COVID-19 has changed the way we engage communities. For health and human service providers, needs assessment activities are at the core of community engagement. However, COVID-19 has changed the way these activities are presently conducted and perhaps forever.

Over the span of three months, and at the onset of stay at home orders issued across the country, Community of Hope (COH) carried out a robust needs assessment project to develop an expansive array of services tailored to meet our community’s needs. Our needs assessment activities built upon a resource and gap analysis performed by LINK Strategic Partners, a national strategic communications and stakeholder engagement firm. The resource and gap analysis identified current challenges to accessing resources and barriers to family wellbeing. Through our partnership, LINK Strategic Partners made recommendations based on conversations, literature, and knowledge of engagement and communications in DC and in Wards 7 and 8, traditionally under-resourced parts of the city.

Those recommendations served as a starting point for deliberation and ideation. Because COH is a health center and housing provider, COH paid close attention to the analysis and recommendations specifically in health, housing, and community engagement in the Ward 8 community. The information from that gap was leveraged to determine what trends warranted further exploration. The city-wide analysis provided the perfect hand-off between partners to move from a city-wide view down to the gathering of information at the Ward 8 resident level.

COH encountered several successes and challenges in conducting needs assessment activities at the resident level amidst a global pandemic. Successes included the development of a dynamic project team with existing staff from across the organization. Many staff had little to no experience with conducting needs assessments or primary research. This created a perfect opportunity for professional work development and training in an area of interest to staff. Other successes included the opportunity to personally speak to community residents to not only assess their needs, but to also provide information and resources on the services available at their very own community health center.
We incurred challenges with attaining a significant sample size or a relatively large enough list of participants that properly reflected the make-up of Ward 8. While our target population included African American teenagers, men, seniors, pregnant women, and women between the ages of 18-45, our overall response rate included nearly 70% seniors and women. The tips and recommendations below reflect lessons learned from our own needs assessment activities. They provide paths forward on how Community-Based Organizations (CBOs) and non-profit organizations can effectively engage residents in a new world where quarantine, stay at home orders, and social distancing limit face-to-face engagement.

1) Leverage existing needs assessments in the city.

Find the perfect hand-off between needs assessments, gap analysis, and resource development plans that already exist, to your neighborhood level needs assessment activities. By leveraging existing information about the city’s resources and gaps, CBO’s will be able to transition smoothly from the city-wide perspective to the neighborhood and resident perspective. City-wide gap analysis and needs assessments often provide macro-level insight into the needs of the city as whole. These results may not reflect the unique attributes of the neighborhood your CBO serves. Instead of verifying the information received from city-wide analysis, focus on gathering information that could not be attained at the city-wide level. Focus on supplementing the existing analysis to paint a full, place-based resident centered, needs assessment plan. Develop key take-aways from existing analysis and drill down on two to three specific focus areas (preferably areas of interest to your target population) to gather deeper insights.

2) Tap into your existing network for participants.

Staff in other departments in your organization may have families that they speak with frequently that you could add to your participant list. Where possible, determine if these staff have the capacity to facilitate focus groups and/or conduct phone interviews. For example, while conducting phone interviews, these staff have built a rapport with families so they may be more willing to participate if they are recruited and engaged by someone they know.

3) Build internal capacity.

Use the opportunity to create internal research and evaluation capacity within your organization. Conducting needs assessments is research. Train existing staff on how to conduct this primary research and give them a new skill set that they can use for years to come. Instead of having to contract out, you now have a que of staff that know how to conduct needs assessments whenever the need comes along.
Provide a brief 30 to 45-minute training using a PowerPoint deck with slides displaying tips, and the dos and don’ts of facilitating interviews and focus groups. Also consider providing guiding questions and a script for facilitators to use. Lastly, as the lead evaluator, provide support to your project team. Consider conducting daily, weekly, or bi-weekly virtual huddles where you can check in on how things are going. Ask the team if they have experienced any barriers with conducting activities. Also ask what things are working well so that you know what to replicate.

4) Use intuitive survey software.

When using internal staff, make their jobs and yours as the analyst, easier by using an intuitive survey software such as Qualtrics. Qualtrics offers a robust text analysis feature that pulls insights from narratives. If staff are unable to translate focus group and interview narratives into a binary format that can be quantitatively analyzed, use the text analysis feature to create word clouds, and charts and graphs that reflect commonly used phrases and terms.

5) Meet families where they are.

In the case of COVID-19, families are at home and so are you. Stay at home orders and social distance requirements have rendered in-person focus groups impossible. Instead of postponing focus group activities or relying solely on online surveys, ask your perspective participants if they have access to the internet and a reliable device to access the virtual meeting platform of your choice. While many homes may not be equipped with laptops or desktops, many have access to smart phones that have built in wireless internet capabilities.

Once this is determined, be ready to help participants download necessary applications and join the group when the meeting commences. Additionally, research whether the platform of your choice provides real time trouble shooting. For example, Zoom offers real time tech support should you incur any trouble using the platform. For some resident, senior residents for example, virtual meetings may be unfeasible. For this population consider conducting telephone surveys or interviews to gather their insights.
6) Understand how anxiety will affect the perception of need.

Naturally, as families have spent weeks at home alone, social distancing from the world as they knew it, they will feel more disconnected than ever before from services and resources available in their communities. The isolation may have caused families to believe that some community services do not exist when they actually do. It is important to keep in mind the age-old idiom – out of sight, out of mind. Instead of chalking these statements up to lack of knowledge and concluding that residents simply need more education about resources available, use this as opportunity to develop action plans that change the way services are marketed during a pandemic.

7) Gather data and provide information and linkages to services at the same time.

Understand that many health and human service agencies are closed or have adjusted operations due to COVID-19 and residents have not been able to access services and supports in the way they are accustomed to. Moreover, the exchange of information has slowed to almost a halt, so not only are residents unable to access services, residents who have never accessed the system before do not know where to begin. As you perform your preliminary data gathering activities such as focus groups, surveys, and interviews, be sure to also provide information on how residents may access services and resources as they describe their needs.

Additionally, families may use your needs assessment activities to express concerns that are out of your organization’s scope. For some families, this will be the only opportunity they have to express how COVID-19 has impacted them and may have questions about national resources to help them navigate their concern. They may look to you as a service provider, to provide them the answers. Families may ask questions about school closures/openings, when stay at home orders will be lifted, or even when they can expect their unemployment benefits. Do not speculate on things out of your purview. Have on hand a list of contacts that you may provide to the resident if they want to get more information. Where feasible, do the research for them, then follow up with the participant to provide relevant information.

Finally, be flexible. In a time of unprecedented uncertainty, always be flexible and willing to amend your timeline and project plan where needed.