

Inequity in a Global Crisis

Part 1 of 2

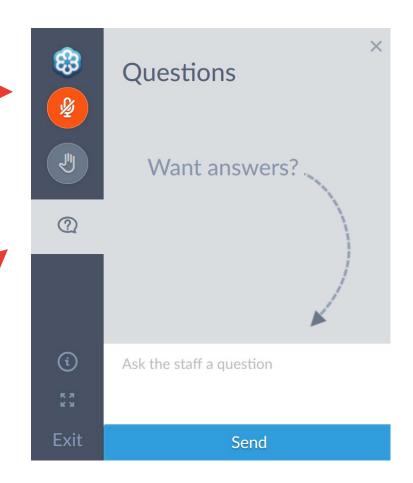


Logistics

Audio will play through your computer. Please be sure your speakers are turned on.

Attendees will be in listen-only mode for the entire presentation.

Throughout the webinar, please type your questions here for discussion in the Part 2 Webinar.



Agenda

- 1. One-Sheet Series
- 2. Introduction by Vicki Clark
- 3. LGBTQ+ Population
- 4. Gender

- 5. Differently Abled Population
- **6.** Race and Ethnicity
- 7. Homeless and Economically At-Risk Populations
- 8. What is Your Role?

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One-Sheet Series

INEQUALITY IN A GLOBAL CRISIS: **GENDER**

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While recognizing that aender and sexuality-based discrimination existed long before the coronavirus pandemic, this document provides an overview of how its effects are compounded by the current crisis and what solutions are being suggested.

Nonprofit organizations,

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Nonprofit organizations

"one-size fits all" solution.

While recognizing that gender-based discrimination existed long before the coronavirus pandemic, this document provides an overview of how its effects are compounded by the current crisis and what solutions are being

This material is based in the cisgender data available. At this time there isn't enough data for summary/solutions for non-binary or nonconforming people

Anxiety, uncertainty, and stigmas need to be acknowledge

pecific communities is critically important

Community activism and collaboration can facilitate fundra

A sense of greater responsibility and community can emerge.

KEY TAKEAWAYS FROM EXISTING RESEARCH

Philanthropists who incorporate gender as a key component of their decision-making help a impact of the current crisis on women. Doing so ensures this marginalized constituency ren

Globally, women comprise 76% of the health care workforce. Health care workers make

10% of COVID Industries th gutted by th

INEQUALITY IN A DIFFERENTLY ABLED

Wonprofit organizations. which depend on philanthropic support from the community to carry out their critical missions, will continue to be affected by the short- and long-term impacts of COVID-19. The constituencies they assist will be impacted differently based on race, class, aender, disability and a multitude of other

The implications of COVID-19 cannot be generically applied to all constituencies Some constituencies are suffering at a far higher rate than others and philanthropists are looking for more than a "one-size fits all" solution.

While recognizing that ahility-hased discrimination existed long before the coronavirus pandemic, this document provides an overview of how its effects are compounded by the current crisis and what solutions are beina suggested.

KEY STATISTICS



Disabilities can

KEY TAKEAWAYS FROM Over a quarter of the U

with disabilities face tre responders, and philan Address the shortag risk of contracting C

denied life-saving m equipment in institu treatment due to im that prioritize individ

often rely on in-home and community support services to live comforta addition, students need adapted educational plans and adults need stea and accessible workplaces. With stay-at-home orders and a shortage of protective equipment, individuals with disabilities are concerned that th support services will be disrupted during the crisis, severely impacting the dignity, and independence

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Guarantee the accessibility of information: Individuals with disabilities sl informed of all developments related to COVID-19. A lack of accessible i the reach of critical information. Communications should be live-caption language interpreter. Websites need to be accessible for those who utili devices, and language should be plain and simple to maximize understal

Increase the availability of mental health resources: Experts have warne periods of confinement, high rates of unemployment, and stressful work on the frontlines of the crisis are creating a mental health crisis that our country is unequipped to address. The Didi Hirsch Suicide Hotline in Los Angeles fielded 1,800 calls in March, versus 20 in February. It is important that mental health organizations have enough support to expand their operations in the weeks and months ahead

INEQUALITY IN A GLOBAL CRISIS: RACE AND ETHNICITY

KEY TAKEAWAYS FROM EXISTING DATA

HEALTH - Black Americans have historically higher incidences of cardiovascular disease, diabetes

circumst INEQUALITY IN A GLOBAL CRISIS: homeles FINANCE Homeless and Economically Insecure

Populations

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When the race Miami-Dade, Fli New York City

27.5 million lack access to health insurance

6.5 million have housing cost burdens of over 50% of their income.

. 200,000 live unsheltered (open to the elements)

70% are individuals and 30% are familie.

• 70% are male, 29% are female, and 1% are transgender or gender non-conforming . 17% are chronically homeless, 7% are veterans, and 6% are under 25 years old

People of color experience higher rate of homelessness than white Americans and

their average representation in the national population

The number of new housing units needed to prevent the spread of the virus and care for the sick

KEY TAKEAWAYS FROM EXISTING DATA

Homeless and economically insecure populations, with limited access to safe and stable shelts healthcare, or resources like the internet, bear the brunt of societal crises. During COVID-19, many human services organizations are working around the clock to address the many immediate needs of these most vulnerable populations. A long term recovery solution is necessary and should address systemic issues creating inequalities faced by both groups. Philanthropists can help address these

Gap Funding: Human service organizations are forced to reduce shelter capacity to maintain social distancing and come up with clever solutions to prevent the spread of the disease. This is creating additional, more complex operations for these organizations, requiring additional funding. While the CARES Act and FEMA made more funds available for human service organizations to assist the homeless during the pandemic and eased the process for obtaining government grants, homeless services systems do not have enough resources to fully meet the needs of everyone experiencing ess. Philanthropic dollars can help organizations fill the current operating budget gap.

Long-term Funding: Over 38 million Americans are unemployed due to the pandemic. Families that are economically insecure feel the worst impacts of the crisis. While the CARES Act sent a stimulus check to every taxpaying family and many states placed a moratorium on evictions, these measures are temporary. In addition, human services organizations that often address these atrisk populations are not fully incorporated into local, long-term economic recovery plans. Philanthropists can help address these needs by funding human services organizations' long-ter

Advocacy: The COVID-19 pandemic highlights the gravity of the homelessness problem in the United States. As we think about how to handle pandemics in the future, reducing homelessness must be part of that plan. This will be critical in protecting the most vulnerable from infection and will prevent homeless members of our society from being in situations where they are more likely to be exposed to viruses. Additionally, we must work toward addressing the economic insecurity faced by many families in the United States every day, which put them at greater risk of homelessness during societal crises. Philanthropists can help by advocating for long-term policy solutions and by supporting organizations that address these inequalities head on

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Why is it important for nonprofit leaders to apply a lens of justice, equity, diversity, and inclusion to fundraising strategies?

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Introduction





Implications of the COVID-19 Health Crisis

The crisis is impacting constituencies in disparate ways.

Existing systemic discrimination and inequities are causing certain groups to suffer more.

Nonprofit leaders must move beyond a "one-size-fitsall" fundraising approach.

Shifting Your Mentality

Charity

- Promotes direct services such as food, clothing, shelter
- Directed at the effects
 (symptoms) of injustice
- Provides short-term relief

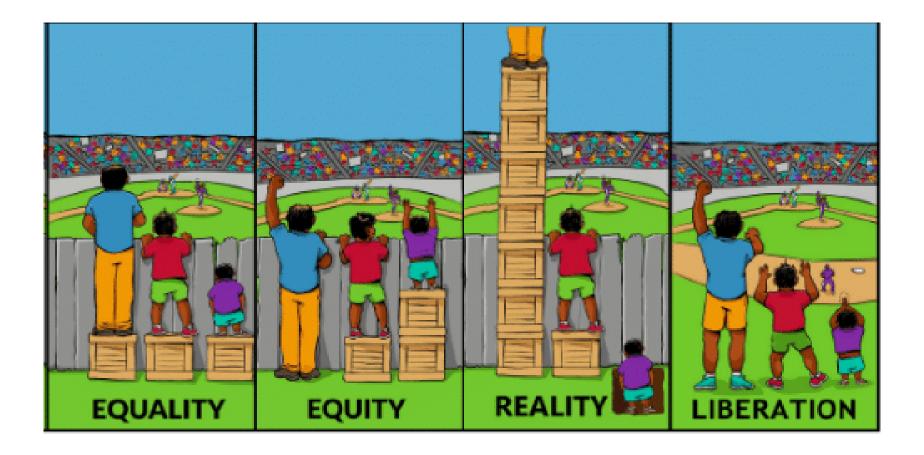
VS

Justice

- Promotes institutional and systemic social change
- Directed at the root causes of injustice
- Provides long-term solutions

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Time to Alter Arrangements



LGBTQ+ Population



LGBTQ+: Key Takeaways from Existing Data

Events cultivating a sense of community and belonging have been canceled.

Higher smoking and cancer rates indicate higher COVID-19 incidences

Youth are forced to live with families of origin, often facing hostility.

Increased isolation could lead to even more disproportionate suicide rates.

Discrimination and barriers to healthcare access are compounded.

A disproportionate number of workers are underemployed, unemployed, and uninsured.

Some religious conservative groups are placing blame for the crisis.

The financial crisis is negatively impacting LGBTQ+ nonprofit fundraising.

LGBTQ+: Response and Recommendations

Lessons from the AID/HIV epidemic:



Gender



Gender: Key Takeaways from Existing Data

Cisgender women comprise 76% of healthcare workers.

Industries that predominantly employ women comprise 2/3 of all "minimum wage" employees in the US

Reports of domestic violence have increased, disproportionately affecting women.

Women and girls receive only \$0.015 of every philanthropic dollar raised.

Women are 10-20% more likely than men to lose their jobs or experience wage reductions.

Fewer than 5% of all US nonprofit organizations focus solely on the unique needs of women and girls.

Gender: Response and Recommendations

Philanthropists who incorporate gender as a key component of their decision-making help amplify the impact of the current crisis on women. Doing so ensures this marginalized constituency remains a priority in uncertain times.

Consider how cisgender women approach philanthropy differently:

Make decisions from a position of empathy, based on relationships.

Seek opportunities to collaborate and build partnerships.

Look for ways to invest that will effect systemic change.

Influence a couple's philanthropic decision-making 84% of the time.

Volunteer to make an impact through action as well as philanthropy.

Differently Abled Population



Differently Abled: Key Takeaways from Existing Data

Disabilities can impact mobility, cognition, independence, vision, hearing, or the ability to care for oneself.

61 million Americans live with a disability.

People with disabilities may be denied COVID-19 treatment due to implicit biases.

Essential services may be disrupted, impacting health, safety, dignity, and independence.

The 6.7 million students with disability often require adapted educational plans.

A lack of accessible information limits the reach of critical information.

Confinement, unemployment, and stress for frontlines workers are creating a mental health crisis.

The Didi Hirsch Suicide Hotline fielded 1,800 calls in March, versus 20 in February.

Differently Abled: Response and Recommendations

Individuals with disabilities face tremendous challenges in this time of crisis. Healthcare professionals, responders, and philanthropists can help in the following ways:



Race and Ethnicity



Race and Ethnicity: Key Takeaways from Existing Data

BIPOC have higher risk for comorbidities that can lead to COVID-19-related death and complications.

Black and Brown people make up 56% of the prison population, 2x their representation in the population.

19.7% of Black workers and 16.2% of Latinx workers are able to telework.

The Navajo Nation has the highest per capita rate of reported cases, recently surpassing NY and NJ.

Black Americans comprise 40% of people experiencing homelessness, 3x their representation in the population.

Black and Brown-owned businesses are being excluded from crisis relief efforts.

Low-income, crowded neighborhoods and reservations are most severely impacted by the spread of coronavirus.

Diasporic Asians are facing xenophobia, violence, and discriminatory threats due to misguided association.

Race and Ethnicity: Response and Recommendations

Hospital capacity, treatment, rapid testing, safety nets, tracking, and translation should be expanded with a focus on marginalized groups. Philanthropists and leaders can support these communities by contributing their voices and funding to direct services and advocacy initiatives.

Hospital capacity, treatment, rapid testing, safety nets, tracking, and translation should be expanded with a focus on marginalized groups. Protections for essential workers must also be expanded. Support BIPOC-owned businesses by directly investing foundation assets, supporting worker-owned businesses, funding equitable growth, and investing in diversity and equitable skills training. Confront discrimination, promote awareness with evidence-based information, and elevate oppressed voices in solidarity.

Homeless and Economically At-Risk Populations



Homeless/Economically At-Risk: Key Takeaways from Existing Data

Individuals with limited access to safe and stable shelter, healthcare, or resources like the internet, carry the brunt of societal crises.

38.1 million people live below the poverty line in the US.

Nearly 570,000 people experience homelessness in the US.

The intersectionality of institutional and systemic inequities are particularly evident within these populations.

400,000 new housing units are needed to prevent the spread of the virus and care for the sick.

Organizations must come up with clever solutions to maintain social distancing, which creates additional, more complex operations, requiring additional funding.

Human services organizations that address the needs of these at-risk populations are not fully incorporated into local, long-term economic recovery plans.

Homelessness and economic insecurity puts these populations in situations where they are more likely to be exposed to the virus.

Homeless/Economically At-Risk: Response and Recommendations

Many human services organizations are working to address the immediate needs of vulnerable populations. A long-term recovery solution is necessary and should address systemic issues that create inequities. Philanthropists can help address these issues in the following ways:



What is Your Role?



Intersectionality

FIVE PREVAILING THEMES IMPACTING HIGHLIGHTED CONSTITUENCIES



Institutionalized
economic
insecurity and a
concurrent lack of
safety net.



Higher risk of exposure through employment in positions that are deemed essential.



Limited access to routine healthcare and historically higher incidences of underlying health conditions.



Discrimination, isolation, and a vulnerability to hostile or violent behavior.



Limited access to necessary and lifesustaining services.

An Equitable Society Requires Active Participation

COMMIT TO STOPPING STIGMA AND BUILDING COMMUNITY RESILIENCY BY:



 Sharing the need for social and financial support for marginalized groups.



2. Maintaining privacy and confidentiality of those seeking healthcare.



3. Quickly communicating the risk or lack of risk associated with products, people, and places.



4. Raising awareness about COVID-19 without increasing fear.



5. Sharing accurate and accessible information about how the virus spreads.



 Speaking out against negative behaviors and the exclusion of marginalized groups.



7. Being cautious about the images that are shared to avoid reinforcing stereotypes.



8. Engaging with marginalized groups in person and through social media.



9. Thanking healthcare workers, responders, and those providing essential services.



10. Nonprofit leaders:
having discussions
with your board about
the relationship
between justice/equity
and your mission.

Thank You

For more resources on the impact of COVID-19 on philanthropy, visit https://ccsfundraising.com/strategies-during-covid-19/

To learn more about CCS Fundraising, visit us at https://ccsfundraising.com/

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