Chapter 22
Building the Capacity of Neighborhoods and the Resilience of Neighbors to Respond to COVID-19: The Neighbor to Neighbor Volunteer Corps

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Background and Historical Perspective

By the end of March 2020, there were 44,771 cases of COVID-19 and 1096 COVID-19-related deaths in New York City (NYC Health 2020). Most businesses were closed with the exception of essential goods and services. By mid-March, social distancing (hereinafter referred to as physical distancing) was adopted statewide, leaving many residents who needed help with activities of daily living and instrumental activities of daily living wondering how they were going to survive. And for individuals who lived alone, the fear of becoming exposed to and infected with COVID-19 with implications of daily survival was palpable. Federal programs were slow to respond to local needs of individuals. Federal and state agencies provided information on the pandemic with broad implications for physical distancing, but tangible assistance was absent.

Residents of university Faculty Housing, the majority of whom were faculty members, partners, and family members, wanted to help their neighbors however they could. Previously, the president and provost of the university, along with their leadership team, had identified urban issues, inequality, and supporting families of all ages as crosscutting themes important to the university in practice and in the development of scholarship and implementation of real-world resolutions. These priority areas guided the provost to establish a Work Life office in 2017. The Work Life office is committed to improving the well-being of its faculty members and administrators and serves as a bridge between university-wide policy and the unique needs of the university faculty and staff. An experienced social worker, hired as the executive director of Work Life, created a comprehensive program of support for
faculty and administrators throughout their work span in parenting, childcare, and early childhood to grade 12 education; in issues of aging, caregiving, and retirement; and in self-care, mental wellness, telework, and financial wellness. Work Life positioned itself at the center of multiple interdepartmental conversations about how to address faculty and administrator concerns at the university. Programming and consultations at Work Life were well underway when the pandemic hit, and because of Work Life’s involvement in the university community, the office was able to pivot, engage, and respond with administrators from the Faculty Housing office to incorporate a civic engagement arm. The goal of this new initiative, Neighbor to Neighbor (N2N), was to help local residents with basic needs through telephone check-in assessments. With the absence of a national intervention combined with a strong desire among local residents to help, interacting with the university’s institutional capacity, N2N was launched.

COVID-19 has a disproportionate impact not just among older adults when compared to their younger counterparts but also among individuals with underlying health issues, who are often racial and ethnic minorities and individuals with lower levels of socioeconomic status (Morrow-Howell and Gonzales 2020). We wanted to recognize, recruit, and train residents (Volunteers) who wanted to give back to society in this great time of pain. All of our Volunteers and clients (Neighbors) were living in Faculty Housing. Some had aged in place over the decades prior to the university’s housing acquisition, while others were affiliated with the university. Volunteers were mostly female (60%), either faculty or partnered with a faculty member, highly educated with the majority having a PhD or MA degrees. Volunteers were 20% Black, 30% Latinx, and 50% White and represented at least 15 countries. They were, on average, 45 years of age. Nearly 8 out of 10 of the Neighbors identify as female. Approximately 20% of Neighbors served had been living in Faculty Housing since the late 1970s, prior to the time that the university took ownership of the buildings. Many Neighbors had underlying health conditions prior to COVID-19, and some employed home health aides who could not commute to work in the early days of the pandemic.

**Conceptual Framework**

The institutional framework of productive aging (Morrow-Howell et al. 2001; Gonzales et al. accepted) was an important heuristic tool that guided the development of our civic engagement program. We prioritized the values of health equity, choice, opportunity, and inclusion, given the great heterogeneity found within our neighborhood, as well as the various needs and preferences of the neighborhood residents. This model exemplifies aspects of the ecological framework with macro-, mezzo-, and micro-factors that interact with each other to develop a corps of Volunteers with subsequent outcomes. At the same time, the model can be used to help identify at-risk populations who might need assistance with basic and mental health needs by Volunteers.
The Program

The goals of N2N were to create connection and support between adults of all ages and abilities in Faculty Housing in an effort to build community social ties between residents. Residents were recruited to the program through a hand-delivered recruitment form sent to everyone living in Faculty Housing. The form provided space for residents to indicate whether they wanted to work as a Volunteer or receive a check-in call from a Volunteer. There was also space on the form to indicate whether residents were particularly concerned about another resident in Faculty Housing. Volunteers entered the program with varying levels of civic experience, and all were required to attend a virtual training session and several optional Volunteer check-ins conducted by the program leads. Program leads provided scripts to guide Volunteers through their telephone conversations with their Neighbor, with tips for conversation and space for the Volunteer to indicate the needs and preferences of the Neighbor, as they arose during the interaction. In the initial stage of contact, the Volunteer was requested to submit anonymous results of conversations to the program leads. Information collected helped the program leads assess whether the program was appropriately targeting the needs of the population. The language used in the script was designed to encourage mutual support between Volunteer-Neighbor pairs, promote autonomy and integrity, and draw careful attention to ageist assumptions and language. Neighbors were encouraged to discuss their coping strategies with Volunteers and to elicit coping strategies and tips from Neighbors, especially those tips and strategies they had employed in difficult situations in the past. Encouraging mutual support was also intended to reduce ageism and ableism, and ageist and ableist attitudes, and to promote a sense of solidarity between the Volunteers and Neighbors. Volunteers were encouraged to discuss with their Neighbor about how often to make contact. Many in the initial phase of the program were making weekly check-in telephone calls.

Health Care

In the initial phase of the project, we found that many residents in Faculty Housing did not have access to their regular healthcare providers. There were several incidents where Neighbors and Volunteers needed an emergency checkup and a prescription for an antibiotic or other medication, and it was widely regarded as unsafe to go to the local emergency room. In response, we created a collaboration with a visiting medical provider who carefully conducted home visits, informed by CDC guidelines, to Faculty Housing residents. This provider used personal protective equipment and followed proper protocol when entering and exiting the residence of each program participant.
Food Resources

When the shelter-in-place order in NYC first occurred, several employees in the Work Life office and residents in Faculty Housing purchased large amounts of dry goods and toiletries to keep on hand as pantry items in case residents needed supplies and were unable to leave their homes or purchase supplies online. As the weeks progressed, it became clear that some grocery stores in the area were remaining open and continued to be well-stocked. The program leads decided to keep the dry goods for Neighbors or Volunteers who expressed food insecurity, and program leads worked with building staff, such as door attendants and superintendents, to deliver bags of food and toiletries. We created a collaboration with the director of the university’s philanthropic campaign who connected us with a local senior center that regularly provides meals to older adults in the community. During the COVID-19 pandemic, they began offering “grab-and-go” meals to their community members and extended their grab-and-go food service to our program participants. We offered these meals to anyone in the program. Each week the meals were delivered to a spot set up by Faculty Housing, and participants picked up meals themselves, or their Volunteers picked them up and delivered them to their Neighbor.

Mental Wellness

Mental wellness was an area of great concern for the program leads. A scale to gauge the mental wellness of Faculty Housing residents was included in the Volunteer script. Volunteers were instructed to ask Neighbors to indicate where they stood on a scale ranging from “content as usual” to “quite concerned about myself and my mood and need a mental health referral.” Volunteers were instructed to be in contact with the program leads immediately if the Neighbor indicated that they were beginning to feel concerned about themselves or were quite concerned about themselves. Volunteers were also instructed to offer a professional mental health assessment to Neighbors. The in-depth assessments were conducted by the university’s School of Social Work doctoral students and faculty members who volunteered to assess Neighbors and, if necessary, refer them to a network of clinical practitioners in the community.

Technology Assistance

With the imposed isolation during the pandemic, we recognized that people unfamiliar with technology might not have their usual means of support when technology problems arose. We also wanted to provide support for those who wished to connect with others through virtual means. To help as many people as possible find
access to various ways of technological connection, we created a collaboration with Cyber-Seniors, an organization providing meaningful intergenerational contact through mentorships between younger and older generations who teach each other technology and life skills, a reciprocal and beneficial exchange. Neighbors were given the website and telephone number of Cyber-Seniors and were instructed to connect with their Volunteer to help them research courses available. Given the lack of normal activities over the summer months, Work Life put out a call to recruit teenage community members to become mentors for the Cyber-Seniors program during the summer months.

Outcome and Critique of the Program

At the beginning of the program, there were 100 Volunteers and 125 Faculty Housing residents who signed up to be part of the program. By the time we had completed the first training and Volunteers made their initial first check-in telephone calls, a major unforeseen issue arose. Many individuals living in New York City during the early phase of the pandemic, including those living in Faculty Housing, left the city to go to second homes or the homes of family members who lived outside of New York City (Bellafante 2020). Many of those who left had signed up to receive a telephone check-in from a Volunteer and were not answering their home telephone numbers. After trying several times to make contact with their Neighbor and receiving no response, several Volunteers grew wary of the program altogether and dropped out. Some Volunteers requested another Neighbor to check in on, and others expressed frustration that they were unable to “do” anything to help and were resentful because they had been promised a job to do and could not do it. Volunteers also expressed frustration with the program, saying that they wished there was more to do to help their Neighbors, and offered a critique of the Neighbors, saying that they were “too independent,” potentially implying a wish that the Neighbors were less competent so the Volunteers could feel more useful and valuable. This is an area for further inquiry and relates to the research on ageism in general and specifically to ageism in the family (Gordon 2020). Often family members express frustration at the independent decision-making of their older loved ones, when they are offering help or asserting control in managing their affairs. Expressing low expectations of the capabilities of older adults is a form of affective ageism which can, in certain circumstances, lead to age discrimination.

Although we provided instruction in conducting the mental wellness part of the script, two Volunteers decided to withdraw from the program because they felt uncomfortable inquiring about mental health. After a discussion, it was revealed that in one case there was also a language barrier, and the Volunteer did not feel that he could fully understand the language expressed around mental health concerns. The other Volunteer revealed that she was battling with her own mental health and felt overwhelmed by her own needs at the time and could not find the energy to help her Neighbor.
Emerging Evidence on Shared Trauma and Shared Resilience

The literature on trauma informs us of both the potential for negative consequences and of the potential for positive consequences and growth of individuals exposed to traumatic experiences (Nuttman-Shwartz 2014). Participation in N2N during the COVID-19 pandemic provided an opportunity for both Volunteers and Neighbors to give and receive support from one another, during a time when both parties were experiencing trauma stemming from COVID-19. The concept of shared trauma (Tosone et al. 2012) usually relates to the therapist-client dyad but is applicable to our Volunteer-Neighbor pairs in this instance of shared pandemic-related trauma. Clinicians also report positive consequences of working with trauma victims, such as increased resilience and emotional expressiveness, independence, and self-confidence (Nuttman-Shwartz 2014; Arnold et al. 2005). Volunteers in N2N reported satisfaction in their ability to provide services and see their Neighbors thrive with the support they gave. Volunteers expressed satisfaction at the opportunity to give back to their community and to feel productive during a time when the surrounding community seemed to be spiraling out of control. Below are some themes from Volunteers about their experiences:

One of my relatives died from COVID-19 in a hospital not far from where I live. There was a sort of helplessness because I couldn’t see the person or memorialize their life. I felt it was incredibly depressing for all of us, and the act of volunteerism and just thinking about other people kind of prevented me from going down into a hole, I think. There’s nothing like helping other people to encourage you to forget your own woes. So yeah, it was good for that. Did it help me deal with the first wave of the pandemic? I guess there’s this sort of psychological place where when you’re forced to console other people and tell them everything’s going to be ok, then you kind of believe it yourself, so in that way it was helpful, I suppose. But it was also good and it was mutually beneficial, in that they turned out to be my upstairs neighbors whom I’d wanted to get to know better anyway. They’re such nice people. I’m grateful for that match.  
[Female, age 49, married]

I think it was just good, in general, to help us remain connected to the community and to remind ourselves to support each other, and it also gave me the opportunity to meet people within my own building that I had never really met before...I think it has given me a stronger sense of community within my own building and within the community at large.  
[Female, age 56, married]

Neighbors also experienced growth and satisfaction in their participation in the N2N project. The experience of mutual help through empathic bonding (Nuttman-Shwartz 2014) is illustrated in the quotes below. The Volunteer-Neighbor pairs felt empathy toward one another and formed tight bonds with one another and expressed interest in keeping in touch with one another:

I felt so glad to be connected with someone who was near me during this time. It took a while to get to know him, but now I am happy that we have a good relationship. We speak every week, and I’m looking forward to getting to know him better when we can socialize together outside.  
[Female, age 72, lives alone]
My Volunteer brought me groceries and food and I am so grateful to her. I really feel like she cares about me, and I didn’t even know her before the pandemic. We talked a lot over the phone, and discussed books and plays, and I felt comfort because I knew that she was there, especially during the time that we could not leave our apartments.

[Male, age 76, lives alone]

I had a medical issue and my Volunteer made sure that I was seen by a doctor, and she got my prescription and food for me when I was ill. This helped me feel less alone.

[Female, age 81, lives alone]

Productive Aging: The Civic Dimension

The N2N program was based on the premise that residents were able to choose whether to become a Volunteer or a Neighbor, and while the majority of the Volunteers were young to middle-aged adults, many were over the age of 65 years and either still working at the university or retired from their faculty position. Older Volunteers contributed their own knowledge of community resources and experiences as community members, and this added richness and depth to the training and follow-up Volunteer community discussions. The desire to give back may have satisfied important psychosocial developmental goals, such as generativity and integrity (Slater 2003; Erikson 1974). Recognizing the positive impact of volunteering on older adults (Gonzales et al. 2015, 2019) and the positive impact of the N2N program on the community as a whole, the program leads intend to continue and expand the N2N program in the future to include additional communities within the university.

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