



Human Services Resilience in the COVID-19 Pandemic

A Responsible Fatherhood Program in New York City

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The COVID-19 pandemic has forced service delivery organizations across the US to rethink how they deliver supports in a world where in-person interactions are constrained. Organizations serving vulnerable populations have had to be particularly adaptable to rapidly restore and ensure the continuity of services to meet people’s needs—needs that may have been exacerbated by the pandemic. Organizations have had to determine the new skills and supports their participants and staff need to meet new demands of balancing work and family. Although COVID-19 introduced challenges that could create gaps in service delivery, it also led to insights about how human service delivery programs can be resilient and function while facing new circumstances. In this brief, we present what one group of service delivery organizations learned as they coped and innovated through the first six months of the pandemic. Their learning journey can help others prepare for service delivery resilience in a future crisis.

We describe the experiences of Seedco’s Strong Fathers, Stronger Families (SFSF) program in New York City as it provided services to help fathers become more financially stable and better able to support their families both financially and emotionally. New York City was an early epicenter of COVID-19 in the US in spring 2020 (CDC 2020), so this brief’s findings are particularly appropriate for seeing how service delivery programs can adjust in crises. When the pandemic hit in March 2020, Seedco had been working with the Urban Institute team for the previous four years to support Seedco’s Continuous Quality Improvement (CQI) approach to service delivery that involved continuous reflection on program improvements. Throughout the first six months of the pandemic, the SFSF team leaders continued to meet with the Urban team to reflect on challenges and progress. They asked us to help

them document the process of innovation, the changes they made, and challenges they faced so they could keep reflecting on and learning from the experience through the program's conclusion and afterward as they continued providing other services. We discuss lessons from these experiences that can be applied more broadly to service delivery organizations that have had to manage the consequences of the pandemic for both themselves and the populations they serve.

The Strong Fathers, Stronger Families (SFSF) Program

As part of the Healthy Marriage and Responsible Fatherhood (HMRP) initiative, the US Department of Health and Human Services, Administration for Children and Families, Office of Family Assistance (OFA) awarded a grant to Seedco, a national nonprofit organization dedicated to advancing economic opportunity for people, businesses, and communities in need. Seedco and two subcontracted community-based organizations (CBOs), STRIVE and BronxWorks, offered SFSF from 2012 to September 2020, when the most recent grant ended.

SFSF was targeted to fathers or father figures in New York City who faced family relationship and economic challenges. Participants were required to be

- age 18 or older;
- an acknowledged father or father figure of at least one child age 24 or younger;
- earning low income (less than 200 percent of the federal poverty level) or unemployed and interested in getting help finding a job; and
- interested in improving their parenting skills and relationship with their coparent and/or spouse/partner.

Participants faced various economic and institutional barriers to getting a job, such as a lack of housing, child support obligations, low levels of education, transportation barriers, criminal justice involvement, and gaps in employment. Other challenges included trauma, substance use, and limited money management, communication, and other soft skills. These challenges also often affected their relationships with their children, spouse/partner, coparent, or other family members. SFSF provided training and services to help their participants overcome these challenges and become stronger fathers who are more financially stable and in a better position to support their families both monetarily and emotionally.

The program focused its work with fathers in three key areas: responsible fatherhood, healthy relationships, and economic stability. Key components in the service delivery process included the following activities:

- recruitment
- intake and assessment
- workshops and trainings

- case management (including support services and referrals)
- job placement
- post-job placement services

Seedco provided fiscal oversight, facilitated regular communication between both CBO partners to address program operations, and employed a team to support each site. The two CBOs provided most of the direct contact with participants. The service delivery procedures of the two CBOs were similar but not identical. In the next section, we describe the procedures that apply to both program sites, though there may be some differences in how the two specifically implemented them. We also discuss the key components of the SFSF service delivery model and how they had to be changed because of COVID-19, including any challenges faced, specific solutions identified, and lessons learned.

A Continuous Quality Improvement Approach

Throughout their grant, Seedco used a continuous quality improvement (CQI) process to assess and improve the program.¹ The Urban Institute assisted Seedco to conceptualize CQI using an implementation science framework. Implementation science² asserts that the drivers for successful implementation occur in three primary categories: staff competency drivers (assessing staff skills, hiring staff, and professional development), organizational drivers (policies and procedures, data systems and culture/climate), and leadership drivers (leadership skills and strategies). The Urban team provided training on CQI and the importance of implementation to SFSF managers. We also met regularly with a cross-functional team by phone to identify challenges, reflect on and test out solutions, and discuss how data could be used to document needs and changes.

When the pandemic hit, we continued to meet but had to pivot from the prepandemic challenges to new challenges. When we reflected with staff at the end of the SFSF grant period, they told us how important it was to maintain the routine meetings with us, which normalized reflecting on challenges and discussing solutions to continually improve to the end. Thus, we continue the tradition of reflection here. We use an implementation science lens to describe SFSF's implementation challenges, successes, and lessons learned in responding to the pandemic.

SFSF's Service Delivery Changes in the Pandemic and Lessons Learned

SFSF worked across organizations to address the challenges faced by families and their own staff as the COVID-19 pandemic and related mandates restricted in-person interactions. Every part of their service delivery model had to be adjusted. Some changes were a direct consequence of the inability to meet their participants in-person, while other changes were because of the pandemic's effects on both participants' and service providers' lives, including unemployment, closed schools, and child care challenges. To organize the discussion, we divide program delivery into its key components, including recruitment, enrollment and data documentation, direct service delivery (workshops and trainings), and

case management and referrals, and we highlight adjustments made by SFSF to each different component.

We also outline lessons learned from the changes made to every part of the SFSF service delivery model—in particular, the transition to virtual service delivery developed and implemented in response to COVID-19. These lessons have implications for multiple situations. They can be useful to continue improving program delivery while COVID-19 remains a threat and virtual programming and social distancing are still needed. In addition, certain innovations developed during the pandemic may be useful for future programming in a post-COVID-19 world. Finally, some lessons are specifically related to responsible fatherhood programming, but some may be broadly applicable to program delivery for similar populations or service activities (e.g., recruitment, virtual learning). The main lessons we discuss here focus on (1) changes in recruitment and enrollment, (2) how program providers can implement virtual workshops, (3) how other services and referrals can be delivered in a virtual world, (4) how staff can alter practices and procedures to enhance the benefits of this programming and minimize its limitations, and (5) how participants respond to virtual programming in different ways. Reflecting on these lessons is an important step in the CQI process to discover lessons to improve future service delivery in various contexts.

The Urban Institute team conducted a series of interviews and discussions with staff associated with SFSF that focused on the initial transition period (about 6 weeks following the stay-at-home orders in March 2020 in New York City) and on the “new normal” that evolved from about early May through July/August 2020. Those interviews and discussions revealed an evolving process of identifying challenges, formulating solutions, learning new skills, experimenting, and refining approaches to meet the challenges of staff, the fathers they were serving, and service delivery partners.

RECRUITMENT

Recruitment is a vital part of SFSF to ensure the program reaches fathers in need of its services. Program staff reported that recruiting is all about developing and maintaining relationships with people and groups. Before COVID-19, maintaining these relationships would involve going in-person to communities or other service organizations and attending street fairs, among other strategies. But with COVID-19 and the shift to a virtual environment, recruitment had to change.

During the six weeks following the stay-at-home order in New York City, recruiting was on pause as the funder provided new guidance around virtual enrollment. Following this period, SFSF staff reported that communication and outreach were more difficult with a lack of in-person venues.

In response, SFSF brainstormed how to transition to a socially distanced environment. To gather ideas, they attended web meetings of community-based organizations across New York City’s five boroughs. Later in summer 2020, SFSF had some socially distanced in-person recruiting events. One was an outdoor tabling event with tents for community-based organizations, where they could share information on their services. At this event, staff reported 25 to 30 people were recruited to SFSF. Additionally, some staff, including an SFSF alum, lived in similar communities as the participants and

were able to recruit people through word-of-mouth. Staff recruited this way before the pandemic but relied on the method more during the pandemic.

Overall, staff reported that word-of-mouth recruitment of friends of neighbors and in-person recruiting events were most successful in bringing new people to the program, but virtual recruitment methods also had some success. Staff found that as long as relationships were maintained, SFSF could still recruit people to the program during the pandemic.

Lessons learned for recruitment

- To help prepare for a possible sudden reduction or change in recruitment opportunities, it is important to develop recruitment contingency procedures including creating a checklist and developing communication and coordination strategies to maintain relationships with partner organizations and individuals in the community.
- It can be useful to reflect on which populations respond better to different types of recruiting methods. For example, fathers who have custody of their children during a stay-at-home order may be too busy to respond to outreach from a program or referral partner but may be more receptive to word-of-mouth and referrals from friends and family. For those in need of support services directly related to the pandemic, a helpful strategy could be reaching out to the organizations providing those services to help spread the word and recruit from their participant populations.

ENROLLMENT AND DATA DOCUMENTATION

The eligibility screening and intake process occurred once a potential participant walked in the door or was referred. Before the pandemic, OFA (the funder) mandated an intake process that required participants to complete several forms in-person, with support from a data specialist. The data were needed to confirm eligibility, collect information to document who was served by the program, and provide baseline data to help assess needs and evaluate improvement at the end of the program. The data specialists would take the initial paper application and online applicant characteristics survey filled out by fathers in-person and transfer that data manually to the program's own online platform, Salesforce. With the pandemic, enrollment conducted on paper and in-person was no longer feasible. SFSF then had to wait for new guidance from OFA.

By May 2020, OFA had changed their guidance to allow for remote, virtual enrollment (first they allowed for it to be done over the phone, and then they allowed it to be done through email or texting with various data security measures in place). It took SFSF time to digitize their enrollment forms and brainstorm the best processes for doing virtual enrollment throughout the pandemic. By the end of May 2020, the program had digitized their forms and amended the enrollment process. The process was fairly hands-on and time-intensive and involved a combination of phone calls and texts or emails to communicate passcodes to participants and have them complete the necessary forms. The data specialist then put the data collected through the online surveys into a spreadsheet and uploaded it to their online platform. With this, the role of the data specialist changed, as they were now working and

uploading the survey data remotely. SFSF provided them with computers and the necessary technology and training to do this work.

As the stay-at-home order in New York City was lifted, the program could have limited in-person interaction. This meant that if a person was unable to complete their forms remotely (e.g., did not have a computer), they could physically go to the program offices to complete their enrollment. At that point, program enrollees had three different options for completing their enrollment: over the phone, online, or in-person.

Enrollment in SFSF was low during the first few months of the pandemic. According to staff, this was for various reasons including the program having to wait to receive new guidance from OFA; participants receiving increased unemployment benefits (which helped with economic stability, one aspect of SFSF's services, and may have led some fathers to not feel as motivated to participate); a lack of access to child care while fathers participated in the program; and health concerns related to COVID-19. After the first few months, however, enrollment started picking up again.

Staff reported that it was initially difficult to figure out how to transition enrollment to a virtual setting, but in time they felt the process was going smoothly. Staff noted that it might be easier for some fathers to fill the forms out online compared with before the pandemic when they were required to fill them out in-person. However, staff speculated that responses to certain enrollment questions might vary depending on the survey mode (online versus in-person), particularly responses to more sensitive questions.

Lessons learned for enrollment and data documentation

- We found both benefits and limitations to virtual enrollment. Exploring a hybrid approach, where fathers complete their applications and surveys in a mix of virtual and in-person formats could allow for flexibility to use whatever approach is most effective for a given situation.
- Because survey responses can depend on the mode of data collection, it is important to reflect on the most sensitive and essential baseline survey questions, plan for and invest the time to explain the questions' relevance to participants, and administer surveys in ways that will gather the most accurate information from participants.
- At first, staff noted it was difficult for them to figure out the best way to collect and document data remotely. However, staff reported that as the system for enrolling new people was solidified—along with the provision of necessary equipment and training on and development of a new process for collecting information remotely—it had become far easier for data specialists to do this work.
- Ensuring confidentiality is a critical part of enrollment. Numerous methods are available to ensure confidential collection and transfer of data on the internet. Conversations with staff, participants, and program funders around this issue are necessary to develop improved procedures that are safe but easier to implement and less time intensive. For example, OFA's initial guidance for moving the confidential collection of enrollment information to a remote

setting was to have participants provide those details over the phone to case managers. Staff reported that this did not work well, because it created a lengthy process that was not user-friendly. OFA subsequently amended their guidance to allow participants to complete enrollment surveys through online links (with separate unique identifiers to maintain confidentiality). Staff reported that the amended process worked far better.

- Having different options for completing the enrollment process can help programs better meet participants' needs. For SFSF, staff reported that having phone-based, online, and limited in-person options allowed the program to be more flexible in meeting fathers' needs.
- It is important to recognize and prepare for fluctuations in program enrollment during crises, potentially because of changes in demand or access. For example, higher unemployment caused by the pandemic could have increased program demand for some, but support from COVID-19 relief benefits may have reduced program demand for others. Similarly, the pandemic made access easier for some participants who didn't have to leave home but more difficult for others who were challenged by the technology requirements or lacked time because of caring for children who could not be in school or child care.

INTERNAL WORKSHOPS AND EXTERNAL TRAININGS

Workshops: Workshops are the heart of SFSF, which offered three workshops, corresponding to the three key program areas—job readiness, parenting, and healthy relationships—over a two-week period. The main challenge for these workshops when the pandemic hit was that they could no longer be held in-person. Staff worked to transition the workshops to a virtual environment, presented on web-conferencing platforms, in the weeks following the stay-at-home order in New York City, and it took a few months to systematize virtual program delivery. In addition, fathers faced their own difficulties throughout the pandemic. Some fathers were not able to attend every workshop because of other commitments (such as child care) and were dealing with other personal trauma because of the pandemic and racial justice movements in summer 2020. Staff responded to these challenges by providing make-up sessions when fathers could not make specific workshops, making more time to do one-on-one sessions with fathers, and ensuring fathers' basic needs were fully met. With this greater flexibility, staff had some difficulties initially tracking online attendance as they figured out how to pivot data documentation.

Staff reported that it was easier for fathers to participate in virtual workshops when they did not have to travel to a physical location, and greater flexibility to make up sessions helped fathers manage other commitments. Staff also noted that fathers had contrasting responses to the virtual environment. Some fathers felt more comfortable sharing personal details when behind a screen, while others felt less engaged. Technical difficulties provided challenges for staff and participants. In addition, the more flexible schedule could be hard for program staff who had other commitments and were balancing working at home with providing care for their children or other family members.

Lessons learned for workshops

- Online education and training have been increasingly available since the 1990s with the advent of personal computers and access to the internet. Advances in technology have made online learning accessible to more people, and online platforms have become increasingly versatile. Although SFSF has some components that are similar to traditional online courses, significant differences also exist. In particular, the workshop format used in the program has a greater interactive component than many online courses. In addition, SFSF fathers likely faced greater challenges compared with more traditional students. These factors need to be considered carefully when transferring the material online and choosing a platform.
- To choose the most effective software and platform, it is important to reflect on which aspects of the workshops and the software worked well, for what types of curricula, for which participants, and under which circumstances. Key questions to consider include the following:
 - » Which limitations to effective workshop delivery were primarily because of the pandemic (e.g., stress from fear of getting COVID-19 and the fathers' need to balance participation with child care) and which are more inherent constraints of remote work (e.g., technical challenges)?
 - » How do the advantages of schedule flexibility and no commuting affect participants' demand for services?
 - » How important is the problem of child care in reducing participants' ability to concentrate on the workshops?
 - » How did the platform affect a father's ability and willingness to interact with the group and share experiences, as well as learn the material effectively?
 - » Some fathers found it easier to share personal stories when they were not face-to-face, because communicating remotely offers some degree of anonymity and safety.
 - » Other fathers found it easier to interact with the group face-to-face.
 - » How effective would a hybrid model be (e.g., some participants in person and others online)?
- Additional considerations involved in choosing specific software or platforms include cost as well as the following:
 - » accessibility to participants who may have limited access to computers and the internet
 - » availability on different hardware platforms including phones, tablets, and laptops
 - » availability for different operating systems (e.g., Windows or Apple)
 - » ease of training participants and facilitators to use the platform
 - » features that could facilitate the type of interactive programming that was part of the SFSF curriculum, such as the ability to divide into smaller groups for discussion and polls for easy participant-facilitator interactions

Trainings: SFSF also referred fathers to specific external occupational skills and certification trainings intended to assist them in getting a job. Because of COVID-19, these trainings were initially

unavailable and then moved to a virtual platform, while maintaining the in-person structure of requiring attendance for 6 to 8 hours a day for multiple days in a row.

Staff reported that it was cognitively difficult for fathers to be on a computer for the time required to complete a training. They also sometimes had family and other responsibilities and could not be on the computer for the required number hours. In addition, some fathers had technical issues, for which some of the training providers had not planned. Seedco had to reach out to a couple of providers to talk through how they planned to address specific issues such as sending out materials beforehand and providing contact information for technical support. SFSF staff reported that this increased their burden, because they had to work directly with the providers to help solve these technical and logistical challenges. On the other hand, like the internal workshops, some staff thought it was beneficial for fathers to not have to physically travel to a location for trainings, and some fathers were eager to partake in the new training offerings.

Lessons learned for trainings

- Although fathers had the capacity to participate online, the requirements of external training providers for participants to be online all day often exceeded what fathers were able to effectively absorb.
 - » How might future contracts with training providers reflect the need to be prepared for online transitions that reflect participants' needs and capacities?
 - » How can SFSF help job training service providers better understand participants' needs?
 - » What types of services are better for in-house delivery and what services work well remotely?

CASE MANAGEMENT AND REFERRALS

Individual case management and referrals were critical for the program model, and protocols needed to be developed to implement those program pieces remotely. Case management involves interactions with participants to understand their needs, referrals to provided needed services, and data systems to document the needs and how they were addressed.

Referrals: An additional component of SFSF was providing post-job placement services such as career case management, advancement services, and additional referrals for different resources the fathers need. Because of the pandemic, some fathers' needs increased, such as child care. SFSF continued to refer fathers to services as needed. Some organizations to which the SFSF program provided referrals closed because of the pandemic, including a GED prep program. In response, one partner CBO created its own GED program for fathers to enroll in.

Overall, referral agencies have remained largely the same as a result of COVID-19 and referrals have slowed down, so adjusting referrals was not as difficult as it had been with other aspects of SFSF's service delivery. Staff suggested that the slowdown in referrals may have been caused by various factors such as the increased unemployment benefits, which may have led people to not seek out job-related referrals as much. Program data backed up this suggestion, as the number of job-specific

referrals dropped from 97 (out of 111) to 14 (out of 36) between the two time periods. The referral services available proved useful for fathers during the pandemic as well.

Incentives: Before COVID-19, SFSF offered incentives and provided resources to fathers in-person throughout the program, and these incentives helped drive people to come meet with staff and attend workshops. Incentives included gift cards for designated milestones as well as transportation supports, lunch and snacks during workshops, and supplies (e.g., baby supplies, clothing). Early on during the pandemic, staff tried to meet with participants in the community at specific times to give out incentives. Despite initial difficulties, later in the pandemic staff started to mail the items they could to individuals. Because they were unable to send digital gift cards due to internal procedures, staff also allowed participants to come into the office to pick them up at designated times.

Staff reported that the effects of the pandemic on the incentives they could provide and the way they were provided may have hurt program participation. For example, when meeting in-person, SFSF could provide transportation supports and lunch, which helped drive people to attend workshops and come meet with staff, but in a virtual setting, those incentives were gone. Also, mailing a gift card for completing a survey was not as convenient as getting it right away after completing a survey, and staff noted that this made it more difficult to incentivize completing surveys or sending job placement retention verifications. On the other hand, staff did perceive that fathers were happy to receive the incentives and resources and reported that the process could be easier for some fathers to receive items through the mail.

Lessons learned for referrals and case management

- Develop contingency plans for distributing incentives in case a remote environment is necessary in a future crisis. This includes working internally to set up flexibility in how incentives can be distributed.
- As a process change is rolled out, pay attention to internal processes as well as external relationships, new partnerships, and existing partners. This involves having contingency conversations with partners and discussing options should in-person services become unavailable. This is important even outside of crises to ensure organizations have a good understanding of how their partners provide services and options for potential modifications that could be made under different circumstances.
- Organizations can be more prepared to support their employees' remote work by reflecting on the following questions:
 - » How can data systems be immediately ready for remote data input in the future? For example, SFSF's use of Salesforce afforded the program flexibility to enter data remotely. As opposed to software and data that sits on a workplace computer, Salesforce is a cloud-based system that can be securely accessed anywhere that has internet access.
 - » How can the organization best provide staff with the training and equipment to work remotely and help them cope with the less defined boundaries of home and work that online work creates?

Conclusion

This brief describes the changes SFSF made to their program delivery and challenges that both staff and participants faced in delivering and participating in the program during the pandemic. We highlight SFSF's successes and discuss issues that could benefit from further deliberation. We also suggest aspects of the service delivery model that could be adapted to responsible fatherhood programs or other service delivery programs to better meet participants' needs or better prepare the organizations for future crises.

The observations in this brief are for a program that had lower enrollment during the pandemic than before the pandemic. Thus, it is important to consider program size when assessing how these lessons can be applied to a post-pandemic hybrid model. Before COVID-19, each staff member had their own function (e.g., recruiter, data specialist, job developer, case manager) and did not regularly cross over into other job specialty areas. The need to operate more fluidly created the need for staff to learn how to perform each other's jobs. Service delivery strategies may need to be altered in a future crisis, so programs should prepare in advance by designating how certain jobs could change in a virtual environment and cross-training staff to perform other functions before the need arises.

Overall, SFSF's efforts to adapt their program in response to the pandemic were successful. In addition to the innovation and hard work of program staff, SFSF's success also depended on how fathers responded to this opportunity. Clearly, the participating fathers had capabilities that allowed them to take advantage of the program offered during the pandemic.

Notes

- ¹ "Adolescent Health," US Department of Health and Human Services, Office of Population Affairs, accessed March 1, 2021, <https://www.hhs.gov/ash/oah/sites/default/files/cqi-intro.pdf>.
- ² We use the Implementation Science framework developed by the National Implementation Research Network (NIRN). This framework is associated with implementation scientists Fixsen and Metz.

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