



Insights from social policy research on communities and COVID-19

In early September 2022, ComVoices brought together community researchers from its network to talk to government's policy officials about:

- the contribution of the community sector during the COVID pandemic, and
- how the relationship between government and the sector could learn from the lessons and precedents set over the last few years.

Key takeaways were that:

1. the Covid pandemic has shown that communities can lead themselves, if given the right tools and resources, and create strong relationships with those who advocate on their behalf;
2. the way community research is being done in Aotearoa is changing, which means policy making is changing; and
3. there is expertise throughout the community that means government can avoid large spends with consulting firms and go directly to community providers to get the best outcomes for our diverse communities.

Suggestions on how social policy can be representative of communities and practical for policy makers

Engage a Community Advisory Panel to advise Government, with an equal weighting to its advice as the existing Business Advisory Panel: The community and voluntary sector is across all political portfolios in the same way as the business sector but has no equivalent representation.

Value community data and stories: Get parliamentary librarians to compile questions for the community sector and use peak bodies for the sector to respond. ComVoices is a network of peak bodies who can help.

Resource the taonga, offer koha: Build community research funding into government budgets. Consultations cost community organisations and we need to be resourced to provide what is needed.

Decolonise data: Build feedback loops to the communities involved into funding grants. Find a way to channel information both ways so that all participants are valued and can see their effort is understood and makes a difference. Negotiate indicators and methodologies.

Acknowledge that public servants are also community members: Allow individual identities to come through in advice, where appropriate. Cultural change comes through integration of our whole selves.

Don't start from zero: Check with peak bodies as to what has already been done by the community and save money on hiring templated corporate research. ComVoices can help. If we are asked for advice that's already been given on an issue, we'll make this clear and will refer to relevant research.

SEMINAR OUTLINE

The seminar's first part began with a grounding in social policy research from a community perspective. This included an overview of the value and breadth of the community and voluntary sector and an explanation of how kaupapa Māori and community research differs from the research provided by large consultancies and academics and the integrity of access it can provide to the community. The second half of the seminar was a panel of NZ community and academic researchers who briefly outlined their COVID-relevant research for particular communities and themes. This was followed by a facilitated discussion about the suggested practical and applied policy response to the research.

The list of speakers was diverse and inspiring. They included: Dr Prudence Stone, Presbyterian Support New Zealand and current Chair of Comvoices; Michelle Kitney, Volunteering NZ; Dr Fiona Cram, Katoa Ltd; Janie Walker, Community Research; Dr Gauri Nandedkar, Building Better Homes Towns and Cities National Science Challenge; Jim Berry, Family Works Central; Warkina Tujuba, African Community Council Wellington; Shana Malio-Satele, South Seas Healthcare; Susan Rapley, Disability Rights Activist; Rochelle Stewart-Allen, Hui E! Community Aotearoa; Thalia Kehoe Rowden, Human Rights Measurement Initiative; Rachel Roberts, Inspiring Communities; and Dr Kate Prickett, Roy McKenzie Centre for the Study of Families.

This seminar was hosted by ComVoices, a network of 23 peak body organisations working nationally and regionally across the community and voluntary sector. ComVoices promotes the value of community and makes visible the concerns of our communities. Our mission is to ensure that there is a strong collaborative voice, ready to influence national policy and its decision makers, but capable of representing and promoting the concerns of our communities across the motu. Through information sharing, advocacy, and dialogue, Comvoices provides coordination to speak collectively on issues impacting communities and community providers.

What did the community and voluntary sector learn from COVID-19?

The common sense of urgency made incredible things possible. During the pandemic, community organisations, community-led initiatives and government agencies moved from the usual transactional time-framed business transaction into a more fluid and relational space. The community and voluntary sector worked with creativity, kindness, innovation, and speed. The collective experience of uncertainty and urgency brought its own benefits; funding opened up without as much paperwork and service specifications got looser. Trust was high between parties, which allowed community work to be nimble and more effective.

Whakawhanaungatanga and local mobilisation made the country's response to COVID-19 possible.

"You can't rush trust and you can't go cheap on methodology."

"Relationship comes before partnership"

"Equity happens through diverse delivery."

"Funders hold the pūtea, we hold the people."

"When communities received funding, we sought forgiveness THEN permission from the funder, this allowed our community to dictate what they needed, then go ahead and thrive."

"If you need to move fast, then both sides need to be allowed to break the rules, share the power, and trust each other, or at least put our trust in that things would go worse for our community if we weren't partnering together like this."

A crisis exacerbates inequity. The resilience of Aotearoa is in our hands.

"The move to a focus on the local is unstoppable. Siloed isolated funding creates siloed isolated groups. A community is a village and, when adequately resourced, it can provide everything its members need, with nobody isolated."

"If funders and communities partner effectively, this will lead to true transformational change."

"The disability community is a community, within every community. It touches every whānau. Disability culture can teach radical acceptance and give unique perspectives that can enrich policy. Accessibility benefits everyone."

"When home is the central method of control in a pandemic elimination strategy, it emphasises housing precarity, unaffordability, and homelessness."

"Māori are not homeless, Aotearoa is their home, so they are houseless. If housing is seen as an investment and wealth generator, we cannot use it as a solution to public health issues."

The voluntary workforce

The community and voluntary sector contributes significantly to the economy, with roughly 115,000 organisations with about 150,000 paid staff and well over one million volunteers. According to Hui E! Community Aotearoa's Pepa mā mō te whai pūtea ā-hapori / Community Funding White Paper, the sector contributed 2.8% of the nation's GDP, about \$8.1 billion.

We have one of the highest rates of volunteerism in the OECD. We offer up a taonga of our passion and belief. The number of volunteers may be dropping, but the number of voluntary hours remains the same. A considerable number of volunteers are retired. The combination of these factors means we are seeing a lot of burn-out in the sector, despite evidence that volunteerism is good for people's mental wellbeing.

Many community members do not have the wherewithal to meet new digital needs and are unable to adjust to new technologies imposed by lockdowns. Isolation as a result of ill-health or vaccination status is causing more polarisation.

It is not just in the digital area that we are seeing this increase in inequity. We are seeing bigger organisations becoming even better off than their smaller counterparts. 20,000 not for profit organisations have income of below \$1000 per year. Of these smaller organisations, 36% had to cut services during 2020-21. Of larger not for profit organisations with income over \$500,000 per year only 14% cut services during the same period.

Kaupapa Māori and community research

Everything must start from Te Tiriti o Waitangi and decolonising societal structures. Both government and the community sector hold the whakatauki 'Aroha ki te tangata' close. We all want people to thrive. This should smooth a path towards trust and equity.

Although there are cultural differences between community research and kaupapa Māori research, both begin by discarding the deficit model where research is aimed at bringing a group 'up to standard' rather than looking at the barriers to wellbeing. This type of methodology leads to an allocation of blame rather than identifying structural determinants of inequity.

Deficit focused research, the modus operandi of most consulting firms, inflicts external research aims on communities. Working within communities means that stories, ancestors, and lived experience are not 'nicked' for others' gain. Research done by communities or members of the community in question become a catalyst for ongoing holistic relationships, where feedback loops and action are inbuilt.

Question fatigue is real, but only happens when stories are denied. True access involves listening and then coming back to check action in response. Build the feedback loop and prove that the community's words are valued and valuable.

Often government research units providing grants or other funders (Marsden for example) have a 'community component' in their research programmes. However, there are no or little accountability mechanisms for funders/grant providers to make themselves and researchers accountable to the community involved after the research. There is no feedback loop where the community can read about the research, comment on it, correct it, or respond to it. This can leave communities vulnerable to a researcher's interpretation. If the researcher has no relationship to the community, this can have potentially harmful effects. And, if the researcher doesn't come from that community there might potentially be biases or misunderstandings that lead to harmful practices or further marginalisation of communities.

The ability to undertake kaupapa Māori and community research has been hampered by the pandemic. Participatory research suffered as meeting kanohi ki te kanohi became impossible.

The creativity engendered by these challenges shaped the nature and format of research. The use of mixed methods increased in the shift to digital interaction. However, with the pivot online, data collection became even more removed from communities. 'Hard to reach' people became even more distanced and longer-term research was either delayed or halted entirely.

CONCLUSION

When the Prime Minister asked all of New Zealand to "be kind" at the beginning of this pandemic, she may as well have pointed to the community and voluntary sector as an example of what to do.

Comvoices wishes to continue engaging with the public policy sector across government and local government, kindly supporting and informing policy through our connections to the community and their own researchers. This is so that policy affecting communities is intentionally equitable from the onset, with accountable and ongoing relationships with those communities. We believe what was effective during this public health crisis could also inform other issues vital to wellbeing in Aotearoa such as the housing crisis, child poverty, decolonisation, and disability access.



Angie Warren-Clarke, Chair of the Social Service and Community Parliamentary Select Committee, opening our Seminar with Dr Prudence Stone, Chair of Comvoices, seated.