EMERGING FROM THE CRISIS

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LETTER FROM THE COMMITTEE CHAIR

Dear Community Stakeholder,

The Research and Community Initiatives Committee of United Way of Central Oklahoma has historically used the Vital Signs publication to highlight a variety of areas of concern and need for our community. Looking back on the last few years, no singular issue has risen to the level of concern and impact as the COVID-19 pandemic – and that is where our focus lies for this issue.

The impact of the pandemic on our medical care professionals and infrastructure was a frequent topic in the news, but it was hardly the only way that our community was left reeling and feeling unprepared. In broad terms, the strain of the pandemic on people’s physical and emotional well-being, educational progress and financial stability may be obvious. United Way of Central Oklahoma’s Partner Agencies worked tirelessly to address those needs in new and creative ways. They understand, better than most, how great of a response was needed to lift up our community, and they know all too well the cost of those efforts on the ones who had to provide help while experiencing substantial need themselves.

It will take years for researchers to fully understand the virus itself and the impact it will have on those exposed. It will take longer still to understand the cost the pandemic has levied on our families, children, workers and other community members in less tangible ways. By highlighting the central Oklahoma nonprofit community and their effort and impact in the wake of this memorable time, we can memorialize the tenacity, challenges and successes of this vital sector of our community.

Your questions and comments are welcome. Please email us at VitalSigns@UnitedWayOKC.org or call 405-236-8441.

Dave Carpenter
Chair, Research and Community Initiatives Committee
United Way of Central Oklahoma
LETTER FROM THE PRESIDENT AND CEO

Dear Community Stakeholder,

There is no debate that the COVID-19 pandemic has had a pervasive impact on our community – no corner of it was left untouched. This has been a difficult time for so many; families who have lost loved ones, children who could not attend school or see their friends, medical workers who continually rose to the occasion while worried for their own families. The examples are truly endless. With so many affected so deeply by the pandemic and its aftermath, it has been difficult to articulate the effect on or to give proper attention to each group and the ways they were affected.

United Way of Central Oklahoma is grateful to have the opportunity to use this issue of our research publication, Vital Signs, as a way to highlight the efforts of the nonprofit communities in central Oklahoma during this difficult time. The pandemic put so many families and individuals in a place of need who had never been before. It also increased the breadth and depth of need for support and services for virtually everyone in our community.

The need for services from our Partner Agencies increased so dramatically at the same time that it was necessary to shift the ways those services were provided – and both of these changes happened overnight. The leaders and care providers at our Partner Agencies found ways to meet our community needs despite all of the obstacles, many of which were brand new, that presented during this time. This Vital Signs issue will highlight those efforts, changes and the impact of the COVID-19 pandemic both on our community and our nonprofit providers themselves.

While we know that the effects of the pandemic linger on and some things will never return to the way they were before the first cases reached our community, this issue is a tribute to those who found a way to care for our community during the most critical phases of the pandemic.

To all of those who responded to the pandemic and lifted up their community during this difficult time, we thank you.

Debby Hampton
President and CEO
United Way of Central Oklahoma
INTRODUCTION

The COVID-19 pandemic confronted our community abruptly, and it changed everything about the way our community operated and interacted. In this issue of Vital Signs, United Way of Central Oklahoma (UWCO) will focus stakeholders on the contributions nonprofits made to our community during and after the pandemic as a sector of individual agencies, as a workforce and as unique individuals within that workforce.

To date, research relating to the pandemic that is specific to nonprofits is sparse. In order to paint a more complete picture of the health and human service nonprofits that partner with United Way of Central Oklahoma, an anonymous electronic survey was administered to UWCO’s 54 Partner Agencies between October 25 and November 3 of 2022. Agency directors were asked to share their experiences during and after the COVID-19 pandemic. Forty-four agencies returned the survey, representing an 82% response rate. We reference survey results throughout this issue to highlight our Partner Agencies’ first-hand experiences related to the COVID-19 pandemic.

As the central Oklahoma economy begins to realize, if not exceed its pre-pandemic benchmarks, this issue of Vital Signs examines how the pandemic was experienced by nonprofit organizations, their employees and the communities they serve.

BACKGROUND

In 2023, we are still recovering from the COVID pandemic, which touched every person in Oklahoma. By the end of 2022, Oklahoma reported over 1.2 million cases and more than 17,500 deaths. A total of 2,522 deaths have been reported due to COVID-19 in Oklahoma County through the end of 2022. Determination of cause of death results in a lag in reporting of COVID-19 deaths. In order to be as accurate as possible at the time of print, 2023 numbers have not been included. The number of deaths was highest in 2021 with an age-adjusted rate of 129.3 deaths per 100,000 population (Oklahoma State Department of Health, 2023). Before the pandemic became widespread in Oklahoma, the state’s economy was impacted by national and global economic troubles. In April and May of 2020, COVID-19 ended the nation’s longest recorded period of economic recovery; by December 2020, total non-farm employment had fallen nearly 10 million below its February 2020 peak (Ansell & Mullins, 2021). While the job losses were “historic and widespread,” the leisure and hospitality industries were the hardest hit, accounting for over 8.2 million lost jobs (Ansell & Mullins, 2021). Between late April and early June of 2020, the University of Chicago found that 39% of respondents nationwide thought it unlikely that they would have a job in 30 days (National Opinion Research Center, 2020).

By early June as initial lockdowns abated, Congress rolled out relief packages and jobs began to rebound. At that time, however, 20% of households “often or sometimes ran out of food before having enough money to buy more” (National Opinion Research Center, 2020).
AGENCY SPOTLIGHT: AREAWIDE AGING AGENCY

"To a great extent, some of the issues we’re dealing with now were making themselves known prior to the pandemic," Areawide Aging Agency CEO Blair Schoeb said.

When the pandemic swept Oklahoma, Areawide closed its congregate meal sites and seniors began receiving at-home meals. At any given time, 2,000 seniors in Areawide’s service area rely on a noontime meal. "The numbers of people requesting meals increased almost immediately," Schoeb noted. Soon, 500,000 meals annually jumped to 700,000. Like many other organizations, Areawide was faced with supply chain delays on a weekly basis. Since Areawide and its nutritional projects did not have enough staff to deliver meals to every senior’s home in one day, the agency developed a drive-thru system at the meal sites. "It was a lot of fun, in an odd way, to be a part of an effort to respond to these changes and to have done so fairly successfully," Schoeb said. "Very few of the seniors we served had a break in service and if they did, it was not more than a day."

Prior to the pandemic, Areawide experienced a slight uptick in funding, but nothing to the scale of the increase in senior citizens they were serving. Schoeb considered Areawide fortunate to not have to worry about funding during the pandemic. DHS quickly released reserve funds to Areawide and the federal government followed with pandemic relief dollars. "I feel extraordinarily blessed that I didn’t have to fight that fight at the same time I was figuring out how to build a new service delivery matrix in order to ensure we could keep up with growing demand," Schoeb said. Areawide also spent hours training seniors on how to grocery shop online, which was a constant question.

Keeping eyes on staff was also crucial to Schoeb. With everyone working from home, boundaries were hard for many staff members — exhaustion soon set in. Conversations about self-care took place. "You just love on each other," Schoeb said.

Although things look different, some challenges have remained the same for Areawide, like the continued rise in senior citizens needing services. The oldest of the Baby Boomers will be 76 this year. By 2030, all Baby Boomers will be over 65 (U.S. Census Bureau, 2019). For the first time, there will be more seniors than children older than five.

DISPARITIES IN JOB LOSSES AND FOOD INSECURITY

In March of 2020, Oklahoma’s unemployment rate was 3.2%. In April of 2020, it was at 12.5%, a 9.3% jump. The job losses were primarily in fields dominated by women, people of color and low-income individuals. Unemployment rates in Oklahoma did not return to pre-pandemic levels until October of 2021. In June of 2023, Oklahoma’s overall unemployment rate was 2.7% and the distribution of unemployment by race and ethnicity is similar to pre-COVID measures (Bureau of Labor Statistics, 2023).

 Minority, renter, low-income and households without a college education were more likely to lose employment income during the pandemic because they were disproportionately represented in industries that were heavily affected by community measures to slow the spread of COVID-19 (Gould & Kassa, 2021). Additionally, low-income households lacked the savings needed to sustain them during times of economic hardship, making them more vulnerable to income loss and food insecurity (Pew, 2020; Monte & Perez Lopez, 2021).
In the March 2022 report, “Bearing the Cost: How Overrepresentation in Undervalued Jobs Disadvantaged Women During the Pandemic,” the Department of Labor noted that the pandemic exacerbated pre-existing disparities in the labor force for women, particularly women of color, who have persistently lower wages and benefits than their male counterparts. During the pandemic, females left the nonprofit sector at a faster rate than men, where they already made up 65.9% of the workforce (Independent Sector, 2022). This disparity left a substantial labor gap in the sector, and women’s employment numbers have only recently rebounded to pre-COVID levels.

In April of 2020, the national unemployment rate for adult men was 13% and 15.5% for women (U.S. Bureau of Labor Statistics, 2020), foreshadowing an economic disparity that would persist throughout the pandemic. Women accounted for 55% of the initial decline in employment, not only due to disproportionate representation in fields with the greatest losses, but also because of the types of jobs they held within those industries (U.S. Department of Labor, 2022).
THE DIFFERENTIAL IMPACT OF COVID ON COMMUNITIES

During the pandemic, people from historically marginalized communities were more likely to suffer job losses, report steep declines in mental health and have medical conditions predisposing them to serious health conditions, including COVID-19 (CDC, July 2022). Long-standing, well-understood barriers prevented many from accessing the services they needed. These individuals were more likely to live with housing insecurity prior to the pandemic.

It is known that children from marginalized communities are less likely to have access to dependable internet (Kewal Ramani, et al., 2018), which can lead to greater academic loss and a widened achievement gap. The disparities in opportunities to learn were intensified when schools were forced to shut down and all learning shifted to a technology-dependent environment. They were also more likely to live in neighborhoods designated as “hot spots” for COVID-19 deaths, indicating a truth we have come to know: where one lives is a determinant of how one might die (Khadka, et al., 2022).

As we collectively regroup and rebuild, it is important to recognize that, for those most affected, the negative impacts of COVID-19 continue to compound. Vulnerabilities, fissures and disparities that existed before the pandemic have been exacerbated, leaving tremendous demands on chronically over-burdened, under-resourced health and social service sectors.
AFFORDABLE HOUSING AND THE CDC EVICTION MORATORIUM

A 2021 Housing Affordability Study commissioned by the City of Oklahoma City noted that 42% of OKC's renter households spent more than 30% of their gross income on housing (Economic & Planning Systems, Inc. & RRC Associates, 2021). The study also found that housing insecurity, which includes factors such as housing affordability, availability, as well as quality and safety, disproportionately affected residents of color, seniors and people with low incomes. On page 17 of Oklahoma City's 2021 Housing Affordability Study prepared by Economic Planning Systems, Inc. and RRC Associates, it is noted, “Without bolstering the system (already stretched beyond capacity) to address housing stability issues, such as social services, renter protections or stronger financial literacy, the cost of dealing with the externalized social problems will far exceed the cost of dealing with them in the first place.”

Currently, Princeton University’s Eviction Lab (2016) ranks Oklahoma’s eviction rate of 6.19% as the 20th highest in the nation (Gromis et al., 2022). In November 2022, KOCO 5 reported that on a typical day 125-150 tenants would appear in Oklahoma County eviction court (Onstot, 2022). The CDC Eviction Moratorium, initially authorized in September 2020 and abruptly ended in 2021 when it was overturned by the Supreme Court, prevented eviction for nonpayment of all renters who met certain income requirements and lived in counties determined by the CDC to have high COVID transmission rates (Shatz & Shaun, 2021). Upon the cancellation of this program, many were left on the brink of homelessness once again.

AGENCY SPOTLIGHT: COMMUNITY CARES PARTNERS

“When a crisis - or pandemic - occurs, hope in the form of triage, including immediate financial assistance, is the start of recovery,” Ginny Bass Carl, executive director of the Community Cares Partners (CCP) said. When the pandemic arrived in Oklahoma City, CCP was established under Communities Foundation of Oklahoma (CFO). A 30-year organization, the CFO maintains relationships with 35 partners, including the Central Oklahoma Funders Roundtable. In March 2020, this group gathered to determine what the community needs were going to be and the roundtable began focusing on rental assistance due to clear community needs. When CARES Act dollars were announced, discussions began with the City of Oklahoma City as to how they were going to be spent. The idea of a short-term program surfaced in the form of CCP.

CCP distributed the first round of Emergency Rental Assistance (ERA) funds allocated by the state of Oklahoma, Oklahoma City, Oklahoma County, and then later Cleveland County. In December 2020, CCP had $21 million to distribute. After distributing funds through their usual channels, “We decided to do something a little radical,” Bass Carl said. CCP was set up at the Oklahoma City Fairgrounds and, by invitation only, allowed people to sign up for rent and utility assistance. They also passed out cards for people to purchase necessities, like clothes, food and gasoline. Throughout the course of 13 days, 1,500 people were served and every dollar was spent.

As their funding diminished and the pandemic-associated aid diminished, huge concerns arose about what happens once funding is gone. “It was only a sliver of a solution,” Bass Carl said. Nearly 130,000 applications were received throughout CCP’s service period. But Bass Carl still expects another surge in people needing help. “I’m sure if you’re in that moment of crisis, fear and anxiety, you’re not thinking about tomorrow, much less two months from then,” she said. “That’s just a symptom of a situation that poverty brings.”
Client demands, inflation, the rate at which nonprofit employees are leaving the field and the cost of providing services all continue to increase. Meanwhile, donors and volunteers, many of whom fell out of the habit of supporting nonprofits during the pandemic, have been difficult to re-engage (Gose, 2021; Independent Sector, 2022). More than half (54%) of respondents expressed concerns about their ability to secure adequate funding to meet client needs in the upcoming year, with a similar number reporting concerns about long-term funding stability (United Way of Central Oklahoma, 2022). Unlike private businesses that can trade stock, sell assets or raise prices to mitigate an economic shortfall, nonprofits are dependent on an unpredictable balance of government reimbursement and community goodwill to deliver services. These resources can be difficult to predict, especially as donors were sometimes dealing with many of the concerns discussed here, and unable to donate at a level consistent with past years. Nonetheless, like their clients, nonprofit workers are adept at leveraging non-monetary resources to serve as currency: they collaborate, they innovate, they persevere and they hold out hope.

Thinking back to early 2020, before the pandemic, has the demand for your nonprofit's services increased, decreased or stayed about the same?

<table>
<thead>
<tr>
<th>Description</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>During the pandemic, demand for our services increased and continues to increase.</td>
<td>68%</td>
</tr>
<tr>
<td>During the pandemic, demand for our services increased, but is now slowing down.</td>
<td>2%</td>
</tr>
<tr>
<td>Demand for our services has remained about the same as before the pandemic.</td>
<td>9%</td>
</tr>
<tr>
<td>During the pandemic, demand for our services decreased, but is now rebounding.</td>
<td>16%</td>
</tr>
<tr>
<td>During the pandemic, demand for services decreased and continues to decrease, or remains flat.</td>
<td>0%</td>
</tr>
<tr>
<td>Other Selective</td>
<td>5%</td>
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(United Way Survey, 2022)
The American Rescue Plan Act was one such program. Passed in March of 2021, this $1.9 trillion relief package included provisions to help individuals and businesses affected by the pandemic:

- $125 billion in funding for K-12 schools
- $39 billion to improve child care services
- $22 billion for Emergency Rental Assistance
- $15 billion to fund the Economic Injury Disaster Loan (EIDL) program
- $7.2 billion to expand broadband access
- $1 billion to AmeriCorps to encourage volunteerism
- $1,400 stimulus checks for taxpayers and their children

It also provided funds to expand the Paycheck Protection Program, increased individual and family tax credits, expanded unemployment benefits and funded COVID-19 vaccines and vaccination efforts, among other necessities (National Council of Nonprofits, 2021).

In addition, ARPA provided $350 billion in aid for state, local, tribal and territorial governments with stipulations on how funds could be spent. Permissible use included assistance to fund government services cut due to COVID related revenue declines, “necessary” investments in water, sewer and broadband infrastructure, and to support households, small businesses and nonprofits (National Council of Nonprofits, 2021).

The state of Oklahoma received $6.1 billion in total funding from ARPA. These funds were allocated across the state to support various programs and services, including health care, education and economic relief for individuals and businesses with Oklahoma County receiving $175 million and the City of Oklahoma City receiving $113 million.

In February of 2022, United Way of Central Oklahoma was awarded $1,000,000 of ARPA funds through the City of Oklahoma City, which were distributed to 49 of its Partner Agencies, all of which have a physical presence in Oklahoma City, to offset the reduction in allocable dollars available due to the COVID-19 pandemic. Our agencies were informed that the purpose of these funds was to help our agencies address the ongoing needs of the community for critical programs and resources and reported that these funds were quickly utilized for this purpose.
AGENCY SPOTLIGHT: NEWVIEW OKLAHOMA

NewView Oklahoma was rocking along pre-pandemic, President and CEO Lauren Branch described. The services NewView provides are expansive, from vision clinics to employment for the state of Oklahoma. NewView was in the business of looking for opportunities to grow its services. The leadership team was also actively looking to diversify its board to be more reflective of NewView's patients and employees.

Rockin’ morphed into true grit when the pandemic arrived in Oklahoma. "Outwardly remain calm, inwardly terrified," Branch remembered. Several of NewView’s operations shut down, including clinical operations. Before the PPE loans and grants were distributed, NewView’s team met to discuss halting rehabilitation programs. "We didn’t know what philanthropy was going to look like," Branch said.

Many of NewView’s federal customers ceased purchases, as employees were no longer working in offices, making certain supplies unnecessary. However, NewView's manufacturing operations continued. A silver lining soon presented itself. NewView is a source for soaps, sanitizer and first-aid kits, and with a COVID-19 pandemic growing nationwide, the agency's services were in high demand. NewView provided all of the U.S. Census Bureau's PPE, so the 2020 Census could be executed. "Those were multi-million-dollar contracts for us," Branch said. "They enabled us to keep our doors open." United Way purchased these supplies and distributed them to their Partner Agencies, providing them with much needed resources, while supporting NewView.

There was no time to wait, NewView’s rehabilitation staff developed creative ways to reach patients with online resources: cue telehealth eye exams. "Even though it was terribly stressful and challenging, and all of us were really scared and struggling with maintaining workforce, there were a lot of good things that happened that transformed our organization and laid the groundwork to take advantage of opportunities and do business in a different way than we had pre-pandemic," Branch said.

Telehealth will never go away for NewView, as it helps staff reach patients more effectively. The addition of telehealth has allowed NewView to increase its services by 30%, without having to hire new staffing in this area. "The real challenge was people getting sick," Branch noted.

Many people who are blind have other health issues. There was an intense level of concern for NewView to remain on top of COVID safety protocols. People were added to take temperatures upon entering the facility, as well as wipe down surfaces. Although some employees did not remain throughout the pandemic, NewView saw its best employment year in 2021. They grew 60 employees from 2020.

"The flexibility and willingness of NewView’s staff and board positioned the agency well for continued growth throughout the pandemic and beyond," Branch said. "We have put a high level of focus on organizational culture," she added. NewView made adjustments in taking care of its employees. Breakroom spaces were completely renovated during the pandemic. "We wanted to make them feel good about coming to work during a very stressful time," Branch said.

Many blind and visually-impaired individuals utilize public transportation to get to and from work and with social distancing being implemented, it produced barriers. Daily routine challenges were exacerbated for many people with disabilities. "All the things they relied on to engage in the community to meet their basic needs, overnight went away," Branch said. "We had to figure out ways to step in and ensure they were still being supported."

While many people anticipate the good to come from 2022, organizations like NewView are not ignoring the post-pandemic challenges. Uncertainty still remains in terms of philanthropy and how NewView will maintain support to be sustainable with its services. "There aren’t any predictors anymore," Branch said. Grappling to determine how best to approach the future, Branch noted the importance of consistent communication with NewView’s board, as well as being prepared to take on opportunities to address systemic issues.

"It’s more important now than ever as a community that we’re collaborating, communicating and leveraging our collective resources because the challenges and opportunities are so big," Branch said. "There isn’t one of us who can do what we need to do. We need to do it together."
Providing desperately needed services at the height of the pandemic was grueling work, and nonprofit staff paid a high price. In August of 2021, the Federal Reserve’s Perspectives from Main Street Survey reported that 70% of community service organizations were experiencing increased service demands compared to before the pandemic. Of these organizations, almost half felt their ability to meet client demands had declined (Chalise et al., 2021). To date, most research regarding the psychological impact of the pandemic on frontline workers has focused on healthcare staff. Public health workers said they experienced at least one mental health condition in the preceding week at a rate of 52.8%, compared to 40% of the public. These symptoms were more common among workers who had longer work hours and those who were more involved in COVID-19-related responsibilities. Many reported feeling overwhelmed by their workloads and the demands of balancing work and home life (Bryant-Genevier, et al., 2021). The constant exposure to trauma and stressors along with fear of exposure to the virus played a role in their challenges. Other frontline personnel, such as nonprofit workers who worked directly with vulnerable populations, likely experienced similarly elevated rates of mental distress and other challenges.

While empirical evidence is sparse, United Way of Central Oklahoma agency directors consistently expressed concern about their employees’ exposure to trauma, their propensity to take on too much and how “employee burnout” is driving staff shortages. Among United Way of Central Oklahoma agency directors, 52% report that, amid Oklahoma City’s current labor shortage, employee fatigue/burnout has negatively affected their ability to recruit or retain staff (United Way of Central Oklahoma, 2022).

Nationally, information documenting the pandemic’s impact on community service workers is telling a grim story, as they are experiencing significant mental distress related to their jobs.
AGENCY SPOTLIGHT: SKYLINE URBAN MINISTRY

“There’s people who never thought they would be in this place needing food for their families,” said Debbie Ingraham, who was Skyline’s CEO during the pandemic. Skyline’s Food Resource Center doors never closed throughout the pandemic. Established in the 70’s, Skyline was the only area self-select food pantry. Skyline’s Food Resource Center, of which United Way funds, is the agency’s largest program, serving 100 households a day, pre-pandemic.

Other programs that make up Skyline are its Style Shop, Eye Clinic, and Garden Program. Clients can receive free or low-cost clothes, free eye exams and low-cost glasses, and education about scalable urban agriculture. Fast forward to March 2020, the Style Shop closed its doors and optometrists ceased eye exams. The only program that remained during the height of the Pandemic was the Food Resource Center.

Skyline wanted to maintain its identity in dignified self-serve shopping but the pandemic made that impossible, Ingraham said. About 20,000 people depend on Skyline’s services. Staff embraced flexibility and were encouraged to look for better ways to serve clients. Skyline’s team of 12 took on serving more than 100 households a day.

The Food Resource Center soon became the grocery warehouse. Staff would pre-pack some bags and put others together on the spot depending on what each household needed. Bags would then be given to a runner who would place them in vehicles.

Although funding went down when the pandemic hit, Skyline was blessed to receive pandemic grants from the Oklahoma City Community Foundation, among others, as groceries were considered an essential service. United Way also never left, providing support and grants. Skyline’s main funding source is local churches, and as the pandemic continued on, contributions steadily decreased.

The agency’s annual giving event also had to be canceled. Some online fundraisers took place, which weren’t as successful. Individual giving has yet to bounce back, Ingraham noted. Today, Skyline aims to diversify its revenue to be less dependent on churches and further develop its partnerships with schools and corporations. “Now post-pandemic, it feels like corporations are seeing the need to partner with United Way agencies, specifically, to take an interest in their community,” said Ingraham.

AGENCY SPOTLIGHT: MENTAL HEALTH ASSOCIATION OKLAHOMA

When the pandemic hit in March 2020, it was not an option for Mental Health Association Oklahoma (MHAOK) to stop service.

“The community needed us and we responded,” CEO Terri White said. “While the safety of employees was paramount, it was imperative we find a way to still deliver services. The pandemic significantly increased the number of people experiencing mental health challenges and economic struggles, which has also increased the instances of homelessness. We are a go-to agency because we provide so many of the services people need most in this time. Key community stakeholders contacted us desperate for resources to help their clients, employees and family members. And the importance of our frontline staff had never been more clear.”

The Association’s Oklahoma City office more than tripled in staff, due to increased need.

“We had to find medically safe and effective ways to reach those experiencing homelessness,” White said. “We gloved up and masked up for safety and offered free COVID testing to staff. We stretched every COVID dollar we received.”

When temperatures dropped dangerously low, MHAOK, in partnership with the City of Oklahoma City and the Homeless Alliance, opened a temporary emergency overflow night shelter. The emergency night shelter in Oklahoma City provided warm beds for 1,097 unique participants throughout three months. The need only grew throughout the pandemic for the services provided which meant that innovative solutions had to be found.
In 2016, the Bureau of Labor Statistics (BLS) estimated that nonprofit organizations accounted for over 12 million jobs, representing 10.2% of private sector jobs nationwide, thus placing the nonprofit sector as the nation’s third largest employer. The nonprofit sector is also the third largest income generator in the United States with over $670 billion in wages (Salamon & Newhouse, 2020).

Nationally, nonprofits employ (Salamon & Newhouse, 2020):
- More than 2 times as many people as the U.S. Finance and Insurance Industries
- Over 80% more employees than the U.S. Construction Industry
- 100,000 more people than work in the Manufacturing Industry

In Oklahoma, nonprofit organizations employ 6.5% of the state’s private workforce (Salamon & Newhouse, 2020). According to the Oklahoma Center for Nonprofit’s 2022 Economic Impact Report, the state’s nonprofits collected $16.5 billion in revenue and held assets worth $57.5 billion. In Oklahoma County alone, nonprofit organizations recorded $6.5 billion in revenue and held assets valued at over $18.2 billion (Oklahoma Center for Nonprofits, 2022).

In addition to contributing to the economy through their operations, nonprofits also help to lower the costs of government services by providing services to the community and lower the overall cost of these services to taxpayers. In 2021, Oklahomans gave $2.5 billion to nonprofits to support their work (Oklahoma Center for Nonprofits, 2022).
Employee vacancies in nonprofit organizations have a direct impact on the ability to meet client demands. As the demand for services continued to rise, staff shortages perpetuated a gap in services. Only 16% of responding United Way Partner Agencies reported no positions open within their organizations, while a concerning 30% have vacancy rates over 10% (United Way of Central Oklahoma, 2022). However, agencies of different sizes report different experiences; the majority (56%) of larger organizations (having more than 50 employees) have a vacancy rate over 10%, as opposed to only 31% of smaller employers having vacancy rates at this level. Nearly half (43%) of all organizations rated their current number of open positions to be unusually high.

Well over two-thirds (76%) of small Partner Agencies with fewer than 24 employees expressed that the demand for their services increased during the pandemic and continues to increase as opposed to 68% of nonprofits with more than 25 employees (United Way of Central Oklahoma, 2022). It is possible that smaller agencies feel the impact of demand more acutely than their counterparts with more employees.

Relative to staffing, what is your nonprofit's current job vacancy rate?

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<thead>
<tr>
<th>Percentage</th>
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<tbody>
<tr>
<td>We do not have any job vacancies.</td>
<td>10%</td>
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<tr>
<td>1-3% of staff positions are vacant at my agency.</td>
<td>44%</td>
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<tr>
<td>10-25% of staff positions are vacant at my agency.</td>
<td>15%</td>
</tr>
<tr>
<td>25-50% of staff positions are vacant at my agency.</td>
<td>5%</td>
</tr>
<tr>
<td>Over 50% of staff positions are vacant at my agency.</td>
<td>0%</td>
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(United Way of Central Oklahoma, 2022)
Despite employing a host of strategies to address staffing shortages, including increased salaries (24%), flexible schedules (16%) and retention bonuses (15%), almost one in three (32%) UWCO Partners have had to implement or increase waitlists for their services due to personnel shortages. A 2021 National Council for Nonprofits study found that 26% of the organizations surveyed had waitlists over a month long (National Council for Nonprofits, 2021). Importantly, this chronic staffing shortage did not emerge only after the pandemic, the 2016 annual turnover rate for nonprofits was 19%, meaning that almost 1 in 5 employees quit each year, compared to an all-industry rate of only 12% (Branson, 2020).

A report by Employment Report found “being able to pay a competitive wage” was the No. 1 staffing challenge for the past five years among nonprofit employers in 2016. The study also found that, after leaving their positions, only 47% stayed within the sector. In other words, nonprofits are not just competing with one another for employees, they are also competing with for-profit companies. (GuideStar, 2016).

Salary increases in the U.S. are forecast to continue to rise to 4.6% in 2023, up from 4.2% in 2022 (Willis Towers Watson, 2022). In a tight labor market, like the one we are currently experiencing, the differences in earnings between nonprofit workers and their counterparts in the private sector can have an effect on both employment and long-term stability in the nonprofit sector. If a nonprofit worker leaves their job for a more lucrative position in the private sector, it may be difficult for the organization to replace them. This can lead to a lack of stability and continuity in the nonprofit workforce, which can in turn affect the quality of services provided by nonprofits.

In recent years, the nonprofit sector has undergone significant changes, with many organizations facing increased competition from for-profit providers, particularly in the social services field. This has led to challenges for nonprofits in terms of funding and staffing, as they struggle to compete with for-profit organizations willing to pay higher salaries, particularly for professional staff such as social workers and behavioral therapists.

United Way of Central Oklahoma Partner Agencies reported a variety of causes for their staffing struggles, with salary competition and burnout being among the top reported factors. Other issues agency leaders believed impacted staff turnover included the lack of funding to provide health care benefits, an inability to compete with for-profits wages, higher salaries and a lack of qualified candidates.

Which of the following factors have negatively affected your agency’s ability to recruit or retain staff? (Check all that apply)

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<tr>
<th>Factor</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salary competition</td>
<td>72.7%</td>
</tr>
<tr>
<td>Fatigue/employee burnout</td>
<td>53.3%</td>
</tr>
<tr>
<td>We require specialized skills, certifications and/or high educational requirements</td>
<td>48.8%</td>
</tr>
<tr>
<td>My nonprofit cannot provide remote/hybrid employment</td>
<td>29.5%</td>
</tr>
<tr>
<td>Transportation issues</td>
<td>15.9%</td>
</tr>
<tr>
<td>A lack of opportunities for professional advancement</td>
<td>15.9%</td>
</tr>
<tr>
<td>My nonprofit cannot provide flexible, in-person schedules</td>
<td>8.0%</td>
</tr>
<tr>
<td>Inability to find childcare</td>
<td>4.5%</td>
</tr>
</tbody>
</table>

(United Way, 2022)
Given that the success of for-profit companies is predicated on a low-wage model, the effect of prolonged labor market tightening remains unclear. While the loss of market share puts a strain on many nonprofit organizations, the greater concern may be in how to respond to a deluge of client demand if companies begin pulling out of the sector en masse.

THE GREAT RESIGNATION

Texas A&M professor Anthony Klontz coined “The Great Resignation” after noticing a set of workforce trends converging in such a way as to cause a “massive wave of resignations” (Kellett, 2022). The trends include:

1. An existing backlog of resignations as some workers chose to stay in their jobs because of the uncertainty resulting from the pandemic.
2. Widespread burnout among workers.
3. Widespread reevaluation of priorities and values among workers.
4. The reluctance of some workers to give up remote work.

One in five non-retired Americans quit a job in 2021, according to a report commissioned by the Pew Research Center (2022). Among the reasons people quit:

- 63% workers who quit a job in 2021 cited low pay
- 63% said they left because there were no opportunities for advancement
- 57% felt disrespected at work

Among workers who had started new jobs, a majority told Pew researchers they now earn more money (56%), have more opportunity (53%), more work-life balance (53%) and more flexibility over their work hours (50%).

Remote/hybrid work has been the norm since the beginning of the pandemic but, as companies begin the process of calling their employees back to the office, nonprofits may experience more turbulence in their workforce.

Privatization of the Social Services Sub-sector

According to John Hopkins University’s Center for Civil Society Studies, the privatization of the social services sub-sector in the United States has been on the rise in recent years. Since 2007, nonprofit agencies serving vulnerable populations have grown by 18.2%. At the same time, for-profit companies are capitalizing on the same government programs that fund nonprofits while offering lower employee wages, and they have grown by over 124% in that same timeframe. This trend has had a number of effects not only on the wages of social services employees, but also on organizations’ accountability, sustainability and ability to deliver the responsive, high-quality services dictated by the missions of the nonprofits that have traditionally provided these services (Salamon & Newhouse, 2020).
Volunteers play an essential role in the nonprofit sector. In 2017, 304,480 Oklahoma City volunteers contributed 18.9 million hours of service, valued at over $458 million to nonprofits (Corporation for National and Community Service, 2017). Prior to the pandemic, part-time employees and volunteers made up 85% of overall nonprofit human resources (93% at agencies with budgets under $500K, Faulk, et al., 2021). In 2021, the Urban Institute’s Nonprofit Trends and Impact report concluded that while the number of full-time staff remained stable during the pandemic, part-time employees and volunteers suffered a sharp decline.

In March 2020, 93% of nonprofits reported heavy volunteer cancellations (Plato, 2020). Nationally, agencies reported a 33% reduction in volunteer participation during 2020 (Faulk, et al., 2021). Among this decline, nonprofits cited they lost 25% of their regular volunteers and 40% of people who volunteered infrequently (Faulk, et al., 2021). Low volunteer levels persisted throughout the COVID pandemic and afterward (Independent Sector, 2022).

United Way of Central Oklahoma’s Partner Agency, RSVP of Central Oklahoma, Inc., whose mission is to coordinate volunteer opportunities for seniors, faced many challenges during the pandemic. A total of 40% of the agency’s volunteers refrained from giving their time out of fear of catching COVID. Nonprofit organizations often had to suspend their volunteer opportunities, leaving gaps in the services they could provide. The agency was able to find online opportunities for about 12% of its workers by the end of 2022 and remains hopeful that others will reengage.
The COVID-19 pandemic exposed a litany of long-ignored systemic and structural breakdowns affecting historically marginalized communities along with the people and institutions working within these communities (Centers for Disease Control and Prevention, 2022). In 2022, Oklahoma's overall health was ranked 46th in the nation, which highlights how many Oklahomans face an abundance of risk factors for negative medical outcomes (Oklahoma State Department of Health, 2022).

The CDC defines the Social Determinants of Health (SDOH) as “nonmedical factors that influence health outcomes.” These factors can include where individuals are born or the neighborhood they live in, their level of education and more complex factors such as access to healthcare and transportation. Even before the pandemic began, certain demographic groups, including people of color and those living with low incomes, experienced higher rates for a variety of health outcomes due to less favorable SDOH (Centers for Disease Control and Prevention, 10 Dec 2022).

People living in low-income neighborhoods may have less access to healthy food options and opportunities for physical activity, leading to increased risk for obesity and other health issues. Individuals with lower levels of education may be more likely to have lower-paying jobs, leading to increased stress and financial strain, which can impact mental and physical health, which is then coupled with fewer employer-sponsored health benefits and ultimately reduces their ability to address their mental and physical healthcare needs (Centers for Disease Control and Prevention, 27 Sept 2022).

The Oklahoma State Department of Health noted the interaction between these risk factors and COVID-19 and that they contributed to significant race- and ethnicity-based disparities in COVID-19 case rates, severity and outcomes, including death (Verdini, 2021). Researchers investigating racial and ethnic disparities in Oklahoma City’s COVID-19 rates mapped “hot spots” in Oklahoma City for COVID-19, observing that in addition to having higher hospitalization and/or mortality rates, hot spot ZIP codes had higher rates of poverty, higher rates of unemployment, lower incomes and lower levels of academic achievement. They attributed these outcomes to less favorable SDOH. Overwhelmingly, residents in these ZIP codes belonged to a racial minority (Khadka, et al., 2022). Even before the pandemic, the Oklahoma City-County Health Department designated these communities as “areas of public health concern,” indicating a pre-existing awareness of health barriers in these neighborhoods (Oklahoma City-County Health Department, 2020). These disparities, all well-documented prior to the pandemic, are manifested in higher COVID death rates among minority residents (Van Dyke, 2021).
REDDUCTION IN PREVENTATIVE HEALTH VISITS

Pandemic-related disparities in health outcomes between races will continue to negatively impact people long after the lockdowns. Differences in cancer incidence and outcomes among people of various socioeconomic, racial and ethnic backgrounds are well-documented (Fallahian et al., 2022). According to Oklahoma State Department of Health statistics, Black, Hispanic and Native American Oklahomans are much more likely than white residents to die from cancers that benefit from screening and early treatment (Oklahoma State Department of Health, 2022). However, people lacking insurance or experiencing other barriers to preventative care receive these screenings at significantly lower rates, meaning their cancers are detected later when there are fewer treatment options. As a result, disproportionate death rates from these cancers are thought to indicate a lack of adequate access to healthcare. According to the American College of Surgeons, the COVID-19 pandemic resulted in a decline of cancer screenings (Fallahian, 2022). Meanwhile, the virus disproportionately affected Black populations, compounding pre-existing obstacles to care such as reliable transportation, time constraints and mistrust of the medical system. The effect of the pandemic on access to healthcare for already underserved groups was substantial, and the compounding effect of these added barriers can only be realized in the coming years.

In 2020, the rate by which Black men died of prostate cancer was almost two times that of any other group, reflecting a significant obstacle to receiving care among this demographic (Oklahoma State Department of Health, 2022).

2020 Oklahoma Cancer Incidence per 100K Residents, by Race & Ethnicity

<table>
<thead>
<tr>
<th>Cancer Type</th>
<th>WHITE NH</th>
<th>BLACK</th>
<th>HISPANIC</th>
<th>NATIVE AMERICAN</th>
</tr>
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<tbody>
<tr>
<td>Lung Cancer Death</td>
<td>44.5</td>
<td>40.7</td>
<td>58.1</td>
<td>40.8</td>
</tr>
<tr>
<td>Colon Cancer Death</td>
<td>10.6</td>
<td>10.8</td>
<td>10.8</td>
<td>20.3</td>
</tr>
<tr>
<td>Breast Cancer Death</td>
<td>12.2</td>
<td>14.2</td>
<td>11.8</td>
<td>11.0</td>
</tr>
<tr>
<td>Prostate Cancer Death</td>
<td>7.6</td>
<td>15.9</td>
<td>5.5</td>
<td>7.4</td>
</tr>
</tbody>
</table>

(Oklahoma State Department of Health, 2022).
AGENCY SPOTLIGHT: VARIETY CARE

“It seemed like every hour we were making a different decision because another need had been identified,” Variety Care CEO Lou Carmichael said. Variety Care provides wraparound care, including medical, dental, vision, mental health and Women, Infants, Children (WIC) services, under one roof. Before the pandemic, Variety Care was fully-staffed. When COVID came knocking, there were many positions in the health care industry that became high risk for exposure.

“Dentistry became impossible throughout the first eight to 10 months of the pandemic. These staff were deployed to complete other tasks, as the program was discontinued for about three months. Although dental and vision programs halted, Variety Care expanded upon WIC and behavioral health services, which exploded into a crisis from the pandemic,” Carmichael said. “Some hygienists went to work in care management for that period, while others worked for county health departments. Temp employees were also added to do testing and screenings at clinics.”

Volunteers in the form of board members and donors stepped up in giant ways for Variety Care, helping ensure the fluidity of drive-thru vaccine clinics and testing sites. The realization of how effective drive-thru options and technology became in providing services was evident post-pandemic.

Besides receiving one-time dollars for pandemic relief, funding did not significantly fluctuate for Variety Care. The first major concern that presented itself to Carmichael was keeping people safe and how to maintain that without having a lag in service.

Variety Care’s role in the delivery system became protecting the emergency rooms. Ensuring that everyone had access to primary care became vital to the agency to prevent ERs from overflowing, where COVID was raging. Testing was set-up immediately in partnership with local hospitals and health departments.

Variety Care’s team was one of many to implement telemedicine, which will now always remain. In March 2020, Variety Care saw a decline in clients but was back to normal numbers by July 2020 with the help of telehealth.

For Carmichael, a defining factor throughout the pandemic was watching her team never give up. “They know it’s their turn to stand up and they are always willing to help and that stays true,” Carmichael said. “What the pandemic set-up was complete burnout because you can only keep that adrenaline pace for so long.” Everything became ‘figure-out-able.’ The option not to was never on the table, Carmichael said. “It was an extraordinary time of flexibility, creativity and can-do determination.”

Burnout prevention training became available to staff for their mental health. Historically, Oklahoma City has shown time-and-time again the strength in unity, and so it came as no surprise that the community leaned on one another in the pandemic. Many community members made masks for Variety Care. “I picked up 200 masks every other day made out of cloth at someone’s home I never met,” Carmichael remembered.

Despite some growth in the midst of change, challenges remain coming out of the pandemic. A lack of equity affects many minority populations, Carmichael noted. “We really have to drive equity into the system and have more understanding of at-risk populations and those who are more vulnerable because they are more likely to fall through the cracks or get bad information,” Carmichael said.

She hopes to see more intentionality globally, statewide and locally. Technology access for more people is important, especially with the rise of telehealth, she added. A more integrated mental health system is key, as well, with a focus on the safety and security of health care professionals. Trauma training is essential for staff, Carmichael said.

The need for more health care workers is also real, which is Variety Care’s No. 1 challenge. Although there is powerful resilience among Partner Agencies and the community, the impact of vulnerabilities, like mental health crises will require more health care workers which are in short supply in Oklahoma. These are problems, grounded in policy, which has continued after the pandemic.
AGENCY SPOTLIGHT: THE HOMELESS ALLIANCE

The Homeless Alliance staff served about 350 people per day in the agency’s day shelter, pre-pandemic. The Alliance’s staff would range from 40-50 on the campus. Their staff grew by more than 100 in the pandemic. “Folks really stepped up and were pretty brave about it,” Executive Director Dan Straughan said.

Post-pandemic is another story. Burnout is real, and the agency has seen some of its largest turnover. As soon as the pandemic hit, it took no time for The Homeless Alliance to move all services outside the campus, making the shelter become a donation center. Showers and bathrooms were no more. Porta Potties took their place.

Curbside Chronicle vendors stopped selling. The agency would later receive a United Way grant to pay back vendors’ lost income. “The relationships that are just part and parcel of being a United Way Partner Agency made (pandemic response) not easy, but possible,” Straughan said. Prior to the pandemic, the Agency did not have an HR staff person. Local funding made that possible for three years.

Staff collectively became a street outreach team, arming individuals with information about the virus, handing out hygiene items, PPE and more.

The Homeless Alliance facilitated conversations at Oklahoma City’s six homeless shelters with city and county health departments and local hospitals to determine the safest approach to serve people experiencing homelessness throughout the pandemic. In just 60 days, quarantine and isolation shelters were established.

“If somebody showed up and they were symptomatic, we could bop them to the isolation center before they came into a big congregate environment,” Straughan said. “That worked extraordinarily well. The system was well-oiled when testing arrived. Staff began testing on the streets, as well as in pods at shelters. The test positivity rate among the homeless population never exceeded 6% in the Oklahoma City area. At one point, it reached 26% in the general population. We feel really good about the success of those endeavors because the population is particularly vulnerable. Had it hit them, it had the potential to go south really fast.”

The main focus became having a location for people experiencing homelessness to quarantine after being released from the hospital. People with comorbidities were welcome to stay in a 50-bed shelter that was particularly locked down to keep the virus out. Nursing care was provided at the 100-bed isolation shelter and several innovative disease-prevention methods were established in collaboration with internationally renowned infectious disease experts from Harvard and Duke.

In looking onward, affordable housing is the agency’s greatest challenge.

NONPROFITS’ RESPONSE TO SDOH

Nonprofit organizations played a critical role in stabilizing communities during the COVID-19 pandemic by confronting factors that impact health outcomes within their communities. They provided essential services, such as food assistance, elder support and healthcare to individuals and families. They held neighborhood vaccination drives, embedded with local organizations to offer child care, provided internet access and helped clients find jobs. The nonprofit sector’s fiscal impact extends beyond the clients it serves.
AGENCY COLLABORATION

It’s more important now than ever as a community that we’re collaborating, communicating and leveraging our collective resources because the challenges and opportunities are so big. There isn’t one of us who can do what we need to do. We need to do it together.
Lauren Branch CEO
NewView Oklahoma

During the pandemic, United Way of Central Oklahoma Partner Agencies worked closer than ever to support not only their clients but each other. In partnership with Variety Care, UWCO was able to make vaccines available to all nonprofit partner staff beginning in January of 2021, helping alleviate some of their concerns for staff safety while working the frontlines. As schools closed and the need for childcare exploded, Boys & Girls Clubs of Oklahoma County (B&GC), which provides afterschool and summer programs for children K-12, rapidly expanded from six to 16 sites to meet the exploding demand for childcare during the pandemic. But they didn’t do it alone, they worked in partnership with the YMCA to determine when it was safe to reopen, with Urban League to ensure that B&GC students received educational assistance and with Sunbeam Family Services, who conducted on-site mental wellness checks for B&GC staff and students.

United Way of Central Oklahoma was at the table to make sure agencies had what they needed. B&GC received a $96,000 grant to reopen expanded childcare facilities. Dan Straughan, Executive Director of Homeless Alliance, expressed appreciation that early pandemic funding came with little red tape, allowing agencies to be flexible as they built the capacity necessary to meet extraordinary demand. Blair Schoeb, CEO of Areawide Aging Agency, noted that United Way partnerships were magnified as agency directors worked together to solve problems.
AGENCY SPOTLIGHT: BOYS & GIRLS CLUBS OF OKLAHOMA COUNTY

Boys & Girls Clubs of Oklahoma County’s (BGCOKC) mission of helping youth reach their full potential never changed. It just shifted during the pandemic. Prior to 2020, there were four Club locations throughout Oklahoma County. A year before the pandemic, the agency saw its largest growth, adding two more Clubs in schools and a teen center to its now 41,000-square-foot building in Memorial Park. Staff and volunteers experienced growth, as well, with BGCOKC seeing its biggest community outreach going into 2020.

Teena Belcik was transitioning into her new role of president and CEO when the pandemic hit. Several days after Oklahoma was encouraged to shelter in place, Belcik received a call from DHS secretary Justin Brown asking if Boys & Girls Clubs would consider reopening to provide childcare for emergency first responders and essential workers. Together with the YMCA, and in partnership with state and local health departments and the CDC, Belcik worked to determine the safest protocols to reopen. Upon opening, staff quickly realized that families who were once dealing with food insecurity were now facing starvation, Belcik said.

School districts soon began providing grab-and-go breakfast and lunch meals, and BGCOKC supplemented by offering after-school snacks and dinner, as well as educational materials. Families picked up meals and educational packets through a drive-thru method every day from March through May 2020.

A poll BGCOKC distributed indicated 75% of families had experienced job loss in the pandemic. In many cases, the Clubs would leave food boxes on families’ doors to ensure they had enough dry goods.

As soon as Belcik and her team recognized the overwhelming need to reopen completely at all locations, Boys & Girls Clubs turned to United Way and received a $96,000 grant. Because of the funding they received from United Way, BGCOKC was able to pull kids off a long waiting list at their Memorial Park Club and opened another site nearby. With the help of Justin Brown, Oklahoma Secretary of Human Services and Early Childhood Initiatives, and $15 million in funding for Boys & Girls Clubs and other youth-serving facilities across the state of Oklahoma, BGCOKC was able to add new sites that were open all day to assist youth with virtual learning and other needs, called HOPE Centers, in the fall of 2020.

While the 15 local school districts that BGCOKC serves were implementing online learning, BGCOKC continued to come alongside them and best serve their students. The stress of being open 13 hours a day was very different from being open three to four hours a day for traditional afterschool programming. After seeing the trauma children had experienced from isolation, domestic or sexual abuse, or from having lived in vehicles throughout the lockdown, it became apparent that mental health had to be addressed in addition to providing students the access to technology so many lacked. As part of the effort to address the extreme behavioral health setback notes, BGCOKC expanded their social-emotional wellness programs to build back self-esteem and mindfulness.

Collaboration between agencies sought to meet the multiple needs students were facing. There were many times Urban League of Greater Oklahoma City would work with Boys & Girls Clubs in ensuring students received educational assistance at the most convenient site. Sunbeam Family Services provided mental health support at all of Boys & Girls Clubs’ locations.

By spring 2021, many districts established a plan of going back to in-person learning for several days a week, but Boys & Girls Clubs remained open about 12 hours a day until fall 2021 to help support the schools. Staff learned numerous different online learning systems to show students how to turn in assignments and help them remain engaged. They also developed socially-distanced recreational activities to keep youth active after each school day, thus allowing kids to just be kids amidst the stress of the pandemic.

Since 2020, Boys & Girls Clubs has grown from 4 to 18 Clubs and has changed the way it serves youth: It is costly. However, the cost of not being there for Oklahoma County’s youth is far more costly. Funding proves to be the greatest challenge for the Boys & Girls Clubs. The agency now has a budget that has grown 250% and sites and personnel that have increased by 300%.

"The need is not going away," Belcik said.
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ACKNOWLEDGMENTS

Partner Agencies

A Chance to Change
Areawide Aging Agency, Inc.
Bethesda
Big Brothers Big Sisters of Oklahoma
Boy Scouts of America, Last Frontier Council
Boys & Girls Clubs of Oklahoma County
Calm Waters Center for Children & Families
Camp Fire USA
The Care Center
CASA of Oklahoma County
Catholic Charities
Citizens Caring for Children
City Care, Inc.
Community Literacy Centers, Inc.
Daily Living Centers, Inc.
DRTC
D-DENT, Inc.
EARC, Inc.
Girl Scouts - Western Oklahoma, Inc.
Goodwill Industries of Central Oklahoma
Health Alliance for the Uninsured
HeartLine
The Homeless Alliance
INETGRIS Hospice
John W. Keys Speech & Hearing Center
Latino Community Development Agency
Legal Aid Services of Oklahoma, Inc.
Mental Health Association Oklahoma
Metropolitan Better Living Center
Moore Youth & Family Services, Inc.
Neighborhood Services Organization, Inc.
NewView Oklahoma
NorthCare
Oklahoma Foundation for the Disabled
Oklahoma Medical Research Foundation (OMRF)
Oklahoma United Methodist Circle of Care
Pivot, Inc.
Positive Tomorrows
Possibilities, Inc.
ReMerge
RSVP of Central Oklahoma, Inc.
The Salvation Army
Skyline Urban Ministry
Special Care, Inc.
Sunbeam Family Services, Inc.
The Education & Employment Ministry
Tinker AFB Youth Center
Upward Transitions
Urban League of Greater Oklahoma City
Variety Care
YMCA of Greater Oklahoma City
Youth & Family Services, Inc.
YWCA Oklahoma City

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This edition of Vital Signs was published in December 2023 and utilized vetted data prior to October 2023.

As with many other current societal factors, human capital information is incredibly fluid while employers, citizens and communities adjust to the rapidly changing effects of the COVID-19 pandemic. United Way of Central Oklahoma’s research team is committed to only presenting reviewed and vetted data to accurately provide readers with a wider scope of the human capital challenges and opportunities facing central Oklahoma.

United Way will continue to monitor reviewed data and certified reports on human capital in our community. We encourage you to visit unitedwayokc.org/research for updated data and reports as they become available.