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## How can Covid mutual aid groups be sustained over time? The UK experience

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## **Chapter 8: How can Covid mutual aid groups be sustained over time? The UK experience**

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### **Abstract**

Mutual aid and other community support groups have been an essential part of the public response to the Covid-19 pandemic. The pandemic and the community needs

associated with it – in particular for practical and financial support for **self-isolation** – extended for many months. Therefore, it is important to understand the factors that enable Covid mutual aid groups to be sustained over time, particularly when initial community solidarity declines. As well as the **stressors** that can arise from volunteering during a pandemic, participants could gain a sense of achievement from acting in line with their values, which contributed to **wellbeing**. Organisers of Covid mutual aid groups indicated that they used various **strategies to keep volunteers involved** like fostering a culture of care, holding social events, building a **sense of group belonging**, flexible leadership structure, and regular communication. Participation in Covid mutual aid groups also motivated volunteers to continue and led to **empowerment**, skills development, and a sense of community cohesion. Based on these findings, we provide a set of recommendations on how to facilitate the continued activities of mutual aid groups in response to Covid and beyond.

## **Introduction**

There was a sharp rise in informal social support activities in local communities in the UK during the Covid-19 pandemic in 2020-2021. One survey, in May 2020, found that 10 million people in the UK were involved in volunteering in response to the pandemic (Legal & General, 2020). Similarly, the World Happiness Report (Helliwell et al., 2022) noted that donations, volunteering and helping strangers all showed increases in both 2020 and 2021. Also, the recent Kindness Test survey of over 60,000 people worldwide found that two thirds of respondents thought that the pandemic had made people kinder (Ingle, 2022). Yet a closer look at trends over time suggest a more complex picture, in which the initial rise in community support and general neighbourliness waned from the high point of Spring 2020 (Borkowska & Laurence, 2020; Lalot et al., 2021; Smith et al., 2020).

The trajectory of Covid mutual aid and similar community support groups in the UK can be seen as an expression of this overall rise and subsequent decline in informal support provision. In the first few weeks of March 2020, tens of thousands of people got involved in such groups (Booth, 2020), with over 4000 groups being set up in the first few months (Shabi, 2021). However, many Covid community support groups

found it hard to sustain the morale and enthusiasm of volunteers<sup>1</sup> over time, and participation declined once 'lockdown' restrictions started to ease (Tiratelli, 2020). For example, our analysis found that online activity in Covid-related Facebook mutual aid groups dropped by as much as 75% by June from the high point of March 2020 (Ntontis et al., 2022).

This pattern of public responses – a sharp increase in informal support behaviours, lasting a few months, and then a decline – is one commonly observed following disasters (Quarantelli, 1999).<sup>2</sup> However, needs for support remain strong even after the initial impact of the extreme event, and may continue long into the 'recovery' period (Kaniasty & Norris, 1999). For example, 15 months after a large flooding incident in York, UK, Ntontis et al. (2020) found that for many residents of the flood-affected area, the community group and associated support that was active in the early stages of the incident had long declined. Yet this period is precisely the time when those affected by flooding required practical and emotional support as they struggle with claiming insurance and rebuilding their homes (e.g., Mulchandani et al., 2019).

In the case of the Covid pandemic, from April 2020, the UK Government provided a food delivery service, run by volunteers, for the most vulnerable (i.e., those shielding) (Gov.uk, 2021). The UK Government also introduced a £500 self-isolation grant for those on low incomes, in September 2020. This was later enhanced by a discretionary fund plus a medicine delivery service (Reicher et al., 2021). However, £500 is less than the minimum wage, only about one in eight of the workforces were eligible (Reicher et al., 2021), and two thirds applying for self-isolation funds were turned down (Butcher & Cowling, 2021).

Therefore, in common with many other countries (Patel et al., 2021), the UK did not offer 'wrap-around' support from the state for those having to self-isolate or shield.

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<sup>1</sup> The word 'volunteer' can mean quite different things within the context of mutual aid. Some groups resist the term as it implies a relationship of charity rather than solidarity. For other groups, however, it captures the fact that some participants see themselves as different from the group organisers. In this chapter, for convenience, we will use the term 'volunteer' interchangeably with 'group member'.

<sup>2</sup> The Covid pandemic can be considered a kind of disaster, despite being more dispersed in time and space than earthquakes, fires and so on, as here too there has been a collective threat of death and a requirement for urgent response.

This meant that people relied on their family, friends, neighbours or the wider community for help with many of their needs, especially shopping. Covid mutual aid and similar community support groups<sup>3</sup> responded to these needs, but also provided support in other ways to enable people to cope with the pandemic, including fundraising, providing information, dog-walking, mental health support, and collecting prescriptions (Curtin et al., 2021; Mao et al., 2021b). Not only this, but through their activities and new connections with their neighbours, many Covid mutual aid groups became aware of, and sought to respond to, other community needs beyond Covid, including among disadvantaged groups such as refugees and those suffering food poverty. Moreover, the first Covid wave and lockdown (in Spring 2020) was followed by further waves, again leading to high levels of self-isolation. Thus, as with other disasters, although the initial outpouring of support had declined following the first Covid wave, there were still many needs in the community not being met by the formal response. In other words, there was a continued need for mutual aid groups or similar support mechanisms.

### **Researching How Covid Mutual Aid Groups Can Be Sustained**

The findings reported in this chapter are based on a programme of research that combined multiple methodologies, sources, and datasets to address the question of how Covid mutual aid groups can be sustained. First, a rapid review of existing research evidence, carried out in October 2020, enabled us to summarise existing knowledge on the broad area of public volunteering during the pandemic (Mao et al., 2021b). Second, to establish with primary data not only the rise but also the decline of mutual aid group activity that commentators had noted (e.g., Tiratelli, 2020), we analysed social media activity in a large sample of UK mutual aid groups (Ntontis et al., 2021). This analysis established that requests for support declined in a similar way to offers of support and that there was only minimal evidence of an uptick when the second pandemic wave occurred in Autumn 2020. Next, to explore the experiences of Covid mutual aid group participants, and in particular the extent to which participation could provide wellbeing benefits, we carried out an interview

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<sup>3</sup> While a large number of groups called themselves 'mutual aid' and looked to that tradition of organising for their principles, others were already existing community support groups that repurposed, or new informal groups that didn't call themselves 'mutual aid' (Mao et al., 2021b).

study with 11 volunteers in a mutual aid group organised by ACORN, a community union and anti-poverty campaigning organisation (Mao et al., 2021a). To understand Covid mutual aid group organisers' perspectives on the factors that helped sustain their groups, we interviewed 32 of them from different parts of the UK about the resources and support they needed, their strategies for retaining volunteers, and some of the experiences they felt motivated people to continue to participate (Fernandes-Jesus et al., 2021). Finally, we carried out a two-wave questionnaire survey of 600 mutual aid participants to test the links between the various strategies, experiences, and continued involvement.

The question of how Covid mutual aid groups can be sustained over time is not simply one for academic research, as it is a profoundly practical question. Rather than focusing on cognitive predictors of participation (as is common in research on collective action), we were principally concerned with the actions of groups and their organisers to consciously create the conditions for those 'predictors' – that is, we focus on organisers' conscious *strategies* (cf. Tekin & Drury, 2021). Our programme of research was therefore more than just data-gathering by academics coming from the outside. It aimed to be participatory and to have impact by assisting mutual aid groups in the Covid response. The research designs and analysis were based on collaboration with an advisory group of Covid mutual aid group organisers; and findings have been shared and discussed in dialogue events with Covid mutual aid group participants and others in the voluntary sector where there has been common learning on 'what works' in sustaining mutual aid groups over time.

We summarise the research findings in three sections. First, an obvious starting point for sustaining mutual aid groups is material support – or *scaffolding* – for those groups. Second, we consider how volunteers *experience* participating in the group, and finally we discuss what the organisers can do to *facilitate that (positive) group experience* (and mitigate negative experiences).

### **Group Scaffolding**

Participants in UK Covid mutual aid and other Covid community support groups were motivated by many of the psychological factors that have been found to predict participation in volunteering and collective action, including community identification (Tekin et al., 2021; Wakefield et al., 2022), identification with the role of volunteer

(Wakefield et al., 2022), allyship (Tekin et al., 2021), compassion for local people (Abrams et al., 2020), sense of community responsibility (Toubøl et al., 2022), and sense of injustice (Mao et al., 2021a).

However, while many people in the community might have these motivations, not everyone will be able to act upon them. Covid mutual aid group organisers we spoke to stressed that the fundamental basis of a group able to provide support to others during the pandemic was the material and practical support the group itself received (Fernandes-Jesus et al., 2021). Thus, the coordinators we spoke to emphasised the need for donations (both financial and food), resources such as transport loaned to them from other organisations, computing facilities and equipment, and meeting and storage locations.

Relationships with other organisations were often crucial to getting these material resources (Fernandes-Jesus et al., 2021). Mutual aid groups were often not in a position to apply for grant funding directly, for example, and relied on their relationship with registered charities and other organisations who were able to do so. Similarly, local authorities were able to help Covid mutual aid groups with funding and with space; and in some cases but not others this support was indeed provided. Organisers saw relationships of trust both with the local community and with other organisations as fundamental (Fernandes-Jesus et al., 2021). In line with this point, our survey of participants found that the alliances their group had with other groups were a significant predictor of intentions to participate in the future, particularly for those participants with little previous community participation experience.

Discussion of scaffolding and relationships with other organisations highlighted some tensions as well as needs among Covid mutual aid groups. Some organisers suggested that people in their role should receive a salary: *'I think it's more sustainable for the organisation to have a full-time employee with that as their job, they're paid for it, and they can look over, they can monitor what's going on in the organisation.'* (Interviewee, East Dunbartonshire). In addition, some groups discussed registering as charities (in order to apply for grants) or other forms of professionalisation and formal organisation. Yet such developments threatened their identity as independent and the 'grassroots' nature of their organisation that was the key to their good relationship with local people (Fernandes-Jesus et al., 2021; Mao et al., 2021a).

Coordinators also referred to volunteers as a basic resource too, and highlighted the need for volunteers with particular skills such as experience in public health and social services; experience in community organising and project management; IT and digital skills; leadership and communication skills (Fernandes-Jesus, 2021). Attracting and retaining such volunteers was a function of those participants having continued motivations or positive experiences from being in the group.

### **Group Experiences**

Our interviews with participants indicated that volunteering in mutual aid groups could be stressful and distressing at times (Mao et al., 2021a). Volunteers reported discomfort when witnessing the difficult life situations of those they were helping. Going to the homes of those who were isolated, disadvantaged or suffering from racism, among participants who often came from a more middle-class background, created a feeling of intruding and being part of the privileged group. In addition, the risk of spreading infection – both to self and to vulnerable people – created stress for volunteers, who were aware that a mistake could be life-threatening. In addition, the organisers we interviewed reported that the activity could be extremely tiring and that there was a risk of burnout (Fernandes-Jesus et al., 2021).

Yet participating in Covid mutual aid groups is also associated with wellbeing (Bowe et al., 2021). Our interviews with volunteers explored a number of sources and mechanisms of such wellbeing (Mao et al., 2021a). First, interviewees reported that by participating in the Covid mutual aid group they felt good about themselves – they were ‘making a difference’, helping others, and acting in line with their values. Having such an impact felt emotionally positive. Some participants also reported an increased sense of engagement with life, suggesting that the mental health benefits of participating in the mutual aid group positively affected other areas of their life. These good feelings were reinforced by the positive feedback they received from the people they helped.

Bowe et al.’s (2021) survey of over 200 Covid community support participants suggests that two potential mechanisms of enhanced wellbeing are a greater sense of community identification and unity. In other words, participating in Covid community support groups could transform relationships and hence the sense of self based on those relationships. In our interviews with volunteers (Mao et al., 2021a),



some described new relationships with other volunteers and with the recipients of support. A new sense of camaraderie or shared group membership with a wider group of people provided them with expectations of social support. In line with Bowe et al.'s survey, some also described a greater sense of connection to their local community, a finding repeated in our interviews with coordinators (Fernandes-Jesus et al., 2021).

These new forms of social identification matter for wellbeing, since shared social identity is associated not only with expectations of social support – as above – but also with efficacy and related experiences (subjective control, empowerment), all of which are themselves predict wellbeing (Drury et al., 2015; Ntontis et al., 2020). Thus, some of our interviewees were explicit that participating in the mutual aid group made them feel less helpless, and gave them a greater sense of agency. In some cases, the activity created a sense of confidence and collective empowerment – including the capacity to challenge the injustices they witnessed (Mao et al., 2021a).

Our interviews with organisers similarly referred to experiences of efficacy as well as the development of new skills – including practical knowledge of community organising, how to deal with people in group settings, how to assume leadership roles, communication skills, and how to listen to people's needs (Fernandes-Jesus et al., 2021). These experiences were in turn associated with positive emotions of pride and joy as well as wellbeing.

The wellbeing benefits evidenced in our interviews with volunteers were not evenly spread. Looking closely at the different backgrounds and expectations of the participants, there appeared to be differences according to the extent to which participants came to the Covid mutual aid group as activists or not (Mao et al., 2021a). Those volunteers with a relatively apolitical identity were more likely to report a new connectedness or camaraderie. By contrast, those with a politicised collective identity (Simon & Klandermans, 2001) were more likely to express feelings of empowerment as a result of this identity: being in the group enabled them to realise their (political) values. Among these interviewees, their political values were realised in three main ways. First, participating in the group was a way to reclaim agency since the activity served to create a solution to what they perceived as the government's inadequate response to Covid. Second, participation not only

contributed to the Covid response, it was also a way to grow the community union ACORN and therefore challenge those in power more effectively in the future. Third, for participants the effectiveness of the mutual aid group contrasted with the 'transactional' (and ineffective) practices of existing society and therefore served as a kind of validation of their beliefs in the principles of mutual aid.

### **Facilitating Group Experiences**

For those organising Covid mutual aid groups, the task they face is not only 'external' (in this case supporting the community) but also 'internal' (sustaining the group in order to support the community). Here we summarise our findings on organisers' strategies to maintain volunteer participation (Fernandes-Jesus et al., 2021) – by trying to protect volunteers from negative experiences and to enhance the experiences thought to motivate continued involvement.

In several of their stated strategies, one aim of organisers was to enhance participants' sense of belonging in and identification with the Covid mutual aid group (cf. Wakefield et al., 2022), and several of them stated that their volunteers did indeed feel part of the group. One of the ways to achieve this responded to the stressors we mentioned earlier. Organisers talked about creating a culture of care and support. They developed guidelines to reduce risk of infection and they monitored workloads to ensure that volunteers were not overloaded. Similarly, our rapid review (Mao et al., 2021b) found that among the factors identified by groups as being important for successful retention of volunteers was not asking volunteers to engage in activities they were uncomfortable with (McCabe et al., 2020).

As part of this culture of care and support, most organisers we spoke to emphasised the role of regular communication within the group. Such communication involved not only informing volunteers, but also listening to their needs. Some of the groups held meetings specifically to share experiences and understand each other's needs.

Meetings and events where people in the Covid mutual aid group could socialise was another important way of getting volunteers to feel part of the group and thereby sustain their participation (cf. Ntontis et al., 2020). Where in-person meetings were not possible, groups organised online meetings.

Organisers said that the structure of the group was important in making people feel part of it and motivating continued involvement. While there was typically a division

between those who played an organising role and other participants (i.e., volunteers, many of whom would come and go), organisers referred to implementing 'horizontal' organisation (cf. Chevee, 2021) and shared informal leadership as a way of building a sense of inclusion. Thus, some organisers described the way their groups made decisions collectively, rather than a minority making all the decisions.

Our two-wave survey of volunteers was an opportunity to examine the effectiveness of some of the strategies described by organisers. We found that perceptions of a culture of group care were associated with later reports that there was good communication in the group, though good communication was not found to be a predictor of continued participation. Perceptions of a culture of care in the group also predicted subsequent sense of community responsibility; and sense of community responsibility predicted both subsequent wellbeing and intentions to participate in the future. Feeling supported by the group and sense of community responsibility predicted subsequent identification with the local community, which has been found by other research to be a predictor of Covid support group participation (Tekin et al., 2021; Wakefield et al., 2022).

The survey also found some differences between volunteers with previous experience of community participation or political activism and those without, which is likely to be important for those organisers trying to keep participants engaged. Thus, for those with previous community participation experience (but not other participants), attending socialising events predicted subsequent intentions to participate in the Covid mutual aid group and beyond. In addition, for those with previous community participation experience, their identification with the Covid mutual aid group was a predictor of subsequent amount of participation reported. For those with little experience of political activism, sense of community responsibility predicted both subsequent reported amount of participation and future intentions. By contrast, for those with previous experience of political activism, good communication in the group was a predictor of subsequent intentions of future participation.

### **Prospects For UK Mutual Aid Groups**

Two years after the start of the first 'lockdown', the UK government dropped almost all measures designed to counter the Covid pandemic, including the legal

requirement to self-isolate, relying just on the vaccination programme. In addition, very likely the increased availability of supermarket delivery slots solved the problem of shopping for most of those who were self-isolating. Mutual aid groups are now much less active and visible than in the early days of the pandemic. So does the question of how to sustain these groups still matter?

We would argue that sustaining the mutual aid groups that arose in the pandemic remains important, for a number of reasons. Many of the organisers we spoke to wanted to continue to respond to community needs beyond Covid (Fernandes-Jesus et al., 2021). Those groups that continued after the early waves of the pandemic extended their activities to other purposes in their local community, including sharing food, pooling DIY tools, measures to tackle unscrupulous landlords, managing a community garden (Shabi, 2021), and tackling homelessness (Lang, 2021). First, then, Covid (or even post-Covid) mutual aid groups are still responding to community needs, and in order to do that the groups themselves need to be maintained.

Second, the mutual aid groups that are still active face new challenges. Some have taken the decision to apply for charitable status so that they get access to funding (Power & Benton, 2021). Many others continue with their more informal status. Mutual aid groups cannot replace public services and it should be clear that the needs they are meeting represent a failure of the social safety-net the state should provide. Nevertheless, such groups do have a role complementing the work of local authorities, charities, and local infrastructure organisations. These organisations should develop relationships with mutual aid groups to support their activities (with expertise, funds and connections) – so long as this is in a way that doesn't undermine the groups' identity and appeal as informal, grassroots and independent (Power & Benton, 2021).

Relatedly, where Covid mutual aid groups have disbanded and formal volunteer organisations and local infrastructure organisations have stepped in to meet the residual local needs, there may be a new reservoir of people inspired by their experience of involvement in mutual aid groups – and who through the experience now identify as 'volunteers' or 'community activists' (Bowe et al., 2021) – who will need to be coordinated and offered volunteering opportunities (Scottish Government, 2022). Certainly, the mutual aid movement changed the volunteer demographic and introduced many new people to community activity (Mao et al., 2021b).

Finally, while the worst of the Covid pandemic may be over in the UK, at the time of writing (May 2022), Covid infection rates are still very high as are numbers of hospitalisations and deaths. The pandemic is not over, despite the UK government's messaging and the disappearance of Covid from the headlines. There are still people in need; and with the likelihood of new variants, there will continue to be needs for support in the foreseeable future.

## **Recommendations**

Our programme of research on and dialogue with Covid mutual aid groups suggests a number of recommendations for organisers seeking to sustain their groups and retain volunteers over time. First, groups need practical resources such as storage space, transport, and computing facilities. A salary for organisers would help many groups, but this and other financial support should come without interference in the group's autonomy and flexibility. As mutual aid groups often rely on other organisations, helping them to create new connections and relationships is important for sustaining them.

Second, as well as practical needs there are the psychological aspects. Organisers are often already employing the effective strategies we identified in the research. But becoming more aware of 'what works' and for who, and how it links to positive experiences in volunteers, will help organisers use their strategies more effectively. The most important strategies in our findings included building shared identities with volunteers; promoting a culture of group care; providing socialising events and meetings; open communication; and flexible or horizontal organisation.

Mutual aid groups were crucial in the response to Covid-19 in 2020 (Kaye & Tiratelli, 2020). While they were relatively novel in the UK in the Covid 19 pandemic, community participation more broadly is well known to be vital in strategies to combat disease outbreaks (Costello, 2020). Understanding how to support and sustain (Covid) mutual aid and similar groups will be a vital part of emergency response in the next crisis.

## **Appendix: Resources**

Our project website brings together a range resources for (Covid) mutual aid groups, including examples of community solidarity from five different Covid mutual aid groups; lessons from activists and social movements pre-Covid; our mutual aid

toolbox of tips compiled from the experiences of the organisers we spoke to; and a large collection of articles on Covid mutual aid groups in the UK and beyond:

<https://www.sussex.ac.uk/research/projects/groups-and-Covid/community-support-and-mutual-aid>

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