

Diana Huynh (Emcee)

0:05

Good morning, and Good Afternoon. Welcome to CCS's Webinar Series, Inequity in a Global Crisis: Part 1 of 2.

0:13

I'd like to go over some logistics before the beginning of the webinar.

0:18

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.

0:26

Throughout the webinar, please feel free to type your questions in the question pane to be included for discussion in part two of this webinar.

0:36

Now, I'll turn this over to Principal & Managing Director, Chris Looney.

Chris Looney

0:42

Thank you, Diana, and good morning to some of you and good afternoon to most. On behalf of CCS Fundraising, thank you for joining our webinar today, Inequity in a Global Crisis.

0:55

My name is Chris Looney, I'm proud to lead a team of caring and compassionate fundraising experts in Southern California and Arizona.

1:04

I'm also proud to be a part of the corporate leadership at CCS, a leading global fundraising consulting firm, that, more importantly, is committed to justice and equity throughout the globe.

1:16

I'm grateful to all of you for joining this call. We recognize that each of you is a justice warrior in your own right.

1:23

We have upwards of 400 registered for this webinar representing hundreds of organizations. And all of you feed the hungry, care for the sick, educate children, lift up the marginalized, and daily address issues around justice, equity, diversity, and inclusion.

1:46

And, given the world and time we find ourselves living, we're fortunate to have people like you in this fight.

1:53

I firmly believe that we need more people like you in this world.

1:58

We can very quickly agree that there is a tremendous amount of pain in the world at the moment.

2:02

It would be convenient to blame it on COVID-19 and though the pandemic is certainly impacting certain groups more than others, we know COVID-19 is shining a spotlight for many today on a centuries old problem that was for many easier to ignore previously.

2:19

We stand firmly with all those hurting today and do our best to create a better tomorrow.

2:27

Several members of my team, a few of those you will hear from today, chose to explore the implications of the current global health and economic crisis by several different constituent groups, including by race, gender, differently abled, LGBTQ+, and the homeless and economically insecure individuals.

2:50

They did this because they were curious, thoughtful, and remain concerned.

2:55

And because a month ago, the visibility of this issue was not as high as it is today.

3:00

This team wants to share with you our passion for these issues.

3:04

And we desire to bring about transformational change.

3:10

We want to share with you information that we sincerely hope will be useful to the broader marketplace in philanthropy and beyond. Much of the information that will be shared is contained in the one-pagers you see here on the screen that will be shared with you along with other resources following this webinar.

3:30

As my colleagues will share with you later in this webinar, we belong to some of the constituencies we'll be discussing, but we do not fully represent them.

3:38

There are others who are greater experts in everything related to justice, equity, diversity, and inclusion.

3:46

We are expert fundraising consultants, and, like you, we're on a journey to develop a deeper understanding of how to apply a lens of justice, equity, diversity, and inclusion to our work.

3:58

We saw trends regarding historically marginalized communities and suspected that nonprofit leaders, philanthropists, and fundraisers, would be as well.

4:09

So, we used our collective knowledge and resources, including the good work of CCS's own People of Color/Multicultural Network and PRIDE groups, to synthesize the information currently available and elevate it.

4:23

Together, we want to uphold the dignity of all individuals and take steps toward rebuilding the fabric of society.

4:31

This webinar is the first in a two-part series.

4:35

Today, in part one, we will provide an overview of how long-term inequities in our society are being amplified and compounded by the pandemic.

4:45

Please share your questions and comments in the chat box. We will use those to help us frame the discussion for part two of this series.

4:55

Part two in July will feature a panel of thought leaders and philanthropists, serving as a forum to explore best practices and innovative approaches toward addressing the needs of these critically impacted individuals and groups in our community.

5:10

Please watch for an email announcement, with further details and registration information.

5:17

I'd like to introduce the members of my team, who have been instrumental in building the tools they're going to share with you: Alexandra Arenz, Samantha Leveugle, Julie Siebel, and Catherine Sun.

5:31

But before they come onstage, it's my honor to introduce you to a guest speaker for today.

5:37

Vicki Clark has devoted the past 30 years of her life to building capacity and inspiring others to incorporate a lens of justice, equity, diversity, and inclusion into their work.

5:49

Our Southern California team benefited from Vicki's wisdom, grace, humor, and no-nonsense call to action earlier this year.

5:58

In this environment, we can think of no better partner to help us frame today's discussion.

6:03

Vicki, thank you for helping us answer the question "Why is it important for nonprofit leaders to employ a lens of justice, equity, diversity, and inclusion to fundraising strategy?"

6:16

Vicki, the floor is yours.

Vicki Clark

6:19

Thank you so much, Chris. Good morning, and good afternoon to everyone, and thanks to the CCS team and the entire family for inviting me to be part of this. It really makes me happy, as Chris said, I've been doing this work for many, many years, and I'm continuing to learn, but it really makes me proud to see a group like CCS to undertake this. First of all, why is it important

when we look at? Let's go to the next slide. We look at the implications of the COVID-19 health crisis, this crisis is impacting constituencies in different ways, different people are impacted in different ways.

6:58

When they talk about folks who are the most likely to be, to be impacted by this, to catch it, if you will, and then, to have an unfortunate outcome, which means to die.

7:14

I see myself. I am an older African American woman with a couple of comorbidities, and it's impacting me differently than other people and lots of other groups. When we look at the systemic discrimination and inequities that are causing certain groups to suffer more, it's really time to take a look at them.

7:36

We know what they are.

7:37

This has not been hidden for a long time, but I think with the current situation with COVID, as well as with the horrific situations of not only Mr. Floyd's death, but other instances of racism and atrocities throughout our country, we are looking at these inequities, and we are exploring and examining these inequities, I think, with a different lens. This is the time when people like you led by groups like CCS can really take a look and must really take a look at these inequities. Also, in this sector, we must move beyond a "one size fits all" fundraising approach. I don't mean to be insulting. But if you've ever anybody out there ever tried to fit into some too tight pantyhose, you will realize that one size doesn't fit all in anything.

8:32

Why is it important for funders to talk about equity?

8:38

Across the social sector, a fundamental element of social impact remains missing: race equity and equity among different marginalized groups.

8:47

The idea that we all look at everything the same. That was exactly the melting pot, where we did not see differences. We saw one organization as the same, we saw one ethnicity. We said, "We're not going to see color. We're not going to see we didn't even when we weren't going to see gender. We're not going to see any of that. We've got to treat everybody the same." It does not work.

9:09

It is impossible to move forward in this work until we address the structural situations that are really entrenched in the nonprofit sector, Not only in the nonprofit sector, but in our history, and our culture, and our mindset, as well as the mindset of our donors and our volunteers.

9:29

And, and, again, in the practices that are embedded in nonprofit and philanthropic management. We can't make social change until we take a really good look at society today, and I really appreciate, Chris, we're talking about the reality of society today, which, as we all see, is changing daily, just rapidly. Philanthropic institutions hold power and resources.

9:56

We need to own that.

9:58

These are the two tools which really can help to reverse the systems that perpetuating equity. They really can. We don't need to shy away from the power and the resources, but we need to realize what that means from a privileged standpoint and how we use that.

10:15

And I'm not sure that philanthropy would even exist if there wasn't this systemic financial inequity.

10:22

It's interesting that we've created kind of what we need to change in a way, funders, philanthropists, and nonprofit leaders if we do our jobs, right, the problems that plague our communities will be eradicated, and we will eventually put ourselves out of business. Well, we have to change the way we look at things. Let's go to the next slide.

10:44

When I talk about changing the way we look at things, the first thing we have to do is change the way we think.

10:50

And we have a responsibility to the public. We know that. But the breadcrumbs of accountability from funded to community impacted by systemic inequity may be really hard to follow.

11:02

And I think it's time that we shift our mentality from a charity mentality to a justice mentality.

11:08

Most of our nonprofit organizations, and in fact, the entire social sector, was, in this country, was primarily founded on a charity mentality that those who have will give to those who don't.

11:23

Very focused on a lot of direct services, which we always need, and directed at the effects of the systems of injustice that provide short-term relief. We are always going to need short-term relief. People are always going to need direct services, but as leaders in this movement, and I'm going to call this a movement, a philanthropic movement, the justice movement in the nonprofit sector, it is time to shift our mentality to a justice mentality.

11:54

When we start looking at philanthropy, as donors, as nonprofits, as leaders, that we're really trying to promote institutional and systemic social change, not just put a band-aid on it, that we are shifting our mentality directed at the root causes of injustice, where we provide long-term solutions.

12:13

I wonder, how many of your boards have had a conversation about programs versus justice. And believe it or not, we were talking about this before the horrific incident that have happened in the past few weeks as we were planning for this.

12:29

Often, because funders, donors, and board members are not typically representative of marginalized groups, or those who are experiencing poverty, or those who are from underserved communities.

12:42

The data is there, if you want to take a look at it, you can look at Board Source's, "Leading with Intent", and often, intention doesn't always equal impact.

12:51

And we have to own that implicit bias is still a reality for everyone, including funders.

12:57

We've looked at many, many in doing the work, working in a nonprofit. We've looked at many grant applications, when I was working on a small nonprofit, if we all have the resources to apply for that. We don't have the structure to apply for that because the grant application was set up almost in the mirror of the way to find or operate. It's not for a small grassroots organization. So, I think that if funders aren't careful, it's possible that we could end up serving the problems of inequity instead of making the change our communities need and that nonprofits are creating.

13:34

So, this idea of talking about equity.

13:36

You say we're doing all we can, we're doing the most things that we can. I know we are, but it's like, how we think about what we're doing. It doesn't mean we're going to start doing some of the things that we're still doing, well, we're going to do them with an eye for justice. And we're going to expand some of the ways that we do things. And we're going to expand our conversations.

13:56

So, let's take a look at the next slide.

14:00

You've all seen this.

14:03

We're having conversations today, and I'm not going to be able to stay on the call with you.

14:07

But when you look at those one-sheets, those are things to talk about. But then we have to move to action. We talk about inclusion. We talk about equity. It is really time to alter arrangements. We tried the "one size fits all" mentality, as I said, look at the first slide, the tall boy never needed a box.

14:28

But we went through our equality phase.

14:32

We're going to give everybody the same thing. He nearly never needed a box to see the game.

14:37

And I see the game as life, that he had access to the game all the time even if he weren't on a box.

14:46

The middle boy was given a box, and it totally changed his life. He can now see the game. He can now fully participate he can fully see the game. The one box didn't help the little boy at all.

15:00

He is still not, he can't see the game, he didn't even know that there's a game going on. And when we don't think about equity, we have to realize that there are people who are left behind and don't even know the game is going on, or they know it's going on, and they don't have any access to it.

15:19

So, when we look at equity, tall boy, he doesn't have his box anymore.

15:25

The middle boy, he still has one box and now, the little boy has two boxes, and he can see the game. He knows there's a game going on.

15:35

What's happening right now, though, is often when we move from equality to equity, some who did not need what we were given, we see that as persecutions.

15:48

And often, organizations and funders are afraid to change their strategies. Because we've always given equally to this, this, this, and this versus where does it really needed? Who can really be helped by us making sure that they have access to the game? Now, the realities of life, is somebody is always going to have more boxes than other people, we own that, that's called privilege. And I'm not talking about privilege in terms of how much money we have.

16:19

I mean, we are privileged and the fact that we have access to certain things. We have information about things and that's privilege. We have food, we have a home, we're comfortable in ways, and so someone has done to always have more boxes. And then, look at the little boy. There's always going to be somebody that's not even at the fence.

16:43

He can't even get to the fence.

16:45

And you and I know that that is the reality for many, many people in our country, but also in our world, today.

16:53

In my mind, because I'm an optimist, I just kind of have that, I just believe that we can move to liberation.

17:01

And I think if we actually start thinking about our work and moving our missions forward with an eye and with a lens toward equity, we will get liberation.

17:13

The fence needs to come down.

17:15

That's why we have to alter arrangements.

17:17

So, in my mind, the tall boy jumped off of his boxes, took the boxes, and knock the fence down.

17:25

Now, all three of the boys can participate in the game.

17:31

All three of the boys have access to the game of life and access equally.

17:38

That's why it's so important to alter these arrangements in our organizations and our donor strategies.

17:45

You know we all most of us grew up with the Golden Rule "Do unto others as you would have them to do unto you." Authors Michael O'Connor and Tony Alessandra have something called the Platinum Rule.

17:56

"Do unto others as they'd like done unto them." How will we know?

18:02

How would we know? Because we're very different.

18:04

We must get up close. We must form relationships with those who are beneficiaries: we must not helicopter in with strategies, programs, and dollars. Where we helicopter in with our ideas of what change will look like, of what transformation, I'm not even talk about transformation, I'm going talk about change, I'm going talk about what transformation should look like. If someone had said transformation is more about unlearning than it is about learning, what is it that your organization and your strategy need to unlearn in order to have a lens of equity and justice?

18:35

That's the first question I would ask. So the idea of really partnering, I love the way CCS talks about the team.

18:47

So, it's important not to impose our requirements, if you will, on groups without talking to them and working with them.

18:56

Thought leader Peter Drucker said, there was really to be true transformation in the country, it would begin with the nonprofit, or what he called the social sector.

19:06

It's interesting that Dr. Drucker believed in the social sector and the nonprofit sector, at times, when even those of us who are working in it were calling it the third sector. He was quite a visionary, and even though he's no longer with us, his words still resonate, resonate with us, about being mission driven organizations.

19:27

And about seeing these organizations as not merely putting a band-aid on issues and saying philanthropy is not merely a holding pattern, but, actually, moving toward true liberation.

19:39

And the only way we can do that is with the lens of equity.

19:42

The time is now.

19:44

I thank you for participating in this webinar. I'm so honored to be a part of it. I got great information from it, and I'm just excited to share what I have learned from this. And I thank you for what you're already doing. And I thank you for what you're going to do. So we must keep our eye on equity. It is time to alter arrangements.

20:07

Thank you so much.

Alexandra Arenz

20:22

Thank you so much Vicki. We are so grateful for your knowledge and to be collaborating with you. So, my colleagues and I are now going to walk you through the documents we produced. We want to acknowledge first, it's important to us to acknowledge that, like Chris said, we do belong to and represent some of the communities will be talking about, but we're not fully representative of all of those communities. We're definitely not experts in all things justice, diversity, equity, and inclusion. We are experts in our own personal experience, and some of us have educational experience and the theory and practice of these topics. But we're right there with you, on this journey to a deeper understanding of how to apply this lens of justice, equity, diversity, and inclusion to our work.

21:08

We're really hoping to expand our thought leadership on the topic alongside you our nonprofit partners. And the communities that we're highlighting, A lot of our work is to serve our clients in communicating a need to current and potential supporters. So, we want to be sure to incorporate this lens into our 360 view and our understanding of the nonprofit landscape.

21:32

So, with that said, I'm going to break down our first document about the LGBTQ+ community. This acronym stands for lesbian gay, bisexual, transgender, and queer or questioning. And the plus basically means that this community loves inclusivity. So, if you're interested, I'd invite you to do more research to look into all the ways that people are identified and embraced by this acronym and this community.

21:58

What we're seeing now in the qualitative and quantitative data is that since the LGBTQ+ community has been historically underserved in many ways, and in certain ways, the current crisis is compounding barriers for this community when it comes to mental and physical health and safety and socioeconomic security.

22:18

In terms of physical health, high rates of things like smoking and cancer within the LGBTQ+ community are overlapping as barriers or indicators of higher COVID-19 incidences.

22:33

And in many ways, the discrimination that LGBTQ+ people face and the barriers they face and access to health care is compounded with this crisis.

22:44

They often experience as discriminatory attitudes among healthcare workers, and that leads the community to avoid or delay accessing health care. In terms of mental health, local, national, and international events like annual pride parades and festivals that really gather and solidify a sense of community are being canceled. And this increased isolation, during the stay at home orders could lead to higher suicide rates. And this is something that's already disproportionately high for this community.

23:17

It's also important to mention that a lot of LGBTQ+ youth are being forced to live with families of origin again. They're often closeted or faced hostile and violent behavior there in response to their orientation or their gender identity.

23:32

And also, there are some religious conservative groups in the US and other countries that are perpetuating a historical stigma by blaming this virus on the LGBTQ+ community, and that really puts those individuals at higher risk for incidences of hostility and violence.

23:52

In terms of socioeconomic security, many local and national nonprofit organizations that are serving the LGBTQ+ community in the US are reporting profound trouble with fundraising, due to financial impacts of COVID-19.

24:09

And on an individual basis, this community is also facing discrimination in employment markets, and higher rates of job loss.

24:16

A recent survey conducted by PBS and the human rights campaign found that 30% of respondents have had work hours reduced compared to 22% of the general population. And they also found that about 12% of LGBTQ+ respondents reported unemployment due to the pandemic. And LGBTQ+ individuals only make up 4.5% of adult Americans. So you can see the disproportion there.

24:44

Given all of this data and evidence, it's really clear that this population is one that needs increased access to resources and services. If you read through our documents in this series, you'll find a lot of links to references and resources. And you'll find that there's a lot we can do even individually to prevent and stop the spread of stigma.

25:04

There are also many opportunities for advocacy and partnership that your organizations and leadership can seize if you wish to support this community.

25:14

If you are a philanthropist or a fundraiser looking to support this community, there are resources and organizations that can help you identify how to lend support, how to directly meet the needs of the LGBTQ+ community and how to support businesses and organizations that are owned and operated by LGBTQ+ individuals.

25:34

So, I will just wrap up by saying that this community is incredibly resilient. There's so much we can learn from our LGBTQ+ neighbors, and colleagues, and friends and family.

25:45

They've learned a really valuable lesson about how to respond to and organize around a health crisis because of their experience with the HIV/AIDS epidemic and have really demonstrated how we can adjust to coexist with this virus now and establish new cultural norms.

26:02

How anxiety, uncertainty, and stigma must be acknowledged and addressed. How, how critical it is to educate and converse and, and spread accurate information that's tailored to specific communities?

26:16

How community activism and collaboration can really successfully fundraise and demand healthcare solutions. And, finally, how a greater sense of responsibility and community overall can emerge from this crisis. So, I thank you all for listening with open hearts and minds. And I will pass things over to my colleague, Julie.

Julie Siebel

26:44

Thank you so much, Alex. And let me add my thanks to all of you for joining us today. We are humbled and overwhelmed by the responses this project has given from our clients, friends, and colleagues.

26:57

The role of women in the United States has been evolving since 1776 when Abigail Adams implored her husband to "...remember the ladies." Just this year, we're celebrating the 100th anniversary of suffrage with the passage of the 19th Amendment.

27:11

For nearly 250 years, some American women have continually gained all manner of rights and opportunities.

27:19

Yet, equity remains beyond the reach for so many. Women of color, those who are economically insecure, those who don't identify as cisgender, and those who are differently abled experience even greater levels of inequality than their economically secure, Caucasian, cisgender sisters.

27:37

As we have witnessed over the past months, this global crisis has amplified gender inequality for all women, but more so for some than others.

27:46

Next slide, please.

27:48

Although there are many examples of how this is impacting women, the existing data points give four key takeaways.

27:56

The documents and resources we used to identify these are listed in the gender one-sheet, along with all the other one sheets that you'll be getting at the end of this seminar.

28:05

First, women are more likely to be exposed to COVID-19 while working in an essential role.

28:11

Globally women comprise over 76% of healthcare workers.

28:15

This statistic refers to all manner of caretaking roles in a hospital, as well as throughout the industry.

28:21

If you look at just one example, consider that one third of all coronavirus deaths in the US come from skilled nursing facilities where equipment, standards for protection, and testing vary dramatically.

28:34

Second, women are more likely to suffer financial repercussions.

28:38

The hospitality and service sectors that employ significant numbers of women have been gutted by the coronavirus and the subsequent economic crisis.

28:47

These sectors comprise two thirds of the minimum wage employees in the US, who are the most vulnerable to being laid off.

28:54

These female employees also lack an economic safety net because of their limited earning potential prior to the crises.

29:02

Third, women are disproportionately affected by domestic violence.

29:06

Reports have increased internationally during these stay at home orders, the stress of sheltering in place, compounded by economic challenges and other triggering factors, serve as a catalyst for domestic violence. Work and routine activity outside the home that typically provided short-term relief from an abusive spouse or partner, have been upended.

29:27

Compounding this tragic situation, shelters have had to limit their occupancy to comply with social distancing standards.

29:35

The UN Secretary General focused international attention on this issue, by urging all governments to put women safety first in their response to the pandemic.

29:45

Finally, philanthropic support for organizations dedicated to the unique needs of women lags behind the other sectors.

29:53

Less than 5% of all nonprofit organizations in the United States focused solely on meeting the unique needs of women and children.

30:01

And only \$0.015 for every philanthropic dollar raised in the US goes directly to support children and women's causes.

30:10

Next slide, please.

30:11

But there is some good news as this global crisis drags on, we have witnessed individual and localized efforts to help women and children and broader trends are emerging, that addressed the longer-term unique impacts of the crisis on gender inequality.

30:26

These positive responses suggest that philanthropists, nonprofit organizations, and community leaders that incorporate gender as a key component of their decision making, have truly helped amplify the impact of the current crisis on women.

30:40

Melinda Gates frequently reminds people of the unique and powerful leadership role women can and do provide locally, regionally, nationally, and internationally.

30:50

Last fall, she told Time Magazine that because gender equality has been chronically underfunded, she is putting resources behind new and established partnerships that introduce innovation and diversity into solutions enhancing women's power and influence.

31:05

So, while the Gates Foundation is working to support COVID-19 relief and recovery, Melinda herself remains committed to funding pathways that are designed to achieve gender equality.

31:17

Lily School of Philanthropy's Women's Philanthropy Institute has demonstrated time, and, again, that female philanthropists approach their philanthropy and community commitments very differently than their male counterparts.

31:30

Successful efforts to rebuild the fabric of society for all women take these differences into account.

31:36

Women make decisions from a position of empathy based on strength of the relationships they have or are able to build.

31:43

Women seek opportunities to collaborate and build partnerships, rather than approach philanthropic support as an independent transactional effort.

31:53

Women look for ways to invest in their communities that will affect systemic change, and they typically support organizations that engage them on multiple levels.

32:02

Women's influence in a couple's philanthropic decisions usually is 84% or higher. It would truly be a mistake to develop a cultivation strategy based solely on a traditional model of a "male head of household."

32:17

Eleanor Roosevelt often said "a woman is like a tea bag. You never know how strong she is until she's in hot water."

32:23

This global crisis has amplified gender inequality, but it is also an opportunity that has been provided to make a difference.

32:31

With the right lens and support, we can elevate all women to a position of equality and provide them with an inclusive, just, society in the near future.

32:41

Thank you. And I'd like to now turn the conversation over to my colleague, Catherine Sun.

Catherine Sun

32:53

Thanks so much, Julie.

32:55

Another population that has been disproportionately impacted by COVID-19 crisis is the differently abled population or people with disabilities.

33:05

The first thing I want to acknowledge is appropriate terminology to use.

33:10

Our research shows that there are different preferences, some prefer differently abled, while others prefer people first language, such as, people who are visually impaired or an individual who uses a wheelchair.

33:23

As always, the best thing to do is to ask someone who represents the population you are addressing.

33:31

Disabilities can impact mobility, cognition, the ability to live independently, vision, hearing, or the ability to care for oneself. In the US, 61 million people live with a disability, which is over a quarter of the population. And, as my colleagues have mentioned before, you can find references for these statistics directly on the one-sheet document.

33:54

While not inherently at a greater risk of contracting COVID-19, people with disabilities are expressing concern about being denied life-saving medical procedures, due to a shortage of equipment in institutions.

34:08

In these cases, individuals with disabilities may be denied treatment due to implicit biases among medical professionals and state emergency protocols that prioritize individuals considered otherwise fit and healthy.

34:22

People with disabilities and their families often rely on in home and community support services to live comfortably day-to-day. Adults need steady employment and accessible workplaces, and the nearly seven million public school students living with a disability need adapted educational plans.

34:40

With stay at home orders, and a shortage of personal protective equipment, individuals with disabilities are concerned that these essential support services will be disrupted during the crisis, which can have severe impact on their health, safety, dignity, and independence.

34:58

As news, information, and updates about COVID-19 rapidly emerge, we must ensure that individuals with disabilities are kept informed of all development.

35:08

Communications should be live captioned and have a sign language interpreter.

35:13

Websites need to be accessible for those who utilize accessibility devices, and language should be plain and simple to maximize understanding.

35:22

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

35:27

And finally, experts have warned that extended periods of confinement, high rates of unemployment, and stressful work on the front lines of the pandemic are creating a mental health crisis that our country has unequipped to address.

35:39

One in five Americans experienced mental illness, and the Didi Hirsch Suicide Hotline in LA, fielded 1800 calls in March versus 20 in February.

35:50

It's important that mental health organizations have enough support to expand their operations in the months ahead.

35:57

As nonprofit leaders, philanthropists, and social justice activists, we can help address these inequities by considering the actions I just described.

36:07

To recap: we must address the shortage of lifesaving medical equipment and particularly how it impacts people with disabilities who often require this equipment in their day to day.

36:17

We must also prevent the disruption of support services and continue to prioritize the services that are essential to the daily health and well-being of these individuals.

36:27

We must consider all forms of accessibility when disseminating critical and timely information about COVID-19 and ongoing protocols, and we can put our resources behind increasing the availability of mental health services during this time of crisis.

36:43

As a final note, I want to say that inclusion of the populations and communities you are addressing is the best way to make meaningful social progress.

36:51

A phrase we often hear in the space of advocacy is, “nothing about us without us.” And so, when creating strategies, action plans, donor strategies, and communications, please always consider inclusion.

37:06

I'll also cover our next document, which provides an overview of the relationship between COVID-19 and race and ethnicity, specifically the black, indigenous, and people of color population. There are so many nuances in this conversation, and the impacts vary greatly between populations so I will underscore the fact that this is an overview and a starting point.

37:29

I also want to acknowledge the Black Lives Matter protests occurring around our country right now. These events are reactions to systemic racism in our society that may seem unrelated to the effects of COVID-19, but the root of both of these crises is simply injustice.

37:46

I won't even begin to claim that the information we are sharing today will move the needle in any tangible way. But every amount we can learn about existing inequities is something we can carry forth with us and the fight for a just and equitable society.

38:03

To dive into our findings, Black, indigenous, and people of color are more likely to have comorbidities that lead to COVID-19 complications.

38:12

Specifically, Black Americans have historically higher incidences of cardiovascular disease, diabetes, chronic respiratory disease, hypertension, and cancer, which are the underlying conditions most likely to increase chances of death with COVID-19.

38:27

Incarcerated and homeless populations have a high circumstantial risk of developing COVID-19 for obvious reasons. Black Americans comprise 40% of people experiencing homelessness, which is three times the representation in the US population. Black and Brown people make up 56% of the prison population, which is double their representation in the US, often, because of economic inequities that make it harder for them to make bail.

38:54

And so in addition to greater physical harm from COVID-19, Black, indigenous, and people of color are also at greater risk of economic harm.

39:04

1% of Black owned businesses secure bank loans in their first year, compared to 7% of white owned businesses.

39:11

Twice as many white business owners access credit cards in their first year.

39:15

And so essentially Black and Brown businesses are being excluded from relief efforts when bank and banks administer crisis relief only to those with established loans or lines of credit. Also, Latinx workers fill a large share of construction jobs, and Black workers are overrepresented in the service sector.

39:36

Only about 20% of Black workers and 16% of Latinx workers are able to telework.

39:42

And a current study suggests that an overwhelming 72% of Latinx domestic workers report unemployment.

39:50

In terms of geography, low-income neighborhoods in the US for Black, Brown, and indigenous populations have been historically crowded into urban areas and reservations due to discriminatory policies are most severely impacted by the spread of coronavirus. And just the last few weeks, the Navajo Nation has surpassed both New York State and New Jersey, with the highest per capita rate of reported cases in the country.

40:16

There's also a rise in stigmatized persecution due to COVID-19. According to a survey conducted by USC, 14% of Asian Americans, 10% of non-Hispanic Black Americans, and 6% of Hispanic Americans report experiencing coronavirus related discrimination, compared to 4% of White Americans.

40:38

Diasporic Asians, from China, Korea, Vietnam, the Philippines, and elsewhere, are facing discriminatory threat by misguided association and false information.

40:51

To begin addressing these inequities, we must stand in solidarity regardless of our identities.

40:58

There are tangible actions we can take to begin closing the gap.

41:02

Hospital capacity, treatment, rapid testing, safety nets, tracking, and translation should be expanded with the focus on marginalized groups.

41:12

Protections for essential workers must also be expanded.

41:15

Philanthropists can support Black and Brown-owned businesses by directly investing foundation assets, supporting worker owned businesses, funding equitable growth, and investing in diversity and equitable skills training. And finally, everyone can use their voice to confront discrimination,

promote awareness with evidence-based information, and amplify the voices of the oppressed in solidarity. There are so many resources circulating right now in light of recent events, and we invite everyone to join us in seeking information and taking action.

41:52

I'll now pass it over to my colleague, Samantha, for our final document in this series.

Samantha Leveugle

42:08

Thank you, Catherine. COVID-19 pandemic has highlighted the problem of homelessness and economic insecurity in the United States.

42:17

Homeless and economically insecure populations have limited access to safe and stable shelter, healthcare or resources like the Internet which would allow one to work or learn remotely and as a result, bear the brunt of the fatal crisis.

42:32

Next slide, please.

42:34

According to recent data from the National Alliance to End Homelessness, about 38 million people live below the poverty line in the United States.

42:42

The poverty line is defined as an income of about \$13,000 per year or less for an individual or \$26,000 per year or less for a family of four.

42:53

About 27 million of the 38 million lacks access to health insurance and about seven million have housing cost burdens of over 50% of their income.

43:07

Nearly 568,000 people experience homelessness in the United States, while great strides have been made in the last few years to address homelessness, that number has continued to grow over the past three years due to a rising cost of housing and limited availability of affordable housing.

43:24

200,000 of these 568,000, live unsheltered and open to the elements 70% are individuals and 30% are family. 70% are male, 29% are female, and 1% identified as transgender or gender non-conforming.

43:45

17% are chronically homeless, which means they've been homeless for 10 years or more. 7% are veterans and 6% are under 25 years old.

43:56

While most people experiencing homelessness are white male, people of color experience a higher rate of homelessness than white Americans and their average representation in a national population.

44:06

So, as we can see, people experiencing homelessness belong to many of the groups that were mentioned previously, which is what we call intersectionality.

44:14

There are overlapping systems of discrimination and disadvantage at play for certain constituencies within the homeless population. As an example, historically, many people fleeing domestic violence or LGBTQ+ youth become homeless, so they are experiencing a crossover of discrimination and barriers because of their identities and circumstances.

44:40

To prevent the spread of the virus and care for the sick adequately, we need about 400,000 available housing units. Diana, next slide, please.

44:50

Many human services organizations are working around the clock to address the many immediate needs of these most vulnerable populations, including the increased need for housing units.

45:00

And philanthropy can help by supporting the short-term efforts of human services organizations, as well as a long-term recovery solution that will address systemic issues creating inequalities faced by both groups. In the short-term, we can help with gap funding. Human services 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, which requires additional funding, while the CARES Act and FEMA have made more funds available for nonprofits to assist the homeless during the pandemic and have ease the process for obtaining government grants, homeless service system still do not have enough resources to fully meet the needs of everyone experiencing homelessness.

45:49

So philanthropic dollars can help organizations fill the current operating budget gap.

45:55

Long-term recovery funding can also make a big difference for these organizations. Over 40 million unemployment claims have been filed since beginning of the pandemic and nearly 80% of Americans live paycheck to paycheck.

46:09

Families facing into economic insecurity feel the worst impacts of the crisis while the CARES Act sent a Stimulus check to every tax-paying family and many states placed a moratorium on evictions, these measures are temporary.

46:24

In addition, human service organizations that often address these at-risk populations are not fully incorporated into a local, long-term economic recovery plan. Philanthropists can help address these needs by funding human service organizations' long-term recovery efforts.

46:42

And in the long term, advocacy is necessary.

46:46

COVID-19 pandemic highlights the gravity of the problem of homelessness in the United States.

46:51

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're more likely to be exposed to viruses.

47:08

Additionally, we must move from a charity lens to a justice lens, focus on eliminating homelessness and economic insecurity. We must work toward addressing the growing economic gap and economic insecurity faced by many families in the United States every day, which puts them at greater risk of homelessness during societal crises.

47:28

We invite organizations and individuals to consider the ways they might be able to help eradicate this injustice.

47:35

In addition, philanthropy can help by advocating for long-term policy solutions and by supporting organizations that address these inequalities head on.

47:44

And with that, I will turn it over to Chris, who will walk us through some considerations that each of us can think about and act upon to begin making a difference for those most vulnerable among us.

Chris Looney

48:01

Thank you, Samantha. And my thanks to Alex, Catherine, Julie, and Vicki as well.

48:10

COVID-19 is certainly a global threat that cannot be ignored.

48:14

We also know that the impact of COVID-19 on communities of color, women, differently abled, LGBTQ+, and the homeless and economically insecure individuals have further destabilized very negatively impacted groups, and we must find ways to step into this work further and more impactful ways to help those most in need at this time.

48:39

As nonprofit leaders, philanthropists, and fundraisers, we have an opportunity to help rebuild the fabric of our future by applying a lens of justice, equity, diversity, and inclusion.

48:52

When we do, we will see five themes that prevail among the constituencies that we've highlighted today.

48:59

First, there is an institutionalized economic insecurity and the concurrent lack of a safety net.

49:06

Secondly, there is a higher risk of exposure through employment in positions that are deemed essential.

49:13

Number three, there's limited access to routine health care and historically higher incidences of underlying health conditions.

49:21

Four, there is discrimination, isolation, and vulnerability to hostile or violent behavior.

49:28

And five, there's a limited access to necessary and lifesaving, life sustaining services.

49:36

As we wrap up the first part of this webinar series, I want to invite you to consider 10 steps we and others can take during this crisis to prevent the spread of stigma, and to help build resiliency in our community.

49:53

We must share the need for social and financial support for marginalized groups.

49:59

We must maintain privacy and confidentiality of those seeking health care.

50:04

We must quickly communicate the risk, or lack of risk associated with products, people, and places.

50:12

We must raise awareness about COVID-19, without increasing fear.

50:16

We must share accurate and accessible information about how the virus spreads.

50:22

We must speak out against negative behaviors and the exclusion of marginalized groups.

50:28

We must be cautious about the images that are shared to avoid reinforcing stereotypes.

50:34

We must engage with marginalized groups in person and through social media.

50:39

We must thank our healthcare workers, responders, and those providing essential services.

50:45

We must start a conversation with your organization's leadership about how you will address these inequities within the delivery of your mission.

50:55

Thank you again for joining us today. We're grateful to all of you for the good work you continue to do.

51:02

We look forward to incorporating your questions and comments into the conversation as we continue this journey in July for part two of this webinar series. We also look forward to hearing from you separately. So please, don't hesitate to reach out to any of us.

51:18

Following this webinar, we will provide access to the one-pagers we reference, and other resources and we hope that they are helpful to you.

51:27

Finally, stay safe and healthy and take care of one another. Thank you.