

Sustaining community-led action in recovery:

Learning lessons from the community response
to COVID-19 in Wales

Summary report

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1.0 Community-led response to the pandemic

In different ways, this pandemic has tested the resilience of our people, communities and systems, and our ability to withstand stress and challenge, adapt, and survive adverse circumstances (1). As well as disproportionately affecting already disadvantaged populations (2–5). Some of the pre-existing volunteering opportunities have decreased or paused during the pandemic, with a proportion of existing volunteers unable to continue volunteering in certain roles (e.g. due to social distancing measures introduced, travel restrictions, shielding and disruption of face-to-face activities) (6,7). This has brought challenges with continued provision for some voluntary organisations, for example, where the majority of volunteers belonged to the vulnerable categories (e.g. 70 years old or older) (6). Whilst it is important to acknowledge the implications this has had on continuity of those volunteers affected and the organisations relying on those, this has not been the primary focus of this report. This research has focused on the enablers and challenges of the spontaneous community-led action during the pandemic, and learning for the future.

Over the last few years, we have seen community-led action surge across Wales in response to the health and social consequences of the virus (8) and emergent needs (9). Citizens became more motivated and engaged in a collective response to needs in their communities and a desire to support the most vulnerable (10,11). People played a vital role in both helping those affected and helping official agencies (11,12) by becoming an integral (informal) part of the wider more formal response (system) to the pandemic; with communities themselves often being the most knowledgeable about their community's own needs and how to meet them, and with established connections and trust (12,13).

Evidence suggests that this spontaneous citizen response (11,12) has the potential to lead to longer-term citizen involvement in volunteering and community work, through new voluntary organisations being created and trust being built with those with power (10). Given the huge beneficial impact of the on-the-ground community response that we have seen in Wales, it is important to capture the learning from the response to COVID-19 to better understand the conditions and structural drivers that enable, support, and sustain community-led action and effectively integrate it to the wider complex system (14). This can help to build resilient communities throughout Wales, who are able to respond to on-going impact in recovery from the pandemic (both for whole communities and for the already disadvantaged) and to adapt to future crises (be that infectious disease, climate change, or economic challenges).

The aim of this study was to understand the role of community-led action during the pandemic. Specifically, to examine the enabling factors; the extent to which community-led action can contribute to addressing underlying determinants of inequalities in health; and how community-led action can be sustained and integrated into the health, third sector, and social support system. Additionally, the nature of community-led action makes it difficult to measure with traditional data sources, so we sought to explore user-generated, real-time sources of data that could improve our understanding of the levels of support and need present in the community.

Understanding how to build resilient communities to be able to respond and recover from future emergencies is important for population health, both in Wales and internationally. Improved understanding of community-led action across Wales, how these valuable assets are leveraged in local responses to the pandemic, and the extent to which this can contribute to health equity - would help policy makers understand how to better support less resilient communities and prepare for future adverse events.

2.0 Methodology

Throughout this study, we define **community-led action** as a range of unpaid and freely chosen **volunteering activities** undertaken by **informal volunteers** (e.g. as individuals or members of community groups) and **formal volunteers** (e.g. through national organisations), or a mixture of the two (see Section 2.0 in Technical report).

For this study we adopted a mixed-methods approach that included:

A quantitative survey across Wales on participation in community voluntary activities, and enablers and barriers. The bilingual survey was available online (and on request in telephone and paper form) from May to July 2021, targeted at formal and informal volunteers recruited via a multifaceted snowballing approach and achieving 2,075 eligible responses from across Wales. Given the time and resources available during the COVID-19 pandemic, it was not possible to carry out a representative population survey of community-led action in Wales.

Qualitative semi-structured interviews on community-led action and sustainability post pandemic amongst different stakeholders across the system (15). Interviewees included recipients of support (n=10), volunteers (n=24), and strategic leads from across health boards, third sector organisations, and local government (n=17). The qualitative study was undertaken in two communities in South Wales within the same Health Board and County Voluntary Council catchments, representing urban and rural environments, namely Blaenau Gwent and Monmouthshire, respectively. Monmouthshire is ranked as a relatively affluent area according to the Welsh Index of Multiple Deprivation (WIMD), with none of its lower layer super output areas (LSOAs) in the most deprived 10% and only 19.6% (or 11 areas) in the most deprived 50% in Wales (16). However, this does not mean that there are not currently any very deprived areas within Monmouthshire, as there exist pockets of masked or hidden deprivation (16–18).

Sentiment analysis of open and unstructured data to explore the potential of using social media data to identify levels of needs and levels of population wellbeing in real-time. We collected and analysed Twitter data in 2020 to investigate whether unstructured data could provide insights into population wellbeing at higher time resolution than annual surveys and whether the proportion of individuals tweeting in each area is aligned with digital exclusion in those areas. Secondly, we explored whether data from Twitter can represent a valuable proxy of population mood and wellbeing. Recognising the importance of digital exclusion, this analysis was to supplement other data sources each providing a new angle on the central research question, and taken together building up a rich picture of the challenges communities face and their response.

3.0 Key messages

By bringing together the findings from the cross-sectional survey, alongside in-depth qualitative interviews in two areas of Wales (see Section 3.0 in Technical report), we provide an overview of the conditions which enabled community-led response in Wales during the pandemic (Section 3.1) and an evidence-informed set of guiding principles for enabling and sustaining informal volunteering and community-led action in future pandemics (Section 3.2).

3.1 Conditions enabling community-led action in Wales

The thematic analysis of the qualitative interviews identified three key elements to enable and sustain community-led action in Wales. These were: (1) understanding community assets and place factors, (2) integration of community-led action into the wider system, and (3) enabling the conditions that drive health equity.

1. Understanding community assets and place factors

(see Section 4.1 in Technical report)

A sustainable approach to supporting community-led action and effectively reducing health inequalities needs to consider place not just people (volunteers), in order to understand fully the differences in levels of need and support within different communities.

Place was a central theme throughout the interviews when exploring differences in community-led action during the pandemic (see Section 4.1 in Technical report). The reference to **place in this context was reflective of the given characteristics of individuals who live there (e.g. their health status, socio-demographics, social capital) and the characteristics of the particular area (e.g. geography, existing assets and resources (capitals)), and how those two levels interact, attributing to differences in health** (19,20). We found that place is particularly important to understanding of the levels of need for support within our communities and potential causes of widening health inequalities during and in recovery from the pandemic. Need during the pandemic reflected underlying health and wellbeing of the population (e.g. aging or clinically vulnerable population), wider determinants of health (e.g. existing social inequalities), and psychosocial factors (e.g. isolation, social support, and level of control). Additionally, we found that place was an important factor in determining how community-led action was coordinated during the pandemic, accounting for varied approaches across areas; and availability of leadership, expertise, and levers for action.

During the pandemic, we found that **hyper-local community-led action** played an important role identifying and addressing emerging needs with targeted support. This is also likely to play an equally important role in recovery from the pandemic as potential new place-based local issues and challenges arise (e.g. impact on mental health, recession).

Drawing on community assets and resources, social connections, and local knowledge was instrumental in community-led action; however, strong social bonds and trust were particularly important in areas more affected by health and social inequalities.

We found that the ability of the community to **draw on existing community assets and resources, and harness local human capital** (e.g. skills, resources of individual members) was instrumental in the local response. Our findings showed that this was visibly reflected in the speed of set up, coordination, and capacity of the groups to continue adapting, including setting up systems for managing informal volunteers, requests, and delivery of support activities.

Our participants highlighted the value of local delivery, **drawing on local social networks and connections, informed by local knowledge and people** (see Sections 3.2.1 and 3.2.3 in Technical report). We also found that more disadvantaged communities were able to have a strong community-led response in the absence of assets and resources, as often their **social capital was high, with closely-knit communities and strong social bonds and trust**. However, greater support from external organisations may be needed to access resources.



Anchor organisations embedded within communities help to harness assets and strengthen community response by acting as local hubs.

We found that communities that were able to coordinate their response at pace did so thanks to their ability to draw on existing resources within the community. For example, **anchor organisations** embedded in the community (e.g. Churches, youth groups) that were able to act as hubs for coordination of response, but also the local businesses that were able to respond to community need and offer support. In other examples, we found that areas with prior experience responding to crises (e.g. flooding) were able to draw on these recent experiences and their built up resilience when responding to the pandemic.

You need a strong community so that you are ready for something like this happening, and I think the fact that the village hall here has been very strong and very active meant that we were able to do it. And I think that side of communities sometimes gets forgotten or you know over-looked, just how much that community cohesion matters. (Volunteer, Monmouthshire)

We're very good in our local borough at responding to a crisis. The pandemic was on a massive scale but you would get that level of involvement at a local crisis as well; if your local school flooded, you would have the community there in a heartbeat to do whatever they needed to do to save that school. That is something that is traditional in our community. We just saw it on a very much larger scale with the pandemic. (Strategic Lead, Blaenau Gwent)

2. Integration of community-led action into the wider system

(see Section 4.2 in Technical report)

Supportive infrastructure and effective working relationships between the public sector and community volunteering groups empowered and enabled local action – helping to facilitate a rapid response.

We found that communities with **pre-existing infrastructure** (i.e. an active and well-embedded anchor organisation) and **well-established working partnerships** with their local authority or other Public and third sector bodies, were better placed to effectively and co-productively build on these relationships at the start of the pandemic (see Section 4.2 in Technical report). We found that there was marked local variation in relationships across and between groups and organisations suggesting that a ‘one-size’ approach does not ‘fit all’, and stresses the importance of building on and strengthening localised relationships.

Additionally, we found that where well-established **community leadership infrastructure** was already in place within a local authority, action in partnership with the community was mobilised quickly compared to other areas, as existing links and networks could be built on effectively (e.g. taking an Asset Based Community Development (ABCD) approach).



A collaborative partnership approach that encourages active citizen engagement and participation helped to ensure solutions were coproduced with local communities to meet local needs.

A **community-partnership model** which hands over power to communities, ‘doing with’ rather than ‘doing to’ contributed to effective community-led action during the pandemic (see Section 3.4.2 in Technical report). We found that communities that delivered a well-coordinated response did so in partnership between local people and key local organisations - as equal partners - connecting and aligning local expertise, knowledge, and resources (see Section 3.2.3 in Technical report). Organisations achieved a more collaborative approach across the public and voluntary sector by:

- Maintaining relationships established during the pandemic
- Building on the community-partnership model (honouring equal partnership and the role of place)
- Harnessing the expertise public and third sector organisations can offer to community groups to support them in achieving their goals or identifying new ones (e.g. training, funding, governance, safeguarding)
- Offering pathways that support the flexibility around the structures and informal processes community-led action tend to prefer
- Enabling and supporting and developing community leadership
- Ensuring there are pathways for community-led action to be appropriately supported i.e. through coordinating support and linking to existing infrastructures, networks and resources (e.g. complex cases referrals).

In all areas, it was felt that strengthening relationships established during the pandemic between public sector, community groups and any intermediaries was key to successfully supporting communities and preventing ‘silo working’. Public bodies have a role in offering their expertise, without imposing formalised

systems on the community, and when support is required community groups need to understand who they need to reach out to and how. Additionally, creating an environment that is supportive of community-led action and to discourage dissipation of volunteerism and the social connections that was so successful during the pandemic as people return to 'normality' and morale and enthusiasm wanes, requires the role of public and other sectors to take on an enabling function (1,21,22).

I think we've seen an overwhelming response from the community, and it would be a shame if we, as public sector, do not continue that relationship. To continue to build on that and find out now what communities need to get them back up and thriving and working again, and how we help them to do that. (Strategic Lead, Monmouthshire)

3. Enabling the conditions that drive health equity

(see Section 4.3 in Technical report)

Policies and processes at every level of governance are needed to create supportive conditions for community-led action to thrive, as well as enabling partnership working with other sectors to realise health equity and ensuring no one and no community is left behind.

We found that **policies and processes at organisational, local, and national level should empower and enable community-led action without restricting it**, ensuring that these policies do not inadvertently widen health and social inequalities and should also account for place-based differences (e.g. rural/urban areas) (see Section 4.3 in Technical report). For an effective community-partnership model, policies need to enable effective integration of community-led action into the wider health and social care system. While ensuring that pathways exist for support from formal services when needed, for example, support community groups with access to funding.

There's been an outpouring of the community, they stepped forward, they actually have some fantastic ideas, solutions, they feel a sense of ownership in their community at the moment and we developed some really solid relationships as public sector within the community in a different way than we ever have before. (Strategic Lead, Monmouthshire)

Levels of social participation, such as involvement in community-led action, is important for empowering local communities to be able to define the conditions that shape them and increase health equity.

We found that the pandemic empowered a wider range of people, reflecting they had a unique 'permission to act' and **get involved** in their local community, and that this action had a positive impact for the health and wellbeing of volunteers as well as for the community. People felt that they were able to help, had the time, were local, had skills and experience that could help others and wanted to improve things in their local communities. Making a difference to the health and wellbeing of others was paramount to driving people to want to volunteer during the pandemic, from across all deprivation quintiles. We found that social participation during the pandemic was driven by a desire to support those more vulnerable within their communities, and ensure that no one was left without support.

COVID-19 gave people the permission to ask for help and to act. There was a clear common purpose, which organisations, community groups and individuals alike shared, that's there. How do we recreate that purpose? (Strategic Lead, Monmouthshire)



Empowerment brings local communities together by providing a sense of ‘collective destiny and control’ that can increase health and health equity.

We found that a key enabler for community-led action was **empowerment of communities**; enabling communities of people to actively participate and be part of finding local solutions to local problems. We found that it is important to value local knowledge and experience; maximise the use of local community groups, networks and hubs; and move away from narratives of socio-economic disadvantage and towards greater acknowledgement of the strengths within communities. For example, more disadvantaged areas with strong local community cohesion and pre-existing social networks were able to draw on these strengths during the pandemic to support one another.

From my perspective on the demographic, there is quite high levels of poor mental health and quite high levels of other long-term health conditions as well, which possibly go back to the industrial past of the area. There is high levels of unemployment. Unfortunately that sort of presents the problems that Blaenau Gwent has, but underneath all of that are very strong communities that work together and help each other, that comes out of all of that.

(Strategic Lead, Blaenau Gwent)

3.2. Framework for enabling and sustaining informal volunteering and community-led action in pandemic response

We have brought together the insights from the communities’ experiences during the pandemic in Wales to inform a framework to enable and sustain informal volunteering and community-led action in response to future pandemics and societal shocks (see Table 1). These actions span across the pandemic response (i.e. preparedness, during the pandemic, and post - in recovery and beyond) (see Section 4.4 in Technical report).

In the sections below, we collate the evidence from our research underpinning each action.

Table 1. A framework for enabling and sustaining community-led action in pandemic response

Opportunities for action		
Preparedness 	1  Empower/enable volunteering	Identify organisations & infrastructure to manage and mobilise volunteers Provide guidance to support community-led action Develop an operating framework to support to enable rapid and responsive cross-sector coordination
	2  Mapping needs & assets	Identify at-risk populations Localised mapping of cross-sector support and identify gaps Ensure resources are inclusive Adapt the response to reach those digitally excluded
	3  Strengthen networks & partnerships	Build on existing networks or establish new ones Integrate specialist support for responding to those with complex needs
	4  Reduce barriers to community action	Lower barriers to entry to volunteering Enable unstructured volunteering opportunities Enabling support for accessing funding for community-led groups
During 	5  Cross-sectorial and localised integration	Adopt an integrated approach to support provision, centred around localised coordination
	6  Understand boundaries of volunteering responsibilities, and support	Recognise limits and boundaries of voluntary roles Step in, where support should be provided by core services
	7  Enabling governance	Enabling support for community groups
Recovery and beyond 	8  Sustaining action	Harness and build further the cross-sectorial relationships Create supportive opportunities for continued involvement Avoid formalising the informal Create flexible volunteering opportunities Continue conversation about next steps and plans, as we enter recovery Provide guidance to community groups at key transition points Identify on-going need for support and longer-term planning
	9  Community investment	Invest locally to enable continuity of anchor institutions and community hubs Enable community groups to access funding to continue activities Consider a longer-term strategic vision for community-led action in Wales Support community initiatives that paused activities during the pandemic to re-adapt at re-opening stage
	10  Acknowledgment	Acknowledge the value and contribution of community-led action



Preparedness

1



Empower/enable volunteering

Identify organisations & infrastructure to manage and mobilise volunteers

Provide guidance to support community-led action

Develop an operating framework to support to enable rapid and responsive cross-sector coordination

Identify organisations & infrastructure to manage and mobilise volunteers

Identify organisations best placed to rapidly engage/empower/mobilise volunteers to respond, and enable supportive infrastructure to match volunteering capacity against demand (see Sections 3.3.2, 3.4.3 in Technical report)

Our findings showed that public and third sector organisations identified a **challenge matching the population need for support with the sudden upsurge in volunteering capacity / of volunteers**. This resulted from organisations lacking capacity and infrastructure to rapidly process, place or develop new roles for the large number of volunteers coming forward to support the response. From the volunteers' perspective, this mismatch was experienced as a lack of pace around harnessing the enthusiasm of volunteers, which quickly led to either loss of interest, or to picking up more informal activities locally instead. Participants highlighted that this challenge was addressed by bringing in specialist agencies that were able to help manage volunteers' recruitment, coordination and offered volunteers on-going support. Having the appropriate infrastructure for coordination, management, suitable placement, and support of volunteers during times when surges and demands are high, is critical to enable a well-coordinated response that engages and mobilises volunteers, meets demands and leads to sustaining volunteers beyond the emergency phase.

Initially there was a glut of volunteers but nothing going on that we could place them in. And we couldn't place them just anywhere, because of the way we work with volunteers, we can only place them with an organisation that's got the proper policies in place, safeguarding, volunteering policies, and all that kind of thing. So, there was a little disjoint in the early stages. (Strategic Lead, Blaenau Gwent)

Provide guidance to support community-led action

Develop and provide 'best practice' guidance that community groups can use to support the development and sustainability of community-led action, covering governance, safeguarding, training, DBS checks, access to funding, useful contacts (e.g. local authority and county voluntary councils (CVCs), and community and partnership teams) (see Section 3.4.1 in Technical report)

Responses from the informal volunteers in our study highlighted the need to gather 'lessons learnt' from the experience of the community-led groups during the pandemic, which could help inform a development of a best practice guidance for community groups for future emergencies. To empower the community to step up, this should include guidance on setting up a community-led group in emergency (structure and coordination), list of key skillsets, tools and resources required to support efficient coordination (e.g. templates, forms, money handling, referrals, case management systems). Alongside, outlining best practice for linking-in with public or third sector organisations to access support with more formal processes such as governance, safeguarding/DBS checks, training, and funding.

A contact and some kind of guidance notes on setting up a group would be useful. If you just had a manual that said, this is what worked-that would've got us to the kind of 90% mark before we started, I think. A lot of it was desperately trying to figure out how to solve problems, but they've been solved now. (Volunteer, Monmouthshire)

Develop an operating framework to support to enable rapid and responsive cross-sector coordination

Coproduce an operating framework to enable rapid and responsive working across public, community-led action and third sectors addressing localised needs (see Section 3.4.3 in Technical report)

When participants reflected on the context at the start of the pandemic, community group volunteers felt there was a lack of presence of a national coordinator or an overarching body at the start, feeling there was no infrastructure: '*no one to lean on*' (Volunteer, Monmouthshire), which led to most communities stepping into action. This was often described as '*frantically throwing things together*' in the first couple of weeks it took to set up and reflected upon as: '*improvising out of necessity not out of choice*' (Volunteer, Monmouthshire).

Participants reflected that having an operating framework which clearly outlined a pathway for cross-sectorial working would have been welcomed, alongside enabling to coordinate response and services to adapt quickly and flexibly to the changing context.

2



Mapping needs & assets

Identify at-risk populations

Localised mapping of cross-sector support and identify gaps

Ensure resources are inclusive

Adapt the response to reach those digitally excluded

Identify at-risk populations

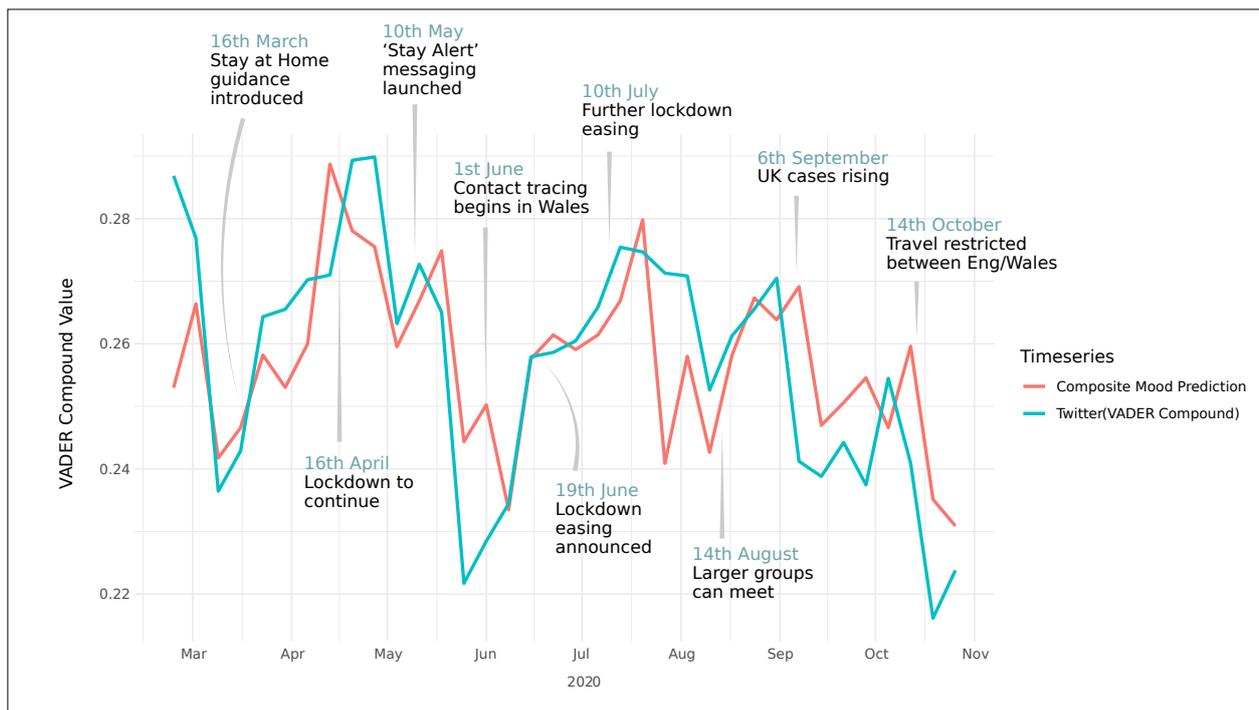
Utilise existing data and local insights to identify existing and newly emerging populations who may be disproportionately affected by the pandemic and its control measures, to provide more targeted support (see Sections 3.3.1, 3.5 in Technical report)

Understanding the characteristics of both newly vulnerable groups and the already disadvantaged whose needs are likely to be exacerbated further by the pandemic and public health measures introduced, is critical to ensure no one is left behind. Participants in our study reflected how newly vulnerable groups started to emerge during the pandemic, particularly individuals who experienced a sudden overnight change in their employment status, as well as low-income households, who often did not have financial buffers. Participants also reflected on the complexity of the issues individuals, whose needs became exacerbated by the pandemic were presenting with (e.g. complex health and social care needs), which were previously unknown to services. We found that to reach those most vulnerable, local authorities, public and third sector organisations worked together with the community groups to **pro-actively reach out** to all individuals listed on the shielded list to **identify what support was needed** and to **raise awareness of what was available**. Many volunteers received training to be able to **notice signs** of recipients requiring additional support when delivering shopping or prescriptions. Our findings highlight the importance of community-led action in identifying early emerging needs, alongside those likely to become exacerbated by the pandemic.

Identifying need-using new (unstructured) data to provide real-time insights

As part of this study, we also tested the potential of utilising unstructured data sources (e.g. Twitter data) to identify real-time insights into levels of needs and support in communities coping with the pandemic (see Section 3.5 in Technical report). Our results showed that compound sentiment derived from textual data from Twitter is a beneficial single measure that can help provide a 'signal' of population wellbeing or distress at a single point in time, across geographical areas. When Twitter data was compared to the *Britain's Mood Measured Weekly* survey (23), Twitter provided signals of mood up to three weeks before this was reported by the population (see Figure 1). Our findings indicate that unstructured data (such as Twitter) can be a useful tool to provide insights in real-time to understand what is happening in the communities responding to the pandemic and help identify needs early on.

Figure 1: Twitter sentiment (measured using VADER compound) in the Welsh population and the derived mood composite from 'Britain's Mood Measured Weekly' collected by YouGov for the Welsh population mapped weekly from March to October 2020. The graph is annotated with significant dates from the pandemic in Wales.



Localised mapping of cross-sector support and identify gaps

Pro-actively carry out a localised mapping exercise across the system (public and third sector, community level) to understand existing support across localities, geographical coverage, and identify any gaps or duplications in provision (see Sections 3.3.1, 4.0 in Technical report)

We found, that in order to provide an integrated response it was essential that local public and third sector teams rapidly **mapped** what services and support different local groups and organisations were providing and their geographical coverage, as well as identifying gaps or duplication in support provision. This included lists of shops, local businesses and services that continued operating through the pandemic, and local community groups that stepped up to support. Participants reflected how this approach strengthened the links between organisations and groups; ensuring public and third sector services could signpost or refer individuals to appropriate local support.

At first, it was making sure that we had the mapping of the services that we knew were available, be it from charities, third-sector groups or community groups who were providing and continuing to provide their service or knew ad hoc support from other community groups, who just decided to start up a volunteer service or groceries and local food shops, who were happy to take telephone orders and do deliveries — that sort of thing. Making sure that we had as much information as possible about what was happening in the community, so that those locality response team members could signpost individuals towards that support. (Strategic lead, Blaenau Gwent)

Ensure resources are inclusive

Coproduce resources, guidance, support and information channels to ensure inclusivity (e.g. groups with registered disabilities e.g. visual impairment, hearing difficulty) (see Section 3.3.1 in Technical report)

Our findings highlighted that more attention is required to ensure resources are inclusive. Participants stressed the need to consider the **needs and support** provided for **groups with registered disabilities** (e.g. visual impairment, hearing difficulty), alongside improving accessibility of information; and providing tailored guidance to support, especially around adjusting to control measures put in place in response to the virus (e.g. lockdowns, self-isolation). For example, participants reported the need for increased support for individuals with visual impairments in public environments (e.g. location of one-way systems in supermarkets and GP surgeries). Those with hearing impairment and hearing loss described facing particular difficulties communicating with others (e.g. face masks and lip reading, move from face-to-face services). Participants highlighted that it is necessary to consider inclusivity assessments and coproduce resources tailored to groups who may be already disadvantaged.

Adapt the response to reach those digitally excluded

Ensure resources, guidance, support and information channels are accessible to those who may be digitally excluded (e.g. provide information and pathways to support in multiple formats (e.g. telephone, leaflets, newsletters)) (see Section 3.2.5 in Technical report)

Our study found that shifting to digital platforms was critical to continue providing services, coordinating response, and expanding volunteering opportunities during the pandemic. However, participants also highlighted associated concerns for the **digitally excluded**, who were more likely to be living in deprived areas. They faced reduced access to services when delivered online; and barriers accessing information, working from home or home schooling.

We found that during the pandemic many efforts were made to support **digitally excluded populations to get online**. For example, through partnerships with organisations like Age Cymru, Digital Communities Wales, or local schools identifying digitally excluded pupils. Community groups and organisations also adapted to **reach those digitally excluded**, including setting up dedicated telephone helplines, door-to-door leafleting of information, newsletters, or word of mouth to raise awareness of support available and expand support pathways.

It was very, very difficult to find a way of communicating information to those people, also around things like where they could access support because everything seemed to be happening through Facebook and social media at one stage. (Volunteer, Blaenau Gwent)

Participants reflected that the need to support digital inclusion in Wales is ongoing. This needs a focus on digital literacy training, access to grants to buy basic IT equipment, creating digital buddies, and enabling local libraries to stock IT equipment (e.g. tablets, dongles, WIFI devices) to be loaned out. Whilst the efforts to level-up continues, it is also important that information and support continues to be provided via multiple formats to ensure accessibility.

3



Strengthen networks & partnerships

Build on existing networks or establish new ones

Integrate specialist support for responding to those with complex needs

Build on existing networks or establish new ones

Build on existing networks or establish new ones to enable a well-coordinated response, expand reach and capacity to support (see Section 3.3.3 in Technical report)

We found that to reach the vulnerable, it was important to build on networks that already existed between community groups and local authorities or third sector organisations, alongside creating new partnerships. Participants reflected how this enabled them to adopt a well-coordinated, localised approach to support provision. Our findings also showed that local community groups which worked closely with the public and third sector, played a vital role in **expanding reach and capacity of support**, drawing on **local knowledge and networks**; operating from a position **of trust, greater agility, with the ability to act quickly and flexibly adapt** to changing priorities. Public and third sector bodies in return provided an **important infrastructure for community groups**, through expertise in recruitment and management, safeguarding and risk assessment, access to funding and training.

Integrate specialist support for responding to those with complex needs

Provide support to community groups and volunteers to help manage complex cases and link with specialist services, where this is beyond their capacity (see Sections 3.2.3, 3.4.2 in Technical report)

Participants reflected that local authorities are well-placed to offer support to on-the-ground community-led volunteers, for example, when dealing with complex cases that are beyond informal volunteers' capacity. We found that during the pandemic response, this included expert advice/assessment of needs, volunteer support around managing the relationship and expectation of the recipients (establishing healthy boundaries), and assisting with linking up with appropriate support services if concerns around additional needs were identified. Cross-sectorial working and integration of services was essential to ensure volunteers and recipients were appropriately supported.

We were allowed to read across any system to see if there were any particular vulnerabilities for individuals, either from a volunteering perspective where we wouldn't send a volunteer, but actually we would make sure that that person was supported by a paid member of staff, and we did do quite a bit of that also just to make sure that we didn't put our volunteers into any vulnerable situation too. (Strategic Lead, Blaenau Gwent)

4



Reduce barriers to community action

Lower barriers to entry to volunteering

Enable unstructured volunteering opportunities

Enabling support for accessing funding for community-led groups

Lower barriers to entry to volunteering

Ensure lower barriers to entry to volunteering, in order to increase pace and turnaround (see Sections 3.4.1, 3.4.3 in Technical report)

In our study's exploration of barriers and challenges that were experienced at the start of the pandemic, participants spoke about how creating lower barriers to entry (e.g. minimising administrative form filling), alongside increased capacity to process registration and placement of volunteers at the start, can help increase pace and turnaround for how quickly volunteers can get involved. Participants felt this could help ensure that the enthusiasm, interest and availability of the volunteers is harnessed timely, without losing the momentum.

Enable unstructured volunteering opportunities

Create opportunities that also enable unstructured, infrequent, piece-meal volunteering (see Section 3.4.1 in Technical report)

Participants highlighted that greater flexibility around volunteering opportunities is needed; creating roles that would be more compatible with the lifestyles of working age populations. This includes offering more flexibility in levels of commitment and frequency of volunteering activity (e.g. a preference for infrequent, piece-meal volunteering).

Those sorts of invitations to volunteer for things always seem to be much more – they are very specific in what is required of the volunteer and often it’s quite a substantial commitment that is not really viable to sign up for, if you also have a job. I think one of the things that’s been quite nice about the type of volunteering that the group has encouraged, is that you can do a little bit of it, and you know when it suits you. (Volunteer, Monmouthshire)

Enabling support for accessing funding for community-led groups

Offer support to community-led groups with accessing funding to ensure community-led support provision can get off the ground (see Sections 3.4.1, 3.4.2 in Technical report)

Our findings highlighted the need to ensure that funding is accessible to informal and community-based groups, with help on how to access it. Some members of informal community groups used their own personal money to purchase items needed at the start of pandemic, included paying for leaflets and posters printing, card machines to enable recipients to pay for their shopping, purchasing yellow vests and ID cards for volunteers. Participants in the study reflected that in the future, it would be beneficial to set up an emergency start up fund that community groups could access, which could sit perhaps within the County Council.

If there had just been a couple of hundred pounds to get you started, just to pay for leaflets, to pay for card machines-that kind of thing at the start. I think that would have made it much easier. A lot of it was desperately trying to figure out how to solve problems, but they’ve been solved now. (Volunteer, Monmouthshire)



During the crisis

5	Cross-sectorial and localised integration	Adopt an integrated approach to support provision, centred around localised coordination
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Adopt an integrated approach to support provision, centred around localised coordination

Create pathways for integrated support provision, based on cross-sectorial partnership working (public and third sector, community groups), and localised coordination (see Section 3.2.3 in Technical report)

We found that adopting a localised approach to an integrated support provision was key to enable efficient coordination of support. Participants highlighted that **establishing multi-agency, cross-sectorial partnership working** between public bodies, third sector, local organisations and community groups was important for enabling well-coordinated, regional response. Local coordination was set by many local authorities through creating **locality-based response teams**, integrating local organisations, community leaders and community groups into their locality response pathways. Participants reflected upon how this way of working reduced silo working and identified gaps in provision, and harnessed local knowledge to enable a rapid response.

The local authority response to the pandemic was to set up community hubs. So, they used their redeployed staff or their shielding staff to run four hubs in those main towns. They gathered all the information on what was happening, what were the assets, who was helping in those towns, and they gathered that information to make the links between those provisions. So, everybody started to know each other outside their towns or the area that they provided services for.

(Strategic lead, Blaenau Gwent)

Participants reflected that community groups had the advantage of being able to mobilise quickly. This was seen as critical at the start of the pandemic where they provided essential support, addressing challenges and needs that were emerging locally (e.g. concerns for vulnerable family members, food deliveries, prescription pick up, providing benefits-related school meals) - giving official services time to set up adequate response systems. This localised understanding of emerging needs and ability to connect with the most vulnerable was a key strength in the community-led response (see Section 3.3.3 in Technical report).

6



Understand boundaries of volunteering responsibilities and support

Recognise limits and boundaries of voluntary roles

Step in, where support should be provided by core services

Recognise limits and boundaries of voluntary roles

Recognise the limits and boundaries of voluntary roles (informal and formal) (see Sections 3.4.1; 3.4.3 in Technical report)

Our findings showed that those coordinating volunteers must be aware of the challenges informal/ community volunteers face and ensure support is offered. Participants reflected how there were increasing demands placed on community volunteers by recipients of support as the pandemic progressed, which often went beyond the capability and role of the volunteer. Participants felt it was essential that any community-led mobilisation of support establishes appropriate processes for safeguarding of volunteers and recipients, and ensures these are workable (e.g. not overburdening the volunteers). Participants highlighted that public and third sector agencies were particularly well placed to support community-led groups with processes required

for safe recruitment and coordination of volunteers (e.g. DBS checks). Our findings showed that early input and quick turnaround is important, as it can help prevent community groups skipping on such safeguarding arrangements just out of necessity. We found that some of the models of working adopted during the pandemic included integration of official health and social care services working with the community, especially where **vulnerable individuals with more complex needs** were identified by volunteers. This was considered a valuable partnership, with the intention to integrate or continue with a similar model going forward post-pandemic.

Step-in, where support should be provided by core services

Avoid over-dependency on community-led groups, especially where support is complex and should be provided by core services (see Sections 3.4.1 and 3.4.3 in Technical report)

We found that where community-led groups had stepped-in to support and cover gaps in service provision, it was important to ensure that this did not lead to an over-reliance on these groups in the long-term, especially when beyond volunteers' capability and capacity. Participants highlighted that formal services should not be *'shifting the burden'*, and should minimise over-reliance on support for issues that should be the role of core services (which have the funding, infrastructure and expertise to deliver more appropriately).

7



Enabling governance

Enabling support for community groups

Enable governance support for community groups

Public and third sector organisation are well-positioned to offer support to community groups with governance (training, risk assessments, safe-guarding, DBS checks, child protection), (see Sections 3.4.1, 3.4.2 in Technical report)

Our findings showed that as part of the **community-partnership model**, there was a real value in the role of the public and third sector agencies supporting community-led action, with their expertise and access to resources. We found that this included supporting the community to achieve its goals (e.g. providing training, governance, safeguarding, risk assessments) and linking the community to resources (e.g. accessing funding, staff for expertise from specific organisations, complex case management). This This also expanded to helping with wider coordination of support and resources across the region, including helping to recruit, manage and support volunteers, bringing-in specialist agencies with infrastructure to support volunteer management, as well as using redeployed staff.

It's just making sure they've got the right guidance and boundaries and you know training and everything behind them at the same time. I think the role of volunteering is definitely more visible and hopefully it will just continue to do so as long as everybody is treated well and with respect and support. (Volunteer, Monmouthshire)



Recovery and beyond

8



Sustaining action

- Harness and build further the cross-sectorial relationships
- Create supportive opportunities for continued involvement
- Avoid formalising the informal
- Create flexible volunteering opportunities
- Continue conversation about next steps and plans, as we enter recovery
- Provide guidance to community groups at key transition points
- Identify on-going need for support and longer-term planning

Harness and build further the cross-sectorial relationships

Continue to invest time and strengthen the relationships established during the pandemic, in the long-term. (see Section 3.4.2 in Technical report)

Participants highlighted that going forward, it was important to establish pathways that can build further in the long-term on those relationships and trust established during the pandemic between the public and third sector and the community. Our research also highlighted that enabling and building on the community partnership model is key, where public and third sector bodies have an important role in being able to offer their expertise without imposing formalised systems on the community, and have pathways established to enable community groups to reach out when support is required.

Create supportive opportunities for continued involvement

Continue to harness the time, energy and desire of volunteers to help beyond recovery phase, through on-going conversations with the community groups and through creating supportive opportunities for community members to continue to stay involved (see Section 3.4.2 in Technical report)

Participants reflected that to enable continuity of volunteers, it was important to continue the conversation and gain a greater understanding of what motivates and what else matters to informal volunteers in their communities. Participants highlighted that creating an environment supportive of community-led action can encourage further participation and sustained involvement of community members (e.g. support with funding, access to community spaces). Other examples participants drew upon included opportunities for connecting community leaders with each other, or establishing and strengthening links with the wider public and third sector.

Our findings showed that it was important for the public sector to **invest time** and **effort** in continuing to work with volunteers **to maintain those relationships** built during the pandemic, continue building equal partnership with communities. Participants also highlighted that where communities continued to step up, there were often **pathways for them to be appropriately supported**, and **community leadership was further nurtured** and **developed** (see Section 3.4.1).

What we have got to do is invest the time, energy and effort in maintaining those relationships and really building that equal partnership with those individuals. So if there is something that they maybe got an hour a week that they want to do, how can we assist them to do that, if they need us to. (Strategic Lead, Monmouthshire)

Avoid formalising the informal

Any integration or efforts to sustain community-led action or informal volunteering need to maintain their sense of autonomy, ownership and avoid formalising the informal (see Section 3.4.1 in Technical report)

Our study found that community-driven grassroots action was accompanied by a strong sense of ownership; members felt proud at how they came together as a community and what they achieved. Whilst those volunteers/groups acknowledged the benefits gained from support they received from the local authority or third sector (particularly with formal processes), it was also highlighted that any integration and effort to sustain community-led action or informal volunteering needs **to maintain sense of autonomy, localised ownership** and **decision-making within the group**, and **avoiding formalising the informal**.

They want their autonomy; they've got together and created something and feel proud of what they've created. We definitely need the help and support from the Authorities, but what doesn't work is them coming in and telling us what to do. (Volunteer, Monmouthshire)

Create flexible volunteering opportunities

Engineer opportunities more compatible with the working lives of informal volunteers to enable continued involvement at recovery and post-recovery stage (see Section 3.4.1 in Technical report)

We found that for sustainable volunteerism to continue at the transition out of the pandemic, there is a need to consider **individual-level factors** to enable volunteers to continue. Such as careful consideration of expectations and commitments required; creating time-flexible opportunities that are more compatible with the lives of working age population; matching volunteers interests and availability (see Section 3.4.1).

Some suggestions for sustaining involvement also included creating regional or local platforms, which could list neighbourhood teams and local community teams that operate in the area – as many informal volunteers interested to continue volunteering preferred to do so locally and reach out to local teams.

Continue conversations about next steps and plans, as we enter recovery

Public sector to maintain on-going conversation with community groups about forecasts and plans as we enter recovery, and which services are reopening to ensure support for any remaining gaps in provision (see Section 3.4.1 in Technical report)

As we enter recovery, participants highlighted that there was a need for public and third sector agencies to continue an on-going dialogue with community groups about the recovery transition plans. For example, providing a road map and clarity on what services were re-opening and at what stage. Community group participants felt this would enable the groups to make informed decisions whether to scale back support or cease provision, ensuring those with on-going needs were able to continue receiving support or be referred to specialist services.

Participants identified it was important that the public and third sector **invest time** and **effort** in continuing to engage with the emergent community groups and volunteers **to maintain those relationships** built during the pandemic, and guide them with key decision-making at transitions to recovery, if they wish to continue to exist beyond the pandemic.

Provide guidance to community groups at key transition points

Support community groups at key transition points with decision-making around their continuity, identifying new purpose and desired structure (see Section 3.4.1 in Technical report)

We found that as the recovery period started, community groups faced key transition points as the demand for support was still high, but the volunteers started returning to work and thus reducing the capacity of the groups to deliver. Participants reflected that it was at this point that going forward, community-led groups faced questions of either scaling back support provision, or continuity through redefining their purpose.

We found that community groups varied in their levels of interest in continuing with their activities beyond the urgency of the pandemic. There were groups with: a) long-term vision; b) unsure of their purpose beyond the pandemic but saw the value in the community network that they set up; c) those happy to continue provision but just within their own community boundaries; and d) those that ceased to exist as soon as the emergency ends. Some community groups saw value in continuing their provision to meet wider local needs by applying for a charitable status. Our findings highlighted that at this point community groups would benefit from guidance, especially around support with establishing appropriate policies, identifying access to funding to continue and develop activities.

Identify ongoing needs for support and long-term planning

Identify long-term impacts and any on-going needs that may exist in the community, as we transition to recovery, and community groups wind down or cease to exist (see Section 3.3.1 in Technical report)

We found that as local community groups decreased activity or ceased completely; there was a need to ensure **on-going needs of those vulnerable continued to be supported**, alongside identifying longer-term needs post-pandemic. This included supporting elderly populations **who had been shielding** throughout the pandemic and **developed anxiety around re-engaging back** with society. Other examples of on-going needs that participants highlighted included continuous demand for shopping and prescription collection, even when restrictions eased, support for those with mobility or other complex issues, alongside needs of individuals with financial difficulties around rent arrears, debts, food and utilities payments. Going forward it is critical to **identify long-term impact** and **on-going support needs** of vulnerable groups, as we start the transition to recovery and community groups wind down or cease to exist.

Even though shielding has ended, a few people who were receiving shopping through the pandemic are now in a position where they feel that they are not able to walk around a supermarket because physically, they have degenerated so much from not doing any physical activity, that they feel they've not got the strength to be able to walk around their local supermarket. So that's something else that is sort of being looked at with social services about how we can support people to build their muscles back up and try and get back out into the community. (Strategic Lead, Blaenau Gwent)

9



Community investment

Invest locally to enable continuity of anchor institutions and community hubs

Enable community groups to access funding to continue activities

Consider a longer-term strategic vision for community-led action in Wales

Support community initiatives that paused activities during the pandemic to re-adapt at re-opening stage

Invest locally to enable continuity of anchor institutions and community hubs

Invest in communities to ensure continuity of key community hubs and anchor institutions, which were critical in facilitating localised action (see Section 3.4.2 in Technical report)

Participants highlighted the importance of continuing to invest to sustain key anchor organisations in the community during the pandemic, as they provided the physical infrastructure around which community response was centred (e.g. village halls, churches, institutes, charities, local businesses). We found that these organisations had the advantage of being well-embedded in the community and offered infrastructure that enabled rapid set up and coordination of response (e.g. using church premises to store and distribute food; using village hall committee's bank account and newsletter to set up a community-led group and distribute key information to residents). Participants highlighted that it is vital to recognise the critical role these embedded (or anchor) organisations play at facilitating local action, but also their important role in creating opportunities for bringing the community together post pandemic, especially in areas which are isolated or have little community activities present.

I think the village hall comes back into its own, really. That's being the hub of the village. I think that's where the sort of community heart is really here. (Strategic Lead, Blaenau Gwent)

Enable community groups to access funding to continue activities

Support community-led groups that wish to continue their existence, with accessing funding for continuous and/or new activities, as we enter recovery (see Section 3.4.2 in Technical report)

Participants reflected that in order to enable and empower communities to continue their activities and participation beyond the pandemic, further support with access to funding was required. This, as was reflected, would enable community groups to either continue some of their activities (if they saw an on-going need) or refocus priorities around other needs in their community.

Consider a longer-term strategic vision for community-led action in Wales

Consider the need for a longer-term strategic vision for volunteering and localised community-led action in Wales, including considerations on funding (see Section 3.4.2 in Technical report)

Participants in this study reflected that a more sustainable funding model for voluntary organisations in Wales was needed, with longer funding periods to ensure continuity of services and retention of staff. Our study also found that longer-term funding for key third sector organisations embedded within communities was welcomed, which were considered to be instrumental in helping to coordinate local action during the pandemic.

Support community initiatives that paused activities during the pandemic to re-adapt at re-opening stage

Support community groups that paused their activities during the pandemic to re-open again, assisting with re-adapting to the recovery context (e.g. how to re-open safely, carry out risk assessments, and identify funding to continue provision) (see Section 3.4.3 in Technical report)

Our findings highlighted it was important to recognise that as we entered recovery, community groups (and their volunteers) which existed pre-pandemic but paused their activities, needed support with guidance around re-opening and functioning in the new COVID-19 regulatory context. In order to re-engage them, participants reflected that the focus on supporting these groups on how to re-adapt and re-open safely was crucial. Participants reflected that additional support from public and third sector organisations could provide the reassurance for these groups to restart their provision and for the volunteers who had to shield or step back to re-engage.

10



Acknowledgment

Acknowledge the value and contribution of community-led action

Acknowledge the value and contribution of community-led action

Take action to recognise and acknowledge the value and contribution communities have created, locally and nationally (see Section 3.4.2 in Technical report)

Findings in this research highlighted that public and third sector agencies play a vital role in creating a supportive environment that recognises and nurtures the value community support brings at local, regional and national level. Participants reflected on how the public sector can support that, by for example, providing funding (e.g. Third Sector Emergency Fund), community spaces, connect community leaders, enable communities to recognise each others' milestones and be inspired by each other; and having a presence in the community — so that community knows where to come for support.

4.0 Conclusion

The pandemic was accompanied by rapid emergent community-led action to support the most vulnerable in local communities (6,24,25). Such emergency situations can exacerbate weaknesses in infrastructure and systems, and existing disparities; however they are also powerful catalysts for change and create opportunities to transform in recovery, and improve the capacity to prevent and withstand similar challenges in the future (27,28).

In this report, we have captured learning from a survey of volunteers across Wales, complemented by qualitative insights from volunteers, strategic leads and members of the public drawn into the community-led response in two areas of Wales during the pandemic. Given the research focused on two geographically distinct areas of Wales, the findings may not be representative of the experiences of the whole population, and all communities in Wales. However, we have drawn from the views from those directly involved in community-led action at the height of the COVID-19 pandemic, to inform a framework to enable and sustain community-led action to prepare for future crises and societal challenges.

In recovery from the pandemic, it will be important to reflect on the findings from this study alongside emerging evidence on community-led action and response, to better understand how to create an enabling environment for community-led action; empowering communities across Wales and increasing local volunteerism and social participation, and understanding how communities and all sectors can continue successful partnership-working.

This aligns with the recommendations from Welsh Parliament's Equality, Local Government and Communities Committee report Impact of COVID-19 on the Voluntary Sector (8); and actions by Welsh Government via the Third Sector Partnership Council and its COVID-19 Recovery Group to understand the role of volunteering in recovery from the pandemic (26). As well as Wales Council for Voluntary Action (WCVA) thinking on actions to build on community pandemic response and volunteering (7).

A focus on strengthening the resilience of our communities is reflected in the Well-being of Future Generations (Wales) Act (27), and the framework developed here with the input from across public and third sector leads and local communities (volunteers and recipients of support) has captured the learning from this unprecedented societal shock on how to sustain and harness community-led action in Wales, moving forwards.

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