



Responses to COVID-19: Challenges, Adaptations & Lessons Learned Among Nonprofits

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ABOUT THIS REPORT

The onset and persistence of the coronavirus pandemic brought about significant hardship for communities and the organizations that serve them. The lack of consistency in our nation's response, the implementation of unprecedented safety measures, a fluctuating economy, and the uncertainty for just how long we would have to live with these challenges, forced organizations to deal with circumstances that have been constantly changing. Communities across the U.S. are experiencing trauma and grief with tragic loss of loved ones, the undo strain on our healthcare systems, and other hardships faced by so many. The pandemic magnified the persistent racial and economic disparities that exist in the U.S., particularly among Black and Indigenous people of color, as positive tests and fatalities have been disproportionately higher in these communities (Brookings, 2020). This year also brought about a reckoning with the racial injustices that are endemic in our systems and institutions. Organizations have undergone significant change with many businesses and social service agencies being forced to downsize or close their doors. A recent survey found that a third of non-profit organizations in Massachusetts have had to reduce staff hours and pay, with almost eighty percent experiencing a decrease in revenue and almost ninety percent with disruptions in their service provision (Massachusetts Nonprofit Network, 2020).

Given these circumstances, Root Cause wanted to better understand how organizations have been dealing with the challenges that have come about as a result of this pandemic. The goal was to learn more about how organizations adapted to support their staff and better serve their communities. We were also curious about how organizations were making their decisions, the impact those decisions are having on organizations and communities, and what support organizations need as they think about how to move forward. This report summarizes what we learned from various organizations throughout the year.

RESEARCH APPROACH & PARTICIPANTS

Data for this report were collected in two waves: first via written responses early on during the pandemic between April and May 2020, and the second by conducting semi-structured interviews with organizations in the U.S. Organizations were identified and recruited for interviews based upon their connection to Root Cause team members and their relative experiences during the pandemic. Eleven organizations from Massachusetts, North Carolina, South Carolina, and Indiana were interviewed between September and November 2020. All participating organizations were direct-service providers who work with various populations including families of young children, students, young adults, moms, and adults in recovery. Services included *Care Management, College-Career Readiness, Housing & Concrete Support, Nutrition & Health Support, Online Learning & Engagement, Peer Recovery Support, and Prenatal Care Coordination*. All organizations were part of some type of network or collaborative that centered around the guiding principles of continuous quality improvement and/or collective action, as well as a formal recovery-oriented system of care. Similarly, all organizations were data driven and learning organizations, where feedback from staff and the people they served were core components of the way they do business. Organizations and programs were small to midsize or were local affiliates of larger, national organizations. More information about the organizations who participated in this research and the questions asked in the interviews are included in Appendix I and II.

ACKNOWLEDGEMENTS & APPRECIATIONS

I want to extend my deep appreciation to the organizations who participated in this research. All of the people who were interviewed experienced a lot of distress during this unprecedented year and demonstrated incredible resilience, empathy and a dedicated passion to serve their communities. Thank you for sharing your stories and for the inspiring work you do.

EARLY EXPERIENCES & RESPONSES

In the initial months of the pandemic, there was a lot of uncertainty about how to provide services and whether this would be a short-term crisis or if a sustained, long-term response would be required. With early shutdowns and stay-in-place orders, organizations saw a decrease in service participation, especially among organizations that partnered with schools. There was a dramatic increase in the challenges that communities faced which required organizations to not only to figure out how to provide services in a way that kept everyone safe, but to determine if other resources and supports were needed.

Organizations pivoted to provide basic services to their clients.

In response to the supply shortages at grocery stores across the country, organizations raised funds and donations to support families in need. One program, CMARC - Care Management for Children, a case management program within a county health department, created a short-term delivery service where staff carried out social-distance deliveries of formula and diapers to families. At this time, they had shifted to delivering services via phone and video calls but would drop off these items as families expressed needs. During the same time another program, Adopt-a-Mom, provided their families with \$150 grocery store gift cards as well as diapers, car seats, baby wipes, and other supplies.

All organizations had some type of virtual component initially during the shutdowns.

All organizations worked from home and/or reduced the number of staff working in person when cities shutdown in the Spring of 2020. Every organization used some type of technology to reduce or eliminate in-person interactions with the people they served. Most common forms of communication used were free and personal communication tools such as google meets, Facetime, WhatsApp, and of course phone calls and texting. Some organizations had access to virtual tools that had added costs including Zoom and Microsoft Teams. These tools were more commonly used for group gatherings. Other organizations could not function entirely remotely due to the nature of their services. One residential program had to remain open to provide services to their residents; however, in order to maintain safety measures, they had to reduce the number of staff allowed in the building and temporarily suspend taking in new residents until it was safe, and the proper protocols were put in place.

ONGOING CHALLENGES & ADAPTATIONS

While organizations made early changes to their services, these changes were not intended to be long-term or ongoing solutions. With the persistence of the pandemic and associated economic challenges, it was important to understand how organizations were maintaining early changes made, were making further or additional adaptations, and how the ongoing challenges of the pandemic impacted organizations.

Organizations mostly focused on their core services

Whether due to budget constraints, limitations of social distancing measures, or to meet the needs of communities, organizations largely limited their scope of services. Two of the college and career readiness organizations we spoke to, who work with high school students, limited their programming to juniors and seniors, and deprioritized outreach to younger students. Supporting students during their more immediate transition out of high school was a critical service, especially during a recession, while engaging younger students to think about their future options, while important, was not an immediate need.

What supports are organizations looking for?

Peer Learning:

Opportunities to connect & share ideas with other organizations

Virtual Management:

Frameworks and strategies to most effectively manage staff remotely

Technology Support:

Up-to-date information on what new resources and best practices are available

Another example is WIC of Guilford County, North Carolina who focused on enrolling and re-certifying families to ensure they could get assistance. Other parts of the program including providing nutritional assistance and breastfeeding education have not been administered at the same level.

Challenge2Change, a peer recovery support organization in Indiana, had to focus solely on providing support groups and have not been able to hold their regular community events. These events are important for recovery communities, as social connection is a protective factor in recovery. Although the events have not occurred, the program increased their provision of support groups. Prior to the pandemic, they held three in-person support groups a week but shifted to online support groups that were offered 3 times a day, seven days a week. The program wanted to ensure their community had sufficient outlets for support to mitigate against being socially isolated during the shelter-in-place orders. The program now is holding smaller, socially distanced in-person groups while also providing six online groups a week to provide multiple options for connection.

Lastly, Florence Crittenton, a housing and concrete support organization, had to reduce some components of their community-based work where they provide rent assistance and other resources to moms that are homeless or housing unstable. The organization also supports early childhood development by conducting assessments with young children to identify risks for developmental issues. Their focus has been on ensuring that assistance is provided but have been unable to conduct the child development assessments because they are providing services remotely. The assessments cannot be conducted over the phone as they rely on activities like observing behaviors.

These findings align with recommendations from The Bridgespan Group (2019) of how organizations can manage during difficult times, which include focusing on the services that have the highest impact and are the most mission aligned.

Other organizations had to adjust significantly or add elements to their core services.

While most organizations limited their scope, others had more adjustments to make to continue providing their services remotely and to meet the needs of their clients. All of the changes made were in alignment with the organizations' missions.

The Boston Private Industry Council (Boston PIC) School-to-Career Program, an organizational program that connects Boston's high school students with summer jobs and internships, had to navigate complicated and unforeseen logistical issues by moving online. The program provides career exploration and preparation activities to students and works closely with schools and local employers throughout the year to prepare for the summer program. Not only did PIC move online, but so did their partner schools and employers. There was a "wait-and-see" period early on to know which employers would keep their summer internship programs, which ones would reduce the number of available spots, and what they could provide for interns (in terms of technology, supervision, etc.) The students experienced issues with access to technology, reliable internet and quiet places to work. They also encountered barriers to being paid as payroll processes moved online and some students didn't have bank accounts, IDs, or other digitized records. Boston PIC had to provide extra support to these students throughout their internships to ensure they were connected, engaged, and so that they could be paid. The program typically supports their students throughout the summer and the organization had to go above and beyond to meet these extraordinary circumstances.

The Adopt-a-Mom program that provides care coordination and access to low cost, high quality prenatal care added other resources to their program including access to dental healthcare, and resources to support payments for ultrasounds and lab testing.

Lesley University's STEAM Learning Lab, who supports teachers in engaging students in STEM fields through project-based curriculums, broadened their scope to support teachers in providing online instruction. They

delivered a three-part online workshop series for teachers in Massachusetts around design, delivery, and inclusivity. They also designed online project-based lesson plans, called instructables, with a focus on at-home delivery and learning where students could find things around the house to do their science projects.

"[The pandemic] was able to shine a light on just some of the gaps that young people, especially young people of color were dealing with. The economy took a turn and a lot of the communities that we were serving rely on youth employment and summer jobs... The fact that we were able to transfer wage money to communities that really needed it, and do it in a significant way, I think made everybody super proud."

*Jonathan Rosenthal,
Assistant Director*

Whether or not organizations limited or shifted their scope of services, many had to invest significant resources to support technology access for the people they serve. For example, organizations have had to work with their partners, such as schools, to make sure that students had access to computers. They've also had to invest in increased internet bandwidth, provide hot spots for at-home connection, and provide technology troubleshooting and support to their staff and clients.

Organizations increased their provision of social emotional, mental health, and connections to other concrete supports. Community needs significantly increased throughout the pandemic, particularly around housing and food insecurity as well as financial assistance. People in recovery in Southeastern Indiana, who live in largely rural communities, have had a harder time getting access to mental health services.

Providers were already limited in the rural area before COVID, and the pandemic has made those resources even scarcer. One organization noted that their families were being forced to make difficult choices of going without resources or risking taking public transportation to buy food. The college and career readiness organizations reported that some of their students were less engaged in school and with their services as they had to support their families by working and/or providing childcare for their siblings. Organizations also noticed, more generally, that the people they served were feeling increased anxiety, loneliness, and worry about the future. All organizations already had mechanisms in place to provide social emotional and mental health support, but these services were significantly increased and have persisted throughout the year. For example, Challenge2Change already connected people to resources, but this became a larger part of their work during the pandemic.

Managing staff during the pandemic required intentional communication, continuous feedback, and adapting organizational policies.

Most organizations were managing their teams remotely or some hybrid version of remote work (i.e., rotating staff in person). Communication had to be more targeted and intentional. Communication was overall more frequent and created opportunities for staff to interact who would not typically engage because of different program areas. Policies were adapted to be more responsive to the personal needs of staff, including working from home, adjusting work hours, as well as shortening meeting times to accommodate for children being at home and to minimize the fatigue from increased screen time. Organizational leaders also strongly advocated on behalf of their staff. Fortunately, none of the organizations had to lay off staff at the time the interviews were conducted.

College Advising Corps of Greater Boston, who has worked entirely virtually since the pandemic's onset, instituted intentional team bonding activities and non-structured virtual time together to maintain staff cohesion. They also increased team engagement and conducted more frequent check-ins with staff, which has allowed the leadership team to stay in touch with more staff, more often. Similarly, other college and career reading organizations who moved to a full virtual environment, also found that they were able to have more frequent check-ins with teams and staff, whereas checking-in used to be more informal, now more structured time is provided.

At Year Up Greater Boston the national organization initiated a later start time, where no meetings are held before 9am, in response to staff feedback. They also shortened the duration and frequency of meetings (including no meetings on Fridays) to reduce staff screen time, and to support staff whose children are at home.

At CMARC, working from home was allowed before COVID as a perk for staff who were employed for a year and met performance standards. Working from home became available as an option for all staff as long as they maintained their productivity, including meeting benchmarks for enrolling families in services and continuing care coordination. The services they provided to families was entirely virtual, regardless if staff worked from the office or at home. The supervisor continued working in the office to show accessibility and availability to staff, checks in regularly with staff about the supports they need at home and emphasizes the importance of self-care.

Guilford County WIC, part of the county health department, was the only county in North Carolina to remain open during COVID. Initially, all staff were working in-person even though families were not coming in as often. The director advocated to the health department at the beginning of the school year that staff be able to work from home part-time to reduce stress on staff and to meet increased demands of home life (i.e., children being at-home for virtual school). Since then, they have been on a rotating schedule of in-person and working from home.

At Florence Crittenton, while staff time was reduced during the summer to comply with social distancing safety protocols, the leadership team found a way to continue to pay all employees at their same wages, despite hourly changes. This was critical to keeping staff morale up and ensuring that staff did not have to risk their health and the health of others to ensure their financial stability. The organization was able to do this throughout the summer until staff could come back and work regular hours. However, there was concern about not being able to continue this practice if another shelter-in-place order occurs.

While the pandemic posed significant challenges, organizations were also the midst of other organizational change. The Black Lives Matter movement added another element of organizational change as leaders had to grapple with their biases, the ways in which they contributed to injustice, and make improvements to their organizational culture and practices to better serve communities of color. The protests and consequences of the unrest that occurred directly impacted many of the communities served by the organizations we spoke to. One organization, Boston PIC, quickly responded by forming an internal Diversity, Equity, and Inclusion committee that began making changes to improve organizational practices and ensure staff of color were supported. This committee, in collaboration with senior managers, also hired a DEI consultant to audit the organization's internal practices and train staff and management.

Some organizations were in the middle of leadership transitions, strategic planning processes, and planning for other organizational changes that continued in spite of the pandemic. One organization was creating a new program to support moms, and even though they were facing capacity challenges with COVID-19, felt that the new program was even more important given the hardships families are facing. Other organizations in the middle of their strategic planning processes were considering how to incorporate what they've learned during this time into future work. While significant changes were not planned, the spotlight on disparities that their communities experienced underscored the need for their continued work. For example, Florence Crittenton relies on community partners to provide programming for their residents, but these partners have not been able to provide their services during COVID. The organization was already considering bringing some of

“Basically, we sat down and did some strategic budgeting around the crisis and were pretty adamant about not creating a separate crisis of making our own employees homeless. So, we worked out the budget and said we’re going to pay our employees, whether they’re working or not.”

*Cheryl O’Donnell,
Florence Crittenton Executive Director*

the programming in-house, and this situation enabled them to take a closer look at whether this was a long-term solution.

HOW TO MOVE FORWARD?

Long-term planning is more complicated given the uncertainty with severity and duration of COVID-19.

There was little consensus about how to move forward among all organizations. Early on there was a strong federal and state government response with the CARES Act, but without a second stimulus package, state funding is precarious and has left non-profit organizations in a holding pattern before deciding what they can do next year or even next summer. There are also long-term financial concerns for organizations that rely on contract revenue based on number of people served and for state contracts that reduced their budgets because of stimulus funding. Organizations that work with schools have had to plan semester-by-semester rather than thinking in the long term. This is due, in part, to decision making changes among schools about in-person, e-learning or hybrid teaching modalities, and also because college application processes are changing, and timelines are shifting. Organizations overall feel more prepared to adapt their service delivery; however, it remains a daunting challenge given the transition to providing in-person service delivery after the pandemic will take time. Similarly, because there is no baseline for comparison, it will be difficult to measure differences in service quality before, during, and after COVID-19.

Organizations are learning what adaptations can be leveraged to enhance their services.

Organizations are not radically changing their practices, nor will COVID-related changes necessarily be codified as ongoing practices. Direct service organizations for which being in-person is necessary will not significantly change their program models but there are changes can be leveraged to enhance the way services are delivered and to create broader access to services.

For example, College Advising Corps of Greater Boston will eventually return to being an in-person program but will be able to leverage technology to engage in students and schools in more ways. During the summer 2020 annual training institute for new staff, they incorporated virtual facilitation and online technology skills training into their curriculum. They had trainees conduct different online engagement activities during the training, thereby increasing their skills. This enabled staff to support their partner schools with technology assistance and provide technology best practices. They also were able to facilitate online college campus visits, which removes some barriers to access and expands the array of colleges they can introduce students to. Both of these practices can be used to build strong relationships and expand opportunities for students.

Challenge2Change conducted a survey with their peer support group participants in which 77% said they would prefer a mix of both in-person and online support groups to allow for greater flexibility for and access to group attendance. Prior to COVID, all support groups were conducted in person, but the program will likely continue to do a hybrid approach post-COVID as long as there is a demonstrated need for it.

Boston PIC adapted their summer internship application process to be entirely online this year, in response to the pandemic, as their applications process for their community-based organizations were still paper-based. This will likely remain an ongoing process as their applications for other programs were already online.

Adopt-a-Mom waived their \$100 service fee for all families to provide additional support those facing economic hardship. This policy change will likely remain in effect as the organization used these funds to help offset costs for moms who could not afford to pay but created budget amendments and flexed other sources of funding to offset the costs for all families.

Finally, one organization was already considering allowing some staff to work from home before the pandemic, and the relatively smooth transition of staff working remotely showed the organization that working from home was effective. Keeping a version of this practice in place will provide more staff flexibility while keeping the core program model intact.

KEY INSIGHTS

Programs that were able to access flexible funding enabled them to better support the people they served.

Whether this was to provide core services to their clients or add other program components to meet their clients' needs, flexible funding was essential. CMARC, for example, was able to shift to providing services with families via phone calls rather than in person because their main funder made that allowance. Because of this change, their funding has remained stable and staff have been able to maintain consistent enrollment. Similarly, Lesley University's STEAM Learning Lab was able to broaden its focus to provide free remote learning workshop series for Massachusetts teachers, rather than just schools that were designated as part of the original grant funding, because their funder approved a more flexible use of their funding. The Building Back for Equity report (Heising Simons Foundation, Education Trust, & Bridgespan Group, 2020) includes recommendations that funders create more flexible grantmaking processes, specifically, making multi-year general operating support commitments. A recent FSG report also recommends that funders and policy makers to remove barriers for social service agencies and provide flexible funding (Clarke, Oomer, & Tavarez, 2020). Flexibility has been an essential facilitator for providing services and funding mechanisms should enable that flexibility.

Programs that were connected to larger organizations had more flexibility and fewer immediate financial concerns.

For example, College Advising Corps of Greater Boston is part of the national College Advising Corps organization and is housed at Boston University. With these connections they were better able to leverage funding, technology, and adhere COVID-19-related guidelines to support the program. The national organization made the decision early on that their programs would be conducted virtually and had a pilot virtual advising program that was quickly brought to scale. These allowed for smooth transitions and helped to ease the stress experience by staff about potential uncertainty.

Adopt-a-Mom, a program within the Guilford County Coalition for Infant Mortality, a non-profit organization, are also housed at the County Health Department. Because of this structure, their overhead expenses were covered which allowed them to flex other funding sources to support the immediate needs of moms and shift programming support to meet the needs of the moment.

Organizations that have continuous learning practices are more agile and better able to adapt their programming.

Organizations that were already in the practice of soliciting feedback from staff and clients used this to understand needs, assess satisfaction with and openness to changed practices, and then further refine changes. The Center for the Study of Social Policy (2020) noted similar findings in their recent report, in which place-based knowledge was cited as a key strength of organizations who can more effectively respond to their communities. One organization asked the families they serve about their willingness to use and comfort with using telehealth. While there was a mix of responses, this allowed the organization to tailor the methods of communication they used to meet the preferences of their families. Challenge2Change, a program that also regularly surveys participants, found that the majority of their participants preferred having access to both in-person and online support programs. The organization has continued doing this hybrid approach rather than simply returning to the in-person modality as a direct result of this feedback. Year Up similarly made internal practice changes in response to staff feedback that they needed more flexibility and less screen time.

The digital divide is painstakingly clear.

A common finding among organizations is that there are significant disparities in access to reliable internet, technology, and quiet places to work from home. It has impacted students' abilities to be in school, prepare for college and careers, and to participate in summer jobs. Even students who have a quiet place to work have family members who are also trying to work from home and school, making internet connections less reliable. Similarly, one organization had access to a telehealth tool that their county was piloting; however, they found that their clients did not have the technology at home to use it and preferred phone calls instead.

Students who do have access, or who have had their access increase due to the support of these organizations, are increasingly growing more fatigued with virtual school, supports and services. Organizations reported that some students were not engaging in school, and therefore were not engaging with the program or were opting out of extra activities offered by the programs. There is concern for these students, as they are identified as having the highest needs even prior to the pandemic, that if they aren't getting the support they need now, they will fall away from a higher education path.

IDEAS FOR FUTURE ACTION

Use multiple forms of communication to engage with the people you serve.

Because most people are experiencing some form of virtual interaction, the wide array of communication channels that exist to connect with each other has become very apparent. While services will eventually be "in-person" again, organizations can leverage different technology tools to more effectively engage their communities. Prior to the pandemic, most organizations relied on face-to-face interaction, and while that method is preferred, it is not always the best way to communicate. Multiple organizations found that using different communication methods, especially texting, have resulted in increased client engagement. For example, Adopt-a-Mom learned that moms are more responsive to texting and that they can answer their questions more quickly, which has strengthened relationships with clients and increased overall engagement. The best approach is to communicate with people in the method they most prefer.

Adopt responsive internal and external policies and procedures.

Organizations that obtain and utilize continuous feedback from clients and staff are better able to modify and create policies that are responsive to the information provided. Year Up, an organization that provides career pathways for young adults, amended policies to meet the needs of students. The organization extended the age eligibility of the program to 26 (from 18-24) and increased their flexibility of student expectations. For example, students are expected to show up to class early, but the new policy allowed students to show up on-time, virtually. Students who have internet connectivity issues or places to work that are not ideal were also allowed to have their cameras off during instruction (programming all online). These responsive policies helped to support the success of their students rather than penalize them for standards that were not aligned to the challenges of the time.

While formal evaluation and monitoring systems can be expensive to implement, all organizations have the capacity to listen to and informally survey their staff and clients. This approach not only ensures that resources are effectively used where they are needed most, but it also builds relationships and strengthens engagement.

Form strong partnerships.

As community and organizational needs increased, organizations tapped into their networks. Organizations were not necessarily able to build new relationships during the pandemic, but they leaned heavily on their existing partners, board members, and the broader community.

Boston PIC, for example, is engaged in a collective action network of other college and career organizations. During the pandemic they used their regular meetings to check in with one another and about students individually, which helped maintain a safety net for students where there may be concern for them falling through the cracks. Similarly, CMARC, a case management agency that relies upon partnerships as a core component of their program model, was able to work with their partners to coordinate deliveries of diapers and formulas for

their families, and to continue connecting them to the resources they needed. Challenge2Change leveraged an existing partnership with a peer non-profit organization to use their HIPAA-compliant video conferencing system to immediately adapt their peer support groups to be online within one week of Indiana's shelter-in-place order. The small program would not have been able to provide those services without that partnership.

Both Florence Crittenton and the Guilford County Coalition on Infant Mortality had strong board support which enabled the organizations to make significant changes to their programs. Florence Crittenton's Risk Management Board Committee helped the Executive Director create COVID-related safety protocols keep their residents, staff, and volunteers safe. They also collaboratively conducted a strategic budgeting process to pay staff even though hours had to be reduced. Similarly, the Guilford County Coalition on Infant Mortality Executive Director and her board had strong alignment in their vision for the organization and what additional services they should support to better assist the families they serve, making budget amendment and program adaptation decisions easy to approve.

By having strong partnerships, organizations are able to share resources, collaboratively solve problems, and work together to maintain service provision.

Advocate to extend policies that reduce barriers to services beyond COVID.

Some of the organizations interviewed were able to maintain their services because of broader, temporary policy changes that removed barriers for families to receive care. Certain requirements such as filling out forms in person, meeting in person to count for billable hours, proving income eligibility for services, etc., were waived so that families could stay socially distanced and receive services. For example, Medicaid allowed for virtual and phone call conversations to count as providing services, enabling the organizations they support to maintain stable revenue streams. Similarly, WIC at the federal level decided that all WIC enrollees would get automatic vouchers, even if they had not engaged in 6 months, whereas prior to COVID-19 they would have to re-apply to receive benefits. They also relaxed and/or waived requirements such as requiring in-person presence to certify enrollment, and proof of need (including proof of Medicaid or income) and expanded the eligibility of what types of food and brands could be purchased with their benefits. These changes made services and enrollment expectations easier to maintain during the pandemic. While certain requirements will have to go back to the way they were, organizations can use this opportunity to imagine and advocate for a new system that makes it easier for people to get the services they need, when they need it, with as few barriers as possible.

APPENDIX I: PARTICIPATING ORGANIZATIONS

Organization/ Program	Interviewee(s)	Population Served & Service Type	Location
College Advising Corps, North Carolina	Jennifer Preston, <i>Director, North Carolina</i>	Teens, <i>College-Career Readiness</i>	North Carolina
Guilford County Department of Public Health, <i>CMARC - Care Management for Children</i>	Deborah Goddard, <i>Supervisor</i>	Young children, <i>Care Management</i>	Guilford County, North Carolina
National College Advising Corps, Greater Boston Area	Katie Hill, <i>Program Director</i>	Teens, <i>College-Career Readiness</i>	Boston, MA
Guilford County WIC	Candice Davis, <i>Director</i>	Young Children, <i>Nutrition & Health Support</i>	Guilford County, North Carolina
1Voice, <i>Challenge2Change</i>	Amanda Sampson, <i>Founder</i>	Adults, <i>Peer Recovery Support</i>	Dearborn County, Indiana
Florence Crittenton Programs of South Carolina	Cheryl O'Donnell <i>Executive Director</i>	At-risk Young Women, <i>Housing & Concrete Support</i>	Charleston, South Carolina
Boston Private Industry Council (PIC), <i>School-to- Career</i>	Jonathan Rosenthal <i>Assistant Director</i>	Teens, <i>College-Career Readiness</i>	Boston, MA
uAspire, Massachusetts	Emma Chavenson, <i>College Affordability Advisor</i>	Teens, <i>College-Career Readiness</i>	Boston, MA
Year Up, Greater Boston	Charisse Alouidor, <i>Associate Director of Admissions</i>	Young Adults, <i>College-Career Readiness</i>	Boston, MA
The Guilford County Coalition on Infant Mortality, <i>Adopt-a-Mom</i>	Jean Workman, <i>Executive Director</i> Leandra Vernon, <i>Patient Coordinator</i>	Pregnant Women, <i>Prenatal Care Coordination</i>	Guilford County, North Carolina
Lesley University, <i>STEAM Learning Lab</i>	Dr. Sue Cusack, <i>Director</i> Dr. Nettrice Gaskins, <i>Assistant Director</i>	Teachers & Students, <i>Online Learning & Engagement</i>	Cambridge, MA

APPENDIX II: INTERVIEW GUIDE

1. How has your organization adapted to continue providing services to the people you serve?
2. Which adaptations, if any, will be adopted as ongoing practices?
3. How do these adaptations align with or impact your program goals, mission and strategy?
4. How are decisions to adapt programming and service delivery made at your organization?
5. What has your organization been hearing from your clients about what they most need related to services?
6. What has your organization learned about how to deliver services in new ways? What has unexpectedly gone well? What have you tried that hasn't worked?
7. How has your organization been able to use data or evaluation to monitor COVID-related program changes and their effects?
8. What external and/or internal factors has your organization encountered that have facilitated or inhibited your ability to provide services?
9. How have partnerships/collaborations been impacted or utilized? What new partnerships/collaborations have been created?

APPENDIX III: REFERENCES

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