



SOCIAL CONNECTEDNESS IN A TIME OF SOCIAL DISTANCING

*United Way of Olmsted County's Connections
Learning Cohort Reflection on Serving through
the Pandemic*

INTRODUCTION

On March 11, 2020, Olmsted County reported its first case of COVID-19. Two weeks later, Minnesota Governor Tim Walz enacted a shelter-in-place order that required all people in the state to stay home unless deemed essential workers. As the pandemic progressed, social isolation increased. The Olmsted County Community Health Assessment and Planning COVID-19 Impact Survey shows a significant decrease in people communicating regularly with family, friends, and neighbors and an increase in adults feeling unaccepted (from 33% in 2018 to 47% in 2021)¹. Nonprofit service providers focused on developing social connections had to rethink their program operations. This required working with existing resources, listening to participant needs, and implementing creative solutions.

Since 2019, United Way of Olmsted County (UWOC) has convened a learning cohort of grantees whose programming improves people's health, education, and/or financial stability through peer or near-peer support models. Each program intentionally develops social connections between community members in order to support participants' goals, through mentorship and other focused relationship building. Each provider is unique and provides programming to specific populations in Olmsted County.

In response to the pandemic, the group decided to focus its learning to better understand how to provide high-quality social connections in a time of social distancing. This required compiling notes and experiences, as well as surveying their clients to understand how COVID-19 has impacted their service experience and their needs. Representatives from participating agencies shared the challenges and strengths of different methods and also provided one another with encouragement and suggestions. Reflecting together on program design and participant feedback led to a list of recommendations for providing high-quality peer support programming in socially distanced settings.

Key learnings from this experience were identified by program providers during their reflection. These learnings included, adjust to the needs, be patient as well as persistent, embed technology, and prepare to be creative and flexible. We live in an everchanging world and it is important to adapt to the needs of clients to build meaningful relationships.

¹ Olmsted County Public Health Services. (2020). *Olmsted County COVID-19 Impact Survey Report*. Found at <https://www.olmstedcounty.gov/sites/default/files/2021-04/COVID19ReportFINAL.pdf>

Meet the Organizations

This section includes an overview of each organization that contributed to this report. Below, each organization shares in their own words their mission, and service areas included in the Connections grant, their programming pre-COVID, and changes made to programming throughout the pandemic.

IMAA Match Program

The Match Program carries out IMAA's overall mission of "building bridges between cultures" on a micro level. By bringing together individuals, families, and community groups with refugees and immigrants in a partnership of cultural exchange and support, the Match Program creates a two-way path for social connection. The Match Program Coordinator identifies participants through IMAA's existing programs, including Family Services, Health Access and Education, Victim Services, Community Engagement, and Interpreting and Translating. Through referrals and ongoing support from staff in these departments, we identify clients for the Match Program and continue to support them through case management alongside match mentorship.

The Match Program faced several barriers in providing services during the COVID-19 pandemic. Volunteers and match families have not been able to meet in person as consistently as before given new restrictions. For many match pairings, communicating over the phone is difficult because of a language barrier. In response, IMAA applied for United Way's Build Back Better grant to purchase laptops for participants. The laptops can provide an opportunity for volunteers and participants to connect virtually. IMAA also encouraged volunteers and match families to meet outdoors, social distance, and wear face masks. Match Program volunteers would request help from IMAA case managers in certain situations to communicate with clients.

Elder Network Friendly Visitors and Caregiver Support

Elder Network was founded in 1988 in Rochester, Minnesota with the mission of helping "individuals impacted by the limiting effects of aging have an optimal quality of life." Elder Network is a local 501(c)(3) nonprofit that primarily serves Olmsted, Wabasha, and Winona Counties through the following programs: Senior Advocacy, Education, Support, Companion Services, Respite Care In-Home, Friendly Visitors, Technology Assistance, and Medical and Non-Medical Transportation. Clients served by Elder Network are typically 55 years of age and older, including care receivers and their caregivers. Many of these individuals are facing disabilities and chronic health conditions. Peer Support Programming provides clients with support and socialization.

Elder Network's Friendly Visiting, In-Home Respite, Support, and Education Programs fall under their Peer Support Programming, and these services had traditionally been provided through in-person sessions between clients and staff/volunteers. Phone calls and letters were occasionally utilized prior to the pandemic but have now become a main means of service delivery, as has video conferencing. Starting in March, phone calls, emails, video conferencing, letters, care packages, and

limited one-on-one and group, in-person appointments were utilized. These transitions have enabled Elder Network to continue serving clients throughout the pandemic.

NAMI Southeast Minnesota Peer Support

Founded locally in 1987, NAMI Southeast Minnesota (NAMI SE MN) is an affiliate of NAMI (National Alliance on Mental Illness), their mission is to improve the lives of individuals affected by mental illness through education, support, research, and advocacy. NAMI SE MN's peer support program connects individuals living with mental illness who have taken an active role in their own recovery (Peer Support Specialists) with individuals also living with mental illness who are seeking extra support in their own road to recovery (peers). This peer support relationship assists peers in setting a vision and goals for the future, establishing partnerships with healthcare providers, improving confidence for decision making, increasing stress reduction tools, strengthening interpersonal relationships, and enhancing communication skills. Peers are given a safe space in which to share their story and learn about mental health treatment options. In addition to staffing two Peer Support Specialists, NAMI SE MN has also trained several Volunteer Peer Supporters (VPS) who benefit from working with peers by connecting with another person with similar experiences, building a sense of mastery, and attending monthly groups which offer opportunity for connection and growth.

Prior to the COVID-19 pandemic, NAMI SE MN staff and volunteers primarily built their participant relationships through face-to-face meetings. Peers also could connect with multiple support groups offered through NAMI SE MN. After the start of the pandemic, NAMI SE MN faced several challenges in connecting with its peers. The need to establish a virtual platform required additional investment, training, practice, and rollout. Further, many of the individuals that NAMI SE MN supports were apprehensive about meeting virtually. Throughout the spring and summer, staff were able to organize Bring Your Own Chair groups which met outside. For the most part, this was successful as it allowed people to socially distance without the need for masks. Unfortunately, this was not effective for all of NAMI SE MN's groups. As the weather got colder, NAMI SE MN searched for different venues that would accommodate social distancing; many were either closed or did not want to host groups during a pandemic. Ultimately, NAMI SE MN chose to make all their groups virtual. One-on-one meetings with peers still occurred in person in situations where social distancing and masks were appropriate.

Family Service Rochester LEAD

The PACE (Parents and Children Excel) Program is a collaborative initiative of Family Service Rochester and Olmsted County Child and Family Services. From its inception, PACE was designed to address disparities and disproportionality that manifests in the form of negative educational outcomes for children of color. The LEAD mentorship program is an integral component of PACE as it affords near-peer support for elementary students who have been referred to the program due to school behavioral, academic or attendance concerns. High school volunteers, with similar lived experiences, connect with their mentees through structured prosocial activities and learning opportunities which promote educational success and achievement. LEAD is designed to be mutually beneficial for both mentors and mentees. Mentors gain

invaluable leadership experience, career and college readiness programming, along with staff and peer support while mentees reap the benefits of a positive mentoring relationship, as well as an additional level of support and accountability for their academic achievement.

During the onset of the pandemic, LEAD programming had to shift to utilizing video conferencing platform to help facilitate interactions between mentees and mentors. Consequently, program staff worked creatively to adapt LEAD activities and events to a virtual setting. The abrupt shift did not occur without its own unique set of challenges. One of the main challenges we encountered along the way was related to technology access, which reaffirmed the reality of barriers and gaps that still exists for the population of youth that LEAD serves. To help families navigate this barrier, LEAD staff worked in collaboration with community partners such as Rochester Public Schools, to obtain Wi-Fi hotspots and provide technological literacy support as needed. Overall, despite a noticeable decline in attendance, LEAD programming continued throughout the pandemic largely uninterrupted and inspired creative solutions such as a drive-by recognition celebration for volunteering mentors.

Next Chapter Ministries TreeHouse

The Refuge/Treehouse of Next Chapter Ministries is a program that intentionally serves 9-12th grade students in Rochester, MN who are either the child of an incarcerated parent/household member or have been system impacted by their own fruition. Often this is a both/and scenario. Historically, Next Chapter Ministries has been supporting individuals and families in Rochester impacted by the cycles of incarceration for over 20 years and began programming for youth 10 years ago. Youth programming goals include reducing at-risk behavior, establishing/restoring/maintaining healthy relationships with self and others, graduating high school and continuing education. Next Chapter supports the justice impacted youth in our community through peer-led emotional support groups by creating a safe place for participants to identify their emotions in a deep and meaningful way. Programming also includes one-to-one mentoring, quarterly goal setting, school/family/justice system advocating, referrals to community resources for the participant and their families, transportation, monthly activities, family engagement activities, and summer camp.

Just before the Covid-19 pandemic, the teen programming was hosting groups each week in the Juvenile Detention Center, Rochester schools, a youth group home, and on-site at The Refuge. When the pandemic struck, all locations served closed their doors and programming was recreated with social distancing protocols in place. All outside volunteers and in-person groups were discontinued. First, efforts were put into establishing virtual programming. Being accustomed to an in-person and deeply relational model, connecting over a screen was not ideal for the teens. Next Chapter staff communicated through more text messages, more phone calls, and socially distanced in-person visits per comfort levels. As restrictions allowed, staff jumped on the opportunity to safely serve in a group setting, creating a hybrid model of serving. Currently, they safely gather on-site, have been invited back into the group home, and continue 1-to-1 mentoring.

Recovery Is Happening Peer Recovery Housing

The Join Our Journey (JOJ) Recovery Housing is a safe & welcoming environment. These transitional houses are home to individuals in recovery from substance use challenges. Recovery Is Happening is the advocacy agency for this model, and assists in opening new houses, educating the public on addiction, providing mediation within the houses, as well as other peer to peer-based services. Join Our Journey housing offers a supportive way of living and opportunities to learn skills in a clean and sober environment. Residents receive 24-hour support from peers in recovery and learn alcohol and drug-free living skills. All house members share responsibility for maintaining the house, using democratic methods to assign leadership roles and expectations. Everyone must be willing to accept house rules, pay his/her share of the house expenses, and have the desire to work their recovery. Join Our Journey provides sober housing to adult men, women, and includes one women and child house.

Pre-COVID, Join Our Journey houses used many internal and external relationship building methods from hosting open-houses, bonfires, speakers, step study meetings, fundraisers, and social activities. Internally residents utilize strategies to confront behavioral issues, including imposing fines for not completing house duties, discussing interpersonal conflicts and behaviors, and developing behavioral contracts. Houses also implemented rewarding events for achieving goals. The Join Our Journey housing program faced many barriers during the COVID-19 pandemic. Increase isolation, boredom, unemployment, and lack of face-to-face recovery support groups. Having limited computers to connect everyone individually to virtual platforms and lack of computer skills led to frustration. Peer staff worked closely with participants teaching computer skills, which helped keep individuals connected. Distance learning, financial stress, and social distancing, disinfecting protocols, and having to wear a mask impacted many recoverees mental health and for some led to relapse. Volunteers have decreased and many do not meet in person given new COVID-19 restrictions. Throughout COVID, JOJ has remained open, accepting new participants, and supporting others on the next steps as they move into independent living or increase services to a higher level of care.

Communication Changes

Each organization had to pivot during the pandemic to continue effectively supporting program participants to improve health, education, and financial stability. Below are two tables that showcase the methods of communication staff and/or peers used to connect with their participants before the pandemic and during the pandemic.

Table 1. Program Methods Pre-Pandemic






















































	Elder Network	FSR PACE	IMAA	NAMI SE	Next Chapter Ministries	Recovery is Happening
In-person 1-on-1						
In-person Group						
Video Meeting						
Phone						
Letters						
Email						
Text						

Table 2. Program Methods During the Pandemic

	Elder Network	FSR PACE	IMAA	NAMI SE	Next Chapter Ministries	Recovery is Happening
In-person 1-on-1						
In-person Group						
Video Meeting						
Phone						
Letters						
Email						
Text						

Collecting Feedback

All organizations recognized various ways the pandemic was impacting their programming and responded by making alterations to ensure services continued with minimal disruption. Organizations wished to understand how effective those adaptations were for individual participants. Client input would then inform whether some program changes should be continued after the pandemic.

The group quickly established that the best way to get honest and productive feedback was to ask participants directly how they feel about the alternate programming. Three questions were created by the group for participants to answer:

1. Before COVID-19, how was our programming working for you?
2. What is working for you with our COVID-19 response programming?
3. Do you have any ideas or ways we can improve our programming with COVID-19 limitations?

Given the unique needs of the different populations served by participating organizations, the group decided that each organization would distribute the questions in the format that would best meet the needs of their participants (e.g., individual interviews, focus group, phone survey, mailed survey). Program staff collected information from July to September 2020.

Provider Learnings

After collecting feedback, cohort members gathered in fall 2020 to reflect on information collected and what key learnings showed up. As the reflections took place, providers were quick to acknowledge the uniqueness of the populations served by each organization. With feedback from participants in mind, the providers determined a few methods of programming that proved less effective during the pandemic.

- **Reaching out to participants through phone calls**

Offering social engagement opportunities over the phone had clear drawbacks for most agencies involved in this cohort. Many participants were disinterested in this method of service delivery. Although it was a quick way for program providers to connect with participants and check in, the majority of participants did not prefer phone calls to in-person contact.

Seniors and caregivers were the only demographic who appreciated being called rather than foregoing friendly visits entirely; however, there was some reluctance at first to this uncommon form of service delivery. A few participants working with other organizations found phone calls helpful and did share that information with their providers.



- **Lack of program flexibility**

Participants wanted to adjust programming and for providers to be flexible in the new environment. With government regulations changing frequently and making it difficult to meet many participants face-to-face, providers needed to think out of the box. Most of these programs relied heavily on in-person connections in the past and needed to adapt to the current state. Organizations that were flexible were able to maintain and create ongoing relationships with their participants.

Despite the great challenges that the pandemic brought providers and participants alike, there were some methodologies that were quite effective. Our providers were eager to share their common learnings that were well-received by their participants.

- **Communication success**

Communication is a key support for any programming, but this is especially true when the community is facing many unknowns and undergoing rapid change. Communicating thoroughly and frequently is essential with all stakeholders, including participants, community members, volunteers, partners, etc. Our providers found that participants were receptive more communications and a variety of communication methods during the pandemic including virtual video conferencing, e-mail, letters, texting, etc.



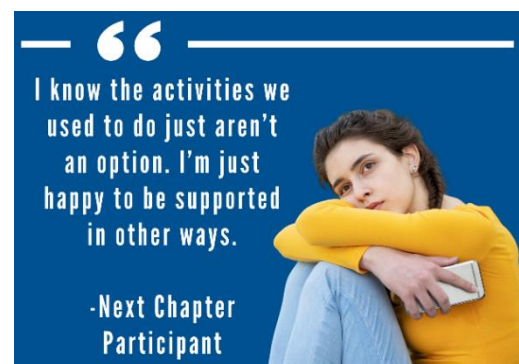
- **Introducing distanced programming**

Many providers found technology to be incredibly useful during pandemic programming. Meeting virtually with participants through video conferencing platforms, texting, or even e-mail. Some providers found writing letters and sending packages was another way to connect with their participants from afar. Distanced programming was not necessarily a strength of these programs before the pandemic;

however, providers were able to adapt quickly.

- **Personalizing programming**

Asking for participant feedback was one of the most efficient ways to adapt programming. Learning what communication styles work best and personalizing communications to meet



those needs made clients feel heard and understood. Providers also used frequent check-ins to see how their distance programming methods were working.

- **Asking for help**

Social distancing did not stop providers from finding ways to support their participants during the pandemic. Many providers found themselves as the first line of support to get resources to participants. They were quick to connect program participants to organizations that specialized in areas like food security or housing stability. Asking for help from other organizations to meet participant needs was an important part of successful connection building.

Emerging from COVID Better



After robust conversation and meetings to discuss the challenges and strengths of the alternative service delivery methods, the Connections cohort reached a consensus on the main learnings and insights gleaned from this process. Nonprofit providers have implemented many changes because of the COVID-19 pandemic. Some of these programming changes will be temporary, and others will help programming to evolve.

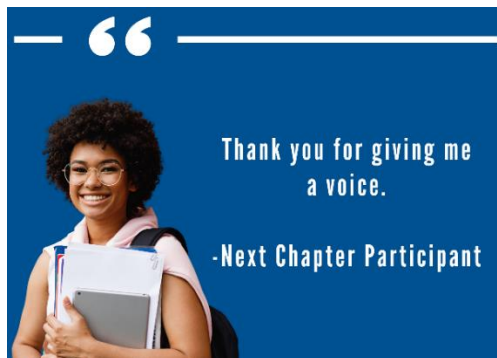
Be creative and flexible

Providers need to be flexible and open-minded when considering program delivery. Offering different options for participants to connect and flexible time options can make programming more accessible. Building relationships in a socially distanced environment may look completely different to existing programming. By individualizing programming when possible, organizations build trust and rapport with participants.

A woman who lives in the state of New York contacted Elder Network about being a Phone Visitor to an isolated older adult. After doing a phone interview, background check, and a virtual training for this volunteer, she was matched for Phone Visits with a participant who is living in a local skilled nursing facility. Due to COVID-19 visiting restrictions, this woman could not have face-to-face visitors in her facility. The volunteer began calling the participant at least once a week. They found out that they had some common interests and were able to connect easily, despite having never met face-to-face. The volunteer also sent the woman several cards and a care package or two. The participant was so pleased with her new friend and was so grateful for this unique connection with someone across the country.



Many of the Next Chapter teen participants come from single-parent, mother headed homes, with multiple children who receive free and reduced lunches. When the pandemic closed the school doors, not only were the children not receiving their school-provided breakfasts and lunches, but their caretakers had to balance working and being home to facilitate distance learning. Most Next Chapter participants have transportation barriers and were not able to get to the community food pick up locations. Next Chapter was able to serve families by delivering meals for them a few times a week.



Adjust to the needs

Participant voice is critical to making effective adjustments to meet changing needs. It has been important for providers to truly listen closely to the needs of participants so they can carefully cater programming to adjusting needs and trends in the community.

One example of a successful adjustment to needs is of a mother and daughter who were matched with the volunteer through IMAA in February 2020. The volunteer has helped the family with basic household needs such as shopping for groceries and transportation, helping the daughter to get to swimming lessons and driving lessons, and practicing English with the mother. The daughter says, “We like [our volunteer]. She is awesome.” They appreciate and look forward to her continued support. When the volunteer was unable to volunteer for a few weeks this fall because of quarantine and other responsibilities, the Match Program coordinator was able to set up another volunteer, to step in to help the family with transportation. IMAA has also been working on setting up a computer and broadband access for the family to improve their communication. The Match Program is being flexible to meet the specific needs of their participants and volunteers.

In the summer approaching the 2020-2021 school year, there was an overwhelming student voice expressing concern for distance learning. Not only is school a place of socialization among peers it is also a place to connect with safe adults and outside resources, receive meals, to have the opportunity to ask questions, receive tutoring and extra academic help. Next Chapter was able to collaborate with other community organizations that serve youth to create a safe space to learn and receive the benefits of the school building in a socially distanced location. There is a student that Next Chapter has been working with for over 2 ½ years. They were able to celebrate the first quarter he has ever passed all his classes since they began working with him.



Persistence and patience

Persistence and patience become more necessary as chains of communication get longer. Consistency builds trust and accountability. These characteristics become even more essential amid isolation and loneliness faced by participants. Our providers were quick to notice the appreciation of their participants to increased communications.

Ensure you establish regular communication with participants. Offer several different communication methods and work with what works best for your participants. As displayed above in Tables 1 and 2, the variation of communication increased drastically in response to the pandemic. For communications over technology, several reminders are necessary. This type of persistence demonstrates that providers care and are accessible to participants.

Embedding Technology

The use of technology has expanded reach to more participants is one such change. Since going virtual, NAMI has been serving more individuals from outside of the Rochester area (i.e., Twin cities metro area, Seattle, WA) in support groups. At IMAA, the laptop program made possible by the United Way Build Back Better grant will continue to support participant communication after COVID.

Elder Network has been able to utilize staff time more effectively to reach more participants through providing Zoom support groups. Zoom support groups have also reached rural clients or caregivers who are unable to leave their home to go to in-person events. Moving forward, Elder Network hopes to expand their digital program offerings through their Technology Assistance Program, to provide safe, contactless visiting for clients in need of connection. Such service options enable those with low mobility and physical disabilities to receive more frequent services. For these reasons, it is possible that Elder Network continue some Zoom components even after in-person programming resumes.



Conclusion

Like countless others, local nonprofit program providers have had to make significant changes during the pandemic to ensure continuity of support for participants. Prior to the pandemic, the cohort knew social connections were an important aspect of wellbeing. Social distancing has underscored just how important relationship-based support can be to the mental wellness of program participants.

The in-person touch cannot be exactly replicated, but the human touch can be reimagined. Our experience further highlighted the importance of technology literacy in a virtual world. Without these new skills, it is impossible to ensure equitable access to a variety of different supports—including social supports. Hybrid (virtual and in-person) programming is likely not going anywhere as in many instances it affords program efficiencies and convenience for participants.

New methods. Same mission. Connections-based programs need to adjust to the needs, be persistent, be patient, and most importantly, be creative and flexible. Organizations would be well-served in taking inventory of a broadened array of “connecting” activities and strategies. Adaptability is key in our ever-changing world.