A Case Study of Community-based, Cross-sectoral Crisis Response to the COVID-19 Pandemic: Serving Racialized Immigrant Communities

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Abstract
Crises—such as the COVID-19 pandemic—bring about myriad problems in magnitude (severity), dynamism (quality), and urgency (timing). Collaborative models that bring together actors from both the public and private sector have thus emerged for institutionalized and community-based crisis response. Such models aim particularly to reach vulnerable, hard-to-reach communities, such as racialized immigrant communities that are among those disproportionately impacted at times of crisis. This paper presents a case study of a community-based, cross-sectoral collaborative formed to respond to the COVID-19 pandemic and specifically targeting immigrant communities. Findings inform a conceptual framework that illustrates the integration of two spheres of service: crisis supports, characterized by a short-term approach, broad-based reach and general objectives; and settlement supports, characterized by their long-term approach, trust relations and targeted objectives, such as language supports and culturally appropriate outreach.

Keywords Pandemic · COVID-19 · Immigrants · Immigration · Cross-sectoral collaborative · Crisis response

Introduction
The COVID-19 pandemic as a global mega-crisis has impacted not only health and wellness and economic systems (Ansell et al., 2010), but also service provision and delivery (Muñoz-Moreno et al., 2020). Indeed, national and local government entities, social service providers, and civil society organizations alike were ill-prepared for comprehensive and timely responses, and resources and systems were found to be lacking (Maher et al., 2020). Meanwhile, interdisciplinary academic literature on crisis response and recovery has grown over recent decades, in tandem with growing public and academic interest in climate change. While this body of research primarily addresses short-term, environmental disasters such as hurricanes, floods, and earthquakes, such examples can still be telling as they illustrate examples of when populations must react to extraordinary crises.

One specific line of study within such scholarship focuses on crisis response that is emergent from localities or communities and coordinated, rather than hierarchical (Misra et al., 2017; Ogie & Pradhan, 2019). Scholars emphasize the need for on-the-ground actors and for coordinated systems and institutions across multiple sectors, from health and education to food and housing (Simo & Bies, 2007). Crises—such as the COVID-19 pandemic—bring about myriad problems in magnitude, dynamism, and urgency. Indeed, the severity, quality, and timing, respectively, of challenges brought on by the pandemic were compounded along these multiple dimensions. As such, collaborative models with a diverse set of actors, from both the public and private sector, have emerged for institutionalized and community-based responses (Cheng et al., 2020; Kitching et al., 2016; Lawrence, 2020), particularly to reach those who are most vulnerable.

Racialized newcomer or immigrant communities are among those disproportionately impacted during times of
covid-19 pandemic, via the calgary east zone new-
with crisis response institutions to respond together to the
serving institutions in calgary, alberta in canada (et al., 2013).

in times of crises, racialized immigrants and other minority
groups often struggle with limited access to emergency com-
communications due to language barriers (mendez et al., 2020;
nezafat maldonado et al., 2020; xiang et al., 2021) and
bureaucratic barriers to financial aid (nguyen & salvesen,
2014).

during covid-19, immigrant communities were at
greater risk of comorbidity than the general population due
to the interwoven risks found in living and work conditions.
industries reliant on newcomer populations, such as the meat-
packing industry in [name of state], can often have employ-
ees living in crowded accommodations. such workers addi-
tionally work closely together on the meat processing floor,
breathing heavily next to each other in physically demanding
tasks. other newcomer-reliant industries include services,
where employees are compelled to work in public-facing roles
in high-traffic locations. such roles are also heavily affected
by lockdown mandates, rendering employment highly precari-
ous. immigrant populations also navigated limited access to
health care and welfare services (hooper et al., 2020). crises
subject immigrant communities to culturally inappropriate
food (mamuji & rozdilsky, 2019; nguyen & salvesen, 2014),
financial vulnerability due to a greater likelihood of job loss,
predatory rental practices, difficulty accessing governmental
supports or private insurance (mendez et al., 2020; thomas
et al., 2013).

this article illustrates a case study of how immigrant-
serving institutions in calgary, alberta in canada worked
with crisis response institutions to respond together to the
COVID-19 pandemic, via the calgary east zone new-
comers collaborative (CENC). Specifically, this article
focuses on the role of settlement agencies as part of the
collaborative. this article offers a conceptual frame-
work for understanding key elements in collaboratives,
including duration, pace and approach to services, institu-
tional relations, logistics, and technologies. first, we
provide conceptual background on these forms of crisis
responses; second, we discuss our case study, including
the local community context and immigrant-serving insti-
tutions; third, in the findings section, we discuss elements
to crisis response; and finally, we end with an analytic
framework and a closing discussion of implications for
practice.

conceptual framing: community-based,
cross-sectoral models of crisis response

A Community-based Model of Crisis Response

during crises, civil society has often stepped in to fill gaps
that governments and state actors could not address (spear
et al., 2020). community-connected groups have played
key roles in reaching isolated or marginalized populations
in a variety of crises, such as Ebola outbreaks in Africa
(santibañez et al., 2015), hurricane katrina in the usa (Li
et al., 2008), flooding in thailand (Leong et al., 2015), and
the COVID-19 pandemic (pimentel walker et al., 2022). there is
a growing consensus among scholars and policymakers
about the importance of involving community actors in
disaster response and mitigation (Xin et al., 2016).

even as minority communities are more vulnerable in
times of crisis (andrulis et al., 2007), studies have dem-
onstrated the resilience of immigrant groups, particularly
when empowered to take action. the presence of strong in-
group ties strengthens the ability of minority communities to
respond to crisis situations (eisenman et al., 2007). cherry
and allred (2012) found that the filipino community during
hurricane katrina “mobilized quickly because of pre-existing
networks, social capital and effective leadership structures” (p.
400). also, during katrina, vietnamese americans mobilized
to deliver mutual support to families, friends, and neighbors
(Li et al., 2008). strong community bonds and cohesion rein-
forced disaster preparedness in a bosnian refugee community
in the usa (Xin et al., 2016). a recent pilot project on disaster
preparedness in alberta, canada (Bogdan et al., 2021) noted
that the community-focused workshops worked better among
Filipino participants than when attempted in a church with no
ethnic affiliation, which lacked strong in-group ties. leaders
within an ethnocultural community, especially faith leaders,
play an important leadership role in emergency situations
(Cherry & Lucas, 2016; mamuji & rozdilsky, 2019; nguyen
& salvesen, 2014). in some cases, national or international
networks extended a source of money to rebuild, as was
seen in the south asian community after Hurricane katrina
(Nguyen & Salvesen, 2014).

in many emergency situations, backchannel communica-
tion on social media, text groups, or even door-to-door brigades
played an outsized role in mobilizing immigrant communities,
particularly in communicating emergency warnings to members
with lower English facility (mamuji & rozdilsky, 2019; mendez
et al., 2020; sutton et al., 2008). indeed, language minorities are
especially vulnerable during disasters (Uekusa, 2019) with lan-
guage translation being critically important in delivering accurate
messaging and information (O’Brien et al., 2018). during the
COVID-19 pandemic, the importance of multilingual members from language minority communities to build trust (Piller et al., 2020), improve information diffusion (Chen et al., 2021), and facilitate credibility to the information from state actors (Ahmad & Hillman, 2020) have become evident.

**A Cross-sectoral Model of Crisis Response**

Inter- or cross-sectoral collaborations (CSC) can be defined as temporary partnerships between multiple stakeholders, including public/governmental agencies and private non-profit organizations, and sometimes businesses and the general public, that are formative and effective particularly during crises (Bryson et al., 2006). Coalitions and multi-stakeholder collaborations that respond to crises, promote systems change, and enhance community well-being have gained attention in recent decades (Foster-Fishman et al., 2001). Three types of CSCs are based on purpose: (1) promoting systems change, (2) administrative resource sharing, and (3) service delivery—the latter, more common and easier to sustain (Bryson et al., 2006).

CSCs are employed to manage situations, such as crises, for which separate efforts are likely to fail or are inadequate, and/or if the potential to fail cannot be fixed by sectors acting alone (Kapucu, 2006). Figure 1 illustrates the conditions that trigger the formation of a CSC, characterized by a rapid rise in dissipated and decentralized communication and consequently, a lack of coordination. Managing such tendencies through sharing information and resources and reinforcing networks, a key function of such collaborations, results in better delivery of essential services (Kapucu, 2006).

**Case Study: Metropolis Immigrants Collaborative**

**Formation of -MNC-**

The CENC is presented as a case study of CSC, expanded to a crisis response in mid-2020 to pool resources between various settlement organizations and public agencies during the COVID-19 pandemic in the northeast area of Calgary, Alberta, home to one of the largest immigrant and racialized populations in the city. In late November 2020 during the “second wave” of COVID-19, Calgary gained the highest number of cases for weeks in the province of Alberta, and it was quickly labeled a pandemic “hotspot” (CTV, 2020). It was at this point that state actors and agencies became more actively involved, crystallizing in the -MNC-’s formal COVID-19 emergency response.

Socio-economic aspects compounded the health risks for the area’s racialized immigrants (Toy, 2020). Many immigrants perform precarious work as frontliners in customer-facing occupations (Liu, 2019) and are more likely to live in multi-generational households where social distancing can be difficult. To aggravate these issues, immigrant communities feared that they would be stigmatized for “spreading” the virus in Calgary (McGarvey, 2020). Moreover, applying a historical lens on relief efforts in Alberta in the past, racialized individuals and immigrants have been marginalized and stigmatized whereby essential items and services were made more difficult for them to access (Graveland, 2020; Toy, 2020). Historical marginalization in times of crisis, rising positivity rates during Calgary second wave, and public/media attention to immigrant communities in Calgary compelled community actors to mobilize with municipal and provincial state actors.

At the same time, the COVID-19 pandemic quickly evolved to be an exceptional crisis situation, unlike previous shorter disasters. The COVID-19 pandemic existed months before CENC for its pandemic response, compared to more common natural disasters, such as flooding or hurricanes, which typically last only for days or weeks. Also, compared to conventional disasters, crisis support for the COVID-19 pandemic was diverse, including the provision of adequate public health information, the delivery of personal protective equipment (PPE), financial assistance for
populations that were unable to work, and workplace protections (Ortega & Orsini, 2020).

**CENC Members and Objectives**

CENC sought to reconfigure services of settlement organizations and other civil society organizations to respond to the needs of immigrant communities during the pandemic, while also mobilizing public agency resources and capabilities. Five core settlement organizations provided food, finance, employment, and mental health services; seventeen other non-profit organizations offered supplementary services; and public agencies imparted resources and other support. Figure 2 depicts the CENC member organizations and their primary roles. CENC established three objectives: (1) deliver immediate relief and support to those in quarantine or isolation; (2) address intermediate barriers and factors contributing to vulnerability of racialized communities; and (3) deliver community-based engagement and prevention through information sharing and education. In addition, CENC conducted research and evaluation, collecting data about services and service recipients.

**Implementing CENC**

Serving immigrant and racialized communities in an emergency in the past has been subsumed under the general crisis response at the state level using universal approaches that can fail to address the unique needs of marginalized communities. Conversely, if driven from a grassroots, local level, the initiative can often be lacking in resources and scope. Bridging the gap to put forward specific supports to marginalized communities thus requires that state agencies have cultural competency or that they rely on overburdened grassroots leaders without the technical or financial capacities to respond fully. Departing from these traditional approaches, key services at immigrant-serving settlement organizations—at the meso level between the state and the grassroots—were repurposed via CENC to manage the second wave of COVID-19 in autumn, 2020 in Calgary.

Settlement organizations do not typically render disaster relief, nor do they typically have access to associated resources. Instead, they impart long-term support for immigrant transition, with a focus on training programs, language and literacy training, and the integration process, often over the course of months or years. Often, the specific focus is on the early years of new-immigrant arrival to Canada and finding employment.

However, in the time of COVID-19, the institutional capabilities and resources of settlement organizations transitioned into a crisis response tailored specifically for immigrant communities. The reconfiguration and extension of existing services for immigrants, underpinned by state resources that deliver short-term, crisis related services, is a defining characteristic of the CENC emergency response. Although not perfect, COVID-19 relief, with its broader scope, made settlement agencies a natural fit for providing assistance to immigrant communities. In the following sections, we analyze the role of settlement organizations in CENC for reaching and providing crisis response for immigrant communities during the COVID-19 pandemic.

![Fig. 2 CENC core organizations and roles](image-url)
Findings: Integrating Settlement Organizations’ Long-term Services with Rapid Crisis Responses via -MNC- Settlement Organizations’ Targeted Approach to Services

Settlement organizations apply a targeted approach to services, with a culturally diverse, multilingual staff with extensive experience communicating with non-English speakers—crucial resources that were mobilized and translated for COVID-19 crisis responses.

Services with Linguistic and Cultural Capacities

A centerpiece of the CENC response was the use of culturally competent, multilingual staff from CENC member organizations, who serve to function as cultural brokers. Scholars have written about cultural brokers, as a “bridge between the dominant culture and (immigrants’) diverse cultures while also serving as institutional agents,” and their efficacy in supporting immigrant communities and families (Guan et al., 2016; Martinez-Cosio & Iannacone, 2007, p. 349).

Key to the delivery of services was a call center staffed by multilingual “cultural brokers” from various immigrant communities. CENC member organizations brought multilingual staff, drawn from its ethnic community membership, with a direct understanding of the needs and experiences of racialized immigrant populations. Top languages recorded by call center staff in a purpose-built database specified which languages to translate information into and which community organizations to focus on in outreach. The CENC call center started operations on December 17, 2020 with seven calls received, and peaked on January 26, 2021 with 162 calls. Over 5,300 callers had contacted CENC through the center, as of July 2021.

Culturally Appropriate Food Delivery

Aimed primarily at immigrants and racialized community members who needed to isolate due to a positive COVID-19 diagnosis, the majority of service requests centered on the distribution of food hampers to the individuals who called the call center. The food hampers were designed to be culturally appropriate. Early efforts involved asking clients directly for food preferences; in later efforts, the hampers were refined to six or seven major cultural profiles which clients could select from (Vietnamese, South Asian, etc.). Callers were able to make more than one type of request, with all requests totaling 7,587, as of July 2021.

Responsive to Needs for Financial Guidance and Assistance

Concerns about financials were significant among the beneficiaries of CENC services. Responding to local needs, CENC proffered individuals with multilingual assistance in applying for public assistance, including COVID-19 benefits, offered by state services, financial advice on managing a budget on lower incomes triggered by job losses, and actual financial assistance for eligible individuals.

Translation of Public Health Information

Multilingual staff at CENC constituent organizations, particularly those with medical training from their countries-of-origin, pooled resources to create translations of COVID-19 information for dissemination to their respective ethnic communities. In multiple languages, live webinars and Q&As via Zoom addressed myths about the COVID-19 virus, as well as hesitancy with regard to vaccination.

Settlement Organizations as “Institutional Brokers” Across Immigrant Communities, Public Institutions, and Collaborative Members

Settlement organizations function as an “institutional cultural broker” between state agencies and grassroots communities, and this function was pivoted for crisis response during the COVID-19 pandemic, via CENC.

Long-established Trust Relations with Immigrant Communities

CENC settlement organizations have existed within Calgary, diverse immigrant communities, with a history of service provision, for at least 30 years. Each core organization had regularly served several thousand newly arrived immigrants prior to the pandemic. And in the COVID-19 crisis, these long-standing, trusted connections with immigrant communities were crucial in transitioning to online services and in outreach efforts to control outbreaks.

Data collected by CENC revealed that community members expressed a greater distrust for the hotline the more they associated it with government institutions. Also, respondents wished both to have a professional speak and understand their language and to better understand Calgary health care system. With multilingual professional staff and volunteers, many of whom have medical and scientific degrees, CENC member organizations had the capacity to fulfill this much needed role of “cultural mediator.”

Mainstream health care services in Canada had struggled to reach immigrant communities in the past, as discussed above (Asanin & Wilson, 2008), and the COVID-19 pandemic seemed no exception. Only 6% of calls to the
CENC call center were direct referrals from the provincial Alberta Health Services; the remaining 94% came directly from the community. These community-based calls were the result of outreach by CENC-member staff through established relationships with ethnic communities.

**History of Fiscal and Administrative Relations with City/Provincial/Federal Public Institutions**

Unlike grassroots or ad hoc community groups, which are often detached from public funding, settlement organizations are regularly contracted to administer public services and thus have established fiscal and administrative relationships with city, provincial, and federal governments. Their long history with public governments was vital to the streamlined mobilization of state funding for COVID. Both institutional and personal relationships between leaders of core settlement organizations and the government were crucial in setting CENC in motion. It was at the personal level—one-on-one and small group conversations—that the impetus for CENC was initiated.

**Some Challenges in Intra-collaborative Relations Among CENC Member Organizations**

Relations among the four settlement organizations—the core CENC members—and among public institutions were well balanced and smooth, due to established, strong intra-collaborative relationships fostered over years prior to the COVID-19 pandemic. This was a strength of the collective. However, inter-collaborative relations among Calgary settlement organizations may also have made it difficult to introduce new organizations to the collective after the COVID-19 crisis response had already begun. CENC member organizations outside the core 17 thus experienced impediments to finding a role.

**Settlement Organizations’ Pre-existing Logistical and Technological Capabilities**

While MNC’s settlement organizations had established pre-pandemic services to address long-term needs of immigrant communities (i.e., English language training, employment, cultural integration), these services quickly morphed to crisis needs. The CENC response involved a repurposing of settlement organization capabilities and infrastructure to meet shorter-term needs brought on by the COVID-19 pandemic. Whereas public institutions had technological capabilities, settlement organizations also had existing logistical and database infrastructure to go with technological capacities that were primed for transitioning for collaborative crisis response.

**From Financial Literacy and Job Training Services to Public Assistance Benefits and Unemployment Support Services**

Training and counseling programs for financial literacy and job training at settlement organizations transitioned into help applying for public assistance benefits, employment advice, and assistance for those out of work due to COVID-19. Receiving the highest number of requests for such services, the [name of organization withheld], a non-profit organization operating locally in the [name of local area withheld] area, offered mental health and wellness services, and assistance in both research and evaluation and benefits and unemployment. By early July 2021, [name of organization withheld] had received 615 requests for “assistance in applying for government benefits”; 436 requests for “assistance finding employment and skills training”; 358 requests for “assistance seeking employment opportunities”; 322 requests for “financial support”; and 166 requests for “counselor assistance.” Key to the transition from pre-crisis service delivery to crisis relief was simplification and management of service requests through the CENC hotline, call center, and centralized database shared by core members. The dissemination of the call center’s number centralized service requests, and the screening and triaging of needs via the call center quickly referred callers to appropriate services from relevant organizations.

**From Database Infrastructure to Referral Systems**

Databases for long-term projects of settlement organizations were reconfigured to serve as key communication resources for streamlining inter-agency referral processes. The CENC call center became the contact point for clients in need of assistance, after which requests, demographics, and needed information were recorded in a purpose-built database. This database informed other CENC member organizations of requests that aligned with their services. The database was also a key resource in tracking first languages, demographics, geographic reach of the collaborative, and emerging needs as they manifested per language group.

**From Catering to Food Delivery**

A pre-existing food service program of a CENC settlement organization transitioned into preparing and delivering culturally appropriate food hampers. Existing staff were re-assigned to food hamper preparation and were supplemented by volunteers and staff from other departments and organizations. Food was purchased with funding provided by federal, provincial, and municipal governments, and by donations. Rather than receive only general food items, immigrant communities
had the option to receive food items of their choice, if available. Cultural brokers received the calls, and immigrant callers were asked what type of food they would prefer, including food from their home country. These preferences are recorded in a database, and the information is passed on to the staff purchasing and compiling food hampers, as well as volunteers making the deliveries. Diverse, multicultural staff and volunteers from CENC organizations played a key role in developing standardized shopping lists for various ethnic profiles.

**Closing Discussion with a Conceptual Model and Practice Implications**

A conceptual model, depicted in Fig. 3, illustrates the integration of longer-term settlement services with crisis response services for immigrant communities during the COVID-19 pandemic, as drawn from the case study of CENC in Calgary as a cross-sectoral collaborative and focusing on the roles of settlement organizations. Within the broader context of the overall vulnerability of immigrant and racialized populations, two spheres of service processes are present—settlement services and crisis response. Crisis supports are characterized by their short-term approach and general objectives, such as public health and access to food, while settlement supports are characterized by their long-term approach and targeted objectives, such as interpretation, translation, and culturally appropriate outreach. Agencies providing the short-term crisis support—typically state agencies—have collaborated with the CENC longer-term-oriented settlement and integration-driven core organizations. The crossover of functions of multi-language services, the delivery of food hampers, referrals to other agencies, is facilitated by the effective use of technology. This conceptual framework of collaboration is illustrated by the intersecting spheres in Fig. 4.

First, elements of “cultural mediation” (Ingleby, 2011) were central to CENC values and activities, and cultural understanding and sensitivity were key to building trust and maintaining relationships with immigrant communities. Settlement organization staff were not only service providers but also cultural brokers, with multilingual and multicultural skills that translated into effective, targeted crisis responses during the COVID-19 pandemic. Secondly, “institutional mediation” or “institutional cultural brokering” was also a relevant concept, specifically for relationships among actors in the broader institutional network and within CENC itself. Settlement organizations played key roles in mediating between immigrant communities with specific needs and public institutions with resources. The third aspect to CENC was the transformation of settlement organization logistical capabilities and technologies from long-term assistance to short-term, rapid crisis response.

**Fig. 3** The integration of settlement services and crisis support services provided at CENC
Though offering insights for targeted and culturally appropriate crisis responses for immigrant and racialized communities, CENC did nevertheless face challenges and learn lessons. CENC as an ad hoc collaborative allowed nimble, responsive actions to emergent issues stemming from COVID-19, but at the same time lacked the longer-term strategic planning necessary for an extended crisis such as the COVID-19 pandemic. When vaccinations, treatments, and measures for curtailing COVID became more common, CENC sought to reconfigure its vision and activities. However, institutional collaboratives can weaken through a divergence of agendas and the failure to moderate power dynamics within the collaborative (Simo & Bies, 2007) resulting in tension and reduced effectiveness. Collaborators must thus exercise reflexivity to mitigate personal conflicts and minimize power struggles. As needs from food security to mental health evolve during and following a crisis, collaboratives can become unwieldy as institutional actors from the non-profit, private, and public sectors work together (Simo & Bies, 2007). Cross-sector collaborations are more likely to be effective when they build on organization self-interest and strengths while minimizing member weakness (Bryson et al., 2006).

Aiming to focus on and support specific immigrant needs, CENC, particularly via settlement organizations, sought to go further than conventional crisis responses that take either a universal, general approach that is often fails to reach hard-to-get communities or a grassroots approach that is typically under-resourced. Rapid crisis responses by public agencies merged with support by settlement organizations, resulting in more integrated services that addressed urgent needs unique to the COVID-19 pandemic, and needs unique to immigrant communities.

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**Declarations**

**Consent to Participate** Informed consent was gained from research participants, where applicable.

**Conflict of Interest** The authors declare no competing interests.

**Research Involving Human Participants and/or Animals** NA.

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