From Crisis to Adaptation: Assessing Disaster Preparedness and Response Strategies among Toronto Nonprofit Organizations during COVID-19

By

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To the small but mighty MACD 2020 *COVID-cohort*—we started our program during a very challenging time; it was sometimes hard to imagine we'd emerge at the other end—yet here we are, still in one piece! It's time to 'systems map' in public.

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EXECUTIVE SUMMARY

Introduction

This research study, conducted as part of a Master of Arts in Community Development capstone project, aims to evaluate the disaster preparedness and response strategies of nonprofit organizations in Toronto that provide social programs and services. The study has two objectives: first, to examine the existing body of knowledge on the topic and second, to identify promising practices that can assist nonprofit organizations in formulating strategies for improving their disaster planning and preparedness. The COVID-19 pandemic has presented a significant public health crisis, leading to the disruption of social services in Ontario. Nonprofit organizations have played a vital role in addressing the needs of the community, and this research aims to document their response to the pandemic. Despite the financial challenges and loss of volunteer workforce, social services nonprofits met the increased demand for their programs and services during the pandemic. However, some organizations were unable to sustain themselves, with many facing demand challenges, suspensions, or modifications of operations. Statistics indicate that there is a significant number of Canadians, including children and other vulnerable people, who would be negatively affected should nonprofit and community-based organizations cease or suspend operations, even temporarily. This project highlights the valuable role of civil society in disaster response, which is underpinned by altruism, collective action, and mutual aid. The findings of this research can guide nonprofit organizations in improving their disaster planning and preparedness, thus enabling them to respond more effectively to future disasters.

The wider problem explored in this study is that despite how much communities and governments rely on nonprofits when disasters strike, and despite nonprofits experiencing differing degrees of disruption to their capacity during the pandemic, very little is known about what factors affected the ability of nonprofits to service their communities during this time. In general, there is little data or academic literature, in Canada or elsewhere, on how prepared nonprofits and community-based organizations are for disasters of any kind. Additionally, there are no prevailing benchmarks, coordinated guidelines, toolkits, or targeted funding for disaster preparedness within Ontario's nonprofit sector. The study aims to define the problem more precisely, generate ideas and recommendations, and identify areas for further research. Without data or benchmarks, there can be no quantifiable improvement or progress, making it difficult to advocate for policy change and additional government and foundation funding.

While this project primarily investigates organizations' planning and preparedness during the COVID-19 pandemic, the goal is to provide recommendations that will be relevant in any disaster.

The following research questions were formulated to explore and address the objectives in this project. Leaders and senior staff members of social service nonprofit organizations were invited to respond in the survey phase and interview phase of this research study.

Primary Research Question:

1. What factors affect the ability of social service nonprofit organizations in Toronto to deal with disasters?

Secondary Research Questions:

1. What disaster preparedness and planning measures did social service nonprofit organizations have in place when the COVID-19 pandemic hit Toronto in March 2020?
2. What lessons have been learned that can be applied to planning to build organizational and community resilience in the face of the next disaster?

3. How has the pandemic changed the way leadership thinks about their organization's role in the community?
4. How did the existing plan help the organization respond to the pandemic?
5. How has the pandemic changed the organization's mission or other parts of the strategic plan?
6. Have new organizational priorities arisen due to new insights gained into the community because of the pandemic?
7. How were services and programs affected by the pandemic?
8. What education, training, and development opportunities do nonprofit organizations need to develop skills and build resilience?
9. What strategic and critical operation plans and processes have been and will be implemented to prepare for future disasters?

Methodology and Methods

This research study utilized a mixed-methods approach with an exploratory design that involved an online survey and key informant interviews to investigate the state of disaster preparedness within social service nonprofit organizations in Toronto during the COVID-19 pandemic. The online survey, conducted through Survey Monkey, collected factual and demographic data and recruited participants for interviews. A total of 28 participants completed the survey, which had an 86% completion rate. Survey Monkey's analytics software was used to analyze the raw data.

Seven key informant interviews were conducted with nonprofit leaders, providing rich context and nuanced understandings of the state of disaster preparedness within Toronto's social service nonprofit organizations. The interviews ranged in length from 26-43 minutes and were analyzed using an inductive, thematic analysis approach with the assistance of NVivo software in the early stages. The data collection occurred in May and June 2022, two years into the COVID-19 pandemic. The scope of the study was limited to Toronto-based social service nonprofits and charitable organizations.

The exploratory design was selected due to the limited empirical data on the topic, and a promising practices approach was used to identify effective interventions for disaster preparedness. While the study's findings are not generalizable, they provide valuable insights and recommendations for future research and interventions. Additionally, the study's engagement was directed primarily at senior leaders, thus excluding the perspectives of junior staff and nonprofit clients.

The literature review, completed after the data collection phase, included a broad range of international perspectives on disaster readiness, not limited to the COVID-19 pandemic. The review covered the past two decades, with some inclusion of older foundational texts. The following key topics were explored: the role of nonprofits in disaster management, the current state of disaster preparation and planning in community-based organizations, the importance of social capital in disaster resilience and recovery, communicating with vulnerable groups during disasters, the value of cross-sector partnerships in disasters, and organizational adaptations to environmental jolts and post-traumatic growth. These topics are relevant to the study and provide valuable context for interpreting the study's findings.

Key Findings

Survey

Survey research findings obtained from an online survey of 28 participants working in social service nonprofit organizations in Toronto were revealing. Over two-thirds of the responses were from staff members employed in organizations with a long history in the sector, while other demographic measures

such as annual budget, number of staff, government funding, and service areas and priorities varied substantially. Although a considerable number of organizations had a strategic plan, only half had a disaster management plan in place before the COVID-19 pandemic. However, many organizations that lacked a disaster plan developed one during the pandemic. The organizations were evenly split regarding the essential/non-essential designation assigned by the Ontario government during the pandemic.

Most organizations felt moderately prepared for a disaster, and this sentiment, surprisingly, was consistent among those with a disaster plan and those without. The pandemic altered the perceptions held by organizational leaders about their role in the wider community and their understanding of risk. A majority of respondents expressed concern about the potential impact of future pandemics, additional COVID-19 waves, and a financial crisis on their ability to continue providing services to clients. Almost all participants believed that the nonprofit sector could take a more significant role in disaster planning and preparedness in collaboration with communities and governments, with sufficient access to funding, resources, and disaster preparedness and risk reduction training. The survey findings indicate that organizations are willing to take on stronger leadership roles in community disaster response and consider having a disaster plan and being better prepared for future disasters to be essential.

Key Informant Interviews

Despite their diverse backgrounds and organizational objectives, the responses of interviewees demonstrated several similarities, resulting in five prominent themes that emerged from the qualitative data.

Theme 1 - Disaster preparation and planning are important in theory but not common in practice.

Theme 2 - Multi-channel communications, to stay connected with external stakeholders, are a critical component of a disaster management strategy.

Theme 3 - Cross-sector partnerships build capacity and strengthen resilience—further collaboration with governments is needed to see systemic change.

Theme 4 - Lack of access to information, knowledge, and expertise in disaster management is a critical factor limiting the creation of effective disaster management strategies.

Theme 5 - The pandemic changed how organizations see their role in their communities, prompted adaptation to meet changing client needs, and built internal resilience.

The findings indicated a lack of clearly defined measures, processes, and actions related to disaster planning and preparedness, even when organizations had a disaster or business continuity plan. Additionally, the subjective perception of an organization's preparedness level was not deemed a reliable indicator of their actual measures and actions towards disaster planning and preparedness.

All interviewees concurred that their organizations employed multi-faceted communication strategies to stay connected with clients and community members during the pandemic. The participants demonstrated a strong resolve to ensure the delivery of messages and an unwavering willingness to do what was necessary to meet their clients' needs, reflected in their organizations' adaptation and innovation practices during the pandemic. In line with survey responses on the same subject, the participants expressed their belief in the existence of a gap between the nonprofit and public sectors and a desire for stronger, more collaborative relationships.

Finally, the participants identified areas for improvement and suggested that investments should be made to enhance the technical transformation of civil society, providing education, training, and knowledge-sharing opportunities to reinforce the disaster preparedness of community-based

organizations. Overall, the findings emphasize the importance of disaster planning and preparedness, effective communication strategies, and the need for collaborative relationships between the nonprofit and public sectors to improve disaster response and management.

Recommendations

The recommendations have been developed to offer valuable counsel to the varied group of stakeholders involved in enhancing disaster preparedness in the nonprofit sector. The intended readership for this section is professionals and leaders operating within the nonprofit sector, including those at both the industry and organizational levels as well as governments and funding bodies who support nonprofit mandates.

The recommendations put forth in this study are firmly grounded in the realities faced by nonprofit organizations, in particular, their limited resources. While recognizing this constraint, each recommendation underwent an evaluation process that considered administrative feasibility, effectiveness, timeliness, cost-effectiveness, and social and political acceptability as well as respective advantages and disadvantages. This report aims to address the issue effectively while also considering practicality, the feasibility of implementation, and potential unintended consequences.

Recommendations for Nonprofits and Community-based Organizations

Recommendation 1: Create a position(s) in the organization that is directly responsible for disaster planning and preparedness activities.

Recommendation 2: Complete a post-pandemic SWOT Analysis for the organization.

Recommendation 3: Conduct a self-assessment or evaluation of the current state of the organization's disaster planning and preparedness.

Recommendation 4: Develop and test disaster communication strategies.

Recommendation 5: Adopt a multi-sectoral approach to enhance social networks and improve information systems and sharing between groups.

Further Recommendations for the Public Sector and Nonprofit Advocacy Groups

Public Sector

Recommendation 1: Maintain the United Way Greater Toronto and City of Toronto Community Clusters via the Community Coordination Plan.

Recommendation 2: Establish a dedicated City of Toronto fund that small nonprofits can access for disaster planning and preparedness purposes.

Recommendation 3: Launch a new grant stream for nonprofit disaster preparedness through Public Safety Canada and/or the Province of Ontario.

Recommendation 4: Develop an online resource library with templates, guidelines, and other tools specifically for the nonprofit sector

Recommendation 5: Reallocate a percentage of all project-based funding from provincial and federal governments that is destined for charities and nonprofits to core funding.

Recommendation 6: Redefine the Province of Ontario's definition of essential and nonessential services.

Nonprofit Sector Advocacy Groups

Recommendation 7: Commission a comprehensive research study on nonprofit disaster preparedness to be conducted by an industry advocacy group, such as Imagine Canada or ONN.

Recommendation 8: Establish guidelines and standards for disaster preparedness within the nonprofit sector.

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CHAPTER 1: INTRODUCTION

The study, undertaken as part of a Master of Arts in Community Development (MACD) capstone project, assesses the level of disaster preparedness and the response strategies employed by nonprofit organizations located in Toronto, Ontario, in response to the COVID-19 pandemic. To limit the parameters of this preliminary investigation, a sample of nonprofit organizations in Toronto that provide social programs and services was selected as the target population.

The purpose of this research is to critically examine the existing body of knowledge regarding the preparedness of social service nonprofit organizations for disasters, as the issue has received little attention in academic literature. The exploration has two objectives: 1) to establish a more thorough understanding of the issue and 2) to determine promising practices that could assist nonprofit organizations that provide social services in formulating strategies for improving their disaster planning and preparedness, thereby enabling them to respond more effectively to disruptions resulting from future disasters.

Background

> *The religious language of awakening suggests we are ordinarily sleepers, unaware of each other and of our true circumstances and selves. Disaster shocks us out of slumber, but only skillful effort keeps us awake.*
>
> (Solnit, 2009, p. 119)

The COVID-19 pandemic has proven to be a distinct and profound public health crisis. Over the last three years, the world has experienced a complete shift in how communities operate and how people interact. In 2020 and 2021, lockdowns, an overwhelmed healthcare system, social distancing, unemployment, illness, and school closures exacerbated the already fragile state of social services in Ontario. The effects of the pandemic persisted through 2022 in the healthcare sector and in economic recovery of Toronto's downtown core (Brail & Kleinman, 2022; Cheese, 2022). Unsurprisingly, research has found that the pandemic affected the health and economic state of historically disadvantaged people at a higher rate (Canadian Centre for Policy Alternatives, 2021; Toronto Community Foundation, 2020).

It is well established that pandemics have occurred throughout human history; however, the emergence of the novel COVID-19 virus (SARS-CoV-2) in Toronto resulted in a state of uncertainty and vulnerability for communities and organizations that surpassed previous recent pandemics, such as the SARS outbreak in 2003 and the H1N1 pandemic in 2009 (Centers for Disease Control and Prevention, 2018; Rosenwald, 2021). Numerous social services nonprofits found that their clients required more support during the pandemic just at the time when the organizations faced financial hardship because of lockdowns and cancelation of fee-based programs. In Ontario, despite financial challenges and a dearth of provincial government support, the nonprofit sector's robust response to COVID-19 endured. Social services nonprofits met a 77% increase in program demand while 50% of nonprofits were managing revenue deficits—all organizations surveyed by the Ontario Nonprofit Network suffered from huge volunteer workforce losses (Ontario Nonprofit Network, 2021). In the first year of the pandemic, over 50% of Ontario's nonprofits instituted virtual operations and 25% utilized their reserve funds (Ontario Nonprofit Network, 2021a).

The valuable role of civil society in disaster response has been well-documented in literature (Demiroz & Hu, 2014; Kapucu et al., 2018; Lassa, 2018; Simo & Bies, 2007). The COVID-19 pandemic serves as a salient example of this phenomenon, as nonprofit and community-based organizations in Toronto have been instrumental in addressing the needs of the community in the absence of sufficient support from municipal, provincial, and federal governments (Morgan et al., 2022; Ontario Nonprofit Network, 2020; Owen, 2020). Despite being caught off guard by the sudden onset of the pandemic in early 2020, these

organizations were able to adapt quickly to the changing circumstances, such as transitioning to virtual program delivery, implementing remote work arrangements for staff, and dealing with the loss of volunteers and cancellation of fundraising events (Haws & Kapelos, 2020; Lasby, 2020; Nasser, 2020).

Yet not all organizations were able to weather the crisis—some were forced to close their doors, and a significant proportion of nonprofits in Ontario faced demand challenges. In February 2021, demand for programs and services exceeded capacity for 34% of Canadian nonprofits (Lasby, 2021, p. 6); by August 2021, the percentage of nonprofits unable to meet demand grew to 42% (Lasby & Barr, 2021, p. 2). Imagine Canada reported that operations remained suspended for 1 in 13 nonprofits in February 2021 (Lasby, 2021, p. 4); statistically, that is a considerable portion of organizations but a steep decrease from the nearly 1 in 5 nonprofits that had ceased or suspended operations at the end of April, 2020 (Lasby, 2020, p. 5). In August 2021, 7% of Canadian nonprofits reported temporary suspension of operations and 78% reported operating with modifications—only 7% reported operating as usual (Lasby & Barr, 2021, p. 3). Additionally, the uptake of emergency benefits offered by the federal and provincial governments, financial assistance meant to support charitable operations, was hindered by unclear eligibility criteria and communication from the government (Ontario Nonprofit Network, 2021a).

In *A Paradise Built in Hell,* Solnit writes that civil society is analogous to a "shadow government" or hidden disaster community waiting to help in moments of chaos, undergirded by altruism, collective action, and mutual aid (Solnit, 2009, p. 312), and there is research that has shown that this has been the case during the COVID-19 pandemic (Greg Lindsay & Koper, 2021; Ontario Nonprofit Network, 2020; Rose-Redwood et al., 2020; Springer, 2020). While *en masse* solidarity and social innovation were requisite to survive the challenges of the latest pandemic, there are lessons to be learned in how nonprofits planned for and responded to the threat.

While the COVID-19 pandemic is not a climate-related disaster *per se,* the vulnerability of communities is compounded by consecutive disasters regardless of the hazard source. The point is that when disasters are layered, the dual-crises worsen already fragile healthcare systems, deteriorate the psychological state of citizens, impede recovery efforts, and increase economic damages (Coronese et al., 2019; de Ruiter et al., 2020). Climate change has been identified as a significant contributor to the increasing frequency and severity of disasters, including fires, storms, floods, heat waves, droughts, human pathogenic diseases, and power outages (Heyd, 2021; Mora et al., 2018, 2022; Tonn et al., 2021). These disasters have the potential to cause significant harm to communities. Moreover, climate change is expected to exacerbate unfavourable conditions and make health outcomes and poverty worse for people, particularly those who are more vulnerable, such as low-income communities and marginalized populations (Formetta & Feyen, 2019; Thomas et al., 2019). It is therefore imperative that efforts are made to improve disaster preparation efforts to protect and support these vulnerable communities.

We have strengthened our readiness and built the capacity of whole-of-society actors, including non-governmental organizations (NGOs), by establishing a humanitarian workforce. Recent emergencies have highlighted the need to engage with civil society partners to further enhance Canada's disaster preparedness and capacity to respond to climate change events. This work supports our goal of preventing and reducing disaster risk through the implementation of an all-hazards approach to emergency management.

The Honourable Bill Blair, President of the King's Privy Council for Canada and Minister of Emergency Preparedness, May 2022, UNDRR 7th Global Session (Government of Canada, 2022, p. 1)

Canada's federal government recognizes the impact of climate change has on disaster risk and is one of the 187 signatories to the Sendai Framework for Disaster Risk Reduction, a 15-year global agreement adopted in March 2015 by the United Nations Member States to reduce the impact of disasters in line with the UN's Sustainable Development Goals (SDGs) (United Nations, 2015b). A significant part of the Sendai Framework

lies in its focus on reducing disaster risk by addressing the root causes of disasters, such as poverty, weak governance, and environmental degradation and recognizes that disasters are the result of complex interactions between physical, environmental, social, and economic factors (United Nations, 2015b). The framework emphasizes the need for "engagement from all of society" to strengthen disaster risk governance, enhance disaster preparedness and response, and promote the integration of disaster risk reduction into development planning and investment decisions (United Nations, 2015a, p. 1). Importantly, Canada, through the Sendai Framework, recognizes the shared role of all stakeholders in disaster risk reduction, including government agencies, nonprofit and community-based organizations and charities, the private sector, and local communities (Government of Canada, 2022; United Nations, 2015b). The framework promotes the active participation of these stakeholders in disaster risk reduction efforts, as well as the sharing of knowledge and best practices across different sectors and regions (United Nations, 2015b).

Defining the Problem

The wider problem explored in this study is that despite how much communities and governments rely on nonprofits when disasters strike, and despite nonprofits experiencing differing degrees of disruption to their capacity during the pandemic, very little is known about what factors affected the ability of nonprofits to service their communities during this time. In general, there is little data or academic literature, in Canada or elsewhere, on how prepared nonprofits and community-based organizations are for disasters of any kind. There are also no prevailing benchmarks from which these organizations can progress from their current state toward a more prepared state. Guidelines, principles, toolkits, funding, and training for disaster preparedness have not been established in a coordinated or prioritized manner within Ontario's nonprofit sector, and there is a lack of accessible and useful resources and leadership on this issue. Yet there are models from international groups such as the Global Network of Civil Society Organizations for Disaster Reduction (GNDR) and the National Health Security Preparedness Index (NHSPI) that provide excellent examples that could be used to inform practice in Toronto nonprofit organizations. This study is exploratory, and as such, it endeavours to define the problem more precisely and generate ideas, options, and recommendations in addition to identifying areas for further research.

Lasting effects from the pandemic, inflation, and rising cost of living are causing more Canadians to rely on charitable services to meet their essential needs such as food, clothing, and shelter (Swadden, 2022). CanadaHelps, a charitable organization that connects donors to organizations through technology, noted in their 2022 Giving Report that 26% of Canadians were already using or expected to use charitable services in 2022, while 25% of Canadian donors were expecting to give fewer (monetary) donations than the year before (CanadaHelps, 2022, p. 6). An Ipsos poll conducted in November 2022 on behalf of CanadaHelps reported similar expectations with more men (27%) than women (18%) indicating they would need help from organizations (Ipsos, 2022). The Ipsos poll found that the groups most likely to rely on charitable services to meet some of their essential needs were those in lower-income brackets (<40K/year), aged 18–34, where one in three (35%) people expected that they would need to use charitable services in the coming months. Of people aged 35-54, 26% expected to use charitable services in the coming months, and one in four parents (27%) also reported they would need to access charitable services for their essential needs (Swadden, 2022). These statistics indicate that there are many Canadians, including children and other vulnerable people, who would be negatively affected should nonprofit and community-based organizations cease or suspend operations, even temporarily.

If our social safety net or "critical civic infrastructure" (Ritchie et al., 2010, p. 3) fails during a disaster due to a lack of resilience and preparation, the interconnected network of nonprofits and charitable organizations will not be able to provide assistance to those in need. Gaps in human and social services will widen, and the government, which relies heavily on the nonprofit sector particularly in times of disasters, will have to shoulder the extra burden; although, what is more likely to occur is that the burden, and

organizational missions, will go unmet. Data presented earlier in this paper show that during the COVID-19 period demands for nonprofit services increased while capacity was not always able to meet the challenge, and a portion of organizations ceased or suspended their operations. If enough nonprofit organizations cease or suspend their operations in the aftermath of a disaster, the impact on communities could be devastating, especially for at-risk and vulnerable groups. Depending on the type of hazard, the emergency resources deployed by the government may not be able to assist in basic services such as food provision because, in the aftermath of disasters, resources are most often focused on immediate threats to life such as search and rescue operations (Ritchie et al., 2010).

Above it was noted that there is a lack of data on the extent to which nonprofits are prepared for disasters as well as a paucity of benchmarks, standards, and guidelines for disaster planning and preparation. Not having data or benchmarks is a concern for several reasons, although the primary concern is that without a point of reference there can be no quantifiable improvement or progress. In 2007, the WHO released a report entitled *Benchmarking Emergency Preparedness: Emergency & Humanitarian Action* in the aftermath of the 2004 Indian Ocean tsunami to take a more comprehensive and measurable approach to improving the region's emergency response. The report highlights the value of benchmarking in disaster planning and preparedness where lessons learned and best practices are continually updated based on experience and new information. Benchmarking is a "strategic process often used by businesses to evaluate and measure performance in relation to the best practices of their sector" (World Health Organization, 2007, p. 3) that allows for best practices to be implemented in a cost-efficient manner.

The nonprofit sector would be in a much better position to advocate for policy change and additional government and foundation funding should they provide data that indicates their need for more disaster preparation and planning resources. When data is available, analyses can be conducted to assess the current state and ensure that the most useful and impactful interventions, programs, and policies are implemented to create the desired future state. Benchmarks and associated standards would also allow nonprofits to reflect on and evaluate how resilient their organizations and broader civic networks are to potential disasters and emergencies. With robust data, a thorough and cohesive policy strategy is much more likely to be implemented successfully—a key concern when funding is restricted and inadequate. Moreover, by continually monitoring and evaluating how well nonprofits are performing against sector benchmarks, policy levers can be adjusted in real time to be most effective. For the same reasons that nonprofit organizations have strategic plans, performance and funding goals, and annual reports, benchmarks for disaster preparedness are also important to measure, evaluate, and improve performance, track progress over time, enhance accountability, and promote transparency.

This study aims to identify promising practices that could assist nonprofit organizations offering social services in developing strategies to enhance their disaster planning and preparation, thereby improving their ability to respond to disruptions caused by future disasters. One possible factor that was considered was whether the presence of a disaster preparedness plan enabled these organizations to be more prepared than others. Furthermore, the study explored whether the annual budget, staff size, access to government funding, or presence of a strategic plan had any effect on an organization's ability to pivot and meet the evolving needs of their communities. Additionally, the study examined the sentiments of the participants regarding the role that nonprofit organizations can play in disaster readiness in conjunction with local governments, and how their own perceptions of their organization's role may have shifted during the pandemic.

All social service nonprofits—knowing they will likely be on the frontlines due to their mandates—must be prepared to meet the threat of a disaster. Ultimately, this research could be used by nonprofits for policy and future planning purposes by adding to their disaster preparedness manual that will assist in managing risk and building organizational and community resilience.

Project Objectives and Research Questions

This project's central aim is to explore and identify promising practices regarding planning and preparing for disasters by social service nonprofit organizations in Toronto. This exploratory project focuses on a limited sample of organizations in Toronto that provide social services and programming. Typically, these types of organizations have mandates to support people with housing, food security, youth, senior, and newcomer services, and with disability, education, and mental health programming.

This project primarily researched organizations' planning and preparedness through the lens of the COVID-19 pandemic; however, the goal was to make recommendations that would be applicable in any disaster. This research project uses the term *promising practices* to refer to interventions, activities, or strategies that show potential for developing into a best practice, but because they have only been used in limited cases or are early in the implementation, they do not yet demonstrate a strong evidence for transferability or a history of impact; however, the practices are based on a robust theoretical foundation (Public Health Agency of Canada, n.d.).

Project Objectives:

1. To analyze survey results to determine how prepared organizations were and what planning and preparation measures were in place, in March 2020, that helped social service nonprofits in Toronto to withstand the effects of the pandemic.
2. To analyze the literature to determine guiding principles and promising practices from other jurisdictions and authorities.
3. To analyze survey and interview data to determine insights and promising practices that occurred during the pandemic in social service nonprofit organizations in Toronto.
4. To make recommendations that can help social service nonprofit organizations build capacity and resilience that will help them to prepare for future disasters.
5. To make recommendations for the nonprofit sector to address the need for education, training, and development opportunities around disaster preparation.

Research Questions:

The following research questions were formulated to explore and address the objectives in this capstone project. Leaders and senior staff members of social service nonprofit organizations were invited to respond in the survey phase and interview phase of this research study.

Primary Research Question: What factors affect the ability of social service nonprofit organizations in Toronto to deal with disasters?

Secondary Research Questions:

1. What disaster preparedness and planning measures did social service nonprofit organizations have in place when the COVID-19 pandemic hit Toronto in March 2020?
2. What lessons have been learned that can be applied to planning to build organizational and community resilience in the face of the next disaster?
3. How has the pandemic changed the way leadership thinks about their organization's role in the community?
4. How did the existing plan help the organization respond to the pandemic?
5. How has the pandemic changed the organization's mission or other parts of the strategic plan?
6. Have new organizational priorities arisen due to new insights you have gained into your community because of the pandemic?
7. How were services and programs affected by the pandemic?
8. What education, training, and development opportunities do nonprofit organizations need to develop skills and build resilience?

9. What strategic and critical operation plans and processes have been and will be implemented to prepare for future disasters?

Key Terms and Concepts

This section provides definitions and explanations of key terms and concepts that are used frequently in the research presented in this project. Having a clear understanding of these terms will help the reader fully grasp the scope and significance of the research.

Nonprofit

The word nonprofit can mean different things depending on the context. The sector is sometimes called civil society, the third sector (after the public and private sectors), and the charitable, philanthropic, voluntary, and social impact sector. The term not-for-profit is also frequently used to refer to organizations that include nonprofit corporations, registered charities, and public and private foundations.

The change from using the word *charity* to *nonprofit* started in the mid-twentieth century in an effort to elevate the status and credibility of these types of organizations (Gauss, 2016). In Canada, government entities such as hospitals and universities, nonprofit businesses such as chambers of commerce, or community nonprofits such as social services, advocacy, or sports organizations all fall under this umbrella term (The Daily — Non-Profit Institutions and Volunteering: Economic Contribution, 2007 to 2017, n.d.).

For the purposes of this research project, the most commonly-used term, nonprofit, will be used and will generally refer to registered charities—those that have been designated as a charitable organization by the Canada Revenue Agency (CRA) and can issue tax receipts for donations.

Social Service Nonprofits

Social service nonprofits can be broadly considered as organizations that provide aid and support to people to improve their wellbeing; often, these nonprofits serve the most disadvantaged and/or marginalized with a focus on equity. The organizations selected to participate in this research project will fit into this general category and will include nonprofits working in housing, food, education, elder-care, employment, healthcare, newcomer, and disability services.

Community-Based Organizations (CBOs)

For the purposes of this project, the term community-based refers to the geographic location of the nonprofits, e.g., local and based in the community. Specifically, it means organizations that primarily serve residents within the City of Toronto. The term community-based in other areas of community development can take on a variety of meanings. Community-based, in this case, is not to be confused with community-based participatory research (CBPR) or community-based development, which both follow key principles of local development, stakeholder participation, co-creation, and decision-making (Hall, 2013).

Disaster Phases

While this research paper is focused on the planning/preparation stage of the disaster cycle, it is important for the reader to have a very general understanding of the cycle as a whole. Governments, academics, and other agencies generally use either a 4 or 5 step disaster cycle when discussing disaster management. The phases of a 4-stage cycle include 1) mitigation, 2) preparation, 3) response, and 4) recovery while those in a 5-stage cycle include 1) prevention, 2) preparation, 3) response, 4) recovery, and 5) mitigation. There is some variation in the order of steps depending on the organization/agency. A typical disaster cycle is shown below in Figure 1.

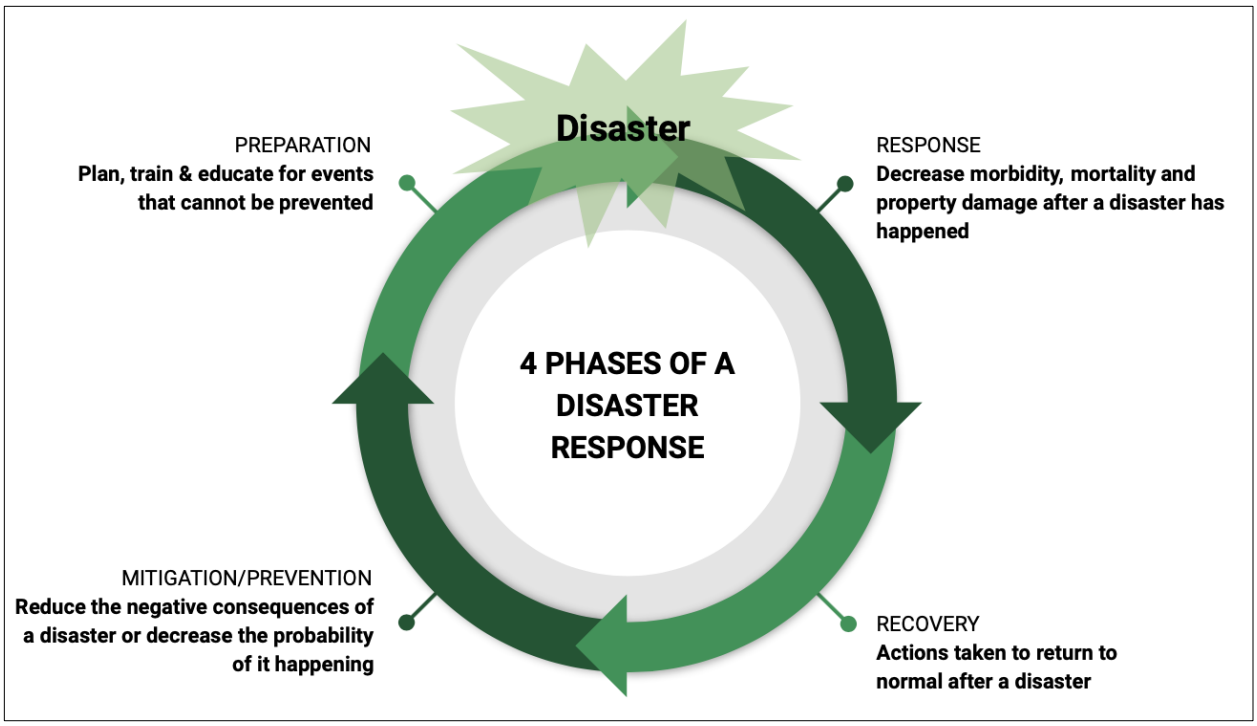

Figure 1: An example of a 4 phase disaster response cycle
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Disaster, Crisis, and Emergency

The terms disaster, crisis, and emergency are often used interchangeably in mainstream literature as they are closely related and overlapping characteristics such as their sudden nature (Al-Dahash et al., 2016). For the purposes of this research project, the term disaster will be used to refer to events such as the COVID-19 pandemic. This is not to say, though, that other documents written on the subject that use the term catastrophe, crisis, or emergency are not referring to the same social phenomenon. A quick review of news headlines will reveal that the COVID-19 pandemic has been described in several ways, yet they are always referring to the same public health issue.

R.W. Perry, professor emeritus of emergency management and disaster research at Arizona State University, addresses the evolving definition of the term disaster in the Handbook of Disaster Research (2018) through analysis of three periods of disaster scholarship. Perry states that disasters are fundamentally social phenomena that disrupt patterns in the social system and that "all disasters have origins in human volition" (Perry, 2018, p. 14). While no universally accepted definition of disaster exists, Perry (2018) believes that the definition used by Enrico Quarantelli—founding scholar of the sociology of disaster— would likely be accepted by most academics. Quarantelli defines disasters as "relatively sudden occasions when…the routines of collective social units are seriously disrupted and when unplanned courses of action must be undertaken to cope" (Perry, 2018, p. 14).

Al-Dahash et al. (2016) conducted an extensive review of the literature and determined that disasters have common features including their nature as "sudden, unforeseen events with natural, technological or social causes that leads to destruction, loss and damage" (Al-Dahash et al., 2016, p. 1192). More specifically, Al-Dahash et al. (2016) state that disasters are high impact events that overload capacity and require external assistance from numerous stakeholders (p. 1192). Crises on the other hand are defined by Al-Dahash et al. as abnormal situations that create stress, upset routines, and threaten business on an

individual, group, or organizational level, and that often include an erosion of public trust, increased media interest, and a shift in public policy (Al-Dahash et al., 2016, p. 1193).

Natural Disaster

The expression natural disaster is widely used colloquially and in the academic literature to describe hazards such as earthquakes, floods, mudslides, hurricanes, and other physical events that historically may have been called *acts of God* (Steinberg, 2006). However, the consensus among most disaster scholars—particularly among those who study the social aspects of disaster and not the physical hazard itself—is that the phrase natural disaster is not only inaccurate but damaging (Chmutina & von Meding, 2019). This shift in thinking originated in the mid-twentieth century when disaster scholars began adopting a more social constructionist understanding of disasters where social and human vulnerability is considered a key driver (Chmutina & von Meding, 2019; Perry, 2018; Quarantelli, 1992).

> *When considering the diverse impacts of natural disaster events, it is important to note that these events are only considered "disasters" if they disrupt the normal functioning of a community due to losses that exceed the ability of the affected community to cope. In other words, if communities are better able to mitigate, prepare for, respond to, and recover from disruptions, there will conceivably be drastically fewer disasters. This capacity for self-reliance and self-mobilization is a central feature of resilient communities.*
>
> (Fitzpatrick, 2016, p. 57)

According to Chmutina and von Meding (2019), some disaster scholars argue that focusing on disasters as destructive events can lead to a prioritization of the hazard in discourse. They argue that disasters are long-term processes of maldevelopment, and that there is no such thing as "rapid-onset" disaster (p. 289). Additionally, Chmutina and von Meding (2019) note that there is an argument in disaster studies discourse to avoid using the term *natural disaster* as it shifts responsibility away from those in power and implies that it is nobody's fault. In recognition of this contestation in the field, this project endeavours to avoid using the expression natural disaster.

Community Resilience

Community resilience, a metaphorical concept that is relatively difficult to define, generally refers to the ability of a community, at a local or grassroots level, to collectively prepare for, function in, and recover from crises, continuous change, or disturbances (Faulkner et al., 2018; Fitzpatrick, 2016; Norris et al., 2008). It has been suggested, though not empirically proven, that resilience is an emergent property or process of social systems; resilience enables communities to adapt to changing conditions and maintain their overall well-being (Faulkner et al., 2018). Resilience-promoting capacities often include, but are not limited to: place attachment, leadership, community networks, community cohesion and efficacy, and knowledge and learning (Faulkner et al., 2018) while indicators include, for example, diversity of skills and ideas, connectedness, exchange of information, transparency, accountability, and access to human and material resources (Fitzpatrick, 2016).

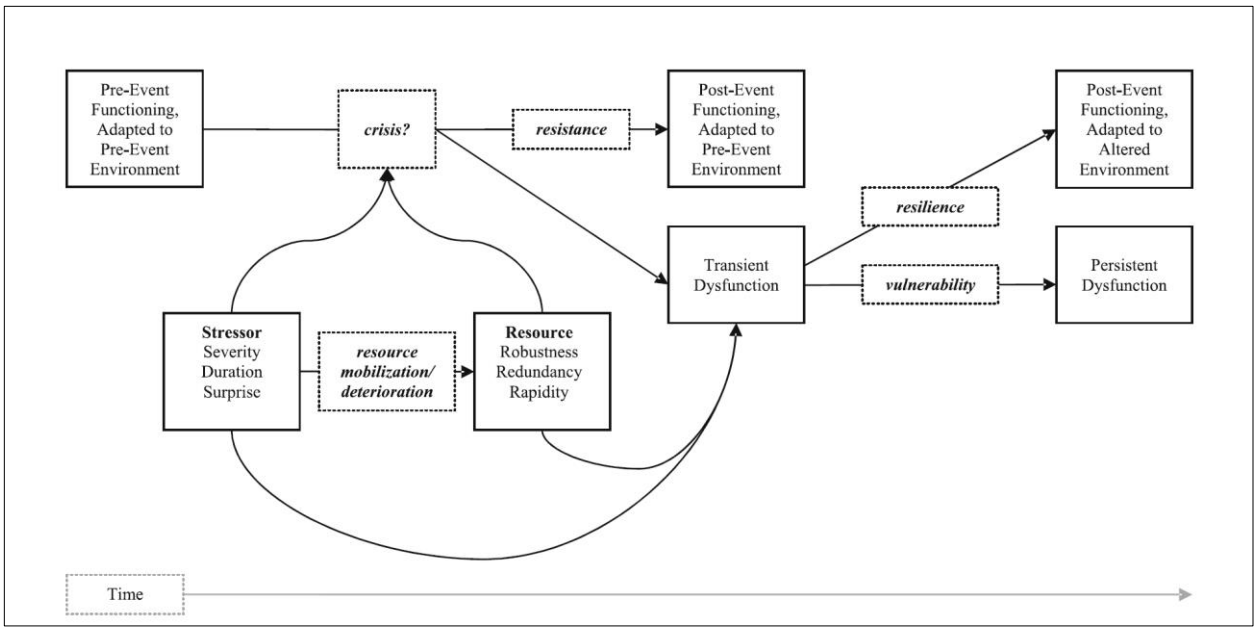

Figure 2: A model to demonstrate resistance, resilience, and vulnerability in a system after a crisis
Reprinted from "*Community Resilience as a Metaphor, Theory, Set of Capacities, and Strategy for Disaster Readiness*," by F.H. Norris, et al. 2008. American Journal of Community Psychology, 41, p. 130. Copyright [2008] by F.H. Norris, et al.

The literature suggests that community resilience differs from other community strengths such as social capital, economic development, information and communication, and community competence due to its transformational qualities that are undergirded by "robustness, redundancy and rapidity" (Fitzpatrick, 2016; Norris et al., 2008, p. 134). However, it is a combination of all these strengths and abilities—the social infrastructure—that enable a community to recover from hazards (Aldrich & Meyer, 2015; Norris et al., 2008). Figure 2, a model reprinted from Norris et al., 2008 (p. 130), demonstrates how resistance, resilience, and vulnerability work as a system after a crisis. According to Norris et al. (2008), resistance refers to the ability of resources to prevent dysfunction by countering the effects of stressors. Resilience, on the other hand, describes the ability of resources to counteract the effects of stressors, enabling adaptation and return to (adapted) functioning. Conversely, vulnerability results from a lack of resources to create resistance or resilience, leading to persistent dysfunction.

Positionality Statement

At the time of this capstone project, the researcher was a board member of a nonprofit organization based in Ottawa, ON. The organization and its members were not invited to contribute to this study. The researcher has worked and volunteered in the Canadian nonprofit sector for many years and as a result has an elevated understanding of the sector as well as assumptions and ideas about how it can be strengthened and improved that have been influenced by observation and personal experience.

The researcher also experienced the disruption of the COVID-19 pandemic firsthand as she had set aside her role as a Director of Philanthropy at a cancer charity to stay home with her young children when schools closed. The researcher is aware that her prior training in nonprofit management and strategic planning and her personal understanding of the topic may influence the interpretation of the data. Thus, she endeavours to approach the research objectively and continually considers alternative viewpoints.

Organization of Report

The report begins by delving into the literature on disaster preparedness and risk reduction as they pertain to the nonprofit sector in Chapter 2. A table is also presented that illustrates the relationship between the

research questions, literature review, and themes that emerged in the data. The theoretical framework for the paper is then outlined.

Moving on to Chapter 3, the report covers the methodology, methods, and the tools used for data collection, as well as the data analysis process and the limitations, delimitations, scope, and strengths of the research design.

In Chapter 4, the survey questions, findings, and visualizations of the quantitative data are summarized. Chapter 5 provides a summary of the key themes and findings from the key informant interviews, including illustrative quotes from participants.

Chapter 6 delves into the discussion and analysis of the research, where the findings and literature are synthesized. Chapter 7 provides actionable next steps and recommendations for nonprofit organizations, the public sector, and nonprofit advocacy groups.

The report concludes in Chapter 8 with the researcher's final thoughts.

CHAPTER 2: LITERATURE REVIEW

Introduction

This chapter explores the academic literature on disasters and the role of nonprofit organizations in preparing for and responding to disasters. Each subsection has been included due to its relevance to the key themes that emerged from the qualitative data. These topics provide context for the promising practices and recommendations presented in Chapter 6. A summary table that links the research questions, literature review, and qualitative data themes, as well as the theoretical framework, are provided at the end of the chapter.

A preliminary literature review was undertaken at the onset of this research project in mid-2021 to gain a deeper understanding of the disaster readiness of nonprofits in Ontario in the context of the COVID-19 pandemic. It was determined, however, that the available literature on this topic was minimal. To expand the scope of the literature review, the geographic focus was broadened to include global perspectives. Despite this expansion, the literature remained limited with the exception of a study conducted by Santos and Lopes (2021) on the preparation and pandemic response of NGOs in northern Portugal.

In addition to the lack of literature specific to the COVID-19 pandemic and nonprofits in Ontario, it was also noted that there was a dearth of research on disaster resilience on Australian NGOs, as highlighted by Roberts et al. (2021) in their recent study. Given the paucity of prior research in this area, it was determined that an exploratory study was necessary to gain a more comprehensive understanding of how charities and nonprofits operate in the context of disasters, the historical impacts of disasters on organizational adaptation, the interventions, adaptabilities, and capacities that lead to resilience, as well as the promising practices and strategies that exist within the sector. The literature review was ultimately completed after the data collection phase, as the themes that emerged during interviews with key informants and from the qualitative data collected from survey participants informed the review.

The research primarily covers knowledge and events from the past two decades, with some inclusion of older foundational texts. A significant portion of the American research is from the post-Hurricane Katrina period, as there was an increase in the study of disaster sociology following that disaster. The search strategy was restricted to reports and papers written in English, which may have resulted in a bias towards English-speaking countries. It is important to note that disaster studies is a global field and there is much research being conducted around the world.

Databases and online journal collections that were accessed for this research project include: Google Scholar, JStor, ProQuest eBook Central, SAGE, Taylor & Francis, and Wiley, although the net was cast far and wide especially at the start of the review to ensure an exhaustive effort was made. Nonprofit public policy and advocacy organizations that were useful for recent statistics, reports, and information on how COVID-19 impacted the nonprofit sector include: Imagine Canada; Philanthropic Foundations Canada; Ontario Nonprofit Network; and the Toronto Community Foundation.

Journals that were particularly helpful for the project and literature review include:

1. Administrative Science Quarterly
2. American Journal of Public Health
3. Canadian Public Administration
4. Disaster Prevention and Management: An International Journal
5. International Journal of Disaster Risk Reduction
6. Journal of Contingencies and Crisis Management
7. Journal of Risk Research
8. Nonprofit and Voluntary Sector Quarterly
9. Public Administration Review

The key topics explored in the literature review that are relevant for context and that emerged from the qualitative data are:

1. The role of nonprofits in disaster management
2. Current state of disaster preparation and planning in community-based organizations
3. The Importance of social capital in disaster resilience and recovery
4. Communicating with vulnerable groups during disasters
5. The value of cross-sector partnerships in disasters
6. Organizational adaptations to environmental jolts and post-traumatic growth

The Role of Nonprofits in Disaster Management

Nonprofit organizations are indispensable to the economy and to the well-being of communities. They link people to essential social services and programs that governments tend to neglect or overlook especially during disasters (Chikoto et al., 2013; Demiroz & Hu, 2014). In Ontario, 58,000 nonprofit organizations employ 844,000 people, 77% of whom are women. Of them, 255,000 people are employed by community nonprofits (Ontario Nonprofit Network & Imagine Canada, 2021). The sector as a whole contributes 7.9% to Ontario's gross domestic product (GDP) while community nonprofits contribute 1.5% of this total—an economic impact of 12.9 billion dollars[1] (Ontario Nonprofit Network & Imagine Canada, 2021).

The literature shows that during extreme and turbulent times, emergence of co-production through grassroots organizations, informal networks, and mutual aid projects arise to fill gaps not met by the public or private sectors (Aldrich, 2012; Aldrich & Meyer, 2015). The cohesion formed through local community networks and social capital before disasters arrive has been beneficial in post-disaster environments (Koh & Cadigan, 2008, pp. 273–275; LaLone, 2012). The disaster and emergency management literature (Bryson et al., 2006; Demiroz & Hu, 2014; Lassa, 2018; Roberts et al., 2021; Simo & Bies, 2007) demonstrates the significance of nonprofit contributions and cross-sector collaboration during times of disaster, particularly with post-disaster relief, recovery, and rebuilding.

First response organizations such as the International Red Cross were founded to handle frontline humanitarian emergencies; however, due to globalization and reliance on interconnected systems including supply chains, the response to these events is no longer the sole domain of established aid organizations (Bryce et al., 2020). There are numerous other disaster relief organizations with similar mandates including the Salvation Army, Global Medic, ICNA Relief Canada, and UNICEF to name a few—these are more typically known as non-governmental organizations or NGOs. NGOs act as conduits or liaisons for community-based disaster risk reduction work and are able to communicate needs and the voices from local communities to authorities (Roberts et al., 2021). Furthermore, NGOs are able to translate and transfer traditional indigenous knowledge, an area which has potential for disaster risk reduction practice in areas such as tsunami risk management (Lassa, 2018). While these organizations are well-known and have a global presence and humanitarian missions, CBOs, faith-based associations, and other local and community-based nonprofits also provide various programs and services to aid in disaster relief. Roberts et al. (2021) identified several key strengths of nonprofit organizations in their scoping literature review: community connections, strong grassroots networks (that access diverse, marginalized populations), local knowledge, adaptive and flexible, and highly motivated volunteers (Roberts et al., 2021, p. 5).

The study conducted by Torstonson et al. (2021) investigated the role of nonprofit organizations in disaster preparedness prior to the 2011 Christchurch earthquake and determined that community-based organizations frequently serve multiple functions for vulnerable community members: they act as an

[1] These statistics use 2018 and 2019 Statistics Canada data and do not account for the changes the COVID-19 pandemic brought.

essential bridge or link (social capital); provide a sense of "ontological security" and agency (Torstonson et al., 2021, p. 390); support preparedness with the right materials, relationships, and communications in culturally appropriate ways; and supply emergency goods and resources (Torstonson et al., 2021). A notable gap in the nonprofit preparedness toolbox is the capability to produce and maintain "fit for purpose" emergency information that is applicable to multiple social and economic contexts, cultures, and languages; however, with more funding, these organizations would be well-situated to create these kinds of materials due to their relationships within their communities (Demiroz & Hu, 2014; Torstonson et al., 2021, p. 394).

In recent years, disasters from hurricanes to heatwaves and humanitarian crises arising from civil unrest have resulted in human-centered impacts requiring multi-pronged relief and recovery response from the public, private, and nonprofit sectors. The COVID-19 pandemic has clearly demonstrated that everything is connected and that impacts in one part of the world can send ripple effects through far-flung communities. Nonprofits are well positioned to assist in disaster scenarios due to social capital, local leadership, and community engagement expertise (Koh & Cadigan, 2008). Nonprofits need not take a secondary or supportive role, they are well-located to be strategic leaders and collaborative coordinators during disasters (Demiroz & Hu, 2014). The pandemic has shown that local and non-frontline organizations also have a significant, and sometimes unexpected, role to play during periods of turbulence (Jensen, 2020; Toronto Public Library, 2020).

Current State of Disaster Preparation and Planning in Nonprofit and Community-Based Organizations

Disaster preparedness is defined as the measures or actions taken before a disaster occurs to prepare all social units (individuals, communities, households, businesses) to more effectively act and respond when a disaster arrives (Austin, 2012; Sutton & Tierney, 2006). Disaster preparedness has benefits for community based organizations: it improves an organization's disaster response, leads to better coordination of response during the active phase of the disaster, and results in a faster recovery (Austin, 2012; McEntire, 2015; Torstonson et al., 2021).

In their report presented at the Assessing Disaster Preparedness Conference, Sutton, and Tierney (2006) employed a systematic review methodology to examine a diverse array of sources, including research instruments, preparedness guidance, and relevant literature, such as archived research data, guidance from federal agencies, documents promoting best practices, and scholarly literature on preparedness and planning. Furthermore, they conducted a survey of business journals published between 2001-2006 to evaluate the extent to which research-based guidance was accessible to business continuity professionals. Their comprehensive report presented a clear and in-depth analysis of the various activities, measures, and dimensions of preparedness across various social units, including nonprofits, ultimately resulting in the identification of a set of general principles of preparedness that are applicable in any social context. The preparedness principles Sutton and Tierney (2006) identified are as follows:

1. "Formal plans are only one element in comprehensive preparedness strategies.
2. Plans mean little in the absence of other elements of preparedness.
3. Preparedness is a process, not a product.
4. Preparedness efforts must be based on realistic assumptions concerning social behavior during crises.
5. Preparedness requires collaboration, not top-down direction – although clear guidance does help.
6. Planning activities should be guided by those who will actually carry out plans.
7. Efforts should be comprehensive and inclusive and should promote multiorganizational participation.
8. Preparedness advocates must overcome constraints, limitations, and sometimes outright opposition.

9. Preparedness should be risk- and vulnerability-based but should also consider low probability/high consequence events.
10. Preparedness efforts must be designed in ways that help responders and victims anticipate surprise, e.g., through fostering the ability to adapt, improvise, and innovate.
11. Preparedness efforts should have an "all hazards" focus, while also incorporating special considerations associated with individual hazards. Preparedness activities should not be organized around specific perils." (Sutton & Tierney, 2006, pp. 32–36)

More recently, Austin (2012) expanded on Sutton and Tierney's (2006) important systematic review using empirical data collected from ninety-three community-based organizations in California. The research identified seven preparedness 'clusters' that can be used to train nonprofit and community-based organization staff on how to prepare for disasters and can help identify characteristics that enhance post-disaster recovery and survival of nonprofit organizations. Additionally, they are helpful metrics to evaluate how prepared an organization is for a disaster. The seven 'clusters' are:

1. "Internal protocol training
2. External response agreements
3. Disaster response capabilities
4. Information collection and distribution to staff
5. Client preparation
6. Building protection
7. Emergency supplies" (Austin, 2012, pp. 387–388).

The principles and clusters outlined above serve as valuable tools for nonprofit leaders seeking a guide or starting point for preparing their organizations for various types of disasters. Sutton and Tierney's (2006) publication offers useful guidance and actionable information that can be effectively utilized as a reference manual for disaster preparation.

Nonprofits tend to operate very close to the margins as a requirement for maintaining charitable status and scoring well on third party impact assessments like those by Charity Intelligence (Chikoto et al., 2013; McKnight & Gouweloos, 2021). This can lead to a lack of funding for future planning activities and non-program initiatives, especially for organizations with many priorities and limited funds, fewer staff, and smaller budgets (Chikoto et al., 2013; Sutton & Tierney, 2006). Outside of a three to six month emergency operating reserve, revenue is not typically allocated to prepare for unforeseen impacts: funders are not keen to support this type of administrative project (Brousselle et al., 2020). Usually, nonprofit disaster and crisis preparedness is focused on risks associated with public relations and donor communications, financial and legal issues, IT and electronic backups, and program continuity (Gilstrap et al., 2016). In areas, such as Florida and California, where disasters such as earthquakes and hurricanes are more likely to occur, more attention is paid to planning for those realities (Gilstrap et al., 2016; Harris, 2017; Rivera et al., 2019). Rarely do organizations without disaster services as their core mission plan for disasters, as they are a distant and ambiguous threat—described by some advocates as "a policy without a public" (Chikoto et al., 2013; Rivera et al., 2019; Sutton & Tierney, 2006, p. 35).

The literature available in scholarly and grey sources has demonstrated a lack of comprehensive documentation on the level of preparedness for public health or environmental hazards among social service nonprofit organizations and community-based organizations. This deficiency may be attributed, in part, to the absence of a standard measure for assessing readiness within these groups. It is crucial to acknowledge, however, that a useful index based in the United States exists, which serves as an exemplar for the development of a disaster preparedness index in Canada and other regions. The National Health Security Preparedness Index (NHSPI)—an annual examination of all US states progress in preparing for, responding to, and recovering from the health consequences of disasters, disease outbreaks, and other large-scale emergencies across 6 domains—is a program funded by the Robert Wood Johnson Foundation

located at The University of Colorado in collaboration with the University of Kentucky (see, https://nhspi.org/). One of the most important findings from the 2021 index was that "states and communities with stronger levels of health security experienced significantly lower mortality risks related to the COVID-19 pandemic." (Colorado School of Public Health, 2021, p. 3). Moreover, another key finding relevant to this study from the NHSPI report (2021) is that health security levels in the Community Planning and Engagement domain—which includes the subdomain of Social Capital and Cohesion—have plateaued after showing significant improvements earlier in the decade. This domain had the largest overall increase in health security, rising almost 20% between 2013 and 2017 to reach a national average of 5.4 (out of 10) (Colorado School of Public Health, 2021, p. 6).

Strong relationships among government agencies, community organizations, and individual residents are crucial for community resilience in disasters and efficient recovery. Historically, the United States has struggled with developing such relationships and engaging stakeholders in emergency planning. According to the report (Colorado School of Public Health, 2021, p. 6), despite marked improvements in this domain from 2013 to 2017, the lack of continued progress suggests that future gains in health security may be challenging, as community engagement is a vital resource for other areas of health security.

As noted above, there is a scarcity of research that specifically examines the level of readiness and preparation for disasters among nonprofit and community-based organizations. Nonetheless, there have been a few recent studies conducted in the United States and Europe that suggest a general trend in this area. They are summarized below.

New York City

A recent and first of its kind study (Rivera et al., 2019) of preparedness of New York City's (NYC) community and faith-based organizations was conducted in 2016. Researchers used a needs assessment survey to gather data on readiness, using five indicators of NYC organizations to respond to a public health threat. The indicators measured were: 1) emergency management, 2) continuity of operations plan (COOP), 3) emergency communications, 4) emergency experience and practice, and 5) emergency resources. Their results showed that CBOs and faith-based organizations were striving to prepare but were facing gaps in practice.

Of the 210 respondents, 61.9% had emergency management plans in place; 51.9% had emergency communications systems in place; 50.0% reported updating emergency plans in the past 24 months; 2.9% performed drills of emergency communication alerts; 10.0% had funds allocated for preparedness and response; 36.7% reported recent inventories of emergency assets; 32.4% had some experience with or practice in real-world emergency response; and 15.7% indicated plans in place for volunteers. Generally, the research found that organizations with larger budgets and more staff seemed to predict slightly better levels of preparedness.

The State of Oregon

Chikoto-Schultz et al. (2018) conducted a study on nonprofit disaster preparedness in collaboration with Portland State University, Portland's Earthquake Report Advocacy Committee, and the Nonprofit Association of Oregon. They received 189 responses from a convenience sample of 501(c)(3) charitable benefit nonprofit organizations across Oregon (Chikoto-Schultz et al., 2018). The team asked respondents questions about perceptions of risk and concerns about specific hazards in Section I. Section II of the survey was concerned with organizational disaster planning and preparedness. Section III covered challenges and barriers to disaster planning and preparedness. Section IV focused on demographics. For the purposes of this review, Section II is most relevant.

The survey asked respondents to note whether they had engaged in a series of 36 activities and the most recent period they engaged in the activities. The researchers' key findings are as follows:

- Nonprofits endeavored to learn about earthquake hazards (the most cited concern) but made minimal effort towards preparedness.
- A lack of coordination and paucity of resource-sharing agreements exist between nonprofits and government agencies.
- Over 50% of the nonprofits had not developed a plan detailing how they would restore or continue to provide services after a disaster event.
- Across all preparedness activities, health and human services nonprofits had higher levels of activity in preparing for a disaster.
- Organizations with larger budgets reported more actions towards preparedness (with some exceptions).
- A majority of nonprofits in the study had never engaged in 20 out of 36 activities associated with disaster resilience practices (Chikoto-Schultz et al., 2018, pp. 7, 23).

The two most cited reasons for organizations not prioritizing disaster planning and preparation were 1) the lack of staff/volunteer time, and 2) limited financial resources (Chikoto-Schultz et al., 2018, p. 16).

Los Angeles County

Chandra et al. (2013) performed a baseline survey to document community-resilience preparation and planning in Los Angeles County focused on engagement, partnerships, and community education. They surveyed staff from the Los Angeles County Department of Public Health and members of the Emergency Network of Los Angeles, an umbrella group for CBOs, faith-based organizations, and private-sector organizations that serve in disaster response support roles but primarily provide routine services to address community needs (Chandra et al., 2013).

There were 127 respondents, and the findings show that "Most health department staff and CBO members devoted minimal time to community disaster preparedness though many serve populations that would benefit. Respondents observed limited community resilience activities to activate in a disaster. The findings highlighted opportunities for engaging communities in disaster preparedness and informed the development of a community action plan and toolkit." (Chandra et al., 2013, p. 1). The full study provides a deeper statistical analysis of the results. The researchers created a community-resilience toolkit and intend for their research to further the national effort to create the health security preparedness index (Chandra et al., 2013).

Los Angeles Area

Gin et al. (2018) conducted a qualitative study of the disaster preparedness level of six nonprofit homeless residential service providers in the Los Angeles area. Their study used three levels of preparedness in a tiered maturity model including: 1) life safety, 2) continuity of operations planning (COOP), and 3) collaborative relationships. Result showed that nearly all respondents felt that their life safety preparations (evacuation plans, safety supplies) were sound and up to meeting the task of a disaster. Continuity of operations plans were not common, and most respondents indicated that they would likely have disaster related service interruptions due to lack of systems such as written protocols, staff redundancy, and logistics plans. On the final measure, collaborative relationships, almost no respondents indicated that they had collaborative partnerships with similar organizations with whom they could partner in an emergency.

Gin et al.'s (2018) recommendations emphasized the importance of expert, external support in preparing key plans and protocols, and the value of building inter-sector relations as a safety net.

Memphis/Shelby County, Tennessee

Chikoto et al. (2013) used a mixed methods study to understand how nonprofit, public, and private organizations in Memphis, Tennessee varied in their mitigation and preparedness activities for a local disaster, e.g., earthquake. Their results indicated that despite fewer resources, nonprofit organizations still

adopted more mitigation and preparedness activities than private organizations. Public organizations had, on average, more activities in place than nonprofits; however, the difference between the two groups was not statistically significant. Public organizations also adopted mitigation and preparedness activities at a higher level than for-profit corporations and the difference was statistically significant. The results showed that organization staffing numbers are positively correlated with mitigation and preparedness activities (Chikoto et al., 2013).

Northern Portugal

Santos and Lopes (2021) explored the crisis management preparedness and response of NGOs in Northern Portugal in the early months of the COVID-19 pandemic (May 2020) using six semi-structured interviews with executive NGO leaders. The findings indicate that organizations in northern Portugal were not prepared, that there were no plans in place to deal with a crisis, and that organizational reaction was solely based on external instruction from public health and government officials (Santos & Lopes, 2021). Santos and Lopes are continuing with a quantitative phase of their study. In the meantime, they proposed that the NGOs identify and explore a set of activities to help them attain a basic crisis management strategy.

The Importance of Social Capital in Disaster Resilience and Recovery

In the past decade or so, emergency response by organizations such as the Federal Emergency Management Agency (FEMA) have praised the merits of social capital and encouraged partnerships between formal and informal networks as a way to lessen the impact of disasters; it is increasingly recognized that social infrastructure is a stronger driver of resilience than building new physical infrastructure (Aldrich & Meyer, 2015; Matthewman & Uekusa, 2021). The literature supports this change in practice as informal networks of neighbours helping neighbours and mutual aid are spontaneous outcomes that are known to occur in communities after disasters (Aldrich & Meyer, 2015; LaLone, 2012; Schmeltz et al., 2013; Solnit, 2009). Despite its potential utility, social capital remains underutilized in formal contexts, likely due to the limited availability of metrics for quantitatively measuring it and a lack of comprehension among emergency planners regarding the integration of social capital into structured emergency planning protocols (Aldrich & Meyer, 2015; LaLone, 2012; Matthewman & Uekusa, 2021). Aldrich and other scholars have provided solid and extensive evidence (Aldrich, 2010, 2011; Aldrich & Meyer, 2015; Fraser et al., 2021; Fraser & Aldrich, 2021; Metaxa-Kakavouli et al., 2018) from multiple disasters, including the COVID-19 pandemic, for the benefit of improving disaster resilience and long term recovery in communities by expanding use of social capital in formal emergency planning. It is also used as a measure in the NHSPI under the Community Planning and Engagement domain. Decidedly, social capital does not exist in a vacuum and is just one facet in the social-ecological system required to build community resilience; other commonly referenced capacities are individual and group capacity (knowledge), leadership, attachment to place, and community cohesion (Faulkner et al., 2018).

Social capital manifests in a bottom-up manner in communities almost immediately after disasters strike (LaLone, 2012; Schmeltz et al., 2013). It comes in the form of first response by neighbours rescuing neighbours, volunteer offers to aid in information distribution, and donations of food, clothing, money, and supplies. When the formal emergency infrastructure is not prepared to deal with an influx of offers from community members, chaos can ensue leading to wasted resources and opportunities (LaLone, 2012). The formal, top-down emergency planning tables should be aware and build flexibility into their plans to account for this inevitability. Regional and municipal emergency planners should take the time to understand the latent networks in their regions in the pre-disaster phase by identifying CBOs, faith-based groups, and others who would make up mutual aid networks (LaLone, 2012; Morgan et al., 2022). By bringing the groups together, especially those with local knowledge, to collaborate before a crisis, more effective and well-rounded response can occur when needed. As mutual aid and social capital are part of both visible and invisible systems, emergence is a common occurrence—emergent groups form to fill in areas where they see gaps in services (LaLone, 2012; Morgan et al., 2022; Schmeltz et al., 2013).

Matthewman and Uekusa (2021) suggest that social capital is not altogether a public good and has been critiqued for its individualistic and exclusive character as only members of 'the group' can gain access (Matthewman & Uekusa, 2021). Social capital scholars emphasize the need for cross-sector collaboration, connection, and support between the public sector and civil society which, they argue, will more ably center equity and inclusion of marginalized groups in the disaster resilience process (Morgan et al., 2022; Schmeltz et al., 2013)

Bourdieu conceptualized social capital in *The Forms of Capital* as "one of four types of capital, along with economic, cultural, and symbolic, that collectively determine social life trajectories." (Bourdieu, as cited in Aldrich & Meyer, 2015, p. 256). Further, he claimed that "social capital is the aggregate of the actual or potential resources that are linked to possession of a durable network of more or less institutionalized relationships of mutual acquaintance or recognition" (Bourdieu, as cited in Aldrich & Meyer, 2015, p. 256). Robert Putnam was responsible for mainstreaming the idea of social capital in the 1990s in his book *Bowling Alone,* where he "defined social capital broadly as the features of social organizations, such as networks, norms, and trust that facilitate action and cooperation for mutual benefit" moving the idea from the individual to the community level (Putnam, as cited in Aldrich & Meyer, 2015, p. 257). Three different ways of organizing social capital are recognized in the literature each with different outcomes: bonding (close connections), bridging (loosely linked networks), and linking (across gradients, e.g. authorities) (Matthewman & Uekusa, 2021). Figure 3 illustrates the differences between the three types of social capital and how they are connected.

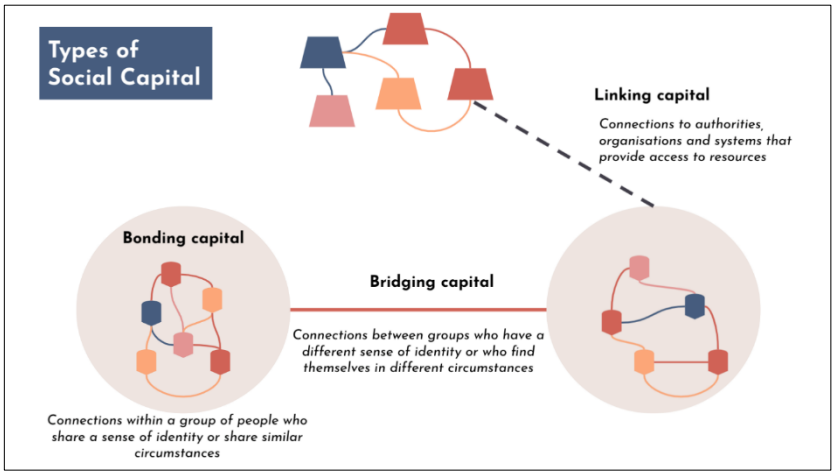

Figure 3: Three types of social capital in a community. Reprinted from Relationships Project, 2021. https://relationshipsproject.org/category/bridge-building. Copyright [2021] by the Relationships Project.

A report produced by the Toronto Foundation in partnership with national foundations and local nonprofits, *2022 Toronto Social Capital Study,* surveyed over 4,000 residents and determined that while social capital remains a viable resource for organizations to tap into, there has been a decline between 2018 and 2022—a result of pandemic fatigue, reduced trust, economic and mental health challenges, changes to volunteering patterns, and distancing between family, friends, and neighbours (Parkin & Ayer, 2022). The Toronto Foundation study examined the personal dimensions of social capital; however, a thorough examination of the organizational networks of social capital, including community-based and religious institutions, within the urban area would prove to be a valuable supplement.

Communicating with Vulnerable Groups During Disasters

During the COVID-19 pandemic, the topics of government communications, public health messaging, and media discourse were highly debated and widely examined. Criticisms were levied against governments for their crisis response and pandemic communication strategies, with some arguing that these efforts contributed to the proliferation of distrust and conspiracy theories (Pavela Banai et al., 2022). The dissemination of misinformation and disinformation, particularly regarding vaccines, also emerged as a significant concern. While a comprehensive examination of risk communication best practices (as outlined

by Campbell et al., 2020) is beyond the scope of this literature review, the literature does demonstrate the importance of effective communication strategies with vulnerable populations. Notably, the literature is heavily skewed towards studies on communication efforts from governments or public health officials during natural disasters or public health crises, and there is a lack of research on communication strategies employed by nonprofit organizations with their program clients.

The role of communications during a crisis or disaster cannot be understated. Indeed, communications are a key element of the preparation for disasters and play a large role in creating timely and effective disaster responses with positive recovery outcomes (Howard et al., 2017; Ulmer et al., 2019). It is well documented in the public health and disaster risk reduction literature that vulnerable groups have disproportionately worse outcomes after 'natural' and climate change related disasters than other groups (Adepoju et al., 2022; Benevolenza & DeRigne, 2019; Gan et al., 2021). The COVID-19 pandemic created similar disproportional outcomes for marginalized groups particularly those who already experienced high levels of risk and vulnerability in the pre-pandemic period (Banerjee & Bhattacharya, 2021; Buheji et al., 2020; Kantamneni, 2020; Sanfelici, 2021). Context is a key consideration for disaster communications as risk calculation varies by group—disaster-related messages can be ineffective without understanding social conditions and other influences impacting decision-making (Clark-Ginsberg & Petrun Sayers, 2020; Howard et al., 2017). Moreover, vulnerable groups can be distrustful of authorities causing them to dismiss communications from governments or the police; however, community-based and faith-based groups are often considered reliable and trusted sources of information, making cross-sector alliances even more important (Clark-Ginsberg & Petrun Sayers, 2020).

Vulnerable groups such as homebound seniors, refugees, homeless youth, or women experiencing domestic violence, often have particular communications expectations and needs as well as variable access to information and technologies such as cell phones and internet access: this makes a multimodal communications strategy a best practice during a disaster (DeYoung et al., 2016; Fuller & Rice, 2022; Howard et al., 2017). During the first year of the pandemic in Toronto when public spaces such as malls, community centers, and the Toronto Public Library branches were closed or on reduced hours, those who relied on these spaces for internet access were left without a critical communications resource. Removal of payphones from public areas is another barrier to communications and information that has negatively impacted vulnerable and low income groups with the spread of mobile phones (Marler, 2018). Allen et al. (2022) conducted fifteen focus groups in four U.S. cities in July 2021 to learn the preferred methods of communication of public health information for people experiencing homelessness (PEH). Their learnings indicate that PEH overwhelmingly preferred to receive health communications with actionable guidelines in a face-to-face setting from a trusted source such as a doctor or other healthcare provider. Triangulating information was a commonly cited tactic whereby PEH would obtain information from multiple sources/locations to determine consistency and truthfulness (Allen et al., 2022).

Much of the recent literature on communications during the COVID-19 pandemic has not been focused on nonprofit organizations outside of a brief exploration of communications with funders (Finchum-Mason et al., 2020) and the innovative solutions undertaken by nonprofit organizations in a coalition to foster advocacy, act as a brokerage/bridging service, and for crowdfunding purposes (Raeymaeckers & Puyvelde, 2021). Although, Raeymaeckers and Puyvelde (2021) did find that nonprofits experimented with novel ways of staying in touch with community members but found it challenging to connect with more vulnerable stakeholders due to a lack of skills (e.g., with online platforms), limited or no internet access, misinformation, and language barriers. A promising practice that their study noted was the use of "the principle of proactivity" where social workers called community members just to check in which was an important aspect of a communication strategy for lonely and isolated people (Raeymaeckers & Puyvelde, 2021, p. 1309).

Social media is at its core human communication, possessing characteristics of participation, openness, conversation, community, and connectedness.

(Veil et al., 2011, p. 110)

Fuller and Rice (2022) have written the most fulsome coverage of nonprofit communications during a crisis with a focus on COVID-19—their longitudinal study surveyed 578 US based public charities six months before the pandemic and once six months into the pandemic. They found that most organizations (of all kinds) do not spend enough time planning and preparing for different kinds of crises (e.g., operational, paracrises, etc.) nor do they perform risk analyses or risk reduction modelling causing leadership to be unaware and/or unconcerned with future potential risks (Fuller & Rice, 2022). A key finding in the crisis literature is that "a significant part of preparedness is learning from past crisis experiences, identifying barriers to response, and formulating future concerns" (Fuller & Rice, 2022, p. 2). Moreover, the study found that the use of social media for community and action purposes correlates positively with a nonprofit's ability to endure and innovate through a crisis. The historical research on "crisis renewal" was also proven to be sound: organizations that have ethical and effective communications in place before a crisis are better placed to pivot and adapt, collaborate, and find innovative ways to deliver on their mission during a crisis (Fuller & Rice, 2022, p. 8). Fuller and Rice (2022) attribute these outcomes to organizations that center organizational values in their actions, form positive stakeholder relations, and embrace crises as opportunities.

There is consensus in the literature that social media and other new media sources are positive additions to disaster communications as they enable the community to be actively and rapidly involved in the response, with the caveat that deluges of online information are challenging to monitor and analyze (Palen & Hughes, 2018; Veil et al., 2011). User-generated media is often perceived as more reliable than information from the mainstream media and can help build community resilience (Palen & Hughes, 2018; Veil et al., 2011). When organizations use social media to connect and build relationships with their stakeholders, they can alleviate uncertainties in times of disaster through interactive communications. As noted by Palen and Hughes (2018) and Veil et al. (2011), interactive forms of media such as microblogging and online forums facilitated more positive experiences for individuals affected by Hurricane Katrina. Through the utilization of these platforms, individuals were able to exchange information, coordinate mutual aid efforts, and process their emotional losses.

According to Howard et al. (2017), it is crucial for nonprofit organizations that serve vulnerable clients to establish communication strategies that take into consideration the demographic characteristics, socioeconomic status, and technological accessibility of their community members during the pre-disaster, active disaster, and post-disaster phases. These considerations include, but are not limited to age, social and economic context, relative disadvantage, disability, and access to technology (Howard et al., 2017). Ongoing, open, and two-way communications must be a long-term commitment for organizations conducted through community engagement activities. Tailored messaging for different groups is also recommended: Howard et al. (2017) found that some groups made very specific information access choices, whereby messages were not received unless sent via a certain medium; for example, older people continue to prefer traditional communications methods such as telephone calls.

The Value of Cross Sector Partnerships in Disasters

The value of cross-sector partnerships and collaboration during disasters has already been alluded to in this literature review but a more comprehensive look is warranted. Much has been written (Bryson et al., 2006, 2015; Clarke & Crane, 2018; Selsky & Parker, 2016) about the opportunities and challenges of cross-sector partnerships between governments, nonprofits, and corporations and their capacity to help solve persistent economic, social, or environmental problems. Bryson, Crosby, and Stone define cross-sector collaboration "as the linking or sharing of information, resources, activities,

and capabilities by organizations in two or more sectors to achieve jointly an outcome that could not be achieved by organizations in one sector separately" (2006, p. 44). In the context of extreme events or disaster situations, cross-sector collaboration can look somewhat different than partnerships that form under normal conditions, but they still create and improve the public value (Kapucu, 2007; Simo & Bies, 2007). Disasters and extreme events generate uncertainty, rapidly paced and stressful environments, and a need for intense coordination between organizations working toward a shared goal (Kapucu, 2007). When agencies from different sectors are well-integrated, complex problems that arise in disaster situations are more easily solved with the added benefit of learning through interaction, adaptation, and spontaneous exchange of information (Ku et al., 2022). Critiques of cross-sector partnerships include problems with control, coordination, communications, and complex individual and leadership behaviours (Simo & Bies, 2007). Cross-sector partnerships come in many forms and can be formalized under contracts, episodic, and one-time alliances (Simo & Bies, 2007). In centralized governments, such as Korea, where emergency management structures are vertically-controlled and bureaucratic, cross-sector or interagency collaboration is limited, hierarchical, and suppressed by authorities (Ku et al., 2022).

After hurricanes Katrina and Rita, the research by Simo and Bies (2007) demonstrates that cross-sector collaborations arose out of a necessity to make up for the shortcomings in one sector; as such they recommended ways to ensure cross-sector collaboration in future crises by investing in short-term funding streams to build civic capacity, enhance current networks, incorporate neighbourhood generated initiatives into city planning, invest in coalition building and emergent groups, and improve information systems and sharing between central agencies and local groups. Similar to the studies after Hurricane Katrina, research on the emergency response after the 9/11 attacks in New York City demonstrated that a lack of prior coordination of interagency networks (disaster response teams and nonprofits) led to confusion and impeded the initial emergency response (Kapucu, 2007; Simo & Bies, 2007). Nonprofits should be included as part of the social and emergency infrastructure to ensure robust early response operations in times of disaster. Kapucu (2009) draws on complexity theory to help explain why collaboration in emergency management structures is critical during disasters; namely, as disasters have emergent behaviours, responses will be more effective if multiple agencies and jurisdictions respond to the disaster versus as independent actors attempting it on their own.

Organizational Adaptations to Environmental Jolts and Post Traumatic Growth

Noting the level and variety of adaptations nonprofit organizations made to their programs and services delivery during the period of the pandemic, it is important to mention Alan D. Meyer's 1982 paper *Adapting to Environmental Jolts* as it provides context for adaptive behaviour in organizations. The term *jolts*, as initially coined by Meyer, aimed to differentiate between external crises or disasters (Meyer, 1982). Nevertheless, it has proven applicable to the internal disruptions faced by organizations during the COVID-19 pandemic. Here, it is important to note that the jolt in Meyer's study—a doctors' strike—was short-lived and not years-long like the COVID-19 pandemic. The prolonged duration of the pandemic, coupled with factors such as pandemic fatigue, loss of revenue, and increased mental health stressors among nonprofit staff, likely had a significant impact on the ability of these organizations to effectively adapt over an extended period.

Meyer's (1982) paper, which explored the impact of a 1975 doctors' strike on three San Francisco hospitals, argues that organizations can benefit from environmental jolts if they stay flexible, responsive, and are open to change and opportunities. There are three adaptation phases – anticipatory, responsive, and readjustment – each with corresponding organization antecedents and adaptive processes (Meyer, 1982). Ideological and strategic variables were the greatest predictors of organizational resiliency while regarding jolts as opportunities for growth, learning, and innovation led to organizational revitalization (Meyer, 1982). Some organizations take actions during a jolt period that are uncharacteristic compared to more calm periods, which Meyer attributes to strategies, structures, ideologies, and accumulated

resources (Meyer, 1982). Building strong relationships with stakeholders and diversifying markets (e.g., expanding programs and services in the case of social service nonprofits) builds resilience. Meyer (1982) cautions organizations to not overlook the 'tremors', or early warning signs, that occur before the jolts.

Similarly, the literature (Fitzpatrick, 2016; Olson et al., 2020; Tedeschi et al., 2004) notes that there is evidence that posttraumatic growth (PTG)—a psychological state marked by positive changes in one's outlook—that can occur in individuals after a disaster, also occur in organizations and communities. PTG is a concept developed by psychologists Tedeschi and Calhoun in the mid-1990s that examines personal transformations in the aftermath of traumatic life events, though they are quick to acknowledge that the roots of posttraumatic growth are ancient and indeed recorded in the literature and religious texts from eras ago (Calhoun et al., 2012). In communities, PTG can lead to "increased social and cultural capital among its people, higher level of community competence and political influence, and even improved economic development" (Fitzpatrick, 2016, p. 79). A state of PTG can be achieved through community resilience, leadership that recognizes opportunities for growth, and the political will to address the complex challenges in the community (Fitzpatrick, 2016). The integration of personal narratives into the social narrative can result in positive organizational or community change, particularly when such narratives are recognized as pivotal events (Tedeschi et al., 2004). Organizational posttraumatic growth (OPTG) is not merely a return to the status quo and 'normal' but to a higher level of functioning for the organization or community (Alexander et al., 2021; Olson et al., 2020). Tedeschi and Calhoun (2004) caution that cultural differences, such as viewing future events along a predictable, linear path (Western) or a less-predictable, nonlinear cycle (Eastern) can have an effect on how PTG, as a cognitive strategy, is applied in different contexts.

During the key informant interviews conducted as part of this study, the topic of mental health unexpectedly emerged as a prominent theme despite not being a specific area of inquiry for the study. Given the increasing concern surrounding the mental health of nonprofit workers, particularly in light of the COVID-19 pandemic, it is recommended that a more in-depth investigation be undertaken regarding the potential for OPTG as a means of reducing psychological stress. It is imperative that organizations provide access to occupational support and resources focused on coping strategies, sensemaking, and personal resilience to those on the frontlines, including social workers, program managers, and other professionals in the nonprofit and charitable sector who provide support to traumatized individuals (Finstad et al., 2021; Maitlis, 2020). However, a comprehensive examination of this topic is beyond the scope of this paper.

Summary

The literature review highlights the significant but underutilized role played by nonprofit organizations and community-based entities in disaster planning, preparation, and response. It is widespread in post-disaster situations to see mutual aid and co-production emerge from grassroots and community organizations to fill gaps not met by the public sectors. The literature also demonstrates that a lack of disaster planning and preparation by nonprofits and community-based organizations for disasters is relatively commonplace. However, since these organizations often perform multiple functions for vulnerable communities, and possess unique strengths, including local knowledge and networks, making them valuable partners for governments and emergency management agencies more support and resources to improve their current state of readiness is necessary. The concept of social capital and its potential to enhance community resilience and practices such as targeted communications for marginalized groups, developing strong cross-sector collaborations, and viewing organizational adaptations to adverse events as positive changes are critical components of a comprehensive disaster strategy. As a starting point, general principles of preparedness, as outlined by Sutton and Tierney (2006), offer a useful framework for nonprofit organizations new to disaster planning.

Summary Table: Research Questions, Literature Review, and Emergent Themes

To bridge the gap between the reviewed literature, research questions, and emerging themes, Table 1 below has been presented to the reader as a visual aid. This tool serves as a structural guide for discussion and analysis.

Primary Research Question: What factors affect the ability of social service nonprofit organizations in Toronto to deal with disasters?			
Secondary Research Question(s)	Specific Question(s) asked to Participant(s)	Qualitative Data Theme (QDT)	Literature Review Theme (LRT)
How did the existing plan help the organization respond to the pandemic?	*You answered in the survey that your organization was (see survey response) prepared in March 2020.* *What specific measures did your organization have in place for a disaster that helped with your COVID-19 response?*	QDT 1 - Disaster preparation and planning are important in theory but not common in practice.	LRT 2 - Current state of disaster preparation and planning in community-based organizations
What strategic and critical operation plans and processes have been and will be implemented to prepare for future disasters?	*Did your organization respond to early (pandemic) warning signals or wait until after the March 13, 2020, lockdown in Ontario? Was the action proactive or reactive?* *Are there any early indicators that you plan to watch going forward? Examples such as the news, wastewater reports, etc.*	QDT 1 - Disaster preparation and planning are important in theory but not common in practice.	LRT 1 - The role of nonprofits in disaster management LRT 2 - Current state of disaster preparation and planning in community-based organizations
How were services and programs affected by the pandemic?	*How did you communicate with your constituents or clients during the pandemic, particularly at the beginning?* *What type of communication worked well and what didn't?*	QDT 2 - Multi-channel communications, to stay connected with external stakeholders, are a critical component of a disaster management strategy.	LRT 4 - Communicating with vulnerable groups during disasters LRT 6 - Organizational adaptations to environmental jolts and post traumatic growth
How has the pandemic changed the way leadership thinks about their	*How specifically has the COVID-19 pandemic changed your perception of your*	QDT 5 - The pandemic changed how organizations	LRT 1 - The role of nonprofits in

organization's role in the community? *How has the pandemic changed the organization's mission or other parts of the strategic plan?* *Have new organizational priorities arisen due to new insights you have gained into your community because of the pandemic?* *What lessons have been learned that can be applied to planning to build organizational and community resilience in the face of the next disaster?*	*organization's role in the wider community and/or the role it plays as a critical resource for the population you serve?* *Have new organizational priorities or programs arisen due to new insights you have gained into your community because of the pandemic?* *Despite the hardships, do you think that the COVID-19 'experience' built capacity and resilience in your organization and/or community? If so, how did the pandemic experience do that?*	see their role in their communities, prompted adaptation to meet changing client needs, and built internal resilience.	disaster management LRT 3 - The Importance of social capital in disaster resilience and recovery LRT 6 - Organizational adaptations to environmental jolts and post traumatic growth
How has the pandemic changed the way leadership thinks about their organization's role in the community?	*Where and what role do you think charities and nonprofits could/should play in the municipal or provincial government's disaster and crisis response?*	QDT 3 - Cross-sector partnerships build capacity and strengthen resilience—further collaboration w/ governments are needed to see systemic change	LRT 5 - The value of cross-sector partnerships in disasters
What education, training, and development opportunities do nonprofit organizations need to develop skills and build resilience?	*What are the biggest gaps in your organizational knowledge regarding disaster preparedness?* *Funding is always a consideration for nonprofits. Besides the need for funding, what specific types of education or training opportunities would improve your organization's disaster readiness?*	QDT 4 - Lack of access to information, knowledge and expertise in disaster management is a critical factor limiting the creation of effective disaster management strategies.	LRT 2 - Current state of disaster preparation and planning in community-based organizations LRT 5 - The value of cross-sector partnerships in disasters

Table 1: Making connections between the research questions, literature review, and emergent themes

Theoretical Framework

Disasters can be considered a social phenomenon, as they have the potential to disrupt social systems and relationships, leading to a disruption in the regularity of daily life (Quarantelli, 1992; Quarantelli & Dynes, 1977). Given that perspective, communities, and organizations will be better equipped to devise effective

strategies for planning and preparation for such events if they view disasters as social issues that demand social solutions, rather than as problems that can be resolved through material means or physical infrastructure (Quarantelli, 1992).

This research project draws on the field of disaster studies and is framed by the social construction theory of disaster. Social constructionism in the field of disaster research "refers to the notion that disasters are products of human practices, with root causes in social structure and social process including perceptions and practices" (Sun & Faas, 2018, p. 624). Theorists suggest that it is drivers of risk, such as poverty and environmental degradation, plus a vulnerable population intersecting with a hazard, that creates a disaster. Essentially, a hazard (e.g., earthquake or novel virus) can only become a *disaster* once it intersects with people and society.

Sociologists and pioneers in the field of disaster research Enrico L. Quarantelli and Russell R. Dynes reframed disasters as events occurring within historical and social contexts and not as objective events happening outside of society (Sun & Faas, 2018). Their theories on the social aspect of disasters shifted the field from structural functionalism to social constructivism (Gilbert, 1998). Dynes (1993) stressed that because of the social nature of disasters, disaster risk reduction (mitigation, planning, and preparation) could be proactive and should concentrate on fixing problems and vulnerabilities in the social system instead of on ambiguous external threats.

> *In reality, it is argued, disasters are, one way or another, primarily the results of human actions. A disaster is not a physical happening, it is a social event. Thus, it is a misnomer to talk about natural disasters as if they could exist outside of the actions and decisions of human beings and societies. […] From this point of view, in one sense there never is a natural disaster; there is at most a conjuncture of certain physical happenings and certain social happenings.*
>
> (Quarantelli, 1992, p. 1)

Social capital theory, particularly the research on community networks by political scientist and public policy professor Daniel P. Aldrich, informed this study. Putnam, who popularized the idea of social capital in the 1990s in his book *Bowling Alone,* "defined social capital broadly as the features of social organizations, such as networks, norms, and trust that facilitate action and cooperation for mutual benefit" (Aldrich & Meyer, 2015, p. 257). Bonding, bridging, and linking, the three types of social capital, contribute to community resilience in distinct but complementary ways.

The underlying assumption for this paper is that disasters are not mainly physical hazards or events, but rather societal phenomena that are highly influenced by structural social inequalities wherein community social networks can make an inordinate difference in the conditions of the acute (response) phase and duration of the recovery period (Aldrich & Meyer, 2015; Quarantelli, 1992; Quarantelli & Dynes, 1977). Strengthening of social infrastructure and underscoring social solutions over physical solutions in the mitigation, prevention, and preparation stages of the disaster cycle helps communities adapt more effectively to disasters in both the acute disaster stage and recovery period (Aldrich, 2012).

CHAPTER 3: METHODOLOGY AND METHODS

Introduction

The purpose of this chapter is to outline in detail how the research for this study was conducted and to describe the methods used for data collection. The researcher's first step was to conduct a cursory review of the disaster and risk reduction literature as it pertained to nonprofit disaster readiness to get an idea of past studies, empirical data, trends, and theories—the results of the review urged the use of an exploratory approach. This project applied a mixed methods approach and consisted of two main research phases: 1) an online survey and 2) key informant interviews.

The survey was conducted first for a few reasons: to gather factual data about the organizations, to get a broad sense of the level of disaster readiness of social service nonprofit organizations in Toronto, to further understand the current state to create more informed interview questions, and as an avenue to recruit interview participants. The interviews were conducted next and were used to gain richer and deeper perspectives from nonprofit leaders and senior staff working at social service nonprofits in Toronto. Information gained from the interviews allowed the researcher to generate key themes that were integrated into the literature review. Approval from the University of Victoria, Human Research Ethics Board (HREB) was required as data collection involved research involving human subjects.

Methodology

The research methodology for this project utilized an exploratory design that incorporated elements of a promising practices approach to gain a better understanding of disaster preparedness within Toronto's social service nonprofit organizations. The research explored the state of disaster preparedness of nonprofit organizations at the start of the COVID-19 pandemic as well as the planning, response, resilience, and future concerns of organizational leaders. Data collection utilized a mixed method approach of both quantitative and qualitative methods as a way to compound the strengths and limit the liabilities of each approach (Meyer, 1982). This was a sensible approach as the pandemic was still an ongoing concern for most nonprofit organizations at the time of data collection and this allowed the researcher to capture broad generalizations through the survey and emergent and nuanced understandings through key informant interviews. The interviews provide rich descriptions within context which is important for exploratory studies (Stebbins, 2012a). This approach was also valuable for the unexpected evidence that arose in conversation during interviews which led to new areas of inquiry (Saldaña, 2011).

Research Ethics

This project required and received a certificate of approval from HREB on January 13th, 2022. The ethics protocol number is 21-0486. The research design explained all instances where consent was required and the tactics the researcher used for obtaining consent. An amendment to allow snowball sampling in the recruitment process was requested and the revised certificate of approval was approved by HREB on February 14th, 2022.

Exploratory Research Design

Empirical data on the research topic is limited and undefined, which is why an exploratory approach was a useful tactic for the initial study. The researcher was not attempting to confirm a hypothesis but instead to explore and gain perspective in a curious and open-minded manner (Stebbins, 2012a). Exploratory designs are ideal for gathering background information, refining concepts and beliefs, and determining hypotheses and priorities for future research (Texas State University, 2022). The flexibility that this type of research design permitted also means that results are not necessarily generalizable due to the smaller sample size and unstructured nature of the research—insights can be drawn, but making conclusive declarations from the findings is not wise (Texas State University, 2022).

> *Researchers explore when they have little or no scientific knowledge about the group, process, activity, or situation they want to examine but nevertheless have reason to believe it contains elements worth discovering. To explore effectively a given phenomenon, they must approach it with two special orientations: flexibility in looking for data and open-mindedness about where to find them.*
>
> (Stebbins, 2012b, p. 6)

Promising Practices

A promising practices methodology was appropriate for this project as it is a common approach in the field of public administration. The Canadian Homelessness Research Network defines promising practices in this way: "an intervention is considered to be a Promising Practice when there is sufficient evidence to claim that the practice is proven effective at achieving a specific aim or outcome, consistent with the goals and objectives of the activity or program" (Canadian Homelessness Research Network, 2013, p. 7). Utilizing a promising practice approach is practical, as it communicates strategies and interventions—that have the potential to make positive results—to organizations and enables them to tailor the recommendations to location, socio-political context, community history, and policy environment (Canadian Homelessness Research Network, 2013).

Methods

The primary data collection was conducted through a mixed methods approach as described below. Survey data collection began on May 10, 2022, and key informant interviews started on June 8, 2022.

Online Survey

To begin this phase of research, the researcher performed a cursory search of Toronto-based, registered charities via the Charity Directorate (this site does not provide employee contact details) which showed there were approximately 820 organizations under the relief of poverty, aged, protective healthcare, and community resource categories (*Charities and Giving - Canada.Ca*, n.d.). The initial target was to collect at least 100 names and contact emails; however, the search for publicly available names and contact information of social service nonprofit executives and senior staff proved to be a difficult and time-consuming task.

Sampling Method and Procedure

Employees at Toronto-based social service nonprofit organizations were directly invited to participate in this project using a few selection methods: self-selection, selective recruitment, and engagement of lay stakeholders (Fung, 2006). Another group was invited to participate via LinkedIn; however, the precise number of people who read the invitation and actively engaged with it on the platform is unknown. Overall, 28 nonprofit executives and senior staff members participated in the survey—of them, seven also participated in the semi-structured interviews.

The objective was to have a diversity of opinions, experiences, budgets, identities, and communities represented where the leaders could meaningfully engage with the topic and provide responses and insights based on their personal experiences (Hankivsky & Jordan-Zachery, 2019). A range of nonprofit organizations providing social services in the City of Toronto that met all the primary criteria were asked to participate. There were four primary criteria: annual revenues over $100,000; publicly available contact details; a functioning website; and a social services mission or mandate. Names and contact details for employees who work at a director level or higher at a social service nonprofit in Toronto were compiled into a final list of 81 names and email addresses—a readily available list of names was not obtainable. Sources for the names and contact information included LinkedIn, Google searches, Canada Helps, Charity Intelligence, the Ontario Nonprofit Network (ONN), the federal government's Charity

Directorate, and the Toronto Nonprofit Network (TNN). All the contact information was sourced from publicly available sites.

Participant Recruitment: Survey Monkey and LinkedIn

The researcher wrote an introductory message and sent it as a test email to a few colleagues to ensure clarity of message and to solicit feedback for improvement. Changes were made and the first email was sent to potential participants, along with the *Letter of Information for Implied Consent* and a link to the survey, on May 10th, 2022 (See Appendices A and B). The purpose of the introductory email was to introduce the research design and provide information to make an informed decision about participating. The inclusion of the *Letter of Information for Implied Consent* in PDF format proved problematic as email servers were flagging it as spam. The researcher had no way to know how many potential participants received the original request to participate—there were only 2 survey responses collected after the first email went out and no analytics were available.

Upon discovery of this technical issue, the researcher determined that the request would be more likely to be accepted as legitimate by email servers if it came directly from Survey Monkey. A follow up email was sent from Survey Monkey and referenced the earlier email. The number of respondents increased by 2 after this message, but it was mostly being left unopened. Survey Monkey does not allow attachments in messages sent directly from the platform; as a work around, the researcher created a basic website to host the *Letter of Information for Implied Consent* and directed participants there instead. With each reminder email, the researcher received 2 new responses. Once a participant had completed the survey, their contact details were removed from receiving any further reminders. The last email reminder was sent on June 7th, 2022.

In the meantime, the researcher had spoken to her graduate supervisor and determined that opening a new channel for recruitment via social media was advisable. A message was posted on LinkedIn in late May. LinkedIn recruitment proved to be a somewhat more successful method of reaching participants. In total, two posts were made on LinkedIn as a 'call for participants. Basic analytics indicate that the first post received 389 impressions and the second post received 424 impressions. The survey closed on June 15th, 2022.

Key Informant Interviews

Key informants self-selected during the survey phase. They were invited to participate in the interview process and if interested, provided their contact information to the researcher. The initial goal was to have 5-8 key informants complete semi-structured interviews: in the end, 7 interviews were completed. The interviews focused on accessing details that the survey could not—namely, identifying the issues of complexity involved in planning and preparing for disasters in social service nonprofit organizations. The interview data was used to discern and explain the survey data, provide context, identify key themes, and identify new areas of research (Hochschild, 2009). As such, the interview questions and framework were developed after the survey was completed.

This research method was chosen, in particular, for its value in having diverse voices heard on this topic—interviewees had an opportunity to speak about their experiences while the researcher practiced deep listening (Cattapan et al., 2020). Most interview participants took the opportunity to share stories—personal and professional—during the interviews; this demonstrated that storytelling can be a useful device that allows people to have dissenting opinions without coming across as critical or dismissive of the government's response (Black, 2013). This is particularly important for groups, such as charitable organizations, who rely on external funding and cannot be seen to be disparaging their funders.

Interviews were coordinated through email. All participants received the *Interview Participant Request Form* (See Appendix C) which was reviewed and signed by participants prior to interviews commencing.

Confidentiality was a key matter: names and other identifying information of the participants were removed from the data and their identities were made anonymous. All interviews were conducted over Zoom as Ontario was still following many social distancing protocols due to the COVID-19 pandemic and people were generally working from home.

Participants were asked approximately 7-8 primary questions and a few secondary or follow-up questions (See Appendix E) if required during the semi-structured interviews. Depending on the flow and direction of the interview and interest of the interviewees, certain questions took more time than others. Interviews ranged in length from 26-43 minutes. All questions were open-ended except for the first one. Each Zoom call was audio recorded with the partipant's consent, and a transcript was made using Otter.ai. Additonal hand notes were made by the researcher if needed.

Engagement and Communication

The engagement and communications activities that took place in the second quarter of 2022 are summarized in Figure 4. Overall, 28 survey responses were collected: 11 via email/Survey Monkey recruitment and 17 via LinkedIn recruitment. Initially, ten survey respondents requested contact by the researcher to participate in key informant interviews and ultimately seven were conducted. The researcher made several attempts to reach all participants who had submitted interest in conducting a key informant interview.

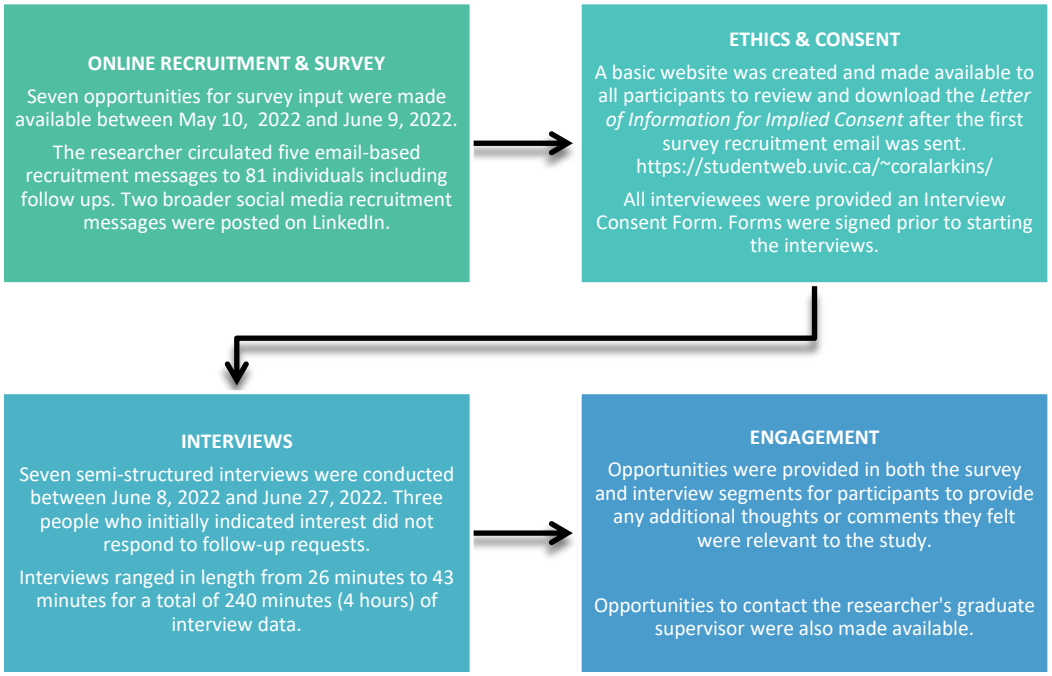

Figure 4: Summary of recruitment, engagement, and communications activities completed in Q2, 2022

Data Analysis

Survey

Survey data was collected via Survey Monkey. Participants were asked 26 research questions plus three more for the purpose of key informant interview recruitment. The majority were closed-ended questions and included multiple choice, 5-point Likert scale, sentiment, and yes/no questions (See Appendix D). The survey had an 86% completion rate and took an average of 8 minutes to complete. The raw data was analyzed using Survey Monkey's internal analytics software. The software allowed the researcher to set the data format (e.g., axis scale and depth) as well as the chart type (e.g., bar, pie, line, etc.) and converted the data into easy-to-read and understand formats such as charts and figures. For the open-ended questions in the survey, the researcher reviewed the individual response data, generated initial codes, searched the answers for themes, and tagged each response with the appropriate codes.

Key Informant Interviews

Key informant interviews were analyzed using an inductive, thematic analysis approach. Thematic analysis is a popular method used for identifying, analyzing, and reporting themes in qualitative data (Braun & Clarke, 2006). Using an inductive approach means that the themes emerge in a bottom-up and data-driven manner; the codes and theoretical framework are not preconceived by the researcher (Braun & Clarke, 2006).

Interviews were recorded using the audio feature on Zoom and then uploaded to Otter.ai to create transcripts. The researcher reviewed and edited each transcript for clarity and accuracy. Edited transcripts were then uploaded into NVivo. First, the researcher went through each transcript to familiarize herself with the data. Then, the data was thoroughly reviewed for the second time and segments of the text were highlighted. Initial codes—a short descriptions used to organize segments of text—were assigned to each segment; categories, or themes, began to emerge. In the first round 191 codes were utilized. Once the first round of coding was completed, the researcher went through the codes again and refined, merged, and split codes as necessary. Next, nodes—a 'bucket' to store/group data—were created to group same or similar themes or concepts. Nodes allowed the researcher to see a clearer picture of the themes; it is an efficient way to review and analyze data. Once all the nodes were created and the codes were grouped together within the nodes, the preliminary thematic framework was complete. The nodes were then arranged in hierarchical order from most referenced to least referenced; in some cases, nodes were further split into parent and child nodes to examine broader and more specific concepts that emerged. Three overarching categories of nodes made up the thematic framework and included: Five nodes of key themes; four nodes of interesting or new findings; and a catchall node for codes unrelated to the research question.

The researcher found that NVivo was a good choice for coding raw data and creating the thematic framework but not user-friendly for a more thorough analysis of the data. Upon advice of her graduate supervisor, the researcher merged the thematic framework from NVivo into a table, outside of the NVivo platform. In the table, the primary and secondary research questions, themes from the data and literature review, participant responses facts, and key quotes were synthesized and analyzed.

Limitations, Delimitations, and Strengths

Limitations, delimitations, and strengths which may have impacted the research findings of this capstone research project have been identified and explained below.

Limitations

Timing

Data collection for this research project occurred during an active pandemic which added additional challenges, e.g., the practice of social distancing and the elimination of face-to-face interactions. Many nonprofit organization employees were still working at and beyond capacity during the data collection phase which may have influenced the number of respondents in the recruitment list willing to participate in the survey and/or the key informant interviews. Also, it is possible that the survey and interview respondents had not yet had the chance to fully reflect on the challenges and opportunities of the pandemic period which may have led to only preliminary responses. Knowing the timing limitations likely present in the community, the researcher attempted to keep the survey short.

Survey sample size and selection

The contact list was compiled by the researcher using online sources and resulted in a database of 81 potential participant names and email addresses. This is only a fraction of the approximately 820 Toronto-based social service nonprofits named under the relief of poverty, aged, protective healthcare, and community resource categories on the Charity Directorate website (Charities and Giving - Canada.Ca, n.d.). As such, the results are more illustrative than wholly representative of Toronto's nonprofit sector. Many nonprofit organizations do not provide email contact details for their staff online and this made it difficult to build a larger participant database.

There was a slow survey uptake after the recruitment email was first sent, so the researcher consulted with Dr. Kimberley Speers and HREB about expanding the reach through social media (i.e., LinkedIn) and incorporating snowball sampling. This approach resulted in higher engagement and 28 people ultimately completed the survey. However, an inherent risk of snowball sampling is the dilution of the participant pool (i.e., participants may not meet all criteria) due to control being moved out of the hands of the researcher.

Key informants and self-selection bias

The key informants were recruited through the survey instrument where they were asked to provide contact information if they wanted to participate in the interview stage of data collection. The response to this was quite high—initially 10 of the 28 survey respondents indicated they would be interested in doing an interview as well. Eventually, seven key informant interviews were conducted. Key informants therefore agreed to participate in the survey and the interview and were likely highly engaged nonprofit sector employees. The self-selecting nature of the engagement process for both the survey and interview segments may have been biased toward those with stronger voices who were more comfortable sharing their opinions and engaging in research that utilizes traditional methods. Engagement was primarily directed at organizational executives and senior leaders so the perspectives of junior staff and the nonprofit clients themselves were not included. These groups would be logical participants to engage for further research.

Absence of second reviewer for thematic qualitative analysis

A limitation of this research was the lack of a second reviewer for the thematic qualitative analysis. Collaboration with a second reviewer would have been helpful in establishing further reliability and rigour. Using an inductive approach, the researcher identified patterns and emergent themes and then created codes and a thematic framework to analyze the data set. However, coding, themes, and interpretation were critically discussed between the researcher and graduate supervisor, Dr. Kimberley Speers.

Lack of previous research on subject

There is ample research on the role of nonprofits in disaster response (e.g., floods, earthquakes, etc.) and nonprofit risk management (e.g., PR crises, IT breaches, etc.). However, due to the COVID-19 pandemic being a novel virus pandemic, there is very limited research on the specific topic of pandemic preparedness in nonprofit organizations especially those not usually tasked with managing a disaster response such as the Red Cross. Additionally, the available research is provisional in many cases and focuses on the active and immediate needs of nonprofits (funding, volunteer support, keeping the organization afloat, etc.) and not on disaster preparation and planning.

Technical issues

Opportunities for engagement were lost due to technological issues early in the recruitment stage. The researcher used Survey Monkey which does not allow attachments on messages sent directly from the platform. Thus, the researcher was required to send a recruitment email from a University of Victoria email account, outside of Survey Monkey, which included the Letter of Information for Implied Consent. The inclusion of the letter as a PDF file caused spam blockers to flag the email as junk. It is not known how many people from the initial list received the email. The researcher found a solution to the problem by creating a website to present the Letter of Implied Consent and related ethics information and was able to restart recruitment.

Delimitations

The sudden and emergent nature of the pandemic necessarily made this research project a reflection or 'snapshot' of a specific time and place. The data collection took place in May and June 2022, roughly two years into the COVID-19 pandemic. The researcher's intention was to collect data from Toronto-based organizations to narrow the geographical scope; however, some participants worked at organizations that, while Toronto-based, had a broader geographical scope for their programs and services. As the public health response for the pandemic was provincially mandated—and in some cases municipally mandated—it was prudent to keep the study within the same geographic area. A different provincial government response would impact the working conditions, experiences, and response of nonprofit organizations in myriad ways. The population of interest for this study is social service nonprofits in Toronto that provided programmatic services to their communities during the COVID-19 pandemic in areas such as food security, addiction, housing and homelessness, education, and youth, newcomer, and seniors services.

While highly important to the viability of nonprofits and imperative to operations, this research project did not explore donor relations, volunteerism, fundraising challenges, or funding innovations undertaken during the pandemic. Revenue discussions did emerge during the interviews, but a full analysis of disaster planning, preparation, and risk as they pertain to revenue and financial security was outside the scope of the project. Additionally, this research project was focused on understanding how organizations responded to the needs of and communicated with community members or clients (e.g., the users of their programs and services) and not on relationships with donors, sponsors, or other stakeholder groups.

Strengths

An unexpected yet fortunate strength of this research project was that survey respondents and interview participants were quite diverse in both personal experience and in terms of their organizations' social service mandates. Using semi-structured interviews allowed space for storytelling by interview participants to illustrate their pandemic experiences and opened space for each participant to frame and reframe the issue of disaster preparedness in the way that was most authentic to their community and organization.

Introduction

This chapter outlines the key findings from the online survey that was conducted with 28 participants from social service nonprofit organizations in Toronto. The survey aimed to gain insight into the experiences of these organizations during the pandemic as well as their level of preparedness and capacity to respond to disaster situations. The findings of this survey provide valuable information for understanding the current state of community resilience within the social service sector in the City of Toronto and can inform future efforts to enhance resilience among these organizations. The survey data and charts were exported from Survey Monkey.

Survey Findings

Demographics and Budget

Questions 1-7 on the survey comprised general demographic and budget-related questions.

In Question 1, participants were asked how many years their organization had been active. As Figure 5 demonstrates, over two-thirds (68%) of the organizations had been in operation for more than 26 years, just over 10% had been active between 21-25 years, and the remainder were spread evenly between 6-10, 11-15, and 16-20 years. No organization had been operating for fewer than 6 years.

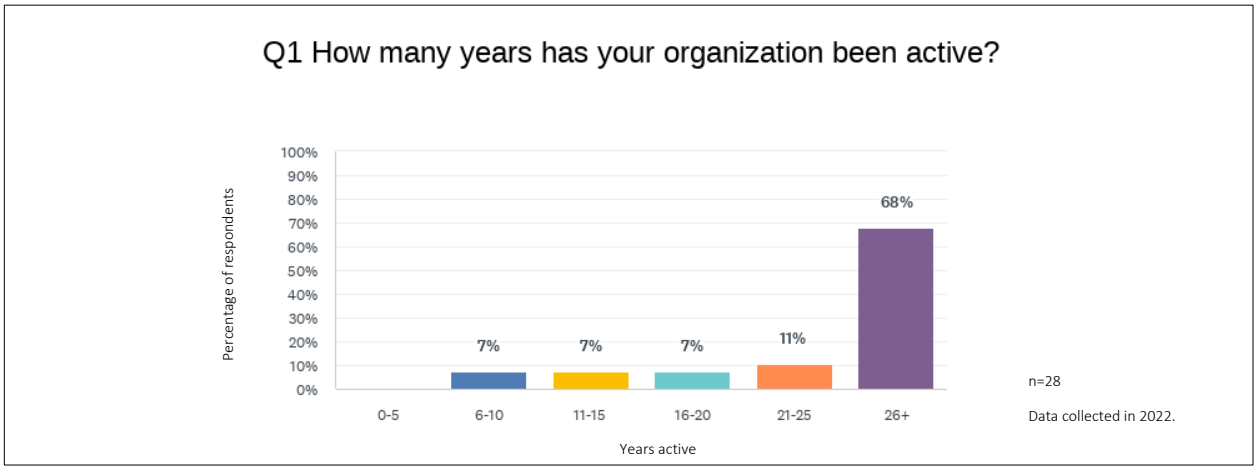

Figure 5: Years the organization has been in operation

In Question 2, participants were asked the approximate number of paid staff (FTE) at the organization. The largest group was 21-50 staff and accounted for almost 30% of respondents as shown in Figure 6. The balance was split evenly at 14% per group for staff levels of 1-5, 11-20, 51-100, 101-150, and 150+. There were no organizations with 6-10 staff, and no organizations reported zero paid staff, i.e., none were solely volunteer run.

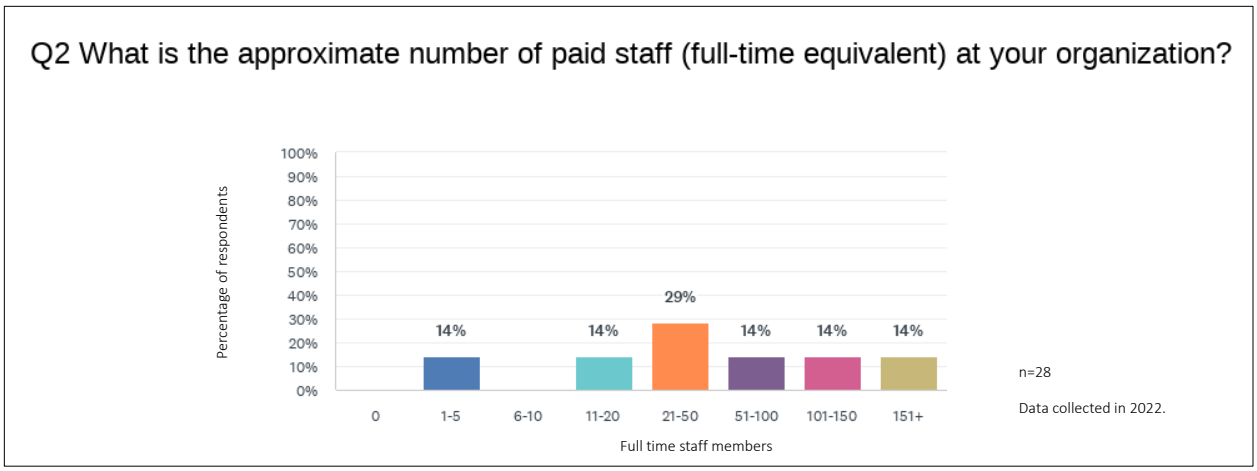

Figure 6: Number of FTE staff at organization

In Question 3, participants were asked about the organization's annual operating budget. Survey results, as shown in Figure 7, indicate that almost 40% had budgets between 3-10 million dollars, 25% had budgets over 25 million dollars, and 18% had budgets between 1-2.9 million dollars. The remainder of budgets (18%) were between $250,000 and $999,999 dollars. No organization surveyed operated on annual budgets under $250,000.

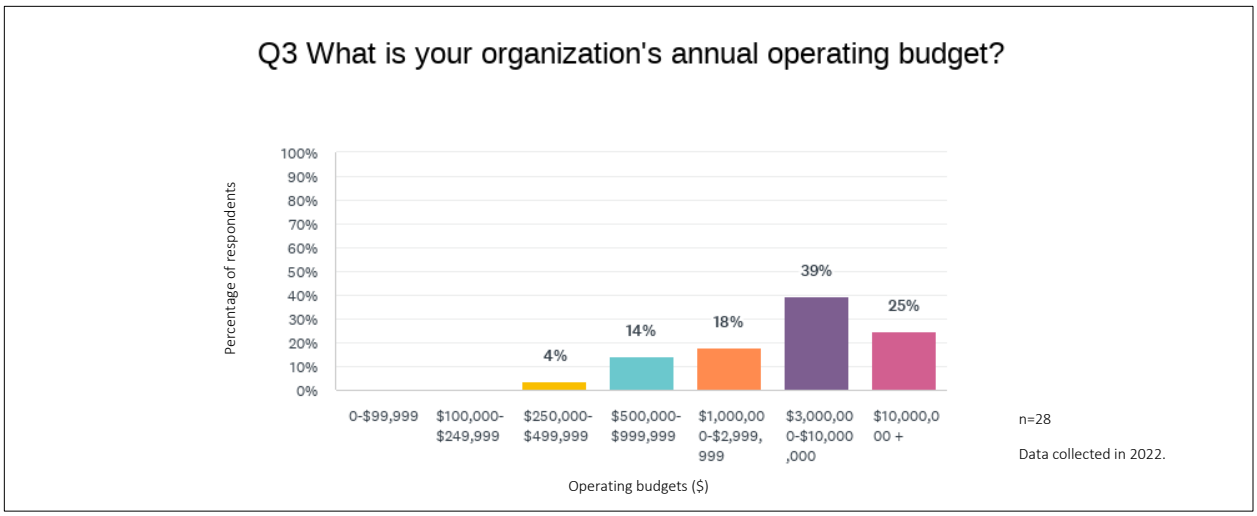

Figure 7: Organizations' annual budget range

In Question 4, the survey asked whether organizations received government funding—either federal or provincial. As shown in Figure 8, half of the organizations surveyed received both provincial and federal funding while 36% received no provincial or federal funding. Of the remainder, 7% received only federal funding, and 7% received only provincial funding. The survey did not ask about other sources of funding.

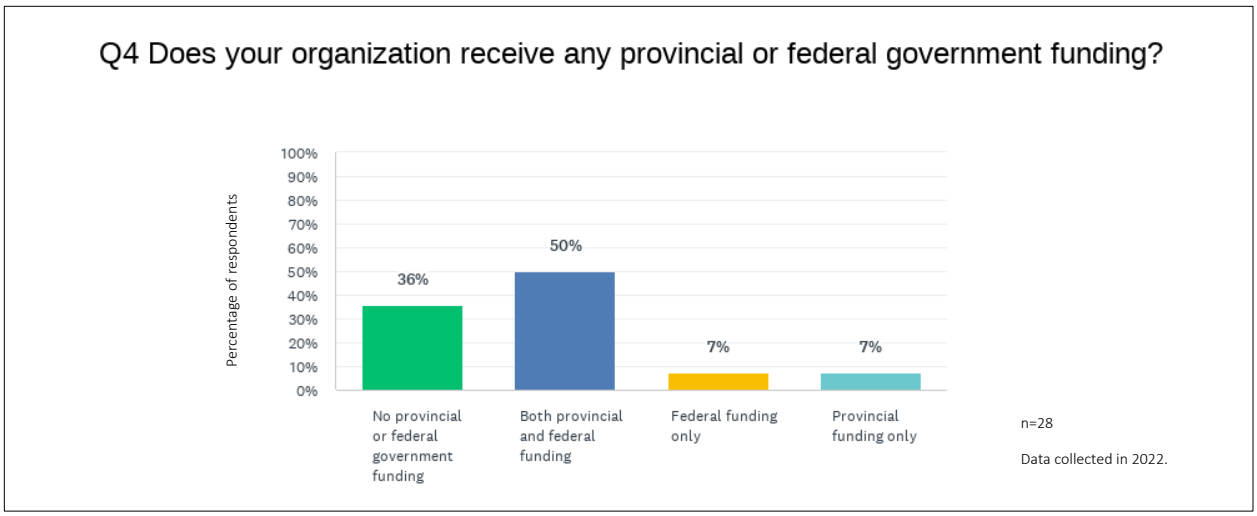

Figure 8: Receipt of funding from the federal and/or provincial government

In Question 5, participants were asked about their organization's primary service area. Although physically located in Toronto, Ontario some organizations had operations outside of the local area. As displayed in Figure 9, international organizations accounted for 11% of responses, 36% had national scope, 39% only served the local Toronto area, and 14% serviced the regional area known as the Greater Toronto Area (GTA).

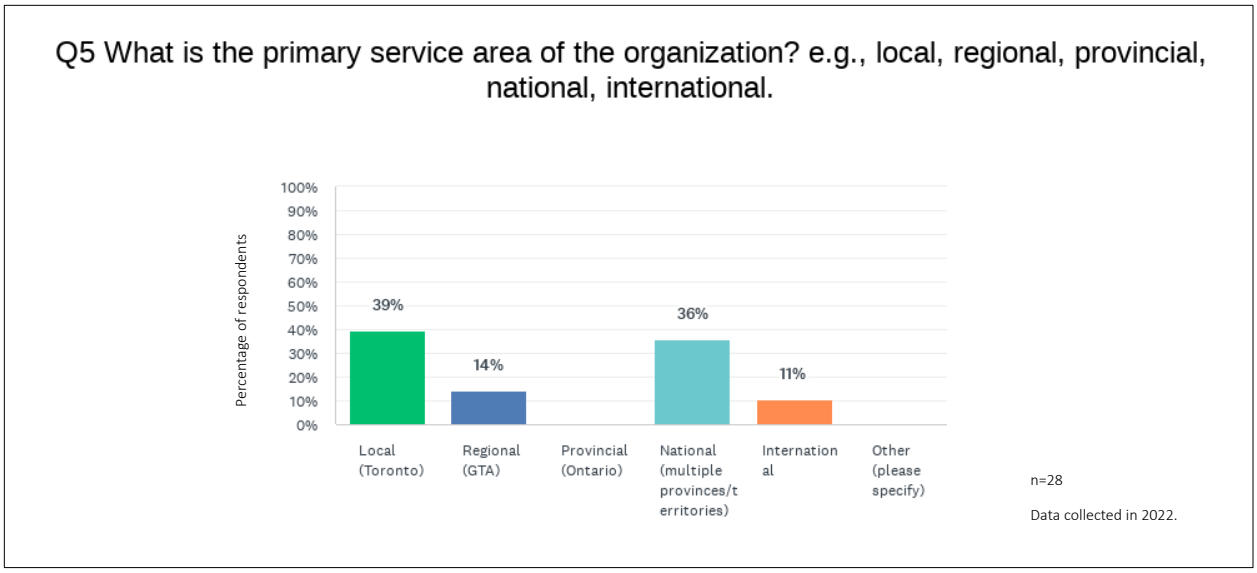

Figure 9: Geographic service area of the organizations

In Question 6, participants were asked to identify the primary communities they provide programs and services to and were asked to select as many as applied. As shown in Figure 10, children and youth, and poverty reduction were the most represented programs with 64% of organizations assisting these groups. Over 50% of organizations also served low-income households, Black communities and/or people of colour, women and girls, and newcomer and refugees' groups. Over a third of respondent organizations served

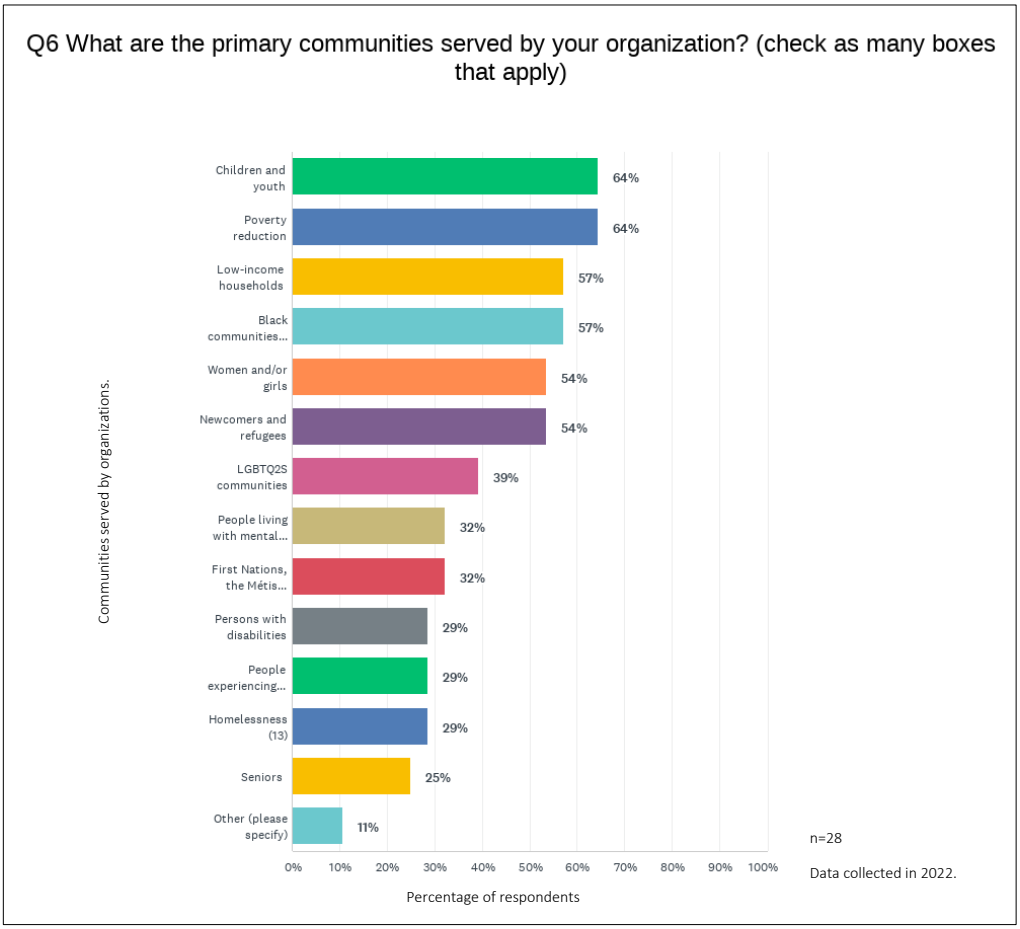

Figure 10: Communities served by the organizations

First Nations, the Metis Nation, and Inuit communities, LGBT groups, and people living with mental health issues or addictions. Finally, 25% of organizations served seniors, people living with disabilities, people facing homelessness, or people facing barriers to employment. Some respondents provided additional categories in the open-ended answer option including individuals experiencing human trafficking and/or sexual and labour exploitation, people living with cancer, and women in conflict with the law.

In Question 7, respondents were asked about their roles at the organization. Research recruitment efforts had targeted senior and executive staff positions. As shown in Figure 11, 40% of participants held the key leadership position at their respective organizations; 7% were the Chief Executive Officer and 32% were the Executive Director. Additionally, 18% were Directors, 14% were Senior Managers, and 4% were the Chief Financial Officers of their respective organizations. The remainder of participants had a variety of positions that participants wrote into the open-ended answer section including Vice President, Development Officer, Executive Assistant, Community Service & Operations Manager, Product Owner, Marketing, and Treasurer.

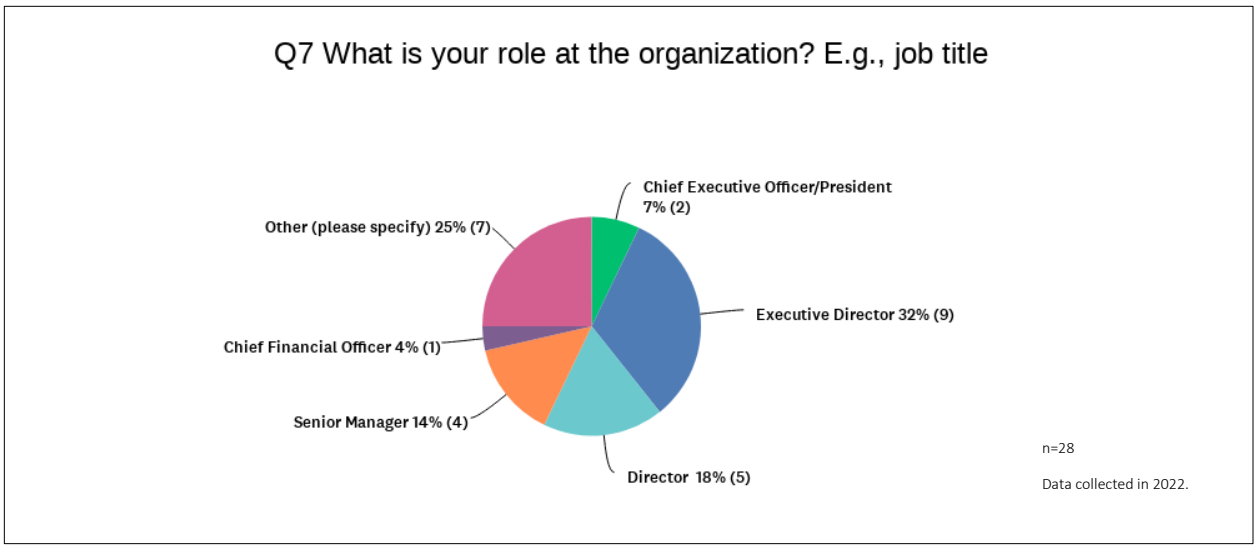

Figure 11: Job role of respondents at their organizations

Strategic Planning and Essential Services

In Question 8, respondents were asked if their organization had a current strategic plan in place when the COVID-19 pandemic started. As shown in Figure 12, the majority (82%) did have a strategic plan, 14% did not have a strategic plan, and 4% had a limited plan in the collective bargaining agreement.

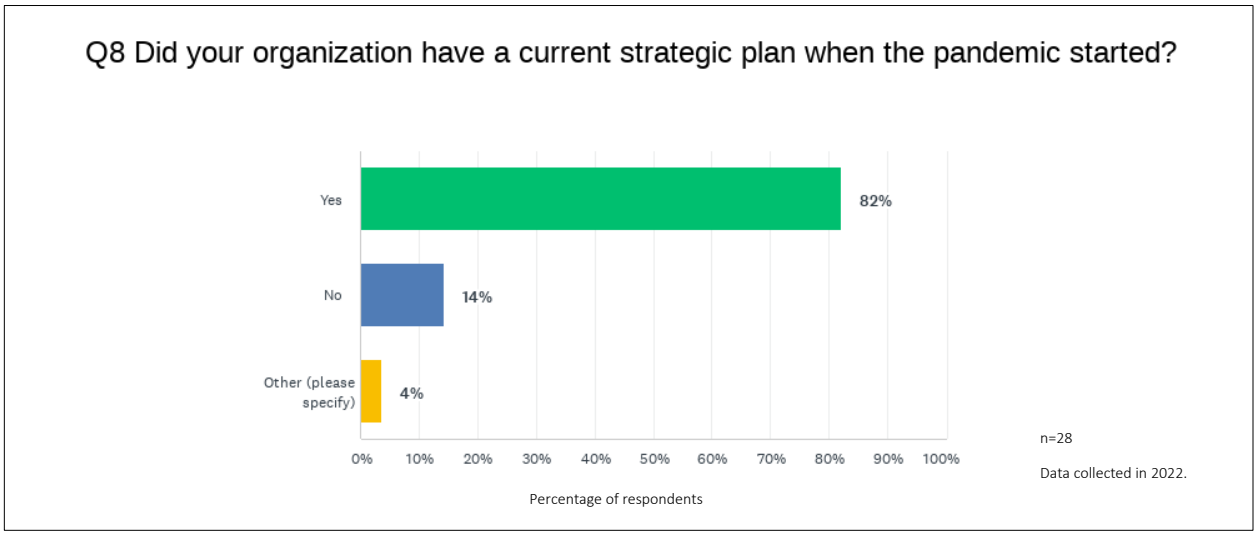

Figure 12: Strategic plan status of organizations in March 2020

Question 9 asked if the organizations had been declared an essential service[2] at any point in the COVID-19 pandemic. As shown in Figure 13, the responses were almost equal at 50% not declared essential, 46% that were declared essential, and 4% that were unsure of their essential status.

[2] A nonprofit was deemed an essential service in Ontario as of April 4th, 2020 only if they were an organization "that support(s) the provision of food, shelter, safety or protection, and/or social services and other necessities of life to economically disadvantaged and other vulnerable individuals". (Chummar, 2020, p. 2)

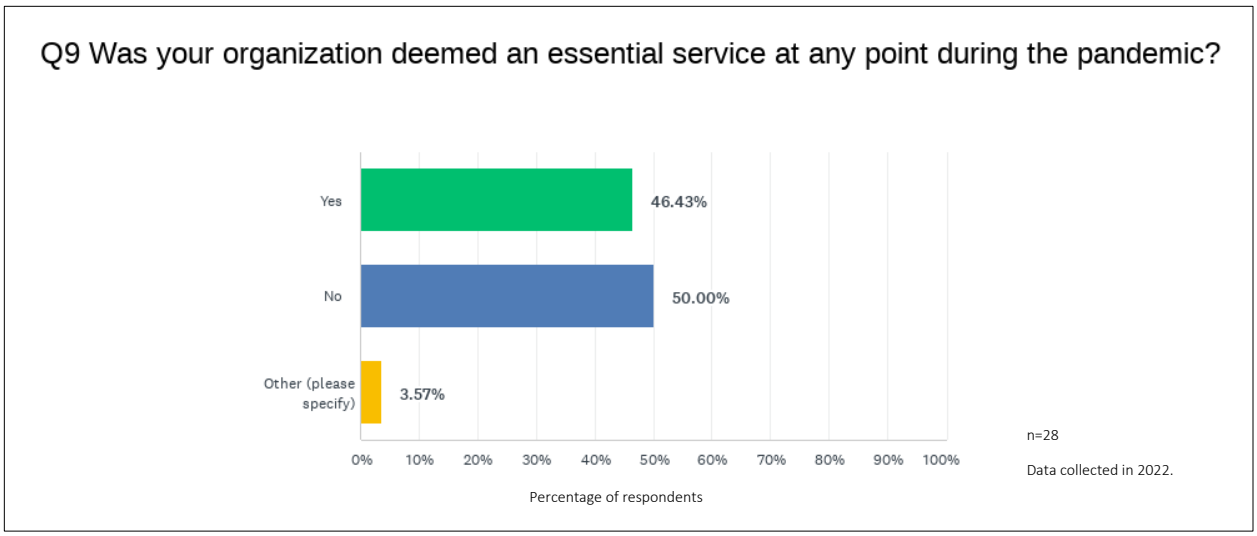

Figure 13: Essential or non-essential status of organization during COVID-19 Pandemic

Pre-crisis: Disaster Preparation and Planning

In Question 10, respondents were asked whether their organizations had a disaster or crisis management plan in place when the COVID-19 pandemic arrived in Ontario in March 2020. Their plan may or may not have included an epidemic or pandemic disease response. The participants were evenly split (50/50), as shown in Figure 14, between those organizations with a disaster plan and those without.

A note on Survey Logic
Question 10 determined which path respondents took, with Questions 11-15 for those without a disaster/crisis management plan and Questions 16-20 for those with one. Questions 11 and 18 were asked to both groups. From Question 21, all respondents answered the same questions. Using skip logic—rules that control the order and flow of the questions—reduces irrelevant questions, saves time, and improves data quality (Bhat, n.d.).

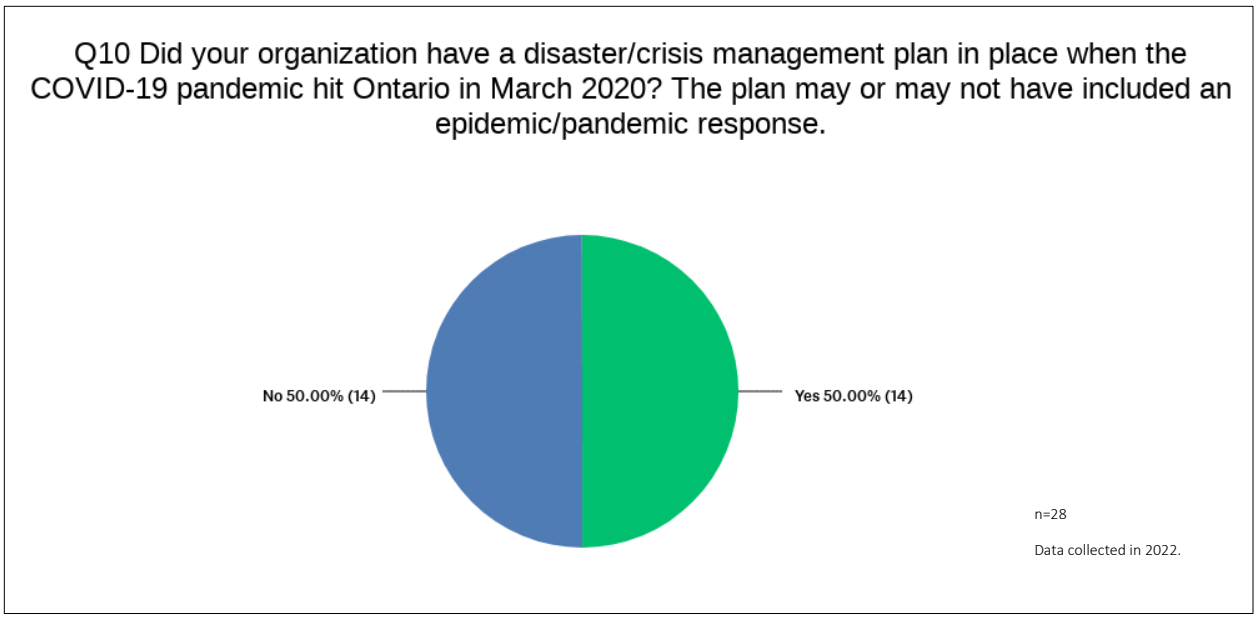

Figure 14: Organizations' disaster management plan status in March 2020

Pre-crisis: Disaster Preparation and Planning (For respondents with no plan in place)

Question 11 is directly related to the main research question and asked respondents how prepared their organizations were for the COVID-19 pandemic. No definitions were provided for the scale of preparedness and the estimation of preparedness level was subjective. A Likert scale was used, and five ordinal levels of preparedness were given. As shown in Figure 15, the largest group (46%) of respondents felt moderately prepared. Another 15% of respondents felt quite well prepared. Just 15% of respondents felt a little prepared and 23% felt completely unprepared. No respondents indicated that they felt extremely well prepared.

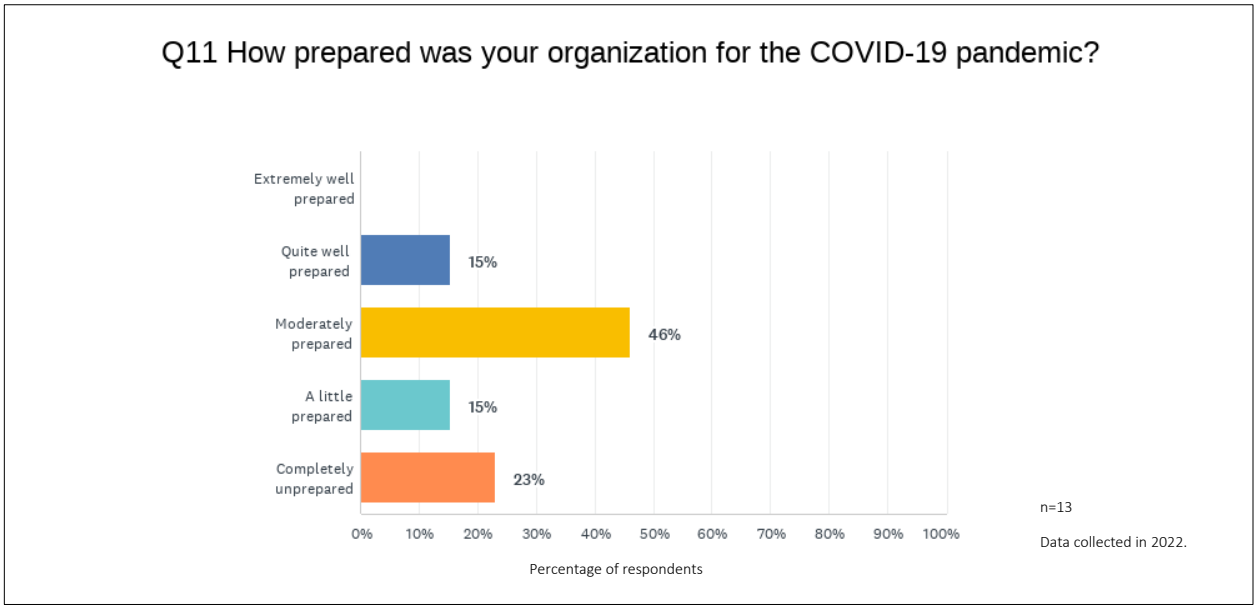

Figure 15: Perception of preparedness level (no plan in place)

When asked in Question 12 why their organizations did not have a disaster or crisis management plan in place, 69% of respondents said it was due to a lack of staff time or capacity, 46% indicated it was due to a

lack of staff expertise, and 31% said it was due to a lack of funding as shown in Figure 16. No respondents said it was due to a disaster plan being too complex to undertake.

Additional reasons provided in the open-ended answer section for not having a plan included: a disaster plan was not part of the organization's overall planning process; that there was a business continuity plan but no specific disaster plan; and, because the organization centered adaptation as a core value, a disaster plan was not necessary. Respondents were able to choose as many reasons as applicable.

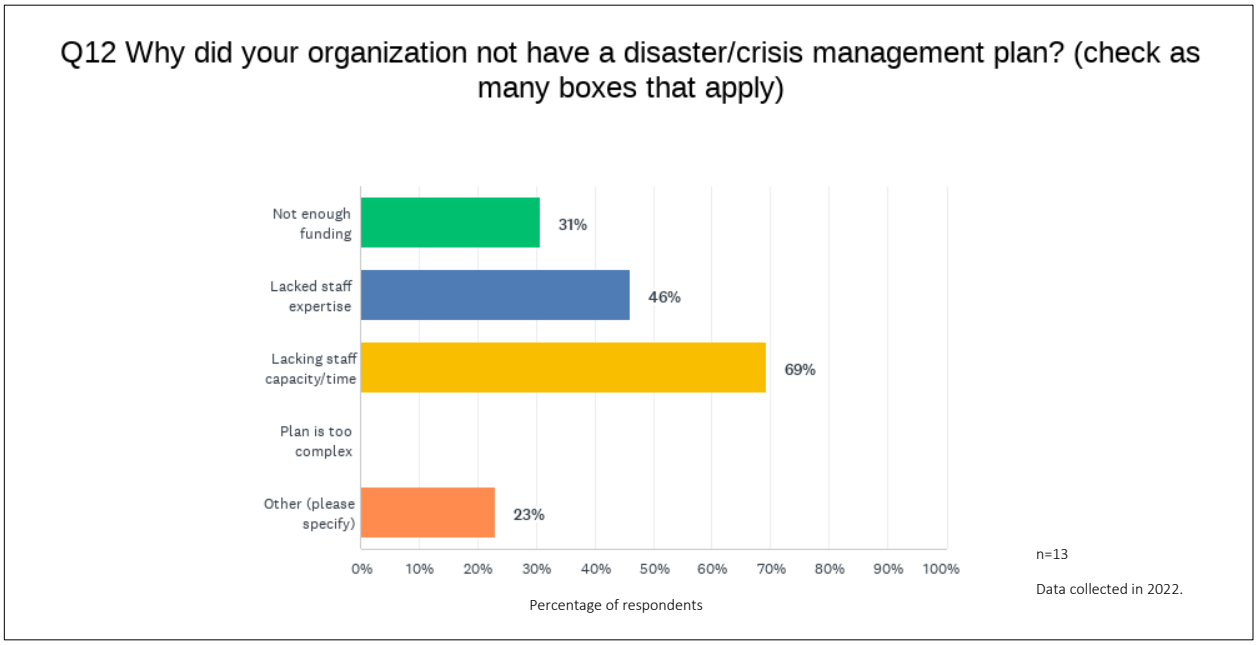

Figure 16: Reasons organizations did not have a disaster plan in place

Question 13 asked respondents what the impact was on the organization from not having a disaster plan in place. As shown in Figure 17, the majority (62%) felt that the impact was neutral, 31% indicated that the impact was negative, and 8% responded that the impact was positive.

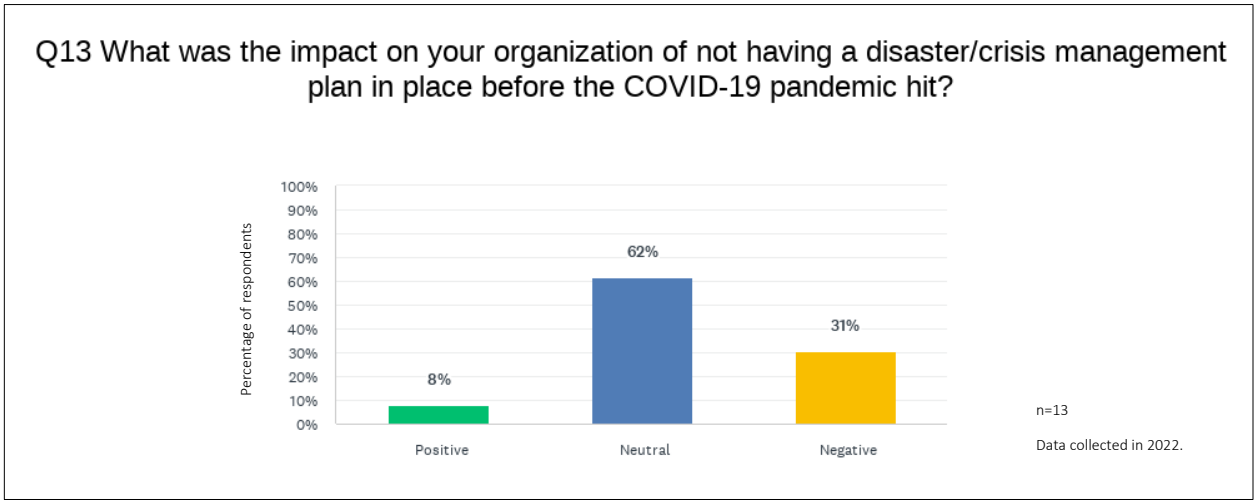

Figure 17: The effect on the organization of not having a disaster plan

Question 14 asked respondents if their organizations had created a disaster plan at any point after March 2020, despite not having a disaster plan in place when the COVID-19 pandemic started. As shown in Figure 18, the majority (54%) of organizations responded that they did create a plan at some point after the

pandemic began. The other 46% of particpants indicated that, up to the date of the survey, their organizations had not created a disaster plan.

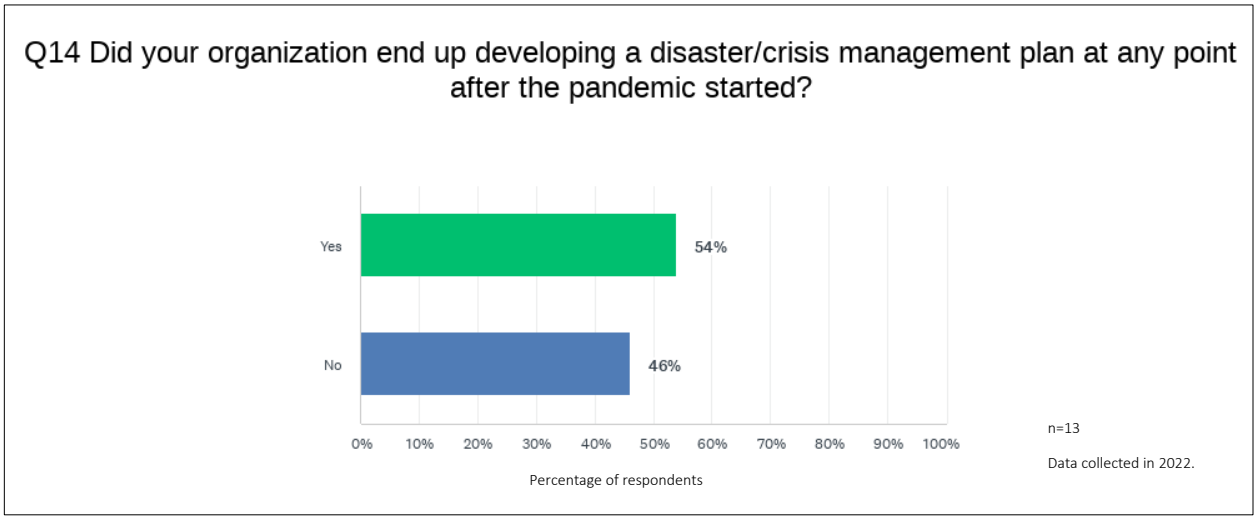

Figure 18: Development of a disaster plan after the pandemic started

Using a Likert scale, Question 15 assessed how respondents felt about the importance of having a comprehensive disaster or crisis management plan going forward. As shown in Figure 19, when combined the vast majority (46%) felt that it was very or extremley important to have a plan. Another 46% felt that it was somewhat important to have a plan. Only 8% felt it was not very important and no respondents indicated it was not at all important to have a disaster plan in place.

Figure 19: Sentiment on the need for a disaster plan

Pre-crisis: Disaster Preparation and Planning (For respondents with a plan in place)

Question 16 is the first question in the question set for those who responded affirmatively to Question 10. Respondents were asked if their organization's disaster or crisis management plan included an epidemic or pandemic response. As shown in Figure 20, 14% of respondents were unsure if their organization's plan included a pandemic response, 43% confirmed that theirs did, and another 43% confirmed that theirs did not include an epidemic or pandemic response.

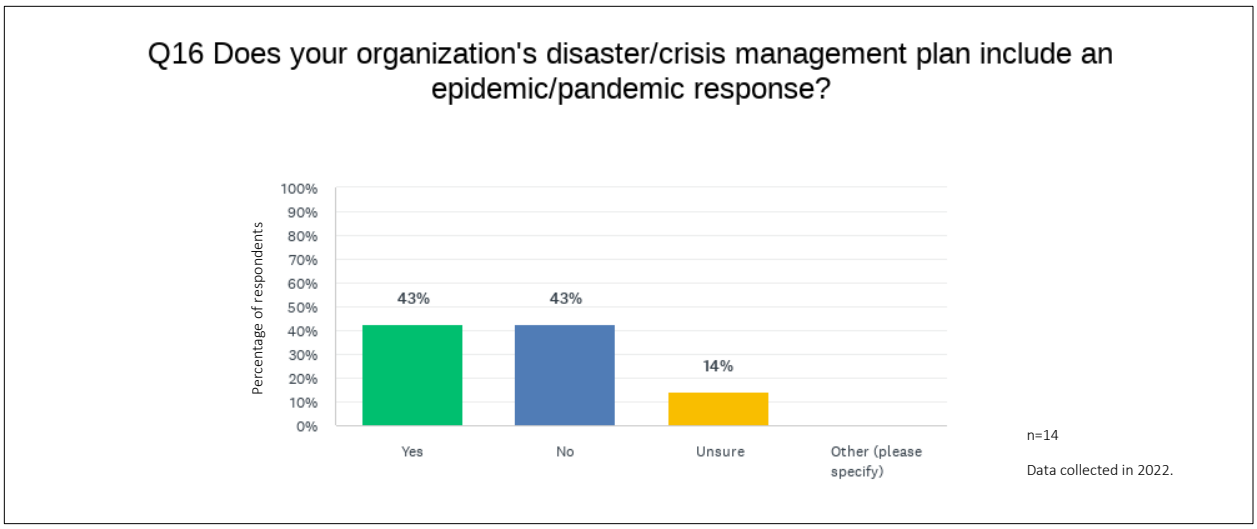

Figure 20: Inclusion of an epidemic/pandemic plan in the disaster plan

Question 17 probed further and asked particpants if the disaster plan included an epidemic or pandemic response due to lessons learned from prior public health emergencies that affected Toronto historically including H1N1 (2009) and SARS (2003). As shown in Figure 21, 43% of respondents confirmed the epidemic/pandemic response was included in their organizational plan due to lessons learned during previous public health situations while 21% responded that they were not sure. The question was not applicable to 36% of participants. No respondents answered no specifically.

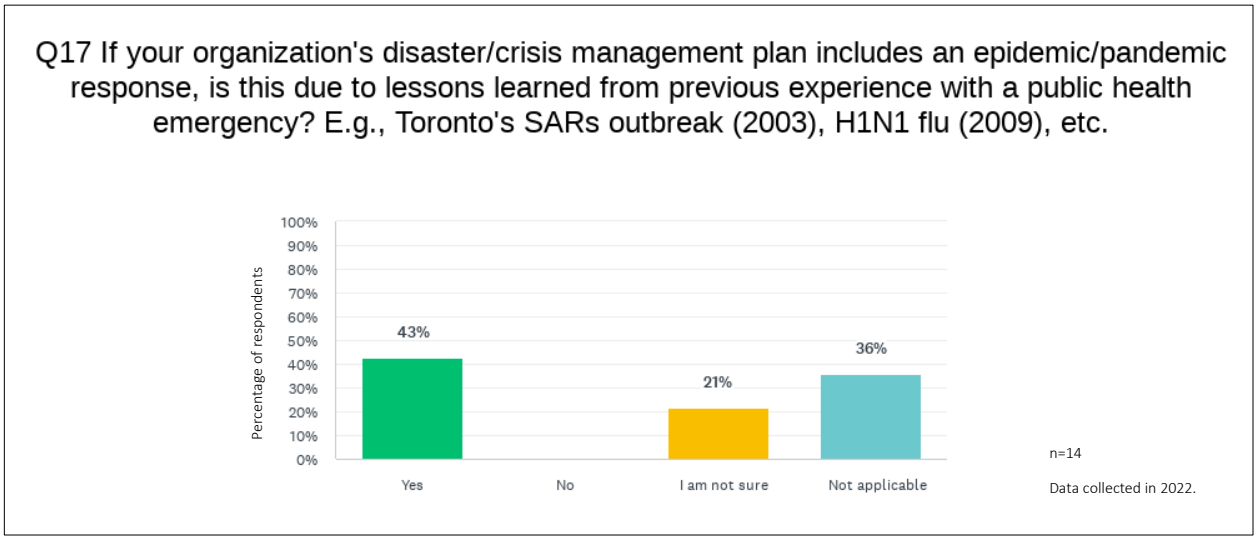

Figure 21: Lessons learned from prior public health emergencies

Question 18 repeats the same question that was asked of the other cohort in Question 11. This question is directly related to the main research question and asked respondents how prepared their organizations were for the COVID-19 pandemic. No definitions were provided for the scale of preparedness and the estimation of preparedness level was subjective. A Likert scale was used and five assessments of preparedness were presented.

As shown in Figure 22, the largest group (43%) of respondents felt moderately prepared. The second largest group of respondents felt completely unprepared (21%). Of the remainder, 14% felt quite well prepared, another 14% felt a little prepared, and 7% felt extremely well prepared.

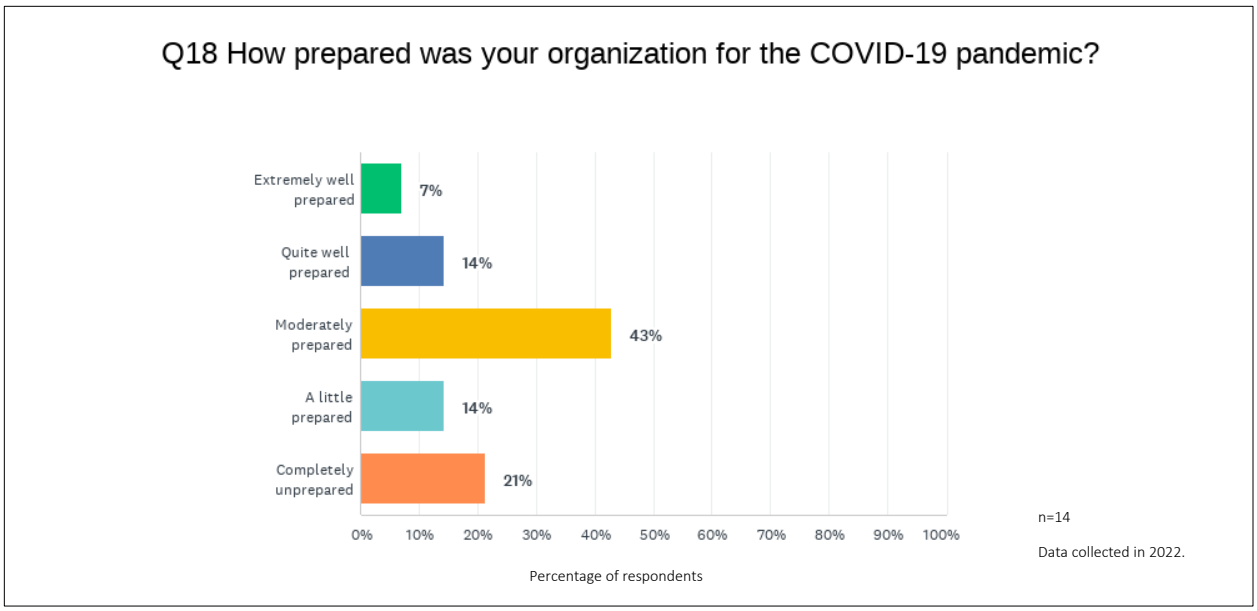

Figure 22: Perception of preparedness level (with a plan in place)

Question 19 probes further into the specifics of the organization's internal processes and asked respondents if there was a designated team responsible for handling crises. As shown in Figure 23, 64% of organizations had a designated management team and 36% did not have a designated management team responsible for handling crises.

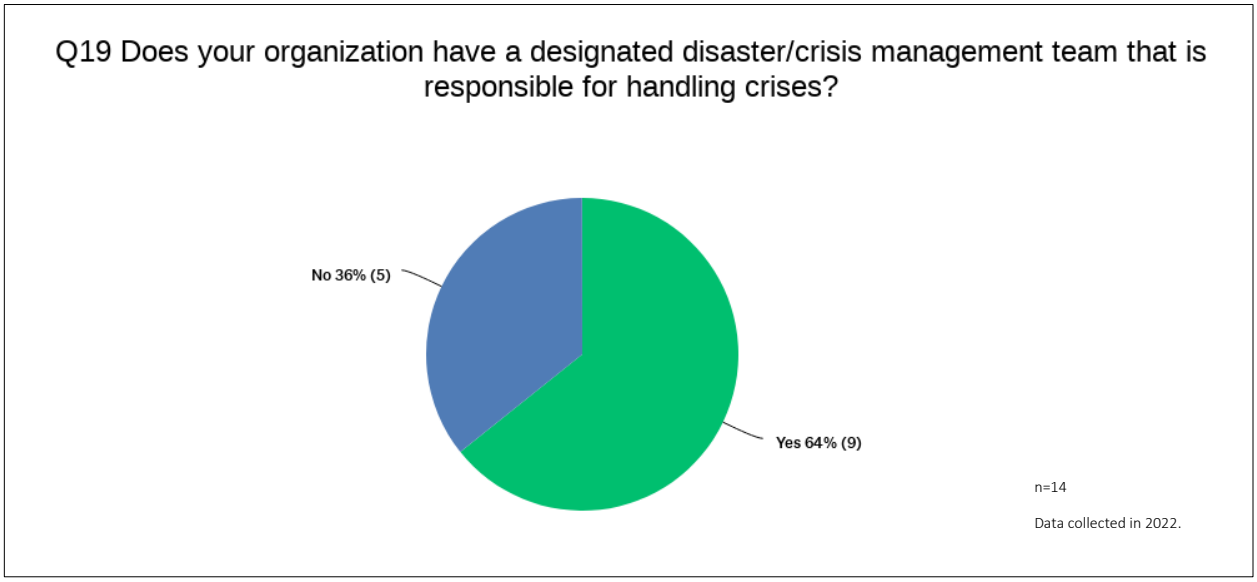

Figure 23: Designation of a disaster management team in the organization

Question 20 was an open-ended follow up to Question 19. It asked respondents for the specific job title or role of the person responsible for managing the disaster/crisis team. The open-ended answers and frequency mentioned are shown in the list below.

1. Executive Director (3)
2. Director of Operations (1)
3. Director of Operations & Programs (1)
4. Vice President of Human Resources (1)

5. Senior Manager of Programs (1)
6. A group made up of Senior Leaders (1)

One (1) respondent noted that their organization has a crisis management team for mental health crises but not for pandemics. The remaining respondents (5) did not have a disaster management team.

The Organization's Role in the Community

Question 21 brought both respondent cohorts back together to answer the remaining survey questions.

Question 21 was related to participants' opinions about how the COVID-19 pandemic changed their perspective of the role that their organizations played as a critical resource for the population they serve and/or in the wider community. Participants were provided with 5 answer choices using a Likert scale.

As shown in Figure 24, the largest group of respondents (30%) felt their opinion/perspective was changed a moderate amount. The second largest group (26%) felt that their opinion/perspective changed a lot. Another 22% felt that the pandemic changed their opinion about their organization's role a great deal. Of the remaining participants, 11% felt that their opinion changed a little and another 11% responded that their opinion did not change at all.

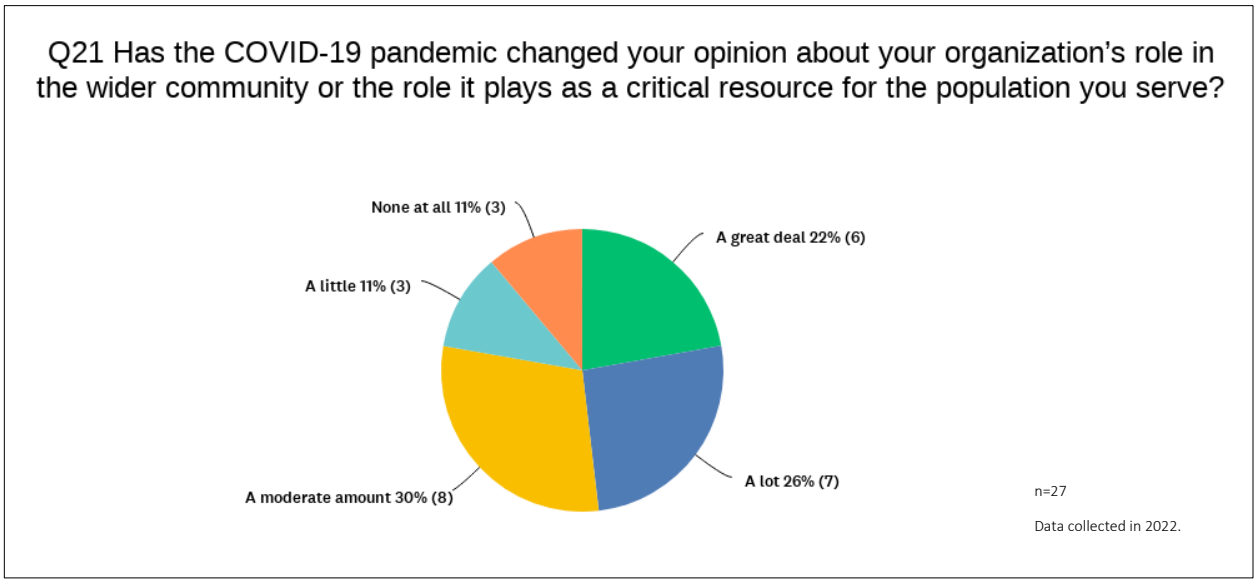

Figure 24: Perception of your organization's role in the community and the purpose it serves

Question 22 asked participants to consider the role nonprofits and governments play during disasters and if they thought there was a larger role for the nonprofit sector to play in crisis planning within the government. Respondents were presented with 5 answer choices using a Likert scale. No respondents disagreed or strongly disagreed with the question. As shown in Figure 25, 48% strongly agreed, 33% agreed, and 19% neither agreed nor disagreed.

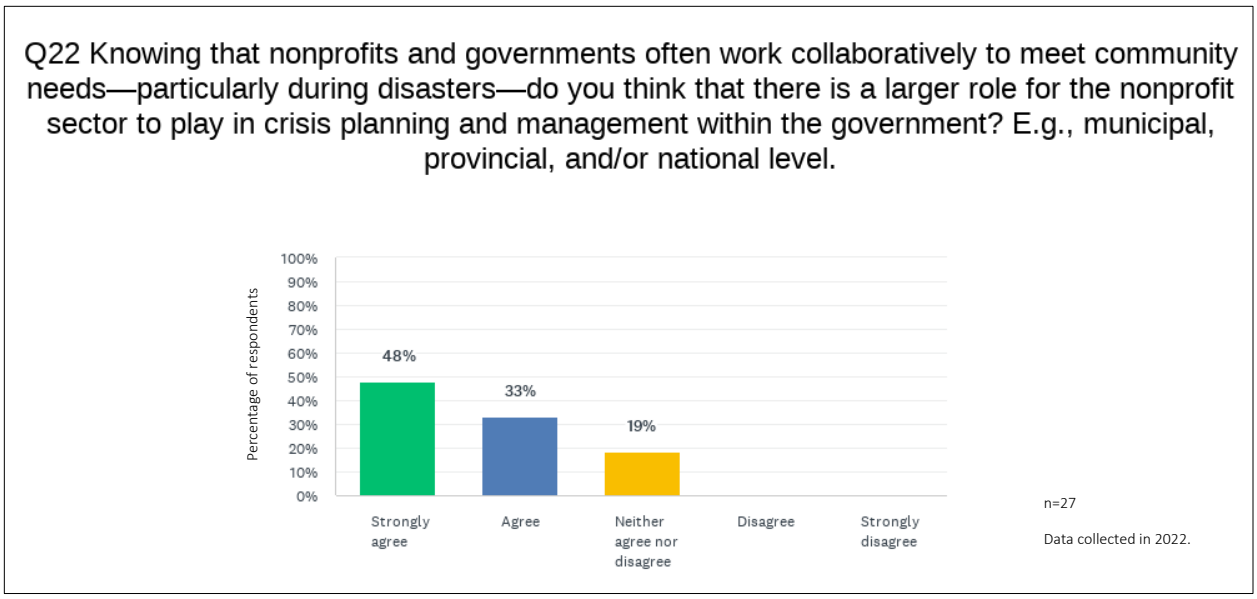

Figure 25: Perception of the role that the nonprofit sector can play in disaster planning and management

Building Capacity and Resilience in Toronto's Nonprofit Sector

Question 23 was an open-ended question and required participants to responded in text format to the following question, "What support, resources, and/or training opportunities would help to strengthen your organization's disaster preparedness and planning competencies? E.g., designated government grants to create a disaster plan, an online disaster/crisis resource developed for nonprofits, etc.". The responses were analyzed for common themes and labeled with 7 identity tags as outlined in Figure 26. Funding was the most frequently cited support that participants felt would strengthen their organization's response, followed by professional resources, training, and technical support.

Figure 26: Types of support that would help strengthen organizational disaster planning and preparedness

Question 24 was an open-ended question that invited participants to share the most important operations-related insight or practice that their organization learned during the pandemic. The responses were analyzed for common themes and categorized into twelve smart practice areas as shown in Figure 27.

The most common practice mentioned was creating an organizational work from home policy (13), followed by implementation of health interventions (12) which consisted of following public health measures, establishing vaccination policies, and/or using infection control in their places of work. New and improved IT systems including switching to cloud-based platforms (10) were the next most common practices cited; next were the organization's instituting flexibility and adaptation (7) as key tenets of practice, and a transfer of services, operations, and client programming into a virtual environment (5). Open communications and transparency (5) were mentioned as smart practices that helped organizational operations during the pandemic. The remainder of themes mentioned by respondents focused on staff health and wellbeing (3), instituting people-first policies (3), having staff redundancy (essentially having a back-up or understudy for essential and front-line roles) (2), establishing new partnerships (2), working on long-term organizational planning (1), and financial measures such as developing a furlough policy (1), reducing staff travel (1), and incorporating incentive pay (1).

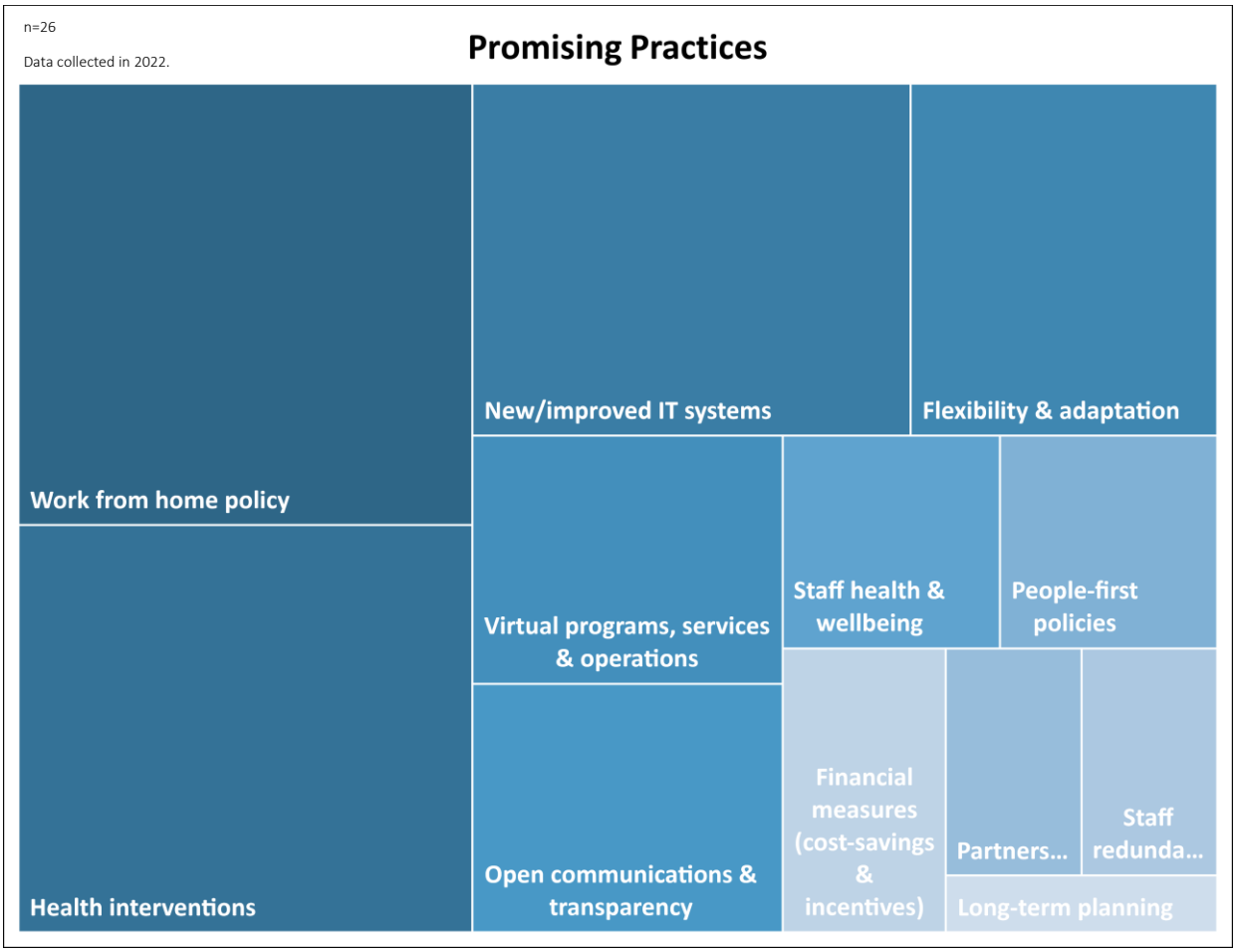

Figure 27: Promising practices that organizations tried during the COVID-19 pandemic

Looking Ahead

Question 25 invited participants to look toward the future and inquired about how their understanding of risk had changed since the COVID-19 pandemic started. Respondents were provided with 5 answer choices using a Likert scale.

As shown in Figure 28, the largest group of respondents indicated that their understanding of risk of a natural disaster or public health crisis had changed a moderate amount, 31% responded that their understanding had changed a great deal, and another 31% indicated their understanding had changed a lot. Of the remaining respondents, 4% indicated their understanding had changed a little bit. No respondent replied that their understanding had not changed at all.

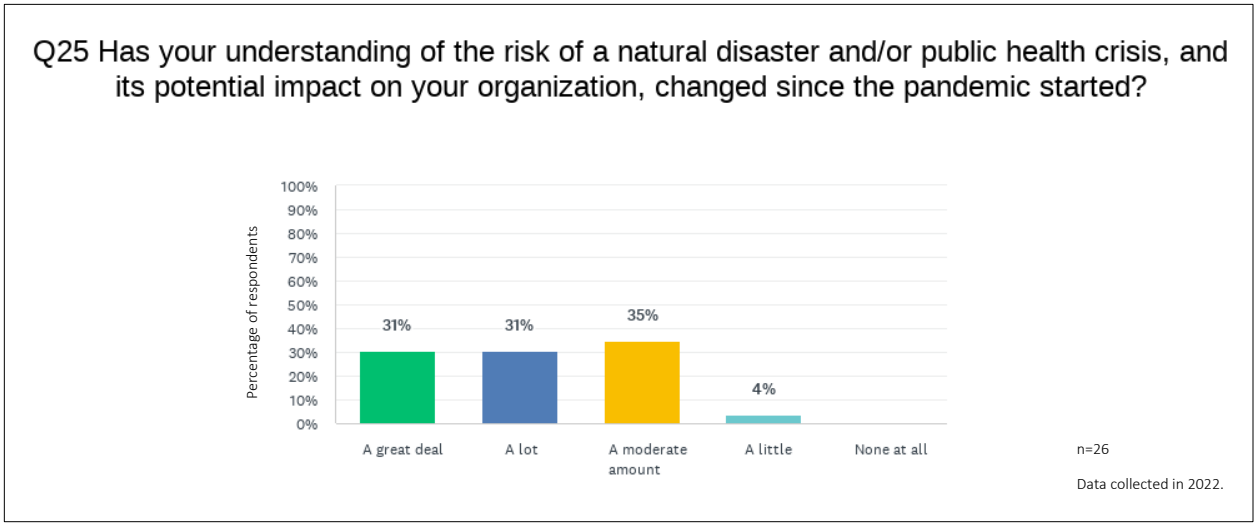

Figure 28: Changing perceptions of risk

Question 26, participants were asked to reflect on future potential disasters or crises and the level to which each concerned them in relation to their organization's ability to provide programs and services while facing these threats. Respondents were able to choose as many answers as applicable. Six disasters

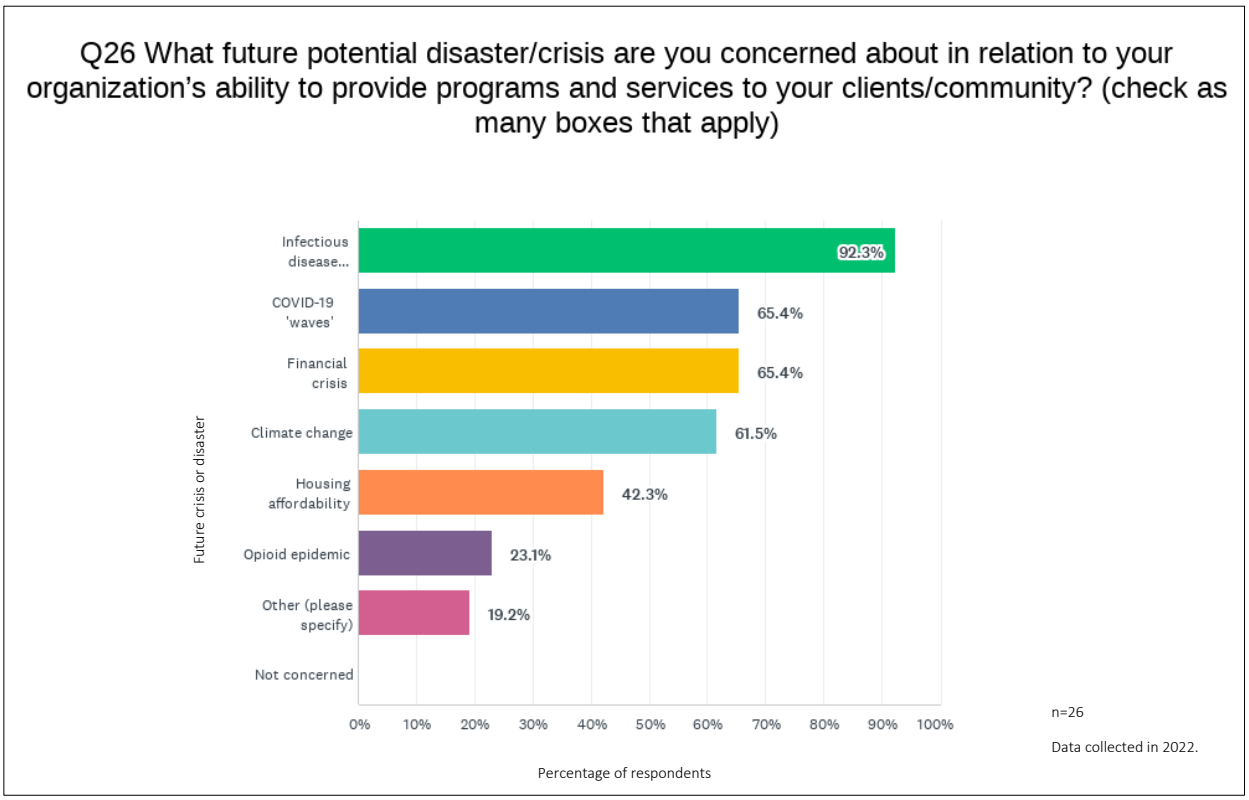

Figure 29: Concerns about future potential disasters

or crisis scenarios were presented to respondents, and they also had the option to write in their own concerns. As shown in Figure 29, the most cited concern was the potential arrival of another infectious disease epidemic or pandemic (92%).

Next were concerns of future 'waves' of COVID-19 emerging (65%), a global financial crisis (65%), climate change (61.5%), housing affordability (42%), and the opioid epidemic (23%).

Five participants wrote in open-ended responses of their concerns which included war, a new refugee crisis, a multi-day power outage, children's learning loss due to pandemic school closures, and persecution of LGBT persons. No respondents indicated that they were not concerned about future potential disasters or crises.

Summary

The survey research findings presented in Chapter 4 were collected from 28 participants working in social service nonprofit organizations in Toronto through an online survey method. The results indicate that a significant proportion (over two-thirds) of the responses were from staff members employed in organizations with a long history (26+ years) in the sector. However, there was a substantial variation in other demographic measures such as annual budget, number of staff, government funding, and service areas and priorities. A substantial proportion of the organizations (82%) had a strategic plan, while only half had a disaster management plan in place prior to the COVID-19 pandemic. Nevertheless, a considerable number of organizations that did not have a disaster plan developed one during the pandemic. The results also show that the organizations were evenly divided regarding the essential designation assigned to them by the Ontario government during the pandemic.

The majority of the organizations felt moderately prepared for a disaster, and this sentiment was similar among those who had a disaster plan in place and those who did not. The pandemic has impacted the perception of organizational leaders about their role in the wider community and has altered their understanding of risk. A majority of the respondents expressed concern about the potential impact of future pandemics, more waves of COVID-19, and a financial crisis on their ability to continue delivering programs and services to their clients. Almost all respondents believed that the nonprofit sector could play a larger role in disaster management in collaboration with their communities and the government, given sufficient access to funding, resources, and training in disaster management and risk reduction. The survey findings indicate that organizations are open to assuming more leadership roles in the community disaster response and value having a disaster plan and being more prepared for future disasters. The qualitative data from the survey and interviews also highlights several promising practices, which will be discussed in the Discussion and Analysis chapter.

Introduction

The following chapter describes the responses given by participants to questions asked during the semi-structured interviews and highlights the commonalities, deviations, and key themes that arose during the conversations. The interviews aimed to elaborate and provide nuance and a deeper understanding of the data collected during the survey and expand the breadth of the study to further answer the research questions. Seven community leaders were interviewed for this part of the project; their answers have been both anonymized and disaggregated and they will be referred to as 'participant 1', 'participant 2', and so on. In some instances, the interviewee did not answer the question—in all cases this was due to the researcher skipping the question (e.g., ran out of time, conversation followed an emergent path, etc.) during the interview and was not due to the interviewee declining to answer.

The interviews were analyzed using thematic analysis keeping in mind the main research question: What factors affect the ability of social service nonprofit organizations in Toronto to deal with disasters? This section begins by listing the key themes that arose from the interview data. Next, it covers the research questions asked to the participants and a summary of participant descriptions and responses including commonalities and deviations. Participant quotes are included to further highlight the themes and participant sentiment.

Emergent Themes

The participants, despite their different roles and organizational mandates, shared many of the same sentiments and experiences of the COVID-19 pandemic. There were common themes that emerged during the interviews; however, the most prominent ones are shown below in Figure 30.

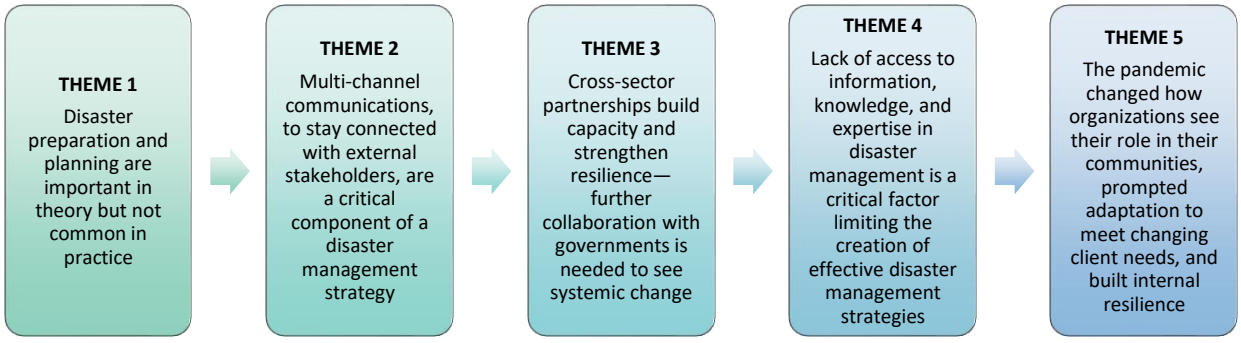

Figure 30: Themes that emerged through the qualitative data and thematic analysis

Interview Findings

Theme 1. Disaster preparation and planning are important in theory but not common in practice.

Q 1. What specific measures did your organization have in place for a disaster that helped with your COVID-19 response?

Responses varied between participants in terms of their perceived levels of preparedness from *completely unprepared* to *quite well prepared* as was captured in survey questions 11 and 18. All organizations took a reactive, not proactive approach inasmuch as they waited until after March 13th lockdown in Ontario to institute pandemic adaptations. Six out of the seven interview participants did not have any specific disaster management measures in place at their organizations that helped with their pandemic response. Of the six, three had some sort of plan but they were either not used during the pandemic or were immaterial as they only included risks such as financial, public relations, or business-related contingencies.

No participants recalled practicing any scenario planning, crisis training, or disaster simulation exercises at any time prior to the COVID-19 pandemic. One participant felt that their prior experience dealing with SARS in 2003 and H1N1 in 2009 in a similar environment gave them a level of preparedness to manage the COVID-19 pandemic quite well.

The following quotes from participants illustrate their organizational approach to disaster preparation and any measures that were in place before the COVID-19 pandemic:

> ***Participant Quotes***
>
> *There wasn't any preparation, there was some kind of emergency preparedness plan sitting on the shelf somewhere for other issues, but not a pandemic. So, there was a lot of chaos, I think, in terms of trusting people to work from home, figuring out what that would look like. ~Participant 3*
>
> *Our approach has always been to have a business continuity plan, which is required for us to have as part of our government funding. What we didn't have was a more specific plan that thought about things like pandemics and other public emergencies and disasters. ~Participant 4*
>
> *I don't think [the organization] did anything beforehand. It was a very small team. They didn't have a lot of policies and that kind of stuff. I doubt that they did much in the beginning. ~Participant 5*
>
> *We had gone through SARS previously, so we had that organizational memory. We experienced SARS and H1N1; we are required to have a response, and that's part of our licensing, and our license to operate as a [certain type of nonprofit organization]. ~Participant 6*

Q 2. **Did your organization respond to early (pandemic) warning signals or wait until after the March 13, 2020, lockdown in Ontario? Was the action proactive or reactive? Are there any early indicators that you plan to watch going forward?**

All seven participants responded that their organizations did not respond in a proactive manner to any early (pandemic) warning signals, and that they waited until March 13, 2020—when the first lockdown started in Ontario—to react. In terms of watching indicators and early warnings going forward, 50% (3) of the participants plan to follow the news from Toronto Public Health and/or various levels of government to keep up to date on relevant warnings. The other 50% (3) of participants did not plan on following any specific indicators or entities. One participant was not asked this specific question and thus was unable to respond. As discussed by the participants, the following quotations identify when their organizations first responded to the pandemic threat:

> ***Participant Quotes***
>
> *Did we respond to early warnings? Probably not in the way that we should have or could have. ~Participant 7*
>
> *I think it was the second week of March that we shut down. I think it was when the NBA had shut down. That was kind of like the straw that broke the camel's back. And so, from that point, we kind of shut down after that. ~Participant 1*
>
> *We waited until after you know, I mean, we were following the news. And we were talking about it as a director group and wondering what the impact was going to be. But we didn't*

implement any public health measures or distancing or masking or anything prior to the lockdown. ~Participant 4

We are going to continue monitoring the Government of Canada and the Toronto Public Health pages. Because that was helpful in informing us on how we can facilitate our response. Yeah, that's something I've been keeping on top of and just understanding the information that's given to us from the government. ~Participant 1

Theme 2: Multi-channel communications, to stay connected with external stakeholders, are a critical component of a disaster management strategy.

Q 3. How did you communicate with your constituents/clients during the pandemic, particularly at the beginning? What type of communication worked well and what didn't?

The researcher asked participants how they communicated with their clients and community members during the early months of the pandemic. Interviewees noted that communication was particularly challenging for marginalized and itinerant groups such as the homeless, refugees, and those who were recently released from the corrections system. Non-English-speaking communities and new immigrants also had challenges, as did people without access to the internet at home.

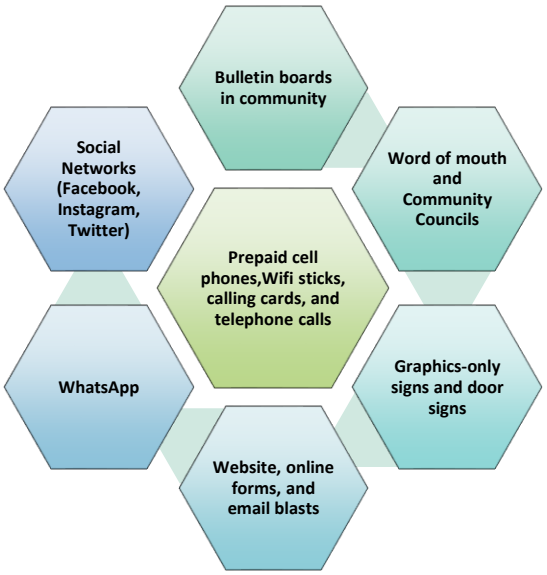

Figure 31: Types of communications used by organizations during the COVID-19 pandemic

All seven interview participants described using a variety of channels within their organizations to stay connected with their clients/community members. Each organization used mediums that 1) they had easy access to, and 2) made the most sense for the demographic and communities they serve. In some cases, the staff at organizations with more transient or at-risk populations, made great effort to provide the means to connect and communicate with their clients/community members. Two participants noted that the lack of payphone infrastructure in the City of Toronto poses a challenge, especially during disasters, for certain groups. Others noted that with the libraries closed, many of their clients/community members had no access to their normal modes of communication including email and free internet access. Many participants described a resurgence of telephone calls. Figure 31 outlines the communication channels participants used at their organizations.

Some of the open-ended responses that represent helpful ideas for communicating with clients in a public health disaster and demonstrate the challenges they faced are captured in the excerpts below:

Participant Quotes

We stuck with digital email using our platform, updating the website. There was really no phone accessibility for the public to reach us. ~Participant 2

We're pretty embedded in the community and we've been around for a long time […] we had some community councils—we took an approach of staff that have really good relationships with particular sites, connecting with those community members. ~Participant 4

What we saw was absolutely a resurgence of the telephone. Actual conversations with people. […] We work with a large vulnerable population so communication by email was not always possible. […] That was a struggle for a long time because we work with such a high population of individuals living below the poverty line […] and a lot of them don't have phones. If we were talking to one, two, or three people in a particular building we'd ask "can you make sure that you connect with other participants that also live in your building? Please put this messaging out, use the bulletin boards within your building to pass along this information". ~Participant 7

There was communication done online to social media and everything, but a lot of our clients are extremely marginalized people, they're not going to be on social media. Phone messages were a good direction […] but that was big chaos. I know a lot of clients complained that they were not getting callbacks, because we didn't have a receptionist. […] I ensured that my counseling team had phone cards, cell phones and internet sticks that we could give to clients so they could participate in programming. ~Participant 3

We have a lot of refugee claimants and English is their third or fourth language. Written was not the best. So, we used a lot of posters. ~ Participant 6

Theme 3: Cross-sector partnerships build capacity and strengthen resilience—further collaboration with governments is needed to see systemic change.

Q 4. What role do you think charities and nonprofits could/should play in the municipal or provincial government's disaster and crisis response?

With this question, the researcher asked participants how they felt about the role nonprofits and charitable organizations could/should have in the City of Toronto's disaster response. They were asked to explain whether they thought the nonprofit sector should be more involved with Toronto's Office of Emergency Management or other disaster management working groups. Of the seven interviewees, one was not asked this question. Of the rest, one participant explained that nonprofits generally needed to be more self-reliant and less dependent on the government for their disaster preparation and management requirements; however, they also felt that some CBOs representatives would be well-suited to sitting on the boards of disaster response groups as they deal with crises daily.

The five remaining participants felt that the nonprofit sector should be more involved in city planning and government initiatives and that there was a disconnect at the current moment. They explained involvement could be strengthened by utilizing a more formalized or structured process, by having people with 'on the ground' or lived experiences (homeless people, newcomers, etc.) participating in decision making along with the city representatives, and by continuing successful cross-sector initiatives that started during the pandemic. Two of the participants worked for organizations that participated in a joint

United Way Greater Toronto/City of Toronto pandemic effort (Community Clusters) and felt that these were a successful example of the public and nonprofit sectors working together to make positive impact in a timely and effectual way.

Participant sentiment and thoughts around the role the nonprofit sector plays in the city's disaster response are highlighted below:

Participant Quotes

Without a doubt—the ability to meet weekly and to have the same players at those meetings was very helpful because then it made connections really easy and just having all the different players at the table was very helpful. I think that was one really great thing. We were able to access resources, were able to mobilize the community and set up different initiatives all pretty fast. So, it was very efficient. ~Participant 1 (on the Community Clusters)

[…] when it comes to responding to a crisis, or just dealing with some of the complex problems that we face as cities and as a country, we often don't integrate the nonprofit sector as much as we could in doing that work. They are the connection to community. And the government will do this in a certain way. They'll come in, and they'll build a strategy, and they want to get down to community. And so how do they do that? They go to the nonprofit sector to talk to community members to try to build government strategies. But I think a more formalized process or structure for that would probably make good sense. ~Participant 4

I would have loved to have been part of some of those some of those tables […] we deal with disasters all the time. We deal with crisis all the time. When I was in mental health, we dealt with a crisis every single day, every single shift. […] some people are really, really, good at it and some people aren't. ~Participant 6

We were seeing decisions made by the city that just didn't make sense because the conversations were not happening on the ground with the organizations. They were happening in some office somewhere. But including nonprofit organizations in those conversations would have made a difference. A much greater impact with supporting our community residents, particularly newcomers who faced significant challenges. We're also a part of the Toronto Neighborhood Centers and they are very much involved in some of those conversations. But they're high-level conversations. They're not getting down to specifics. I think nonprofits have a vested interest in the health of their community. ~Participant 7

Theme 4: Lack of access to information, knowledge and expertise in disaster management is a critical factor limiting the creation of effective disaster management strategies for organizations in the nonprofit sector.

Q 5. What/where are the biggest gaps in your organizational knowledge regarding disaster preparedness? Besides funding, what specific types of education, training, or opportunities would improve your organization's disaster readiness?

Interview Question 5 asked the participants to describe the biggest gaps or deficiencies in their organizational knowledge regarding disaster preparedness and what might help them improve their situation. One interviewee responded that they had some gaps at the beginning of the pandemic but had been able to resolve them and currently did not have any gaps/deficiencies to speak of. The other six interviewees were able to identify the areas they felt were most deficient and where efforts should be placed—their answers were quite varied and included the opinions listed below:

1. Lack of modern technology and infrastructure—investment via technology grants is needed.
2. Absence of information on what to do in a disaster created specifically for the nonprofit sector (and not for a business) and nowhere to go/call for guidance—a dedicated source of information for the sector would help.
3. Absence of internal disaster management processes and policies.
4. A gap in how various government ministries work together and communicate which leads to confusion around responsibility for service.
5. Limited staff capacity to take on a disaster management portfolio; and paucity of *pro bono* consulting to assist nonprofits without internal capacities.
6. Absence of disaster management expertise, guidance, and resources available.
7. Lack of funding (grants) for disaster management consulting (this was mentioned by a few interviewees).

Some of the open-ended responses that represent important opinions around gaps in education, training, opportunities, and resources for nonprofits are identified in the participant quotes below:

Participant Quotes

I was perusing the City of Toronto, Toronto Public Health, and Government of Canada websites and there was a lot of guidance for businesses, but not so much guidance for how nonprofits operate. […] But a lot of times, we had questions. […] there wasn't a body that we can reach out to that could answer some of those questions in terms of what kind of plans we needed to have in place, or what we could and couldn't do. ~Participant 1

Our absolute biggest downfall and biggest gap is technology. […] I know enough nonprofits that are working with systems that are just so far behind. ~Participant 2

I came from an HIV/AIDS organization, where very fortunately, the Ministry of Health's AIDS bureau is very good at flagging these kinds of needs well in advance, and there is a lot of opportunity to share resources, because there is centralized resource development in a body that shares that [role]. So, then the organizations don't feel a burden, given that they don't often have the structures to build these massive scale plans [themselves]. ~Participant 3

We don't really know someone who can take stock of what a disaster management plan for this organization should look like, given all our program work, because it's not just about a

building, it's also about the work we do and the people we serve, and all of that. But the biggest challenge would be the resources and not having funding to actually spend money to do something like that […]. All of that needs money, and there isn't any investment in doing that. ~Participant 3

One thing that we still don't do well in human systems is sort out how to work at the intersection of multiple ministries and spaces. And because the work of child welfare is inherently interdisciplinary—it bumps up against housing, poverty and mental health and substance abuse—it is really hard for us to know how we need to mitigate a crisis when we don't know what is or isn't being done by those other sectors and systems. […] so how do you develop your plan when it intersects with five other plans? And you don't know what those five other plans are? ~Participant 4

I think there's going to be some variance depending on the organizations and what they're going to need to be able to get it done, it's going to be different, because the little guys spinning their wheels that are living on annual funding with no core budgets that are trying to make things work, they don't have the time for creating pandemic plans—they can barely deal with the crisis of the day. […]. I think that knowledge sharing from how people got to where they are today is really important. […]I would hope that it wouldn't be just 'here's your template, here's how you build your plan. This is how much money we have for this fiscal—good luck'. I hope it would be creating working teams of people in similar sectors. What are some case studies that work? Where did we really fail? How does that apply to you and creating more knowledge sharing and working group scenarios where people can learn from each other and not have to reproduce the wheel? Because templates are so sterile and often don't really help you. I feel like it's often more useful to talk to somebody who lived through it and build on that together. ~Participant 4

Theme 5: The pandemic changed how organizations see their role in their communities, prompted adaptation to meet changing client needs, and built internal resilience.

Q 6. A) How specifically has the COVID-19 pandemic changed your perception of your organization's role in the wider community and/or the role it plays as a critical resource for the population you serve?

Participants were asked to expand on their answer to Question 21 from the survey about the change in their perception of the role their organization has as a resource for their clients and/or in the wider community. Of the interviewees, six out of seven agreed that their perspectives had changed. One interviewee felt that their perspective had not changed as they had been focused on internal needs and preservation. Of those whose perspectives had changed, interviewees mentioned a variety of ways in which these changes manifested. For example, the way they think and speak about their work changed, they realized how dependent clients/community members were on them for services, and they realized that they could act as a conduit between different organizations to meet a particular need.

The following quotes from participants illustrate their experiences with changing perceptions of their organization's role in the community:

Participant Quotes

We had this program working with women who are in sex work trying to exit sex work, and most of the women are very, very marginalized. Some of them were struggling with very

severe depression, suicidal ideation, and very high overdose risk—some overdoses did happen. But there were staff who still went in the community to meet with them somewhere in a safe space, so they could stay in touch with them. And I think that, for me, was a strong testament to the role of the work that frontline staff do. Because these clients could have very easily been forgotten. Nobody would care—many of them are living in such isolation that no one would care. But often they [our staff] found them, and they stayed in touch with them. ~Participant 3

We work really hard to be good neighbours. So, it didn't really change us in the community whatsoever. We were just looking to make sure that we were surviving and ready to keep our doors open. ~Participant 6

It's always been about the programs and services but now it's like, hold on a second, what we're missing in the conversation is the issues or social impacts that we're addressing through those programs and services[…]. As an organization we address these issues within our community. And we do that through the services that we provide. It's a slight shift, but it's a shift enough that it changes the vision of the organization. ~Participant 7

Q 6. B) Have new organizational priorities or programs arisen due to new insights you have gained into your community because of the pandemic?

Many participants described how their programs and services had changed or expanded to better meet the needs of their communities. They mentioned that they had requests for new programs or services based on specific needs that arose during the pandemic due to social isolation, school closures, and other hardships. One participant described completing a needs assessment during the pandemic to ensure their organization was being as responsive as possible. New programs and services the participants described included online tutoring for youth, virtual mental health support, outdoor children's programming, and assistance with food vouchers.

As discussed by the participants, the following quotes demonstrate changes and innovations their organizations implemented during the COVID-19 pandemic:

Participant Quotes

The first thing that we learned was there's obviously a high need for mental health supports. And that was in the form of one-on-one counseling, virtual counseling, or one-on-one virtual counseling. We hired a social worker for that, to work online and in person. ~Participant 1

We partnered with Sick Kids Hospital and did a pilot project to deliver [our children's program] in parks […] it's led to a whole expansion of 'on the land' programming and we want to do a summer camp. Yeah, it will definitely be ongoing. ~Participant 4

The program team reinvented the way they work with new programs. And we're helping two or three times the number of people because it doesn't cost as much to do some of those things as it does to move someone across the world. […] we're getting more media which means we're getting way more cases; our cases are probably going to be 10,000 this year, and a couple years ago, it was 3,000. So, there's a lot more people requesting help as well. ~Participant 5

Q 6. C) Despite the hardships, do you think that the COVID-19 'experience' built capacity and resilience in your organization and/or community? If so, how did the pandemic experience do that?

In this final question, participants were asked whether the experience of the pandemic, despite the hardships, had built organizational capacity and/or resilience. Two of the interviewees were not asked this question due to time limitations. The other five participants all stated that the pandemic did build capacity and resilience in their organizations in a few different ways. They described positive changes to the way staff members are supported, innovative programming for their clients, improvements to the way people work, co-operation and mutual assistance between organizations on funding applications, the importance and value of virtual programming especially for youth, and the benefit of networking and working groups.

The following excerpts from participant interviews illustrate their experiences with building organizational capacity and resilience during the pandemic:

Participant Quotes

We really took stock of where our staff are at, understanding that they're all going through something, too. And you know, even though this work is very important, and that the community relies on [the organization] for some things, we recognize that our staff can't pour from a half empty glass. We had to ensure that our staff were in a good place […] just understanding that if our team is having a difficult time that bleeds into the work that they do with the young people. ~Participant 1

Now everybody is a little bit more transparent with information. […] How did you do that? What are you doing? I'm filling out this grant application—people were sharing grant applications! Like, I got this [Ontario grant] funding. Here's my grant that I wrote that was accepted.[…] For as much as it [the pandemic] took from us, it gave us a lot too, in different ways. Are they as tangible as dollar figures and participation numbers? Not always. Are they as valuable? Yeah, for sure. ~Participant 2

I definitely think that the pandemic introduced a ton of stress and chaos and disruption. And that shock to the system created a whole bunch of innovation because we needed to learn how to move in ways that we hadn't moved for a while […] I think it forced innovation in ways that are timely and fantastic and taught us how to do service delivery in the 21st century, in the context of a globalized world, and digital transformation, and that we can work from anywhere. It changed a lot of perspectives of leaders across multiple sectors around how we can do our work and what's best for our staff and what's best for our community. […] We were just raking it in, but the little guys had to prioritize, writing a grant to serve their community over buying new computers for their staff […] we did something that others maybe didn't […] we all went together, we banded together 18 [of our] organizations, and we wrote grants together. And we helped the little guys in that group of 18 to get what they needed. ~Participant 4

The United Way and City of Toronto staff, from all the community clusters across the GTA, we'd get together regularly and share what's happening in this community. If there's another community that's having similar issues, they share their practices and what they're doing. It continues to be a great source of information, ideas, and considerations. For me, the community cluster tables and the TNC tables are what helped me survive [the pandemic]. ~Participant 7

Summary

Interview participants were asked to reflect on their experiences working with a social service organization during the COVID-19 pandemic and their responses were significant, rich, and illustrative. Despite their varied backgrounds and experiences, and the objectives of their respective organizations, the participants' responses exhibited several similarities and convergences, from which five prominent themes emerged.

The findings revealed a lack of clearly defined measures, processes, and actions related to disaster planning and preparation, even when organizations had in place a disaster or business continuity plan. Furthermore, the subjective perception of 'preparedness level' indicated by each participant in the survey was not deemed a dependable indicator of an organization's actual measures and actions towards disaster planning and preparation. All interviewees concurred that their organizations implemented multi-faceted communication strategies to stay connected with clients and community members during the pandemic. Additionally, all participants demonstrated a strong resolve to ensure the delivery of messages and an unwavering willingness to do what was necessary to meet the needs of their clients, which was also reflected in their organizations' adaptation and innovation practices during the pandemic.

In line with most survey responses on the same subject, all interview participants expressed their belief in the existence of a gap between the nonprofit sector and the public sector, and a desire for stronger, more collaborative relationships to be established. Finally, the participants identified areas for improvement and suggested that investments should be made to enhance the technical transformation of civil society, along with the provision of education, training, and knowledge sharing opportunities to reinforce the disaster preparedness of community-based organizations.

CHAPTER 6: DISCUSSION AND ANALYSIS

This chapter serves to interpret and establish a coherent connection between the literature review, primary research, and findings, thereby facilitating a comprehensive understanding of the research questions and any ancillary information gathered during the research. An exploration of these elements enables the research questions to be effectively addressed and provides insights that inform the subsequent section, Chapter 7: Recommendations.

Answering the Research Questions

Primary Research Question

The primary goal of this research project is to answer the following question: What factors affect the ability of social service nonprofit organizations in Toronto to deal with disasters?

The present study was initiated with the overarching hypothesis that the existence of a formal disaster plan would constitute a significant factor in an organization's ability to manage a disaster. However, through an examination of both qualitative and quantitative research, as well as a thorough review of the relevant literature, it has been determined that this hypothesis is flawed. A formal plan, it has been discovered, represents merely a minor aspect of the broader disaster preparedness framework. When viewed within the context of the literature review, the primary research findings demonstrate that the preparedness status of social service nonprofit organizations in Toronto is comparable to that of similar organizations in other jurisdictions, such as the United States and Portugal. In other words, such organizations are making the most of the limited financial and human resources at their disposal, yet there exist significant deficiencies in their practices. The initial theme (Chapter 5, Theme 1) derived from the qualitative research data, which is that disaster preparation and planning are viewed as vital in theory but are not commonly implemented in practice, has been identified in conjunction with the data collected and is consistent with the trends observed in nonprofit and community-based organizations in other countries.

As per the findings of the literature review and primary research, numerous factors influence the efficacy of nonprofit and community-based organizations in managing disasters. The nature of the hazard or disaster, it appears, is frequently of lesser significance than the presence of a comprehensive approach that encompasses targeted actions and measures taken in advance of the occurrence of the disaster.

The quantitative data collected in this study did not reveal any characteristic from the list below that had a significant influence on the ability of social service nonprofit organizations in Toronto to cope with disasters. However, previous research (Chikoto-Schultz et al., 2018; Rivera et al., 2019) has shown that having a large operating budget can be significant and protective in disaster preparedness. Unfortunately, a comparison to lower budget organizations was not possible in this study as most respondent organizations had large budgets. It is important to consider budget as a variable in disaster preparedness, as the majority of Canadian charitable organizations (56%) have operating budgets of $200,000 or less, with 35% of these smaller organizations operating with revenues of only $10,000-$49,000 per year (Dobuzinskis, 2020). Small charities are defined by CanadaHelps as those with revenues under $500,000/annually (Glogovac, 2018). Chapter 4 of the report highlights that according to survey question 23, the resource that organizational leaders most commonly identified as necessary to improve their disaster preparedness was increased funding.

Organizational or operational variables that were queried in the survey include:

1. Duration of operations in years
2. Number of staff (FTE)
3. Receipt of government funding
4. Essential vs non-essential status
5. Having a strategic plan in place
6. Having a crisis/disaster plan in place

The literature review has identified several critical factors that disaster and emergency preparedness experts consider essential to successfully manage an organization during a disaster, provided they are implemented before the disaster occurs. The most concise summary of these factors is Sutton and Tierney's (2006) outlined in Chapter 2, Section Current State of Disaster Preparation and Planning in Nonprofit and Community-Based Organizations. By combining the principles identified by Sutton and Tierney with other relevant literature, previous research studies, and the data collected in this study, several key success factors have become evident. These factors are outlined in Table 2 below.

Factors that affect the ability of nonprofit organizations to deal with disasters	
1.	Understanding that disaster preparedness is an ongoing, evergreen process.
2.	Formal plans are important, but not sufficient. Other measures of preparedness must be in place.
3.	Preparation and planning should be risk and vulnerability based. Include low probability/high consequence hazards of special concern for the specific location.
4.	A whole-of-society approach is best: cross-sector, intersectoral, and multiagency participation and collaboration are critical. Resource-sharing agreements are important for smooth and effective coordination.
5.	Disaster preparation and planning should be done in cooperation with stakeholders who will be 'on-the-ground' during activation. Inclusion of stakeholders from all sectors (including informal social capital networks when possible) in the social and emergency infrastructure is an effective way to improve response, manage emergence, and reduce shortcomings in any one sector during/after a disaster.
6.	Preparedness efforts must be flexible and designed to allow for adaptation and innovation.
7.	External support from specialists is recommended when creating disaster plans and protocols.
8.	Greater social capital, across formal and informal networks, enhances community resilience and facilitates post-disaster recovery.
9.	Organizational leaders should allot time during the recovery phase to recognize the pivotal event that occurred; it is an opportunity to rewrite the narrative, learn and grow from the disaster experience, and identify barriers to future success.
10.	Effective disaster response necessitates comprehensive and multichannel communication strategies tailored to the unique demographic characteristics/preferences of vulnerable groups.
11.	Organizations that prioritize effective and ethical communication prior to crises tend to exhibit greater agility, collaboration, and innovative problem-solving during crises, resulting in more positive outcomes, achieved through stakeholder engagement, values-driven communication, and seizing opportunities for growth.
12.	In the case of the COVID-19 pandemic, access to technology, IT expertise, and online cloud-based systems were an important success factor due to lockdowns and social distancing[3].

Table 2: Factors that affect the ability of nonprofit organizations to deal with disasters

[3] In other disaster scenarios, cloud-based operations may not be as successful.

The majority of the aforementioned factors that contribute to effective disaster management are primarily social in nature and are closely linked to the Theoretical Framework presented in Chapter 2 of this study. The framework asserts that occurrence of disasters can significantly disrupt social systems and relationships, and therefore, it is crucial to view disasters as social issues that require social solutions. This research project draws on the social construction theory of disaster, which highlights that disasters are the product of human practices with root causes in social structure and process (Sun & Faas, 2018).

> *To build collective resilience, communities must reduce risk and resource inequities, engage local people in mitigation, create organizational linkages, boost and protect social supports, and plan for not having a plan, which requires flexibility, decision-making skills, and trusted sources of information that function in the face of unknowns.*
> (Norris et al., 2008, p. 127)

As emphasized by Quarantelli and Dynes (1977), disaster risk reduction should concentrate on fixing problems and vulnerabilities in the social system rather than external threats. Social capital theory, particularly the research on community networks, informs this study and highlights the value that social capital contributes to community resilience. The results of this study underscore the importance of strengthening social infrastructure and prioritizing social solutions over physical solutions in mitigating, preventing, and preparing for disasters to help organizations and communities adapt effectively during the acute disaster stage and recovery period.

Availability of previous research and the data collected for this study were not as robust as needed to make the specific case for Toronto-based organizations. However, the literature review shows that the critical factors for affective disaster preparedness are likely universal, at least in Western contexts, but there will be additional needs for organizations in areas that are prone to hazards, such as earthquakes, flooding, or forest fires.

Secondary Research Questions

The secondary research questions this studied posed to participants helped to answer and provide context for the primary research question (See, Table 1: Making connections between the research questions, literature review, and emergent themes). These questions are addressed below.

1. *How did the existing plan help the organization respond to the pandemic? What disaster preparedness and planning measures did social service nonprofit organizations have in place when the COVID-19 pandemic hit Toronto in March 2020?*

Exactly half of the responding organizations had a disaster plan (of any kind) in place when COVID-19 started in Ontario in March 2020. Of those who had a plan, almost half of them included an epidemic/pandemic plan. The perceived level of preparedness of organizational leadership did not seem to be directly connected to the presence of a formal plan as is consistent with the research that shows a plan in and of itself is not enough. Indeed, even some respondents who had a plan, felt 'completely unprepared' for the pandemic while others knew there was a plan *somewhere,* but it was not consulted or factored into the organization's response. Participants who had experienced SARS (2003) and/or H1N1 (2009) in their workplaces in the early 2000s did find that it had a somewhat protective benefit and gave them a level of preparedness due to organizational memory. This is consistent with the research that learning from past disaster experiences has a positive effect on the ability of an organization to weather a future disaster.

Participants reported few measures or actions taken ahead of the pandemic to prepare in case of a disaster. For example, scenario planning, client preparation, protocol training, resource-sharing agreements, or simulation exercises were not noted by any participants when asked about specific measures undertaken. Some participants noted emergency supplies (only one organization had access to a small PPE stockpile) and IT/data security measures were in place but that those were not particularly

helpful in the case of the pandemic. This paucity of actions is likely due to two factors: 1) thinking of disaster preparedness as a product instead of an active and ongoing process, and 2) the commonly cited reasons for not having a formal disaster plan: lack of staff time, not enough funding, and no internal expertise.

2. *What strategic and critical operation plans and processes have been and will be implemented to prepare for future disasters?*

Most participants indicated a desire to improve their organizations' disaster planning and preparedness. Over half of the organizations that did not have a plan at the beginning of the pandemic developed one at some point since then. Overall, it seemed that respondents did not know where to begin with improving their strategic plans and processes to plan for a future disaster. Most indicated that they would rely on the messaging from federal and provincial governments and public health authorities for information on what to do should a disaster occur. Knowing that messaging and instruction from authorities was the key resource for many respondents, it is even more important that a whole-of-society approach to disaster preparation is embraced and that stakeholders from civil society are included in the City of Toronto and Province of Ontario planning process. The need to improve communications and build stronger, more collaborative relationships between the nonprofit and public sectors was a widely held sentiment amongst the participants. During the pandemic, a collaboration between the sectors emerged, led by the United Way of Greater Toronto and the City of Toronto—this was a particularly important and successful venture for smaller nonprofits and could be a useful prototype moving forward.

3. *How were services and programs affected by the pandemic?*

All participants reported their programs and services being affected by the pandemic in some way. Some reduced, suspended, or ceased their operations while others extended virtual operations and saw record demand or went above and beyond to connect with vulnerable community members. Others changed their offerings based on the immediate needs of their communities and pivoted, adapted, and innovated to meet those challenges such as providing food vouchers and outdoor children's programming. It would be outside the scope of this paper to review and interpret in detail the myriad ways things changed for organizations over this period. However, there were some common changes that were frequently cited by respondents including customizing communications with clients/community members to stay connected, opening virtual programming, and prioritizing digital innovation, and collaborating with other organizations to share resources/knowledge. The most unexpected of these was the interagency knowledge sharing that emerged spontaneously between small and large nonprofits. It was particularly notable due to the transparent way resources were shared to apply for grants and other funding—these secrets are usually closely held confidences. Mutual aid is a familiar element in the post-disaster phase but to see it in the nonprofit sector in the way it manifested was surprising to the researcher.

4. *How has the pandemic changed the way leadership thinks about their organization's role in the community? How has the pandemic changed the organization's mission or other parts of the strategic plan? Have new organizational priorities arisen due to new insights you have gained into your community because of the pandemic? What lessons have been learned that can be applied to planning to build organizational and community resilience in the face of the next disaster?*

Overall, the vast majority of organizational leaders reported that the pandemic experience changed their opinion about the significance of the role their nonprofit plays in the community—not only during a crisis but in the day-to-day lives of many people. One participant from a smaller community-based organization reported that the experience and new learning was enough to change the vision of the organization. Others indicated the disruption the pandemic brought was the jolt they needed to change some ingrained habits that were outdated and that the shift to a more online/virtual/remote work environment was conducive to improved productivity and helped to build internal trust. Viewing the impact of the disaster as

an opportunity is beneficial to organizational growth; being flexible, innovative, and adaptable is the sign of a resilient organization which often leads to revitalization (Meyer, 1982). The change in understanding of disaster risk was also notable for almost all respondents, but whether this carries forward into the post-pandemic period is yet to be seen. To that end, while almost every respondent (92.3%) selected 'infectious disease pandemic' as a future concern back in the spring of 2022, that percentage may be significantly reduced if the question was asked again in 2023.

5. *What education, training, and development opportunities do nonprofit organizations need to develop skills and build resilience?*

As mentioned above, funding is one of the most important factors that increases the likelihood of an organization successfully handling a disaster. Education, training, and other development opportunities can only be effective if more funding is allocated, whether from existing organization budgets or by special grants created for this purpose. For small nonprofits, reallocating funds will prove difficult. Regardless, the need is acute for investment in this area, whether supported by the government or other funders. On the survey, professional resources (e.g., a dedicated online resource for nonprofits) and training were the second and third most cited need respondents felt would strengthen their organizational preparedness competencies. This is consistent with the findings in Chapter 5, Theme *4 (Lack of access to information, knowledge and expertise in disaster management is a critical factor limiting the creation of effective disaster management strategies for organizations in the nonprofit sector),* where interview participants noted many of the biggest gaps in their knowledge base was a profound absence of expertise, guidance, and resources developed for the nonprofit sector.

One of the reasons that this gap might exist is the lack of representation at the federal level for the charitable and nonprofit sector. Despite the great responsibility of nonprofits and charities in maintaining the social and civil infrastructure of Canadian communities and the governments reliance on these organizations during disasters and in the day-to-day, they have no home in the federal government. There is not a minister responsible for the portfolio, and as such it has been difficult to advocate for funding, representation, support, and a unified policy response (Edwards et al., 2022).

Unexpected Findings

One of the unexpected findings was how consistent the results of this study are with those from other jurisdictions evaluated in the literature review in subsection *Current State of Disaster Preparation and Planning in Nonprofit and Community-Based Organizations*. All the other studies, except the recent study from Portugal, were based in the US and completed after Hurricane Katrina and before the COVID-19 pandemic; as well, the Sendai Framework for Disaster Risk Reduction was initiated in 2015. That the results are strikingly similar indicates a few issues: priority for disaster preparedness has not been filtered from the government level to the nonprofit sector, grants and funding for preparedness remains too low and/or restricted, current resources are insufficient and inaccessible for nonprofit organization staff, and/or there is a psychological element to change that has not been accounted for in the implementation of disaster preparedness and planning initiatives.

An additional observation that surfaced throughout the process of data collection and analysis pertains to the frequency with which discussions related to mental health were initiated by participants. Despite the absence of a mental health-related inquiry in the survey or interview, it became apparent that the matter was of great importance to numerous participants and formed a crucial component of their pandemic experience. It is noteworthy that the protracted and uncertain nature of the pandemic, in contrast to time-limited hazards like flooding, amplified the influence of mental health and wellbeing in the work environment.

The nonprofit sector in Canada has long had issues with employee retention and was already facing an HR crisis before the COVID-19 pandemic (Clasadonte et al., 2019). The pandemic has exacerbated the HR crisis

in the sector: employees are leaving their jobs at an exponential rate, there is a labour shortage, and the impact on community programs and services is inevitable (Ontario Nonprofit Network, 2021b; United Way East Ontario, 2022). Organizations would benefit from reviewing their internal policies and practices to find solutions, such as better access to mental health supports, to help and retain employees facing onerous workloads, stress, low morale, and burnout. Frontline position staff, who often experience vicarious trauma, are especially impacted (Mental Health Commission of Canada, 2021). Improving the capacity and resilience of Canada's critical civic infrastructure is imperative, as it is indispensable to the economy and to the wellbeing of communities particularly during turbulent times. More research on the impact of disasters on the mental health and wellbeing of nonprofit workers is advised.

Strategic or Research Implications

The results of this research study have implications for policy, practice, and future research. The data show that not enough funding, support, and resources are being channeled into the nonprofit sector to meet the preparedness needs and resiliency requirements of communities against future hazards. Canada's commitment to the Sendai Framework for Disaster Risk Reduction focuses around shared responsibly and a whole-of-society approach. The Sendai Framework prioritizes 1) understanding disaster risk, 2) strengthening disaster risk governance, 3) investing in disaster risk reduction for resilience, and 4) enhancing disaster preparedness for effective response and to "Build Back Better" in recovery, rehabilitation and reconstruction at the national and local level (United Nations, 2015b). To meet Canada's obligation under the Sendai Framework the federal government should devote more attention to the role that civil infrastructure and community-based organizations can play and mainstream disaster risk reduction across all sectors.

The implications from the research for the charitable sector and individual nonprofit or community-based organizations is that there are actions and measures that can be taken immediately to improve their capacity to withstand the next hazard and to build internal and external capacity in their communities that will serve as protection against a future disaster. As many of the factors for success are social in nature, organizations can start efforts without new funding streams forthcoming. For example, collaboration with organizations in the community to write mutual aid and resource-sharing agreements or convening working groups to exchange knowledge and expertise, (e.g., neighborhood preparedness groups, industry-wide preparedness initiatives). Internally, organizations can form a preparedness committee and conduct an assessment of the organization's current state.

As for further research, the data show that there is very limited knowledge about the disaster preparedness of the nonprofit sector as a whole. An industry group such as Imagine Canada or the Ontario Nonprofit Network would be wise to conduct a full assessment to ascertain a benchmark from where the sector can only improve. Further research into the correlation of mental health outcomes for nonprofit workers and the impact of disaster is also warranted.

Limitations of Analysis

In addition to the fulsome review of the study's limitations, as noted in Chapter 3 subsection Limitations, the analysis would have benefitted from the survey instrument including more questions around the frequency of specific actions and measures taken, or not taken, by organizations. Also, the nature of recruitment for participants precluded data from very small or volunteer-led organizations that may not have a website or easy to find contact information but have an outsized impact on their local communities.

Summary

This chapter provides a justification for the coherence between the literature review, primary research, and findings in addressing the research questions. The primary research objective was to identify the critical factors that influence the capacity of social service nonprofit organizations in Toronto to manage

disasters. The study revealed that while having a formal disaster plan is essential, it is just one element of disaster preparedness. Moreover, the preparedness status of social service nonprofit organizations in Toronto was similar to that of similar organizations in other countries. The research has identified various factors that impact the effectiveness of nonprofit organizations in managing disasters. Additionally, it has been revealed that while disaster preparation and planning are deemed crucial in theory, they are not regularly put into practice. The researcher compiled Sutton and Tierney's (2006) principles, the literature, past research studies, and the findings from this study's data, into a table of 12 key success factors.

The literature review emphasized the importance of social factors as crucial aspects of successful disaster management. The study highlights the significance of reinforcing social infrastructure and prioritizing social solutions over physical solutions to mitigate, prevent, and prepare for disasters. This approach will help organizations and communities to adapt effectively during the acute disaster stage and recovery period. However, despite interest and a willingness to do and learn more by nonprofit leaders, there remains a significant gap in both policy and actionable guidelines for how nonprofits can better prepare for hazards. This is a unique situation given the set of challenges most nonprofits and charitable organizations face, such as limited resources, restricted funding, and human capacity constraints. Therefore, the subsequent chapter aims to provide more specific guidance and recommendations to address this gap.

CHAPTER 7: RECOMMENDATIONS

Introduction

As communities change and continue to face complex challenges, policymakers must make critical decisions that have far-reaching consequences. In the context of disaster preparedness and risk reduction, the identification of viable policy options and recommendations can be a daunting task. To address this challenge in part, this report presents several recommendations that can be considered in addressing the level of disaster preparedness of Toronto's social service nonprofit organizations. The suggestions presented are based on a thorough review of the relevant literature, research findings, and an analysis of the potential benefits and drawbacks of each option. Each recommendation was evaluated using a set of criteria (see Figure 32).

Taking into account the lack of a specific client for this capstone initiative, the recommendations have been developed to offer valuable counsel to the varied group of stakeholders involved in enhancing the related challenges of disaster preparedness. The intended readership for this section is professionals and leaders operating within the nonprofit sector, including those at both the industry and organizational levels as well as governments and funding bodies who support nonprofit mandates.

The recommendations put forth in this study are firmly grounded in the realities faced by nonprofit organizations, in particular, their limited resources. While recognizing this constraint, each recommendation underwent an evaluation process that considered its respective advantages and disadvantages, and potential timeline. The suggestions aim to address the issue effectively while also considering practicality, the feasibility of implementation, and potential unintended consequences.

Assessment Criteria

Each recommendation was assessed using the following criteria:

1. Administrative Feasibility: Recommendation is feasible for the organization to implement, given available resources, staff capacity, and stakeholder support.
2. Effectiveness: Recommendation will be effective in reducing the impact of disasters on the organization and its stakeholders, based on empirical evidence or best practices.
3. Timeliness: Recommendation is timely and can be implemented within a reasonable timeframe.
4. Cost-effectiveness: Recommendation maximizes the benefits/outcomes it produces while minimizing costs and other inputs.
5. Social and Political Acceptability: Recommendation is likely to be adopted and implemented, given the political and social climate and level of public/donor support (Bardach, 2012).

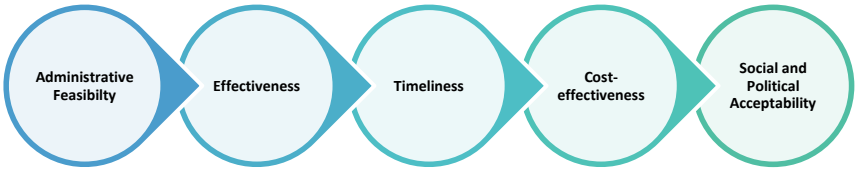

Figure 32: Recommendation assessment criteria

Recommendations for Nonprofits and Community-based Organizations

The following are practical recommendations that can be taken to improve disaster preparedness in the nonprofit sector. These suggestions are not mutually exclusive and can be adopted as one or more feasible "next steps." They are presented in a progressive sequence, moving from simpler to more complex actions,

to allow for a gradual and systematic approach to implementation. While advantages, disadvantages, and suggested timelines are proposed, they are not definitive.

Recommendation 1: Create a position(s) in the organization that is directly responsible for disaster planning and preparedness activities.

To ensure effective disaster planning and preparedness, it is recommended that an organization appoint one or two staff members to the dedicated role if such a position does not already exist. By sharing the role, the workload can be balanced and managed more effectively, reducing the risk of burnout and stress for individual employees. This role should also be considered for succession planning to facilitate knowledge diffusion across departments and ensure its longevity. Succession planning involves identifying and developing qualified individuals who can step into critical roles when necessary. Therefore, training and development opportunities should be provided on an ongoing basis.

For very small nonprofit organizations with few staff or those that rely solely on volunteers, a senior volunteer role could be considered for this position. Additionally, organizations can collaborate with other small organizations to share expertise and resources, creating a win-win situation for both parties. Smaller organizations can also partner with their corporate, foundation, or government supporters to leverage their disaster planning staff and/or departments. This would be a particularly strong way to build social capital and cross-sector partnerships as described in literature review sections *The Importance of Social Capital in Disaster Resilience and Recovery* and *The Value of Cross Sector Partnerships in Disasters*.

Advantages: Low-risk, improved disaster preparedness, potential to increase social capital/network

Disadvantages: Additional expense (long-term), internal resistance to change, increased workload

Suggested timeline

Immediate (0 – 3 months): Identify best placed position(s) in organization to incorporate this role into their portfolio. For smaller organizations, identify potential collaborators from within your support network.

Medium-term (6 – 18 months): Create a succession plan for the position. Seek out training and development opportunities for the position.

Long-term (12 months – 2 years): Consider hiring a stand-alone position for the disaster planning and preparation role if funding allows.

Recommendation 2: Complete a post-pandemic SWOT Analysis for the organization.

SWOT analyses are a commonly used strategic planning tool. They are also utilized in the nonprofit sector particularly during post-fundraising event periods; the basics of running a SWOT in an organization should be relatively simple. If there is no staff member with experience running a SWOT, reach out to your support and volunteer network for expertise. During the SWOT analyses, strengths, weaknesses, opportunities, and threats from the pandemic period will be reviewed. Recommendations for improvement will be made. Areas of strength, adaptation, and resilience should be highlighted and celebrated. This is a time in which post-traumatic growth can be made by rewriting the narrative of the organization and its staff during the pandemic. To build social capital, external stakeholders such as volunteers, donors, community members, and clients can be invited, too. See, section *Organizational Adaptations to Environmental Jolts and Post Traumatic Growth* in the literature review.

Advantages: Low-risk, provides clarity, facilitates strategic planning, encourages collaboration

Disadvantages: Time-consuming, can overemphasize weaknesses, requires post-SWOT actions

Suggested timeline

Immediate (0 – 3 months): Completing a SWOT analysis sooner rather than later is important because valuable information and organizational memory may be lost over time and through staff turnover.

Recommendation 3: Conduct a self-assessment or evaluation of the current state of the organization's disaster planning and preparedness.

Assessing the current state of disaster preparedness of the organization will provide a benchmark for ongoing improvement. As a starting point, Austin (2012) provides a list of seven preparedness clusters and Sutton and Tierney (2006) provide eight preparedness clusters that can be used as metrics by which nonprofits can evaluate how prepared they are for a disaster. See section *Current State of Disaster Preparation and Planning in Nonprofit and Community-Based Organizations* in the literature review.

To conduct an internal evaluation, nonprofits can start with a document review of current plans, processes, and policies. Existing disaster plans and procedures, including evacuation plans, communication plans, pandemic plans, and plans for business continuity should be assessed. To gain an understanding of their staff and client readiness, low-cost or free tools for data collection (qualitative and quantitative) can be used, e.g., Survey Monkey or focus groups. Organizations might consider using volunteers to assist with data collection and analysis. Additionally, they can leverage existing resources within the organization, such as staff members or volunteers with evaluation expertise. Once the self-assessment is complete, a list of training and development needs should be compiled. Prioritize the most critical areas that need improvement or training, allocate budget, and identify specific steps and timelines for implementation/completion. Set a follow-up date in a year for re-evaluation.

The researcher discovered a useful resource that can assist nonprofits in assessing their disaster readiness level, which is the *Ready Rating* program offered by the American Red Cross. This program can serve as a practical starting point, particularly for small or volunteer-led organizations with limited staff or financial resources. By becoming a member of *Ready Rating* for free, organizations can access tools, resources, and information that can help them evaluate and enhance their capacity to withstand disasters and maintain operations. The program provides two online self-assessment tools to measure an organization's level of preparedness and two template generator tools that can be customized and downloaded to create an Emergency Action Plan tailored to the organization's needs. Although a Canadian Red Cross version is available, it appears to still be in Beta mode.

Advantages: Facilitates continuous improvement, promotes accountability, highly effective

Disadvantages: Time-consuming, requires expertise, leadership endorsement may be difficult

Suggested timeline

Immediate (0 – 3 months): Conduct a *Ready Rating* assessment through the American Red Cross. Being to compile documents for a review. Identify stakeholder (staff, volunteer, external partner) with evaluation expertise.

Medium-term (6 – 18 months): Survey staff and other key stakeholders as necessary about their understanding of the organization's disaster planning and preparedness. Compile a report, identify current state, and develop a list of actions, activities, and improvements. Create any plans during this time, e.g., business continuity, communications, etc. Facilitate training and development as necessary.

Long-term (2 years+): Update and improve disaster preparedness policies, processes, and procedures. Review annually.

There are many free resources online that can help guide nonprofits create business continuity plans, disaster communication plans, emergency plans, etc. as well as checklists and activities that can be implemented. Some of these resources are identified below in Table 3:

Organization	Resources	Website	Notes
Canadian Red Cross American Red Cross	*Ready Rating* assessment and customizable Emergency Action Plan template	Canada (beta mode): https://www.newreadyrating.ca USA: https://www.readyrating.org/	Free online self-assessment. Template generator. Online resource centre.
TechSoup	Disaster Planning and Recovery Guide IT Assessment and Continuity Plan The Resilient Organization Workshop	https://www.techsoup.org/disaster-planning-and-recovery	Courses and webinars are also available. Updated in 2020.
County of Los Angeles Public Health	Many templates for various disaster planning needs Risk Assessment Matrix	www.publichealth.lacounty.gov › Non Profits Continuity and Recovery Plan	Disaster and Pandemic. Planning for Nonprofits PDF - updated in 2009.
The Nonprofit Association of Oregon	Disaster Planning for Nonprofits Guide Continuity of Operations Plan (template and guide)	https://nonprofitoregon.org/page/disaster-planning-nonprofits	Free checklists, resources, discussion prompts, tips, and videos. An action-oriented guide with tools you can use. Updated in 2021.
City of Vancouver	Emergency preparedness plan Business and Employer Emergency Preparedness (BEEP) guides Business Continuity Plan Emergency Safety Kits	https://vancouver.ca/home-property-development/business-emergency-safety.aspx	The BEEP guides provide handy checklists and easy to implement plans. Updated in 2017.

Table 3: Disaster planning and preparation resources for nonprofits

Recommendation 4: Develop and test disaster communication strategies.

It is crucial for nonprofit organizations to prioritize disaster preparedness and develop effective communication strategies that enable smooth information flow during emergencies. Such strategies should be tailored to cater to the needs of vulnerable or transient communities, which may experience limitations such as lack of internet access or phones, especially when libraries are closed. To ensure that all stakeholders, including staff, donors, clients, and vulnerable groups, can access important information and resources during a disaster, nonprofits should aim to continually build trust through ethical and effective communication strategies.

Effective communication is critical for nonprofits, and it requires clear information, empathy, and understanding. To successfully address the unique needs of each community or group, nonprofits should engage in two-way communication. However, it is important to acknowledge that communication strategies should be tailored to specific contexts and consider external factors like language barriers, social conditions, and distrust of authority. Therefore, nonprofits should develop communication strategies that are sensitive to the diverse needs of the communities they serve. See section *Communicating with Vulnerable Groups During Disasters* in the literature review.

Advantages: Low-risk, enhances community engagement strategy, socially/politically expedient

Disadvantages: Time-consuming, resource-intensive, difficult to maintain/keep up to date

Suggested timeline

Immediate (0 – 3 months): Identify the stakeholders who are likely to be affected by a disaster and may require communication. Develop emergency notification procedures. Review existing communication channels to ensure that they can deliver timely and accurate information during a disaster.

Medium-term (6 – 18 months): Develop a comprehensive communication plan. Establish a team responsible for developing and implementing the disaster communication plan. This team should include representatives from different departments, including public relations, IT, and emergency response teams. Provide training to staff and stakeholders on the communication plan and procedures to ensure that they are familiar with the plan and can respond appropriately in case of a disaster.

Long-term (2 years+): Conduct regular communication drills to test the effectiveness of the communication plan and identify areas that require improvement. Gather feedback from stakeholders on the plan's effectiveness and adjust it as necessary to ensure that it meets the needs of the stakeholders. Regularly review and update the plan to ensure that it remains relevant and effective. This may involve incorporating new communication technologies, adapting to changing stakeholder needs, and accounting for new potential disasters.

Recommendation 5: Adopt a multi-sectoral approach to enhance social networks and improve information systems and sharing between groups.

A multi-sectoral approach—where the organization engages with stakeholders from different sectors, such as government, private, and nonprofit sectors—can build important networks and social capital. Collaboration between the public and nonprofit sectors is critical to achieving effective disaster response operations. By working together, these sectors can leverage their respective strengths and resources to enhance disaster response efforts and better serve affected communities.

Strong community ties can be developed by creating opportunities for people to connect and engage with each other. Encouraging people to help each other and share resources can build social capital by promoting a sense of reciprocity and trust. Building social capital requires creating opportunities for people

to connect, engage, and collaborate with each other. By fostering strong community ties, encouraging diversity and inclusivity, developing a sense of collective identity, providing opportunities for civic engagement, and promoting reciprocity, more resilient and connected communities are made. Building social capital requires a long-term and sustained effort, and nonprofit organizations can play an important role in this process. See section *The Importance of Social Capital in Disaster Resilience and Recovery* in the literature review.

Advantages: Improves community resilience, increases civic engagement, promotes diversity and inclusion

Disadvantages: Leadership endorsement may be difficult, resource-intensive, outcomes difficult to quantify

Suggested timeline

Immediate (0 – 3 months): Attend and participate in community meetings, forums, and other public events to engage with community members and build relationships.

Medium-term (6 – 18 months): Forge partnerships with other organizations and businesses in the community to collaborate on projects that promote social capital. Provide training and education opportunities to community members to build skills and knowledge that can help them become more engaged and connected in the community e.g., training on disaster preparedness.

Long-term (2 years+): Conduct a community survey to help identify the needs, interests, and concerns of community members, which can help the organization tailor its programs and services to meet those needs. Engage in policy advocacy for policies that promote social capital, such as policies that support community development and civic engagement.

Further Recommendations for the Public Sector and Nonprofit Advocacy Groups

The following recommendations provide specific and actionable "next steps" to improve disaster preparedness in the nonprofit sector. These recommendations are divided into two sections: the first is directed at the public sector, and the second is aimed at nonprofit advocacy groups. Within each section, the recommendations are presented in order of increasing complexity, and they are not mutually exclusive.

Public Sector

Recommendation 1: Maintain the United Way Greater Toronto and City of Toronto Community Clusters via the Community Coordination Plan. These clusters provide a critical platform for coordination and collaboration among community-based organizations, municipal government agencies, and community stakeholders in the event of a disaster. By maintaining these clusters, Toronto's collective ability is enhanced to respond and recover from disasters and ensures that the needs of communities are met in a timely and effective manner.

Recommendation 2: Establish a dedicated City of Toronto fund that small nonprofits can access for disaster planning and preparedness purposes. This fund will provide critical financial resources to support the development and implementation of disaster preparedness plans for small nonprofits, which are often particularly vulnerable to the impacts of disasters. By establishing this fund, the resilience of the nonprofit sector will be enhanced and better equipped to respond and recover from disasters, ultimately supporting the well-being of communities.

Recommendation 3: Launch a new grant stream for nonprofit disaster preparedness through Public Safety Canada and/or the Province of Ontario. This grant stream will provide critical financial resources to support

the development and implementation of disaster preparedness plans and training for nonprofit organizations.

Recommendation 4: Develop an online resource library with templates, guidelines, and other tools specifically for the nonprofit sector. This resource library will serve as a one-stop-shop for nonprofit organizations to access the necessary tools and resources to prepare for disasters. A dedicated website with specific guidance for the sector is recommended, as the needs of nonprofit organizations are significantly different from those of businesses and individuals. By establishing this resource library, the aim is to support the capacity-building of nonprofit organizations and enhance their ability to prepare for and respond to disasters, ultimately supporting the well-being of communities. This resource could be guided by a multi-sectoral working group and funded by Public Safety Canada.

Recommendation 5: Reallocate a percentage of all project-based funding from provincial and federal governments that is destined for charities and nonprofits to core funding. This will enable organizations to cover essential costs such as administration, delivery of core programs and services, communications, and disaster preparedness. Organizations require core and unrestricted funding to cover essential costs and reduce the administrative burden. Imagine Canada is a strong voice advocating for this change to support the essential work of charitable and nonprofit organizations; they recommend a 30% reallocation from project-funding to core funding needs (Imagine Canada, 2022).

Recommendation 6: Redefine the Province of Ontario's definition of essential and nonessential services. Include nonprofits and community-based organizations as essential services as they form an invaluable part of the critical civil infrastructure that supports the basic needs in communities. During a disaster, these organizations should be granted essential status to prevent any potential shutdowns due to nonessential status. This recommendation is based on the recognition that nonprofits and community-based organizations play a vital role in providing essential services to vulnerable populations, including but not limited to, access to healthcare, mental health and addiction services, educational services, food and shelter, and other basic needs. These services are critical to maintaining the health and safety of Ontarians, supporting the well-being of communities, and minimizing the impact of a disaster.

Nonprofit Sector Advocacy Groups

Recommendation 7: Commission a comprehensive research study on the state of nonprofit disaster preparedness to be conducted by an industry advocacy group, such as Imagine Canada or ONN. The study will aim to provide a more representative understanding of the current state of nonprofit disaster preparedness in Ontario and/or Canada. By conducting this research, gaps and opportunities will be identified to improve the sector's disaster preparedness, which will ultimately enhance the sector's ability to respond to and recover from disasters.

Recommendation 8: Establish guidelines and standards for disaster preparedness within the nonprofit sector. These standards should be developed using an all-hazards and whole community approach. Guidelines will provide a consistent framework for nonprofit organizations to develop and implement their disaster preparedness plans, ultimately enhancing their resilience and ability to respond and recover from disasters. Standards allow for greater alignment across the sector and ensures that organizations are equipped with the necessary knowledge and resources to prepare for and mitigate the impacts of disasters. To be conducted by an industry advocacy group, such as Imagine Canada or ONN in partnership with Public Safety Canada, Canadian Red Cross, or other leader in Emergency Management.

Summary

Chapter 7 presents recommendations for enhancing disaster preparedness of social service nonprofit organizations in Toronto as well as further recommendations for the public sector and nonprofit advocacy groups. The recommendations for nonprofit organizations are based on an evaluation process that

considered the administrative feasibility, effectiveness, timeliness, cost-effectiveness, and social and political acceptability of each option. The recommendations progress from the least to the most involved and include creating a dedicated lead for disaster planning, conducting a post-pandemic SWOT analysis, conducting an evaluation of the current state of disaster planning and preparedness, developing and testing an emergency communication plan, and adopting a multi-sectoral approach to build networks and increase social capital.

CHAPTER 8: CONCLUSION

This research was framed by the social constructionist theory of disasters which considers disasters as social phenomena shaped by social structures, processes, and practices (Sun & Faas, 2018). Further, the theory suggests that disasters are not merely physical events but a result of the intersection between hazards, vulnerable populations, and social context (Quarantelli, 1992; Sun & Faas, 2018). By strengthening social networks and addressing structural social inequalities, communities can become more resilient and better adapt to disasters; thus, the recommendations herein emphasize human initiatives and collective action (Aldrich & Meyer, 2015).

Nonprofit organizations are essential partners in disaster preparedness and response efforts due to their community engagement expertise, strong grassroots networks, local knowledge, adaptability, and highly motivated volunteers and leaders. The COVID-19 pandemic has highlighted the crucial role that social services nonprofits and local, community-based organizations can play during times of crisis, underscoring the importance of further supporting nonprofits in their disaster preparedness and response efforts. The goal of this project was to determine what factors affect the ability of social service nonprofit organizations to endure disasters.

This research has significant implications for policy, practice, and future research related to disaster risk reduction and resilience building in the nonprofit sector. Emergent themes from the qualitative data suggest that while organizations recognize the importance of disaster planning and preparation in theory, they may not always have concrete measures in place to ensure preparedness. Additionally, effective communication with stakeholders is crucial in a disaster management strategy, and partnerships with other sectors, particularly the government, can build capacity and strengthen resilience. The COVID-19 pandemic has also brought about a shift in organizational perspectives, prompting adaptation and innovation to meet changing client needs and build internal capacity and resilience. The themes emphasize social and civic actions such as preparedness, adaptation, communication, and collaboration in effective disaster management. The findings of the study further indicate that the current funding, support, and resource allocation to the nonprofit sector are insufficient to meet the preparedness needs and resiliency requirements of communities against future hazards. To fulfill Canada's commitment under the Sendai Framework, the federal government should heed the outsized role civil infrastructure plays in disaster recovery and further efforts to mainstream disaster risk reduction across the public and nonprofit sectors.

This study offers practical recommendations for nonprofit organizations, industry groups, and governments to improve the state of disaster preparedness in communities. The recommendations are primarily social actions that can be taken to improve civil infrastructure—often a more powerful driver of resilience than building physical infrastructure (Aldrich & Meyer, 2015). There is value in pursuing further research to evaluate the disaster preparedness of nonprofits and establish a benchmark for measuring and improving their performance. A study with a broad scope and wider range of participants would be beneficial; it would yield more accurate, reliable, and representative results, which could ultimately lead to better informed decision-making and policy development. Furthermore, it is necessary to conduct research into the correlation between the impact of disasters and mental health outcomes for frontline nonprofit workers.

In conclusion, this research study highlights the importance of investing in risk reduction, disaster preparedness, and resilience building in the nonprofit sector. The findings have significant implications for policy, practice, and future research and call for a whole-of-society approach to address disaster risk in Canada.

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Appendix A – Recruitment Email Script Template with Snowball Sampling

Email Subject line:

Hello [first name],

My name is Cora Larkins, and I am a graduate student in the School of Public Administration, Faculty of Human and Social Development at the University of Victoria. I am conducting a research project called *Building capacity and disaster resilience in Toronto's nonprofit sector: Lessons learned during the COVID-19 pandemic* for my master's degree under the supervision of Dr. Kimberly Speers.

Given your experience working in Toronto's nonprofit sector, I feel that you are well suited to provide insight for my project and I invite you to participate in a 10 minute online survey. The purpose of the study is to explore how prepared nonprofit, social services organizations in Toronto were for a disaster and how they responded to the rapidly changing circumstances and increased community needs during the COVID-19 pandemic. The goal is to identify lessons learned and to make recommendations to assist nonprofits with building disaster resilience and organizational capacity to prepare for future service disruptions due to public health, natural, and/or climate change disasters.

The survey consists of questions related to your organization's disaster/crisis preparation and planning and your organization's role in the community during the COVID-19 pandemic. If you would like to volunteer for this study, please read the attached ***letter of information for implied consent*** which further details the information you need to determine if you'd like to participate.

To participate in this voluntary research, please click the link below to access the survey when you are ready to begin. The survey will be open until May 31st, 2022. To compensate you for your time, you will have the chance to opt-in to receive an executive summary of the final research results.

Access web-based survey here: *https://ca.research.net/r/nonprofit_disaster_planning*

If you think a colleague at your organization is more suited to participating in this study, please feel free to pass this information along. Additionally, if you know other people in Toronto's nonprofit sector who would be interested in participating in this research, please forward them a copy of this information. There is no obligation for you to pass along this information, and there will be no penalty if you do not pass along this information.

If you have any questions about my project, please do not hesitate to contact me at coralarkins@uvic.ca. You may also contact my supervisor, Dr. Kimberly Speers at kspeers@uvic.ca.

Thank you in advance for your support of this important research.

Sincerely,

Cora Larkins

The proposal for this research has been reviewed by the University of Victoria Human Research Ethics Board (HREB) and was found to be in compliance with the University's ethics policy. If you have ethical concerns about the research, such as your rights as a participant, you may contact HREB at ethics@uvic.ca or 250-472-4545.

Appendix B – Letter of Information for Implied Consent

Building capacity and disaster resilience in Toronto's nonprofit sector: Lessons learned during the COVID-19 pandemic

You are invited to participate in a study entitled *Building capacity and disaster resilience in Toronto's nonprofit sector: Lessons learned during the COVID-19 pandemic* that is being conducted by me, Cora Larkins. I am a graduate student in the School of Public Administration, Faculty of Human and Social Development at the University of Victoria and you may contact me if you have further questions by emailing coralarkins@uvic.ca.

As a graduate student, I am required to conduct research as part of the requirements for a degree in Master of Arts, Community Development. This research is being conducted under the supervision of Dr. Kimberly Speers. You may contact my supervisor (250) 721-8057 or by email at kspeers@uvic.ca.

Purpose and Objectives
The purpose of the study is to explore how prepared nonprofit, social services organizations in Toronto, Ontario were for a disaster and how they responded to the rapidly changing circumstances and increased community needs during the COVID-19 pandemic. The goal is to identify lessons learned and to make recommendations to assist nonprofit organizations with building disaster resilience and organizational capacity to prepare for future service disruptions due to public health, natural, and/or climate change disasters.

Importance of this Research
Research of this type is important because nonprofit organizations that have a mandate relating to social services are often at the frontlines when disasters occur. It is important to research smart practices regarding risk mitigation and disaster resilience to ensure that vital social infrastructure can respond in these circumstances to serve the needs of the community. Building capacity in the nonprofit sector is one way to prepare for future risk.

Participant Selection
You are being asked to participate in this study because you have a senior role in a Toronto based nonprofit social service organization. Organizations and senior staff were randomly selected for participation from a list of organizations in the City of Toronto that met the primary criteria of 1) annual revenues over $100,000/year, 2) a functioning website, 3) publicly available details for the organization, and 4) a social services mandate/mission.

Participant Criteria
Survey participants should be senior level employees (e.g., senior management, director, CEO, COO, etc.) or senior level volunteers (e.g., chair of the board) of a nonprofit social service organization with program operations in the City of Toronto. For this study, a social service organization is broadly considered an organization that provides aid and support to people to improve their wellbeing and includes nonprofits working in housing, food, education, elder-care, employment, healthcare, newcomer, and disability services.

What is involved?
If you consent to voluntarily participate in this research, your involvement will include participating in an online survey. You will be asked survey questions related to your organization's disaster/crisis preparation and planning, capacity and resilience, and your organization's role in the community before and during

the COVID-19 pandemic. Participation in the online survey will require approximately 10 minutes of your time.

There will also be an opportunity to opt-in to a 30 minute semi-structured interview in which you will be asked to elaborate on these experiences. With your permission, I will audio-record the interview to ensure accurate transcription and analysis.

Inconvenience
Participation in this study may cause some minor inconvenience to you such as filling in an online form, participating in a survey, or giving up time to participate in research.

Risks
There are no known or anticipated risks to you by participating in this research.

Benefits
The potential benefits of your participation in this research include compiling smart practices and recommendations that will be useful to the nonprofit sector in the Toronto area. The research will then have the potential to help participants and their organizations and enhance the overall state of knowledge.

Compensation
As a way to compensate you for any inconvenience related to your participation, you will have the chance to opt-in to receive an executive summary of the final research results.

Voluntary Participation
Your participation in this research must be completely voluntary. If you do decide to participate, you may withdraw at any time without any consequences or any explanation. If you do withdraw from the study your data from the online survey will still be used as it is impossible to remove from the database. Participants who withdraw will still receive a copy of the executive summary of the research paper if they wish. To withdraw from the study, contact Cora Larkins or Dr. Kimberly Speers using the contact details above.

Anonymity
Several steps will be taken to protect your anonymity and identity. In terms of protecting your anonymity while participating in the online survey, only the principal investigator can associate survey responses with individual participants and that is only if certain information is provided, e.g., opting into the interview where your contact information is voluntarily provided. All participants' identities will remain anonymous in the dissemination of results and the report.

Confidentiality
Your confidentiality and the confidentiality of the data will be protected by storing data on a password-protected website hosted by the University of Victoria. The data will be deleted 365 days after the last use for this project. The dissemination of findings will ensure that participants' data remains confidential.

Dissemination of Results
It is anticipated that the results of this study will be shared with others as a master's capstone report and presentation to the committee, and in an executive summary to participants. The results of this study may also be shared in a published article or presentation at a conference. All participants' identities will remain anonymous in the dissemination of results.

Disposal of Data
Raw data from this study will be disposed of (electronically deleted) within 365 days of last use. Electronic data will be erased from the University of Victoria website on which it is hosted.

Contacts
Individuals that may be contacted regarding this study include Cora Larkins and Dr. Kimberly Speers. Contact details are noted above in the first two paragraphs.

In addition, you may verify the ethical approval of this study, or raise any concerns you might have, by contacting the Human Research Ethics Office at the University of Victoria (250-472-4545 or ethics@uvic.ca).

By completing and submitting the online survey, your free and informed consent is implied and indicates that you understand the above conditions of participation in this study and that you have had the opportunity to have your questions answered by the researchers.

Please retain a copy of this letter for your reference.

Appendix C – Interview Participant Consent Form

Building capacity and disaster resilience in Toronto's nonprofit sector: Lessons learned during the COVID-19 pandemic

You are invited to participate in a study entitled Building capacity and disaster resilience in Toronto's nonprofit sector: Lessons learned during the COVID-19 pandemic that is being conducted by me, Cora Larkins. I am a graduate student in the School of Public Administration, Faculty of Human and Social Development at the University of Victoria. You may contact me if you have further questions by emailing coralarkins@uvic.ca.

As a graduate student, I am required to conduct research as part of the requirements for a degree in Master of Arts, Community Development. My research is being conducted under the supervision of Dr. Kimberly Speers. You may contact my supervisor by email at kspeers@uvic.ca.

Purpose and Objectives

The purpose of the study is to explore how prepared nonprofit social services organizations in Toronto, Ontario were for a disaster and how they responded to the rapidly changing circumstances and increased community needs during the COVID-19 pandemic. The goal is to identify lessons learned and to make recommendations to assist nonprofit organizations with building disaster resilience and organizational capacity to prepare for future service disruptions due to public health, natural, and/or climate change disasters.

Importance of this Research

Research of this type is important because nonprofit organizations that have a mandate relating to social services are often at the frontlines when disasters occur. It is important to research smart practices regarding risk mitigation and disaster resilience to ensure that vital social infrastructure can respond in these circumstances to serve the needs of the community. Building capacity in the nonprofit sector is one way to prepare for future risk.

Participants Selection

You are being asked to participate in this study because you have a senior role in a Toronto based social services nonprofit organization. Participant organizations and senior staff were randomly selected from a list of organizations within the City of Toronto that met the primary criterion of 1) annual revenues over $100,000/year, 2) a functioning website, 3) publicly available details for the organization, and 4) a social services mandate/mission.

Participant Criteria

Interview participants should be senior level employees (e.g., senior management, director, CEO, COO, etc.) or senior level volunteers (e.g., chair of the board) of a nonprofit social service organization with program operations in the City of Toronto. For this study, a social service organization is broadly considered an organization that provides aid and support to people to improve their wellbeing and includes nonprofits working in housing, food, education, elder-care, employment, healthcare, newcomer, and disability services.

What is involved?
If you consent to voluntarily participate in this research, your involvement will include participating in an online 1:1 Zoom interview that will ask about your organizational and leadership experiences during the COVID-19 pandemic to date with a focus on disaster planning and preparedness. The interview will include questions about program innovations, leadership, and your organization's role in the community.

You will be asked to elaborate on your experiences during the COVID-19 pandemic and provide thoughts and recommendations on education, training, and process improvements for the nonprofit sector to help build resilience to disasters.

Interviews will take approximately 20-30 minutes and will be held online via the Zoom platform. During the interview, written notes will be made, and an audio-recording will be taken with your permission. An audio-to-text transcription will be made from the recording.

Zoom servers are located outside of Canada and Zoom stores users' names and usage data outside of Canada. No other information is stored outside of Canada, and recordings of Zoom meetings are not stored on Zoom servers.

Inconvenience
Participation in this study may cause some minor inconvenience to you such as filling in a form, participating in an interview, or giving up time to participate in research.

Risks
There are no known or anticipated risks to you by participating in this research.

Benefits
The potential benefits of your participation in this research include compiling smart practices and recommendations that will be useful to the nonprofit sector in the Toronto area. The research will then have the potential to help participants and their organizations and enhance the overall state of knowledge.

Compensation
2 To compensate you for any inconvenience related to your participation, you will have the chance to opt-in to receive an executive summary of the final research results.

Voluntary Participation
Your participation in this research must be completely voluntary. If you do decide to participate, you may withdraw at any time without any consequences or any explanation. If you do withdraw from the study data will only be used with the participant's permission. Participants who withdraw will still receive a copy of the executive summary of the research paper if they wish. To withdraw from the study, contact Cora Larkins or Dr. Kimberly Speers using the contact details above.

Anonymity
Several steps will be taken to protect your anonymity and identity. Participants will remain anonymous in the dissemination of results. While the interviews will be recorded, the recordings will be destroyed once they have been transcribed. The transcriptions will not contain any mention of your name, and any identifying information from the interview will be removed. The transcriptions will also be kept on a password protected computer and only the principal researcher will have access to the interviews. All information will be destroyed after 365 days of last use.

Due to the study's context of organizations in Toronto, although unlikely, it might be possible for someone with knowledge of the sector to guess who may have participated, but the results will not connect individuals nor organizations with their responses.

Confidentiality
Your confidentiality and the confidentiality of the data will be protected by storing data on a password-protected computer. The data will be deleted 365 days after the last use for this project. The dissemination of findings will ensure that participants' data remains confidential.

Dissemination of Results
It is anticipated that the results of this study will be shared with others as a master's capstone report and presentation to the defence committee and in an executive summary to participants. The results of this study may also be shared in a published article or presentation at a conference.

Disposal of Data
Raw data from this study will be disposed of (electronically deleted) within 365 days of last use. Electronic data will be erased from the University of Victoria website on which it is hosted.

Contacts
Individuals that may be contacted regarding this study include Cora Larkins and Dr. Kimberly Speers. Contact details are noted above in the first two paragraphs.

In addition, you may verify the ethical approval of this study, or raise any concerns you might have, by contacting the Human Research Ethics Office at the University of Victoria at 250-472-4545 or ethics@uvic.ca.

CONSENT:

Do you consent to our Zoom interview being audio-recorded for the purposes of this research project?

Yes, I consent ☐ *No, I do not consent* ☐

Your signature below indicates that you understand the above conditions of participation in this study, that you have had the opportunity to have your questions answered by the researchers, and that you consent to participate in this research project.

_____	_____	_____
Name of Participant	*Signature*	*Date*

Please keep a copy of this consent form for your records and scan/email a copy to the researcher.

Appendix D – Survey Questions

Disaster preparedness and planning in the nonprofit sector

Thank you for participating in this research survey. Your feedback is important.

The survey will take approximately 10 minutes to complete. There are 29 questions, however, you will only be asked a portion of them (~25) based on your previous answers. By completing the survey, your free and informed consent is implied and indicates that you understand the conditions of participation in this study.

This study has been reviewed and has received ethics clearance through the University of Victoria Research Ethics Board.

1. How many years has your organization been active?

- ◯ 0-5
- ◯ 6-10
- ◯ 11-15
- ◯ 16-20
- ◯ 21-25
- ◯ 26+

2. What is the approximate number of paid staff (full-time equivalent) at your organization?

- ◯ 0
- ◯ 1-5
- ◯ 6-10
- ◯ 11-20
- ◯ 21-50
- ◯ 51-100
- ◯ 101-150
- ◯ 151+

3. What is your organization's annual operating budget?

- ◯ 0-$99,999
- ◯ $100,000-$249,999
- ◯ $250,000-$499,999
- ◯ $500,000-$999,999
- ◯ $1,000,000-$2,999,999
- ◯ $3,000,000-$10,000,000
- ◯ $10,000,000 +

4. Does your organization receive any provincial or federal government funding?

- ◯ No provincial or federal government funding
- ◯ Both provincial and federal funding
- ◯ Federal funding only
- ◯ Provincial funding only

5. What is the primary service area of the organization (local, regional, provincial, national, international, other)

- ◯ Local (Toronto)
- ◯ Regional (GTA)
- ◯ Provincial (Ontario)
- ◯ National (multiple provinces/territories) International
- ◯ Other (please specify)

6. What are the primary communities served by your organization? (Check as many boxes that apply)

- ☐ Children and youth
- ☐ Low-income households
- ☐ Seniors
- ☐ Persons with disabilities
- ☐ People experiencing poverty
- ☐ Women and/or girls
- ☐ Newcomers and refugees
- ☐ People living with mental health conditions or addictions
- ☐ Black communities and/or People of Colour
- ☐ People experiencing employment barriers
- ☐ First Nations, the Métis Nation, and Inuit communities
- ☐ LGBTQ2S communities
- ☐ People experiencing homelessness
- ☐ Other (please specify)

7. What is your role at the organization? E.g., job title

- ◯ Chief Executive Officer/President
- ◯ Executive Director
- ◯ Chief Operating Officer
- ◯ Director
- ◯ Senior Manager
- ◯ Chief Financial Officer
- ◯ Other (please specify)

8. Did your organization have a current strategic plan when the pandemic started?

- ◯ Yes
- ◯ No
- ◯ Other (please specify)

9. Was your organization deemed an essential service at any point during the pandemic?

- ◯ Yes
- ◯ No
- ◯ Other (please specify)

10. Did your organization have a disaster/crisis management plan in place when the COVID- 19 pandemic hit Ontario in March 2020? The plan may or may not have included an epidemic/pandemic response.

- ◯ Yes
- ◯ No

Disaster preparedness and planning in the nonprofit sector

Pre-Crisis: Disaster preparation and planning - No plan in place

11. How prepared was your organization for the COVID-19 pandemic?

- ◯ Extremely well prepared
- ◯ Quite well prepared
- ◯ Moderately prepared
- ◯ A little prepared
- Completely unprepared

12. Why did your organization not have a disaster/crisis management plan? (Check as many boxes that apply)

- [ ] The organization did not have enough funds to develop a disaster/crisis management plan
- [ ] The organization did not have the staff expertise to develop a disaster/crisis management plan
- [ ] The organization did not have sufficient staff capacity and/or time to develop a disaster/crisis management plan
- [ ] Developing a disaster/crisis management plan is too complex
- [ ] Other (please specify)

13. What was the impact on your organization of not having a disaster/crisis management plan in place before the COVID-19 pandemic hit?

- ◯ Positive
- ◯ Neutral
- ◯ Negative

14. Did your organization end up developing a disaster/crisis management plan at any point after the pandemic started?

- ◯ Yes
- ◯ No

15. How important is it for your organization to have a comprehensive disaster/crisis management plan going forward?

- ◯ Extremely important
- ◯ Very important
- ◯ Somewhat important
- ◯ Not so important
- ◯ Not at all important

Disaster preparedness and planning in the nonprofit sector

Pre-Crisis: Disaster preparation and planning - Plan in place

16. Does your organization's disaster/crisis management plan include an epidemic/pandemic response?

- ◯ Yes
- ◯ No
- ◯ Unsure
- ◯ Other (please specify)

17. If your organization's disaster/crisis management plan includes an epidemic/pandemic response, is this due to lessons learned from previous experience with a public health emergency? E.g., Toronto's SARs outbreak (2003), H1N1 flu (2009), etc.

- ◯ Yes
- ◯ No
- ◯ I am not sure
- ◯ Not applicable

18. How prepared was your organization for the COVID-19 pandemic?

- ◯ Extremely well prepared
- ◯ Quite well prepared
- ◯ Moderately prepared
- ◯ A little prepared
- ◯ Completely unprepared

19. Does your organization have a designated disaster/crisis management team that is responsible for handling crises?

- ◯ Yes
- ◯ No

20. If your organization has a crisis management team, who leads the team? E.g., their job title/role - no personal names, please.

21. Has the COVID-19 pandemic changed your opinion about your organization's role in the wider community or the role it plays as a critical resource for the population you serve?

- ◯ A great deal
- ◯ A lot
- ◯ A moderate amount
- ◯ Additional comments
- ◯ A little
- ◯ None at all

22. Knowing that nonprofits and governments often work collaboratively to meet community needs—particularly during disasters—do you think that there is a larger role for the nonprofit sector to play in crisis planning and management within the government? E.g., municipal, provincial, and/or national level.

- ◯ Strongly agree
- ◯ Agree
- ◯ Neither agree nor disagree
- ◯ Disagree
- ◯ Strongly disagree

23. What support, resources, and/or training opportunities would help to strengthen your organization's disaster preparedness and planning competencies? E.g., designated government grants to create a disaster plan, an online disaster/crisis resource developed for nonprofits, etc.

24. What are the most important operations-related insights or smart practices that your organization learned during the pandemic? E.g., increase website bandwidth, work-from- home policy, etc.

25. Has your understanding of the risk of a natural disaster and/or public health crisis, and its potential impact on your organization, changed since the pandemic started?

- ◯ A great deal
- ◯ A lot
- ◯ A moderate amount
- ◯ A little
- ◯ None at all

26. What future potential disaster/crisis are you concerned about in relation to your organization's ability to provide programs and services to your clients/community? (Check as many boxes that apply)

- [ ] Climate change (e.g., heatwaves, floods, food security, extreme storms, forest fires, etc.)
- [ ] Another infectious disease epidemic/pandemic
- [ ] Continuation of COVID-19 'waves'
- [ ] The opioid epidemic
- [ ] Housing affordability
- [ ] A global financial crisis
- [ ] Other (please specify)
- [ ] N/A - I am not concerned

27. **Are you willing to participate in the interview portion of this research study?** If so, the 1:1 interviews will be conducted by Cora Larkins, the primary researcher, and will take approximately 30 minutes. They will be held online via Zoom.

- [ ] Yes, please contact me
- [ ] No, thank you
- [ ] Not me, but a colleague would be happy to participate on the organization's behalf

Additional comments

28. What is the best way to coordinate your interview date/time? E.g., email, phone call, text message, via an executive assistant.

Please provide contact information and preferred method in the comment box below.

29. If you would like to receive the **executive summary** of this research study, please email me at **coralarkins@uvic.ca** and provide your contact email.

If you have any further comments that you think are relevant to this research study, please share them below.
Thank you!

Appendix E – Key Informant Interview Questions

1. On the survey, you answered that your organization was _____ prepared in March 2020.
   What specific measures did your organization have in place for a disaster that helped with your COVID-19 response?
   a) What types of disasters were you prepared/ing for?
   Follow up question: Did your organization run staff crisis training and/or simulation exercises in preparation for an unseen disaster?

   How did it impact your real pandemic response?

2. **Did your organization respond to early (pandemic) warning signals or wait until after the March 13, 2020, lockdown in Ontario? Was the action proactive or reactive?**
   a) Are there any early indicators that you plan to watch going forward? Examples such as the news, wastewater reports, etc.

3. **How did you communicate with your constituents/clients during the pandemic, particularly at the beginning?**
   a) What type of communication worked well and what didn't?
   Follow up question: What if there was no power/cellular service due to a catastrophic event like Hurricane Katrina?

   2nd Follow up question: Has the organization followed up with constituents (e.g., via survey) to inquire about their perception of the organization's COVID response and how to improve, do differently, exclusions, etc.?

4. If they answered in the affirmative on the survey Question 21:
   How *specifically* has the COVID-19 pandemic changed your perception of your organization's role in the wider community and/or the role it plays as a critical resource for the population you serve?

   Follow up question: Have new organizational priorities or programs arisen due to new insights you have gained into your community because of the pandemic?

5. **Where and what role do you think charities and nonprofits could/should play in the municipal or provincial government's disaster and crisis response?**

6. **I understand that funding is always a consideration for nonprofits. Besides the need for funding, what specific types of education or training opportunities would improve your organization's disaster readiness? What are the biggest gaps in your organizational knowledge regarding disaster preparedness? Do you see any opportunities for *quick wins*?**
   Follow up question: Who (organization/person/government) do you believe is best suited to provide this type of training at scale?

7. **Despite the hardships, do you think that the COVID-19 'experience' built capacity and resilience* in your organization and/or community? If so, how did the pandemic experience do that?** E.g., strong/new partnerships, networking with likeminded or different organizations, mutual aid, civic mindedness, new expertise developed, etc.

   **Researcher to define capacity and resilience terms for participants if needed*

   Follow up question: How might the nonprofit sector work together to implement best practices in expectation of another disaster? Who do you see as the most effective person/org/group to implement a sector-wide working group, or should planning remain with individual organizations?

Additional Questions if time permits:

1. If they had a plan in place or created one during COVID: How was your Board of Directors involved, or not, in the disaster planning, preparation and implementation of the plan?
   Follow up question: Are there any promising governance practices that came out of this experience? E.g., decision making practices, leadership styles, etc.
2. If your organization was forced to close its doors for any extended amount of time due to a disaster (e.g., like Hurricane Katrina), where/to whom would you direct your clients for help?
3. Should nonprofits deemed essential services be given *priority* access to government grants and funding to create, implement, and maintain a disaster plan? Would that be fair?
4. Should essential nonprofits be assessed for disaster preparedness? Do we need to start with a benchmark assessment and build from there? What indicators or metrics would you use to determine a nonprofit's disaster readiness?