisis created **unprecedented challenges** for autonomous community action organizations trying to maintain relationships with various populations. On the one hand, community organizations faced increased needs and requests. On the other, many experienced a reduction in the number of people they were able to reach, due to the public health measures put in place and the various obstacles covered by this report.

Despite the challenges, community organizations put numerous strategies in place to maintain strong links with the populations they serve. **Two facilitating factors**, specific to the approach of ACA organizations, were mentioned by the individuals the Observatoire de l'ACA met with.

The first factor allows community organizations to adapt to the changing contexts of the crisis because they are rooted in **relationships they've already built** within communities and have a **robust understanding** of the needs and realities present in the populations they serve. Their proximity and roots within the community allowed them to quickly identify, and in some cases even anticipate, the best ways of maintaining relationships with their populations in response to the impacts of the crisis on their living conditions.

The second factor is the way community organizations take a **personalized approach** in responding to the specific needs of each person, supported by a **holistic understanding** of their reality that considers all aspects of their living conditions. As explained in the Observatoire de l'ACA reports about [Impacts on Populations](#), the crisis resulted in a series of problematic situations that were each unique and which couldn't be addressed by a one-size-fits-all solution, which would inevitably exclude many people and could place some of them in even more difficult situations. In contrast, ACA organizations are dedicated to "leaving no one behind" by taking the full complexity of each individual's situation into account.



The more connection we have with our community, the more we know our members, the more we know their needs, the better we'll be prepared to answer when a pandemic hit. Our good links that we already have, we already had messenger. We already had good coordinators through text and stuff like that... Our connections allowed us to continue to offer services much more easily.

**Group in Gaspésie**



## DATA SOURCES

The Observatoire de l'ACA is a large-scale **action research project** that seeks to document the impacts of the COVID-19 crisis on Quebec's autonomous community action (ACA) organizations.

The data used in this report are drawn from **analyses** conducted in summer 2021 from:

### Qualitative component

15 focus groups conducted from November 3, 2020 to February 24, 2021 (97 participants)

### Quantitative component

Online survey carried out by IRIS from October 23 to December 14, 2020 (740 organizational respondents)

### Documentary component

Consultation of reports and analyses produced by governmental sources, the ACA movement and the research community during the COVID-19 pandemic, up until July 2021

Translator's note: Citations that are followed by an asterisk were translated into English from French. The original citations can be found in the [French version of this report](#).

To learn more:



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