

Brighton Center's Response to COVID-19: Reflecting on Service Learning and Social Determinants of Health

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The impact of COVID-19 on Brighton Center operations

Many organizations throughout the greater Cincinnati and Northern Kentucky areas, including the Brighton Center, have seen financial impacts due to the COVID-19 pandemic. Since many of the populations that the Brighton Center serves have been disproportionately affected by the adverse effects of the pandemic, an increase in services and funding for those services has been necessary. Additionally, there has been an increased need for services as many more people are experiencing financial hardship than prior to the beginning of the pandemic. As per the US Bureau of Labor Statistics, the unemployment rate in the Cincinnati-Indiana-Kentucky metropolitan area increased from 4.4% in March of 2020 to 14.1% in April to 2020⁵. Many fundraising events, including Wine over Water and Roaring 20's Gala, have had to transition to a virtual platform. It is probable that fundraising events will have to remain virtual for the near future, which may impact fundraising efforts and attendance rate at events, leading to a decrease in monetary donations needed to support an ever growing increase in demand for services. The Brighton Center has extended their services to many individuals experiencing new job loss, homelessness and other financial struggles during the pandemic--but not without difficulty. The need for monetary donations and grants remains as pertinent as ever in order to extend help and services to those most affected by the pandemic.

The COVID-19 pandemic has greatly impacted personal communications, relationships and interactions. Meetings and large gatherings have almost entirely transitioned from in-person to virtual. Many services, including exercise classes and community events, have either been cancelled or changed to a less convenient online format. However, the Brighton Center has not only grown in the face of these challenges but has also come together as a community to collaborate and craft creative solutions. They describe their commitment to adapt to changing times in a recent newsletter: "Over the past two months, we have adapted in every imaginable way to continue to meet community needs under ever-increasing constraints due to COVID-19. Crisis breeds creativity and provides the opportunity of seeing the way we deliver services through a different lens"⁷. Though the pandemic has created unprecedented and unpredicted struggles for the Newport community as a whole, the Brighton Center has made the most of the situation by collaborating and growing in communication skills.

Throughout the COVID-19 outbreak, Brighton Center remained committed to providing critical services to the community which they serve. In a statement to the community, Brighton Center said "We continue to remain committed to serving the community and will adapt and

tailor our services to meet the immediate and critical needs of families during these unprecedented times, as we have for over 50 years.” Since March 2020, Brighton Center has monitored health and safety guidelines provided by the Center of Disease Control and the State of Kentucky. With these recommendations in mind, Brighton Center has temporarily stopped accepting clothing and household donations. Clothing Closet, a neighborhood thrift store that provides high quality and affordable clothing and household items at affordable prices, is closed to the public until further notice. Food donations are also currently not accepted. Nevertheless, Brighton Center is accepting monetary donations to be able to purchase food, personal care, and cleaning supplies in bulk to sustain daily operations and support families in need. Furthermore, Brighton Center continues to provide Emergency Assistance. Services provided by this program include access to a food pantry, USDA TEFAP Commodities, USDA CSFP Commodities, clothing vouchers, personal hygiene items, limited financial assistance, and limited access to baby items. Last year, Brighton Center accepted over 9,915 emergency calls and almost 1,000 individuals received food through Brighton Center’s USDA Commodities distribution program. Even social distancing protocols remain in place, Brighton Center recognizes their tremendous effect on the community and continues to provide services individuals rely on the most³.

The onset of COVID-19 has put a strain on volunteer resources for the Brighton Center. They have reported a 300% increase in the number of individuals requiring their services since the pandemic began. This increased demand reflects both increased usage by prior aid recipients, but also an expansion of the number of families needing assistance. In an April 23rd communication, the Brighton Center reported that in the prior weeks, 30% of the families they served had never previously received assistance from the Brighton Center. Unfortunately, this increased demand comes at a time when volunteering resources are more limited. With reductions in the number of available volunteers due to the pandemic, sufficient personnel to provide assistance presents an ongoing challenge.

Socially precarious times such as these normally cause an increase in the number of people both serving in non-profit organizations and utilizing their offerings; however, due to the highly contagious nature of COVID-19, a natural concern arises for non-profit organizations whose work is highly centered around people. With responsibility to customers, clients, employees, and volunteers alike, organizations are now faced with the challenge of managing the risks and benefits of reopening. The National Council of Nonprofits has issued guidelines to minimize risks to volunteers, including making space assessments in all buildings that volunteers work in, ensuring adequate supplies of hand sanitizer are available, and restructuring in ways that allow volunteers to remain physically distant from one another¹⁰. In the statement that Brighton Center issued regarding COVID-based adaptations to their services³, they describe the balanced approach that they are taking to ensure the safety of their volunteers as well as those benefiting from their services. These changes vary by service, but in

general, services with no physical requirement such as career guidance have moved online, while services that are necessarily in-person such as Scholar House are still operating using their volunteer staff as before. In all in-person cases, they are committed to protecting everyone they contact, which in their mind now means operating within the guidelines set out by the CDC as well as the requirements of state government. Brighton Center places a high value on the services they offer to the community as well as their volunteers, and their adherence to CDC recommendations and limitation of in-person contact is evidence of their commitment to safety.

The impact of COVID-19 on Brighton Center clients and the surrounding community

On March 16th, 2020, the Brighton Recovery Center (BRC) suspended intakes of new women to its program, though they have continued to serve the women already enrolled at the center because this is a residential facility. In an effort to maintain social distancing, the center is no longer allowing residents to attend outside Alcoholics Anonymous meetings and no outside volunteers are allowed to enter the building. However, the BRC's catering service, Center Table, has remained operational for delivery only, in order to provide financial support and important job training skills for the center's residents. The most recent update on the Brighton Center's website states that new intakes are still suspended until further notice due to health concerns, although the BRC continues to accept referrals and place potential residents on the waiting list. Finally, despite the pandemic, a virtual New Beginnings Ceremony was held in early June for 18 women who completed the BRC's program³.

Center for Employment Training has resumed in-person skill instruction as of July 6th, 2020. The office has been open normal business hours during the weekdays. Precautions such as social distancing and allowing only one customer in the office at one time are being taken to decrease COVID exposure. The Kentucky Career Center (KCC) is offering in person services by appointment at select locations (KCC-Williamstown and CVG Career Center). Virtual services over the phone are also being offered at the other KCC locations. Additionally, financial education services are virtually providing one-on-one financial coaching to individuals.

Brighton Center offers several programs tailored to child care and child development. While some child care centers were able to remain open, home visiting programs suffered in the advent of COVID-19. Brighton Center's Home Instruction for Parents of Preschool Youngsters (HIPPY) is one of Kentucky's Health Access Nurturing Development Services (HANDS) home visiting programs. HIPPY aims to guide vulnerable families safely towards optimal health outcomes, social behaviors, and academic achievement through home visits and a child development curriculum. Prior to the pandemic, home visits included activities for school readiness, parenting tools and techniques, and resource referrals.

Jamie Coyle, HIPPY program director, and Tammy Weidinger, Brighton Center President & CEO at the time, spoke to the evolution of HIPPY throughout the pandemic. COVID-19 led to

an abrupt end to HIPPY's face-to-face meetings in the beginning of March. Initially, HIPPY had to transition to 30-minute phone calls focused on how families were doing and coping with the pandemic and assessing any current needs of the families⁴. HIPPY relied on in-person visits to build strong relationships. Short phone calls, often difficult for parents with young children to juggle, made it tough to continue the curriculum⁴. A necessary shift to prioritizing discussions on food, diapers, and cleaning supply deliveries, help filing for unemployment, and financial assistance meant sacrificing a focus on the child development curriculum at the heart of HIPPY. By May, HIPPY got creative with the curriculum and began delivering 2-4 weeks of lessons to families at a time to be discussed weekly over Zoom, FaceTime, or a phone call. While returning to the curriculum was exciting, about 10-15% of families faced electronic issues, including lack of Wi-Fi connections, limited data plans, and no computers or printers to access new materials⁶.

Aside from families already enrolled in the program, some HANDS requirements did not allow for flexibility in crisis situations like COVID-19. New family intake for HIPPY froze on March 16. This freeze came at a time when families perhaps needed the most guidance, while learning how to work from home while caring for young children and losing jobs without having time to prepare⁴. Overall, social isolation introduced by COVID-19 created potential barriers to the success and well-being of vulnerable children, both current and future HIPPY enrollees.

Currently, 207 senior citizens are sheltering in place and maintaining social distancing in the Brighton Center's three senior residential facilities: Saratoga Place, Two Rivers, and Austinburg Apartments. Since March, these buildings have not allowed any outside guests to enter, unless these guests were providing essential services or critical care to the residents. Additionally, the residents were encouraged to practice social distancing within common areas of the building³. This is very difficult for the residents, since they were used to having many volunteers and visitors come to the building for various activities (especially bingo) frequently, and to interacting with each other on a regular basis. This sudden and unexpected lack of social connection is very stressful and emotionally dejecting for the residents, though the staff are trying to keep up their spirits through starting a card program so that community members can send encouraging notes to the seniors. Furthermore, Brighton Center employees have made countless phone calls to check on each resident, as well as having staff in the building five days a week and have the resident manager available on the weekend. Some bright spots: in September, the staff and residents celebrated Senior Citizens Day, and in June, Ron, an 86-year old resident of Saratoga Place, received several medals in recognition of his military service from local and state officials. Despite this, this lack of interaction and social connection is likely having a negative impact on the seniors, as we can predict from research on the subject, though we have not been able to discuss these topics with the residents or staff themselves³.

Fortunately for the seniors living at Two Rivers Apartments, 98% of them have not been financially impacted. With the economic stimulus payment and the increase in Supplemental Nutrition Assistance Program (SNAP) benefits to \$194 a month from what some were getting

(\$15 - \$25 a month), we have been told from the Center that the residents are doing quite well. The Salvation Army has also been of much assistance, bringing a box of food to 40 individuals each month. With the additional benefits, the residents have been able to make purchases to improve their quarantine life, such as televisions and computers. We were told that some of them had enough financial flexibility that they were able to share some of their compensation with family members outside of the Center who were more negatively impacted by the financial effects of the pandemic.

Student and physician advocacy in times of COVID-19

A large issue gaining prevalence during the COVID-19 pandemic has been unemployment and the subsequent loss of insurance that comes with losing one's job. Many patients will completely be lost to healthcare follow-up when they lose insurance, leaving their chronic health problems to get worse and new acute problems to go untreated. The individuals that are served by the Brighton Center are already at a high risk for being under or uninsured and that disparity is likely worsened by COVID-19. As healthcare professionals, it is not only our job to care for our patients but also to advocate for our patients ability to receive that care that we are willing to give them. The Pandemic Unemployment Assistance allows patients who have been diagnosed with COVID-19 to receive additional assistance from the government. We need to advocate to make sure that our patients are educated on the application process for this and have the right evidence of their COVID-19 diagnosis. Since many of our patients are getting diagnosed in a variety of different ways, it is important that we help track and return the laboratory results in an efficient manner. We should strive to create a centralized Department of Health portal so patients can easily retrieve their testing results and provide them to the appropriate government agency. Otherwise, it can be very difficult to track down temporary testing sites for results later on.

There are a myriad of ways that students and physicians can use their platform to support the needs of our partners and their community. Due to the loss of income or employment that many individuals face in the midst of the pandemic, affordable housing is important now more than ever. By partnering physicians and health systems in the Newport area with Habitat for Humanity, we could better work towards connecting members of the Brighton Center and surrounding community with the resources to achieve housing stability. Habitat for Humanity has shared recommendations for solutions to inform the U.S. Congress' stimulus work, including mortgage forbearance for families, a national moratorium on foreclosures and evictions, and grants to nonprofit lenders to support payment forbearance. Furthermore, they have joined 200 other nonprofit organizations in urging the U.S. Congressional leaders to include a nonprofit track in future legislation that expands on the CARES Act. However, they need people who play influential roles in their communities to advocate these initiatives on their behalf and engage with local and state governments, and this

is where medical students and physicians could come in and lend their support. Additionally, students and physicians could serve as volunteer educators for the Brighton Center to increase public awareness about the pandemic, as well as dispel any myths about the virus itself. This could include infectious disease education seminars that teach individuals about how the virus can be transmitted, as well as proper hygiene techniques and best practices to stay safe and healthy during these unprecedented times.

There are a couple of opportunities for direct medical student advocacy through the American Medical Association. The framework of the American Medical Association is a lobbying body of organized medicine that uses lobbying dollars in order to support politicians that promote or write legislative policy that empowers patients, ensures quality of delivered healthcare, addresses health insurance and attempts to dismantle social barriers to good health outcomes. Medical students can write policies in which they posit that the AMA only support candidates that plan to increase COVID-19 testing and make it affordable for all patients, perhaps including patients that be undocumented or not have insurance. Once this resolution is adopted by the AMA, they will help candidates get elected who uphold these values of testing accessibility for all patients. Another opportunity to get involved in medical student advocacy via the American Medical Association is to participate in the Medical Student Advocacy Region Conference, where medical students visit their local representatives office in Washington D.C., and express their recommendations for the health of their community to the representatives themselves as constituents of the district. Representatives are not often medical professionals, and greatly appreciate the input of physicians and future physicians in their area. Their representative could potentially bring forward a piece of legislation that is in favor of expanding Medicaid to increase testing during the COVID-19 pandemic, and may not have known how important it is to do so without the input of the medical student advocates.

The unique health challenges associated with staying home to reduce transmission of COVID-19 offer an opportunity for medical students to advocate for better health outcomes in our community. Authors of a letter published in *Obesity* analyzed trends in Google search terms during the pandemic to identify increasing reliance on takeout food, propensity toward 'baking' and 'recipes,' and decreased interest in 'healthy eating' search terms². Already, reduced access to health care in medically underserved communities and those facing greater socioeconomic barriers create disparities in health screening rates and literacy; amid the pandemic, the community is reducing interpersonal interactions further. Still, face-to-face interaction is a critical method of sharing health information⁹. Public health fairs are one solution to these problems that can be implemented by a medical student body and offer an opportunity to improve health literacy and screening rates in our own community. Students are capable of providing basic health information as well as performing vital health screenings like blood pressure, blood glucose, and weight checks¹. Additionally, a public health fair would create a point of contact for community members and the resources available to them. Students could provide information available on coronavirus.ohio.gov pertaining to the work of community

action agencies, improvements to insurance coverage and assistance for lost coverage during COVID-19⁸.

References

1. Aponte J, Nickitas D. Community as client: reaching an underserved urban community and meeting unmet primary health care needs. *J Community Health Nurs.* 2007;24(3):177-190. doi:10.1080/07370010701429611
2. Bhutani S, Cooper J. COVID-19–related home confinement in adults: weight gain risks and opportunities. *Obesity.* 2020;28(9):1576-1577. doi:10.1002/oby.22904
3. Brighton Center. (2020). COVID-19 response. Retrieved from <https://www.brightoncenter.com/COVIDResponse>
4. Brooks, T (Producer). (2020, April 23). COVID-19 and Kentucky Kids: The Impact on the HANDS Home Visiting Program [Audio podcast]. Retrieved from <https://kyyouth.org/covid-19-and-kentucky-kids-the-impact-on-the-hands-home-visiting-program/>.
5. “Bureau of Labor Statistics Data.” *U.S. Bureau of Labor Statistics*, U.S. Bureau of Labor Statistics, 2020, data.bls.gov/timeseries/LAUMT391714000000004?amp%3Bdata_tool=XGtable.
6. Coyle, J. “Preschool Home Visits in the Era of COVID19.” *MomRising.org*. <https://www.momsrising.org/blog/preschool-home-visits-in-the-era-of-covid19>. Published May 12, 2020. Accessed September 26, 2020.
7. “Crisis Breeds Creativity.” *Brighton Center*, Brighton Center, May 2020, www.brightoncenter.com/blog/post/crisis-breeds-creativity.
8. Economic Resources for Individuals and Families. *Coronavirus.ohio.gov*. <https://coronavirus.ohio.gov/wps/portal/gov/covid-19/families-and-individuals/Economic-Resources-for-Individuals-and-Families/>. Published August 12 2020. Accessed September 27, 2020.
9. Murray K, Liang A, Barnack-Tavlaris J, Navarro A. The reach and rationale for community health fairs. *Journal of Cancer Education.* 2013;29(1):19-24. doi:10.1007/s13187-013-0528-3.
10. National Council of Nonprofits. (2020). Nonprofits and coronavirus, COVID-19. Retrieved from <https://www.councilofnonprofits.org/nonprofits-and-coronavirus-covid-19>.