

# THE IMPACT OF COVID-19 ON CIRCLES OF SUPPORT AND ACCOUNTABILITY

## CIRCLES EUROPE RESEARCH COMMITTEE

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## **INTRODUCTION & CONTEXT**

Circles of Support and Accountability [CoSA] are groups of trained community volunteers who support people convicted of a sexual offence (usually contact offences against children) to integrate back into the community post-release. CoSA programs operate on the premise that by providing recently-released Core Members (people convicted of a sexual offence, CM) with a Circle of 4 -5 community volunteers who provide both practical support and accountability, they will be better equipped to lead law-abiding lives in the community. However, during the COVID-19 pandemic, the usual face-to-face sessions were not possible.

## **AIMS OF THE RESEARCH**

This research looks to investigate the impact that COVID-19, mainly social distancing and remote working, has had on CoSA provision and providers in Europe, the USA, and Canada and the potential impact of the pandemic on Circle processes moving forward.

## METHODOLOGY

A mixed-method, English language survey was designed and distributed via Qualtrics. All CoSA providers who were members of the Circles Europe Association were sent a link to the online survey. A total of 16 CoSA providers from eight different countries<sup>1</sup> (three UK providers, five Dutch providers, one Belgian provider, one Spanish provider, Belgium, Spain, one Latvian provider, one Irish Provider, one American provider, and three Canadian providers) completed the survey during lockdown in late July, as well as throughout August 2020.

The study ran for four weeks over the initial peak lockdown period spanning July-August 2020. The research received ethical approval by the University of the West of England's Research Ethics Committee.

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<sup>1</sup> Please note that different countries have different numbers of CoSA providers, with some countries having multiple providers (UK, Netherlands, Canada, USA) and others only having one (Spain, Ireland, Latvia, Belgium).

## FINDINGS

### The impact of COVID-19 on current Circles

All the CoSA providers involved in the study moved, all or most of their activities online. At the time of lockdown there were 182 circles running across the 16 CoSA providers that participated in the study, with the move online having mixed results.

*Those using zoom have fared better in maintaining engagement, but volunteers do not feel able to challenge as effectively on remote contact. Therefore, the accountability aspect of the CoSA is missing. Those on teleconferencing have struggled as CMs not very engaged and conversation does not flow. Those on 1 to 1 tel. calls have struggled with repetitive nature of the conversation. (a UK CoSA Provider)*

A small number of Circles were suspended (21 Circles from UK, Canada, and Latvia), with young peoples' Circles in the UK being especially impacted.

*It is considered not appropriate to start new Circles remotely so we shall wait. (a Dutch CoSA provider)*

A small number of Circles (only three Circles, one from the Netherlands, UK, and Canada) were permanently closed.

*Core Member not able to access virtual contact very easily and felt it was no longer helpful. (a UK CoSA provider)*

### The impact of Covid-19 on referrals for new Circles

Twenty-two Circle referrals across five providers in the Netherlands, Canada, UK, and Latvia were not taken.

*Lack of released from prison core members. (a Latvian CoSA provider)*

*Enquiries not progressed to referral as not possible to assess comprehensively without face to face interviews. (a UK CoSA provider)*

Twenty-seven Circle referrals across nine providers and providers in the Netherlands, Belgium, UK, Ireland, and Latvia were accepted, but the start of the Circle was postponed.

*It was considered not feasible to start a new circle remotely. (a UK CoSA provider)*

Twenty-five Circle referrals across five providers in the USA, Canada, UK, and Latvia were started remotely, but these were limited in scope and presented various challenges.

*We are referring only to the pre-circle engagement between circle coordinator and future core member. We do not expect to start Circles remotely. (a UK CoSA provider)*

*(We found it) more difficult to build common ground. (a USA CoSA provider)*

#### **The impact of COVID-19 on staff training and development.**

No Circles staff were made unemployed or voluntary resigned during the lock down period, with only seven members of staff from one UK provider being furloughed for a short period of time.

Many providers reported no impact on staff health and well-being (seven providers in Belgium, Canada, Netherlands, Ireland, Spain, and Latvia) with less reporting staff being somewhat impacted (five providers in Netherlands, UK, and USA) or severely impacted (one provider in Canada).

*We find ourselves somehow limited in what we can deliver, although the needs of our clients have increased. This is sustainable in the short term, hardly for much longer. (a UK CoSA provider)*

*Increased strain due to increased contact by CMs seeking relief from mental health crisis. (a Canadian CoSA provider)*

*Furloughed staff have been maintaining contact with the 2 remaining staff and each other by weekly training sessions but are missing the face to face contact with team and with the volunteers and CMs. (a UK CoSA provider)*

A larger proportion of providers said that COVID-19 had no impact on staff training and development (five providers and providers across UK, Canada, Netherlands and Spain), with fewer providers stating that it had some impact (four providers across Netherlands, Latvia, Ireland and America) or a severe impact (one CoSA provider, from the UK).

*Staff have met weekly for developmental/training discussion, but the content is curtailed. (a UK CoSA provider)*

*Co-ordinator has had training cancelled including AIM3 interventions. (a UK CoSA provider)*

*A remote training format was created that works but not as well as in person training. (USA CoSA provider)*

### **The impact of COVID-19 on volunteer recruitment, retention, and wellbeing**

A large proportion of CoSA providers stated that COVID-19 had impacted volunteer recruitment, either somewhat (seven providers across UK, Netherlands and USA) or severely (four providers across Netherlands, Spain, UK, and Ireland), with two providers stating that there was no impact (from Canada and Latvia).

*Volunteers signed in on websites. They were approached through phone and been told that an interview would be taken at a later date. At this moment it is possible to take the interviews and all the aspirant-volunteers have been interviewed. The training is a different issue. We can have 6 persons in a room. Normally 2 trainers and guest-speakers. But new volunteers are necessary. We have planned 3 training-sessions instead of one. It has been delayed and in our region, new volunteers are very, very welcome (a Dutch CoSA Provider)*

*Applications have continued to come in but the training schedule has been impacted. We were about to launch online training but recent changes to lockdown rules have meant that we can*

*look at face to face training in a COVIDsecure way. However, this all takes a lot of planning and with staff furloughed, there have been inevitable delays (a UK CoSA provider)*

*Recruitment is actually up with some having more time or looking for ways to give back in this time (USA CoSA Provider)*

A large proportion of CoSA providers reported either that COVID-19 has had no impact on volunteer retention (six providers across Canada, Netherlands, USA, Spain, and Ireland) or that there was some impact (four providers in UK, Latvia, and Netherlands).

*We expect some of our volunteers to leave the provider as they were not allocated to any Circles. (a UK CoSA provider)*

*Two active volunteers withdrew from a circle. One came in conflict with the core member because she refused to go on skype/WhatsApp, out of fear to give her privacy away (her last name, her private phone-number; we provide phones, but the phones are old Nokia-phones). The other volunteer got sick (no[t] COVID-19) and withdrew. (a Dutch CoSA provider)*

*Regular contact and discussions with existing volunteers with (Latvian Provider)*

*Have asked experienced volunteers to come back to help us set up new Circles, will have four or five Circles up and running by year end with a combination of new vols and experienced vols. Should achieve original goals with a lot of work over last 6 months (Irish Provider)*

The majority of CoSA providers reported that COVID-19 has had some impact on volunteer engagement with ongoing Circles (eight providers across Netherlands, UK, Belgium, Ireland, and USA) with only one stating that there was a severe impact (which was Latvia) and the remaining providers stated there was no impact (two providers across Spain and UK).

*Some Volunteers made a phone-schedule, others kept contact via WhatsApp. Some volunteers felt the urge and the need for their presence (through phone, etc.). Especially with core members with issues concerning Child-Pornography. Other volunteers froze a little and needed some guidance about 'how to approach a core-member without face to face contact. (a Dutch CoSA provider)*

*Most volunteers have carried on engaging well with young person on video meetings etc. Some have been reluctant to start face to face socially distanced meetings. (a UK CoSA provider)*

*Some (volunteers) have preferred remote format and others want in person as soon as possible (a USA CoSA provider)*

CoSA providers were split on whether COVID-19 had an impact on volunteer health and well-being, with some saying that it had no impact (six providers in Belgium, Netherlands, Ireland, Spain and Latvia), with similar numbers stating that it had some impact (six providers in Netherlands, UK, and USA) and a small number reporting a severe impact (one provider in Canada).

*Overall, volunteers adapt to the new situation. Some of them felt more anxiety and one could not adapt to the new form of communicate (afraid that her private mail address or phone number should be used for Skype or Zoom. (a Dutch CoSA provider)*

*Difficulty adjusting to new Circle dynamic, discomfort with new types of conversation, feeling useless (a Canadian CoSA provider)*

### **The impact of COVID-19 on Core Member retention, engagement, and wellbeing**

CoSA providers were split on whether COVID-19 had impacted on Core Member engagement with their ongoing Circles, with a large proportion saying that there has been no impact (six providers in UK, Canada and Belgium), and with similar numbers stating that it had some impact (six providers in Netherlands, Canada, Belgium and UK). Very few indicated being severely impacted (one provider in Latvia).

*Some Circles started Zoom/Skype-sessions and were very active in WhatsApp. Other core members (those who live in homes with staff) froze a little and are waiting for the lockdown to be over. One core member, whose circle just started told the coordinator that he felt not familiar enough to proceed contact via phone/mail/video. The circle was just starting, and this circle eventually stopped during Corona-time. (a Dutch CoSA provider)*



*Most CMs adjusted alright to remote meetings, but conversations in some cases have been made difficult through lack of privacy, lack of body language, and poor phones. (a Canadian CoSA provider)*

*Those on phone contact have struggled more than zoom contact but not all CMs can access zoom or can afford to have telephone conferencing. (a UK CoSA provider)*

All providers, apart from those in Belgium and Latvia, reported that Core Member health and well-being were somewhat impacted (nine providers in Netherlands, Canada, UK, Ireland, Spain and USA) or severely impacted (three providers in UK and Canada).

*Lockdown means loneliness; Core Members told us they feel that they are not alone in this. Some of them said: I'm used to it, have been in prison, it will pass over. (a Dutch CoSA provider)*

*Some young people are supported well at home. Some have seen a decrease in health and well-being for example no exercise or routine or schoolwork etc. (a UK CoSA provider)*

*Increased anxiety, decreased income, halfway house restrictions resulting in poorer mental health, no visits to family. (a Canadian CoSA provider)*

### **The impact of COVID-19 on the feedback on Circle dynamics**

Slightly more CoSA providers stated that COVID-19 had no impact on the feedback between Circles staff and volunteers on their ongoing Circles (six providers across UK, Canada, Netherlands, Latvia, Spain, and Ireland) and only five stated that there was some impact (which were in USA, UK, and Netherlands). No providers stated that there was a severe impact.

*The feedback was given per phone. Some volunteers needed a bit more attention, the coordinators provided that. (a Dutch CoSA Provider)*

*Staff sit on all Circles. (a Canadian CoSA Provider)*

*One part-time staff member is coordinating all remaining Circles so it is not possible to provide the service one would wish to. Fortnightly/ monthly zoom meetings are offered to all volunteers to maintain contact but not all avail themselves of this. (a UK CoSA provider)*

*Continued by phone and zoom. (an Irish CoSA provider)*

The majority of CoSA providers stated that COVID-19 has had no impact on the feedback between Circles staff and core members on their ongoing Circles (nine providers across UK, Canada, Netherlands, Latvia, Spain, USA, and Ireland) with three stating that there was some impact (which were in UK, and Netherlands) and one provider stating there was a severe impact (based in the UK).

*Some core members were fine, others were given more attention because the risk or needs were estimated higher. (a Dutch CoSA provider)*

*Staff is in regular contact with all Core Members. (a Canadian CoSA provider)*

*Most communication between Core Members and coordinators has been put on hold and any issues are dealt with via volunteers or the supervising agency. (a UK CoSA provider)*

The CoSA providers were split on the impact that COVID-19 has had on the feedback between core members and volunteers in their ongoing Circles, with some stating that there was no impact (six providers across UK, Canada, Netherlands, Latvia, Spain, and Ireland) or that there was some impact (six providers in UK, USA, and Netherlands); however, none stated that there was a severe impact.

*Some Circles tried to keep in contact, but felt the certain subjects were more difficult to address via phone. (a Dutch CoSA provider)*

*For those running virtually Circles, feedback is satisfactory but not as good as face to face. For those on hold, there is little if no communication/ feedback. (a UK CoSA provider)*

*Improved with one-to-one phone calls before going to zoom meetings. (an Irish CoSA Provider)*

**Impact on CoSA providers moving forward**

Most Circles providers stated that COVID-19 had no impact on the funding of their ongoing Circles, at least in the short term (eight providers and providers across UK, Canada, Netherlands, USA, Ireland, and Latvia) with only three stating that there was some impact (UK, Netherlands, and Spain).

*Not an issue, because our government is our funder. No changes here. (a Dutch CoSA provider)*

*Some bids have been put on hold and some interviews with potential funders are on hold. (a UK CoSA provider)*

The Circles providers reported either that COVID-19 would somewhat (six providers across Netherlands, Spain, UK, and Belgium) or severely change (two providers from UK or Latvia) the traditional delivery method of a Circle. However, four providers (UK, Canada, USA, and Netherlands) believed that there would be no impact, at least in the short term.

*Young persons' Circles are activity based so this will have to be monitored to see how realistic they are. Venues will have to be risk assessed and we might have to have fewer Circle members. Volunteers who are in the vulnerable category will not be able to be used for the foreseeable future. (a UK CoSA provider)*

*Criteria of core members may need to be considered. (a Latvian CoSA provider)*

*Video meetings will probably continue in some cases for some time. (a UK CoSA provider)*

*Online modality will be incorporated. (a Spanish CoSA provider)*

*Once in person meetings are again allowed it should go back to the way it was (a USA CoSA provider)*

**What positive impact did COVID-19 have on your Circles provision?**

In the main, most providers were able to point out some of the opportunities that new ways of working during COVID-19 presented. These opportunities were mainly centred around feeling more

inclusive, making greater use of virtual and online resources, and greater flexibility in the timing of Circles meeting, as well as greater availability to confer with other professionals.

*In some Circles more inclusion through the feeling we are all in this together. (a Dutch CoSA provider)*

*Increased contact with volunteers (both by staff and Core Members), volunteer development, increased capacity to reflect on feeling and coping strategies. (a Canadian CoSA provider)*

*The utilisation of zoom meetings with other agencies has enabled attendance at national level. It has given us the opportunity to review our practices, including comprehensive risk assessments of venues. Some virtual meetings might be useful, and some online training might be possible. (a UK CoSA provider)*

Many CoSA providers stated that they were impressed with the commitment of volunteers, as well as the fact that Core Members welcomed, and were grateful for, the online support.

*Creativity, high level of commitment from volunteers, CM very grateful for the online support. (a Spanish CoSA provider)*

*Gave Circles a chance to adapt and added the use of technology as an option. (a USA CoSA provider)*

One country, Latvia, stated that there were no positive outcomes from the COVID-19 changes.

*We have not any positive things, maybe just new ideas how to work in new ways (work online). (a Latvian CoSA provider)*

### **What implications are there for Circles moving forward in the “new normal”?<sup>2</sup>**

The participants indicated that there might be challenges in receiving and maintaining funding moving forward into the “new normal.”

*Likely to have issues with funding; uncertainty around what will be deliverable; potentially, having to ask volunteers to take some risks (although limited). (a UK CoSA provider)*

Additionally, concerns were expressed about whether volunteer recruitment would remain high given the restrictions around meetings, increased social distancing, and risks around the use of public transport, as well as inside gatherings and social distancing.

*We are dependent on public health authority on meeting in person. There will be added risks for both volunteers and core members who are often aged and or reliant on public transit. (a Canadian CoSA Provider)*

*It's harder to travel by train or bus, you need a big space to meet. (a Dutch CoSA provider)*

*Lack of face to face meetings, possible lack of motivation for the volunteers. (a Latvian CoSA provider)*

*Do not find spaces for meetings, some Core Members are scared. (a Spanish CoSA provider)*

*Circles should remain about the same, but with technology people could join remotely when away. (a US CoSA provider)*

Some providers, mainly from the Netherlands, suggested new ways of working for Circles in the “new normal,” including increased outdoor meetings and activities (this could be weather dependent with the research happening in the summer).

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<sup>2</sup> A “new normal” emerges when changes to accepted ways of doing things are so profoundly changed by an event or series of events that new methods and processes must be employed to adapt to those changes. The effects of the Covid-19 pandemic have been dramatic in many international jurisdictions; to the extent that many aspects of social existence have changed, likely forever. An example of this would be the much greater reliance on online technologies for meetings, training sessions, conferences, and routine social contacts.

*More one on one activity's, more outdoors, taking a stroll or hike. Coordinators national team came together once in the 6 weeks. During crisis it was weekly via video-calling. So, there was more cohesion in the national team. (a Dutch CoSA provider)*

**What are the biggest issues your provider is facing in the next 12 – 18 months?**

One of the biggest concerns was being able to transition back to previous ways of running Circles, whether this would be possible and what it would look like. The participants wanted Circles to return to what they were before, but were uncertain as to whether this was possible, and if this changed way of working would impact funding, recruitment and engagement moving forward.

*Getting back in the flow with the circle-activities. completing incomplete Circles by training new volunteers, trying to get rid of the waiting list for core members (by training the just accepted new coordinators). (a Dutch CoSA provider)*

*No concerns just at this time, it is going well; 2nd phase of Covid-19 may prove more of a challenge if we end up with ill volunteers and core members or staff. (a Canadian CoSA provider)*

*The recruitment of volunteers, involvement of the new core members, training of prison staff. (a Latvian CoSA provider)*

*If social distancing continues and local lockdowns or extra waves it will be constantly difficult to support young people in the best way we can. (a UK CoSA provider)*

*Maintain the structure to continue growing and developing new Circles. That we continue being referred to candidates for central membership. (a Spanish CoSA provider)*

**Do you have any good experiences and suggestions/lessons learned that you would like to share with other providers?**

Many providers talked about the realisation that virtual Circles could be successfully used, but that this only worked with established Circles where the meetings had transitioned to an online platform, rather than in the creation of new Circles.

*Beginning Circles with a reiteration of ground rules: take a few breaths, remind all circle members to be present to each other, having a reflective question can work for some Circles, modelling confidence that meeting via phone can work too. (a Canadian CoSA provider)*

*We have pivoted to go virtual without too much difficulty. We have good IT support. We also use teleconferencing where needed and conditions of core members are required. (a Canadian CoSA provider)*

*Its ok to use programs like MS Teams to have meetings. (a Dutch CoSA provider)*

*Maintain contact with large groups of volunteers through monthly meetings with a speaker and then break out rooms for small group discussion. Try to help CMs access zoom rather than tel contact- although not always possible if their MOSOVs (Sexual of violent offender manager)/POs want to restrict internet usage. (a UK CoSA provider)*

*Online contact can be a nice variety to ftf [face-to-face] contact, but it must be an addition to ftf contact. Some Circles shared more daily experiences and information through WhatsApp and discovered for example nice online games to play with a group. But the most Circles are looking forward to see each other in real life. (a Dutch CoSA provider)*

The providers praised everyone's adaptability in responding to the COVID-19 and stated that there was a feeling that we were all in this together.

*It was amazing how proactive and quickly our centres transitioned to remote meetings. (a USA provider)*

## CONCLUSIONS

### The main findings

1. All CoSA providers were impacted by COVID-19 and the lockdown period in Spring and Summer 2020; with the majority being adversely affected.
2. There were differences in the impact of COVID-19 on Circles provision within and between countries; particularly across CoSA providers in the UK and the Netherlands (however, it must be stated that these two countries had multiple CoSA providers complete the survey, which was not true of all countries with CoSA provision).
3. There was an impact on staff, volunteer, and Core Member health and wellbeing because of the pandemic, some of which affected their engagement with Circles provision and each other.
4. Circles providers were able to adapt their offering (in the short term) to continue providing a version of Circles and to support Core Members, as well as staff and volunteers, during the pandemic.
5. Circles providers wanted Circles delivery to return to a face-to-face provision but were unsure when this would happen or if it would ever be possible.

### Discussion & reflections

This research highlights the importance of CoSA providers having to adapt their Circles provision as a result of the COVID-19 lockdown and, importantly, the need to continue this adaption in regard to the limitations presented by the “new normal.” CoSA providers are considering innovative ways of implementing Circles in an adapted fashion, including the creation of a hybrid model of Circles with face-to-face and virtual provision, more outdoor activities, increased online training, and stressing the need for continued commitment from stakeholders, as well as continuing the stronger working partnerships that emerged through lockdown.

This research shows that most CoSA providers across various international jurisdictions managed to continue to provide some level of support to Core Members. This enabled new learning in how to make virtual or remote provision meaningful. The findings reported herein show that blended



approaches employing face-to-face provision and alternate forms of support (such as remote and virtual means) can work at least in the short term. These virtual and remote methods of provision, however, appear to work best with Circles that have already started with face-to-face contact and, therefore, include an aspect of pre-existing rapport. All Circles providers indicated that they prefer to return to face-to-face Circles provision but would be prepared to supplement this provision with virtual and remote forms of support, as well as more outdoor activities and online training.

## RECOMMENDATIONS

This report outlines the impact on CoSA provision of the first COVID-19 lockdown during the Spring and Summer of 2020. Results highlight the impact that pandemic precautions have had on Circles providers internationally. The following recommendations are made to assist providers in the event of any future lockdowns and, potentially, as we move into “new normal.”

- Traditional wisdom has been that CoSA works best in person, which means that there needs to be greater consideration of what a socially distanced Circle looks like; especially moving into the autumn and winter months of 2020-2021.
- CoSA providers are advised to develop guidelines for remote and socially distanced Circles, placing them into their risk registers and future bidding plans. Some jurisdictions may need to contend with prohibitions against use of online resources for some Core Members on community supervision. Liaison with statutory agencies may assist in relaxing some conditions of release in the furtherance of continued Volunteer/Core Member contacts.
- CoSA projects benefited from funder support in adapting and/or delaying their use of resources, which helped them weather the impact of the first wave and lockdown. As such, funders are encouraged to give CoSA providers assurances on the continued provision of funds and, if that is not possible, clear direction would be appreciated as to what any restrictions may be.
- Core Members need focused, additional support in times of lockdown as the resulting isolation is likely to have an impact on their mental health and wellbeing.
- CoSA staff need additional support during periods of lockdown; especially in terms of the impact of working from home, working remotely, and any impacts on mental health and emotional wellbeing.
- CoSA providers, with their partners and funders, need to develop clear pathways to navigate the “new normal” and the most effective ways to plan CoSA provision; including, whether there needs to be additional research and investment in new versions or variations of the CoSA model.