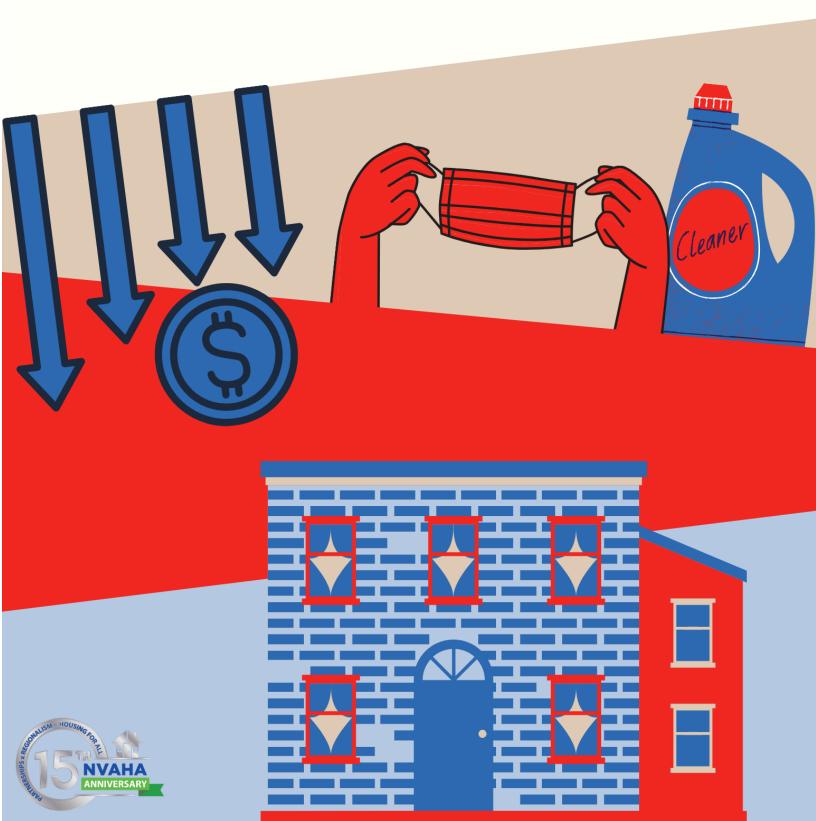
Northern Virginia Affordable Housing Alliance COVID-19 Impact Survey: Phase I Results



Executive Summary

In May 2020, the Northern Virginia Affordable Housing Alliance (NVAHA) conducted a brief survey assessing the impact of the COVID-19 pandemic on the operations, staff, and clients of affordable housing and homeless service providers in the Northern Virginia region. This survey was the first in a series of three surveys NVAHA plans to administer over a six-month period. The second survey will be sent in July 2020 and the third survey will be sent in October 2020.

On May 4, the first survey was sent to 35 organizations operating across the City of Alexandria, and Arlington, Fairfax, Loudoun and Prince William Counties. Nineteen organizations completed the survey before it closed on May 26 - a 54.29% response rate. Non-profit affordable housing developers represented the largest share of organizations participating in the survey. The mean age of participating organizations was about 40, and the majority of organizations had between 1 and 50 employees. Most organizations were active in more than one Northern Virginia Jurisdiction, and nearly 30% were active in all five jurisdictions. About 65% of organizations owned or managed affordable units, and the number of units owned or managed ranged from 10 - 7,500.

Revenue Loss In the month of April, cancellation of a spring meeting or other revenue-generating event was the most frequently reported source of lost revenue, followed by lost rental income, and loss of philanthropic grants. Because the survey was administered in early May, and participants were only asked to report on lost revenue for the month of April, the number of organizations who report a loss of rental income is likely to increase in subsequent surveys.

Impact on Services for Residents/Clients When asked how *else* the pandemic had affected their organization (besides loss of revenue) respondents most frequently reported disruption of services for clients/residents, followed by an increased demand for services. In future surveys, we will seek to ascertain what specific services have been disrupted, and what services are in greater demand as a result of the pandemic, to better understand the extent to which these outcomes overlap.

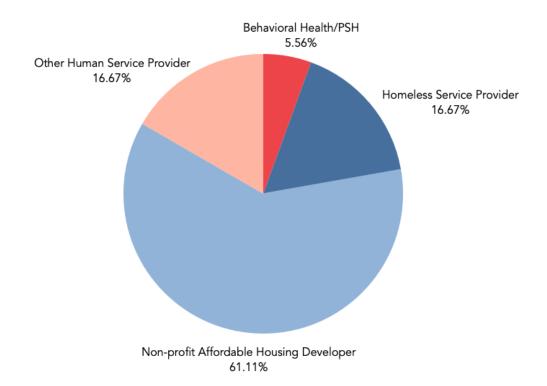
Funding Needs The most frequently reported funding need of participating organizations was unrestricted operational funds, followed by funding to provide direct services to residents/clients. Notably, all five respondents who elected to write-in other funding needs emphasized the need for rental assistance funding. The most frequently reported non-funding need of participating organizations was free or discounted cleaning supplies and/or personal protective equipment (PPE).

Resident/Client Concerns Respondents who worked directly with affordable housing residents, individuals experiencing homelessness, and other client populations were asked to rank how often residents reported various concerns. Employment status was the most frequently reported resident concern, followed by housing and food access. Lack of internet access was the least frequently reported resident concern, but lack of a device with which to access the internet was the most frequently reported barrier preventing residents/clients from accessing information about COVID-19. Lack of information available in residents/clients' native languages was the second most frequently reported barrier to accessing information about the virus.

Results from this survey will inform the development of subsequent surveys, and will be shared on the NVAHA blog and COVID-19 resource page. Together, the results from all three surveys will be used to develop a series of recommendations that will be shared with local government officials to inform FY 2022 budget development.

Section I: Organization Characteristics

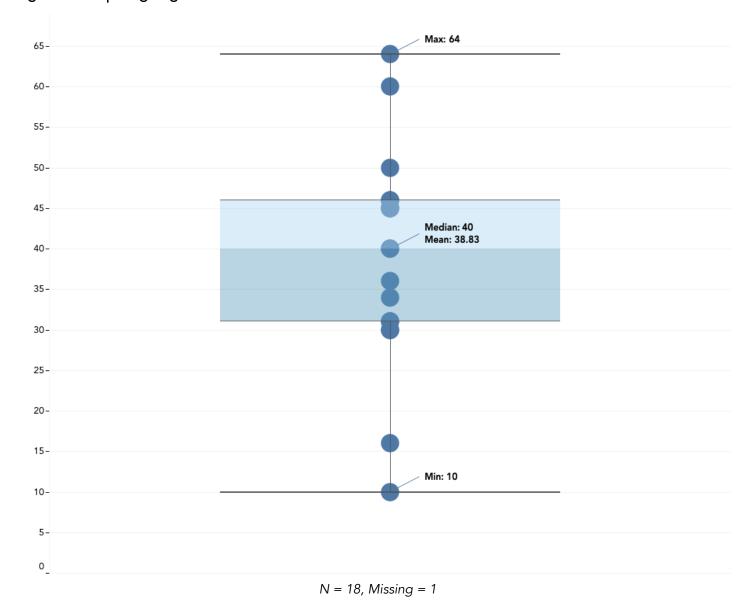
Primary Function of Participating Organizations



$$N = 18$$
, Missing = 1

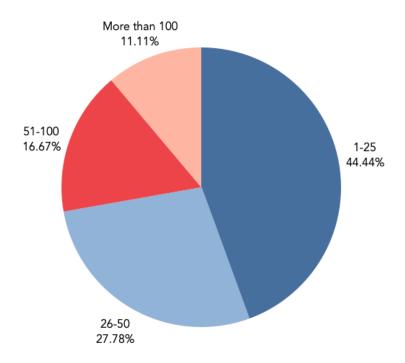
Of the respondents who identified their organization's primary function, the majority were non-profit affordable housing developers, followed by homeless and human service providers. One respondent indicated the primary function of their organization was behavioral health in the context of permanent supportive housing. None of the respondents who identified their organization's primary function represented a public housing authority, a for-profit affordable housing developer, or an organization whose primary function is property management.

Age of Participating Organizations



All organizations for which age was recorded were at least a decade old. The mean age of these organizations was about 40 (38.83).

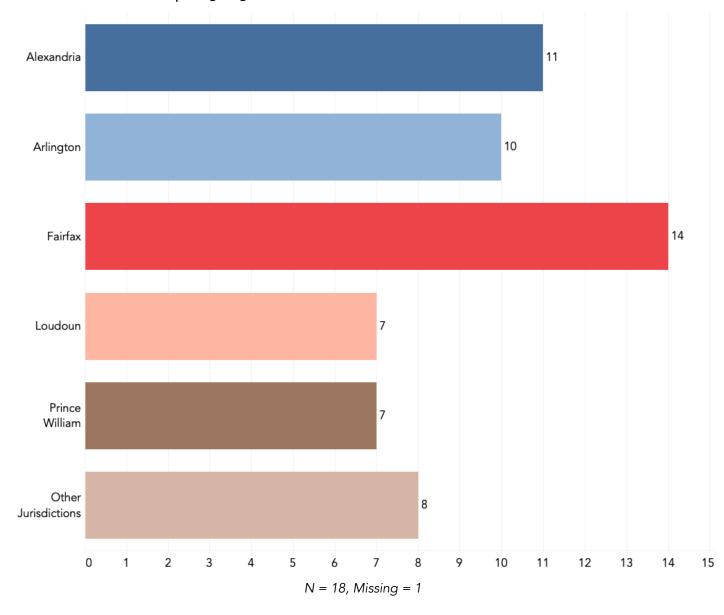
Size of Participating Organizations



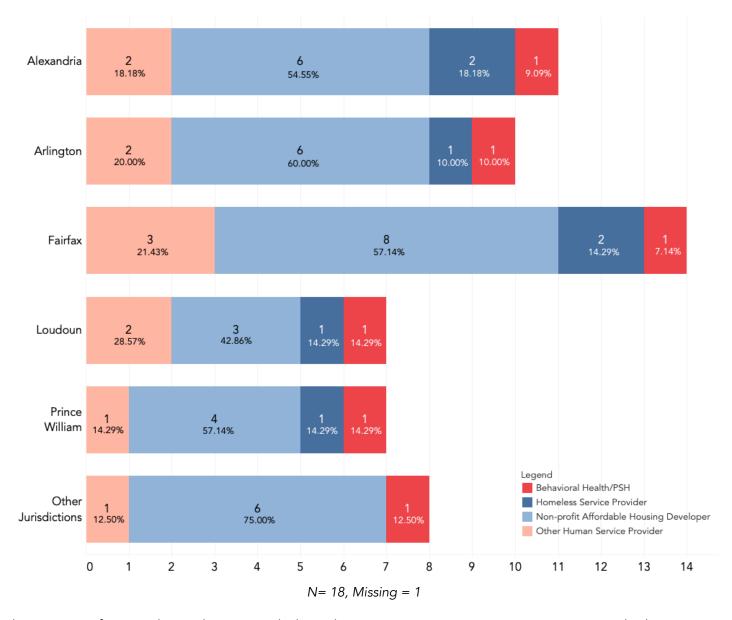
N = 18, Missing = 1

Most organizations for which staff size was recorded had 50 or fewer employees (72.22%). Two organizations had more than 100 employees. In future surveys, we may seek to determine whether any participating organizations have more than 500 employees, affecting their eligibility for the Paycheck Protection Program, and exempting them from the emergency paid sick leave requirements outlined in the Families First Coronavirus Response Act.

Jurisdictions Where Participating Organizations are Active

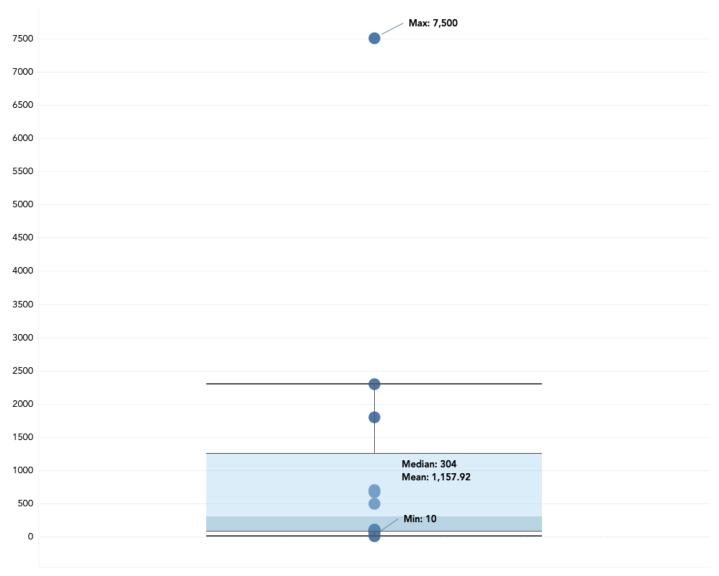


Organizations in Each Jurisdiction by Primary Function



The majority of respondents who reported where their organizations operate were active in multiple jurisdictions (61.11%), although three were active in Fairfax only, three were active in Alexandria only, and one was active in Arlington only. Five organizations (27.78%) were active in all five NoVA jurisdictions. Non-profit affordable housing developers represented the largest share of organizations active in each jurisdiction. This is consistent with the distribution of organizations by primary function, as non-profit affordable housing developers represented the largest share of participating organizations for which primary function was recorded (61.11%).

Property Management

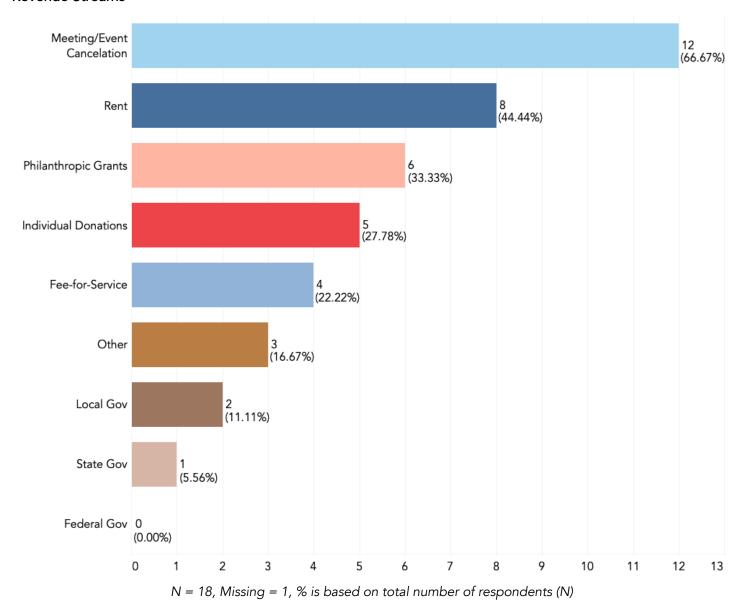


 $N=12,\, Missing=2,\, N/A=5$ Respondents who did not own or manage affordable units (N/A) were treated as missing

Among respondents who indicated whether their organization owned or managed affordable properties or units, 64.71% owned or managed units and 35.29% did not. The number of units respondents owned/managed ranged from 10 to 7,500 with a mean of 1,157.92 units.

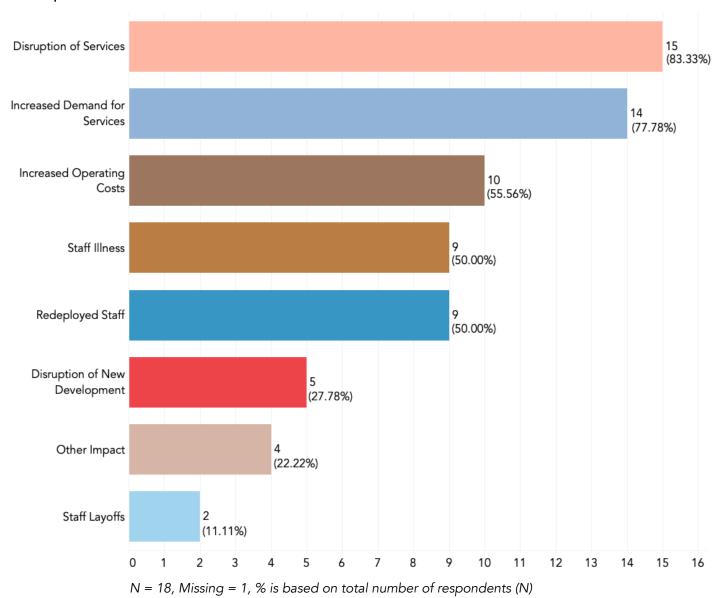
Section II: Impact of COVID-19 on Organizations

Revenue Streams



Cancellation of a spring meeting or other revenue-generating event was the most frequently cited source of lost revenue (66.67%) among respondents who indicated how their organizations' revenue streams were affected by the pandemic in the month of April (although one organization reported exceeding their fundraising goal after transitioning their spring event to an online fundraising campaign). The next most frequently cited sources of lost revenue were rental income (44.44%), philanthropic grants (33.33%), and individual donations (27.78%). Local (11.11%) and state government contracts (5.56%) were the least frequently cited sources of lost revenue, and no respondents reported a loss of revenue from federal government grants or contracts. Other sources of lost revenue reported by respondents included loss of sponsorship for a fall meeting, and loss of developer fees tied to stabilized operations. It should be noted that, because the survey was conducted in early May, respondents were asked to report on revenue loss for the month of April only. Impact on revenue streams is an outcome we will continue to track over time through subsequent surveys.

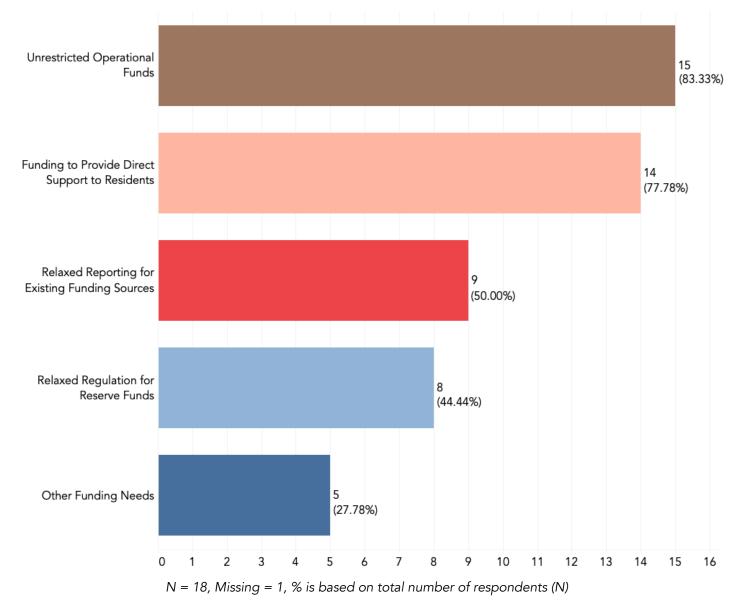
Other Impact



Among respondents who indicated how *else* (besides changes in revenue) their organizations have been affected by the pandemic, disruption of services for residents/clients was the most frequently cited impact (83.33%). This was followed closely by an increased demand for services (77.78%). In future surveys, we will seek to ascertain what specific services have been disrupted, and what services are in greater demand as a result of the pandemic, as well as what resources (i.e., increased staff/volunteers, increased funding) are needed to eliminate disruptions and meet demand.

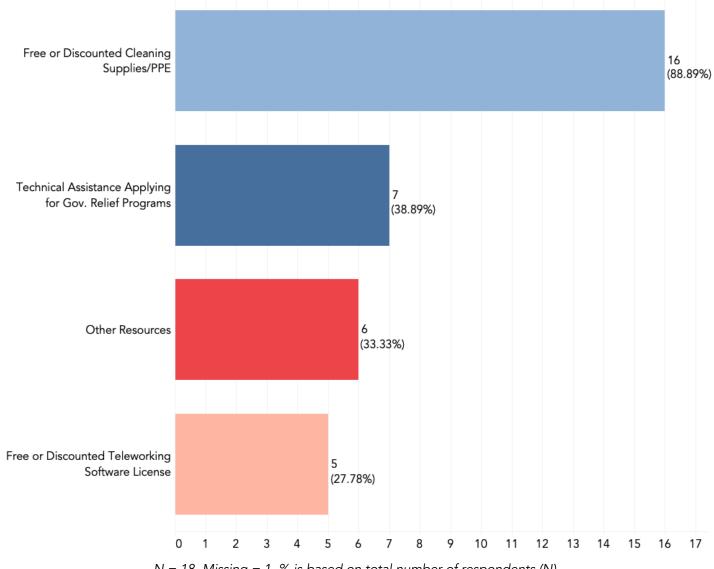
Staff layoffs were the least frequently cited source of impact (11.11%), although we will continue to track this outcome over time. Self-reported sources of impact (write-in response) included the need to curtail non-emergency maintenance; inability to purchase items due to pandemic-related shortages; added costs of purchasing mobile computing equipment, PPE, and third-party cleaning services; and disruption of development due to an inability to conduct site visits, and hold in-person meetings and strategy sessions. These outcomes may be added to questions on organizational impact in subsequent surveys.

Funding Needs



Among respondents who reported their organizations' funding needs related to the COVID-19 pandemic, unrestricted operational funds were the most frequently reported need (83.33%), followed by funding to provide direct support to residents (77.78%). All five respondents who reported other funding needs (write-in response) emphasized the need for funding for rental assistance (among other needs). In future surveys, we may seek to evaluate whether locality-based rental assistance programs have alleviated the need for rental assistance funds, and whether the impact of these programs has been experienced equally across sectors (e.g., non-profit affordable housing developers vs. homeless service providers seeking to provide permanent housing for clients).

Other Needs

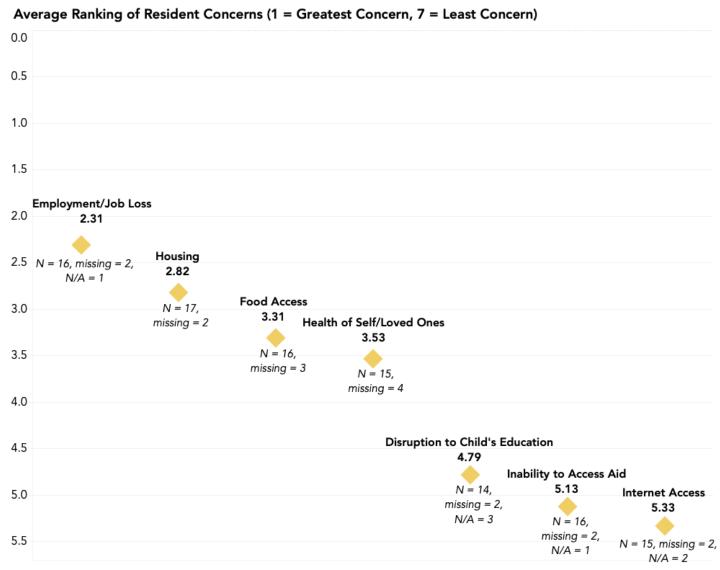


N=18, Missing = 1, % is based on total number of respondents (N)

Among respondents who reported their organizations' other needs related to the COVID-19 pandemic, free or discounted cleaning supplies and/or PPE was the most frequently reported need (88.89%). A free or discounted teleworking software license was the least frequently reported need (27.78%). Other needs (write-in response) included assistive technology for clients in need of virtual support; laptops and broadband service upgrades for staff working from home; assistance transitioning clients experiencing homelessness from shelters to housing; leadership and coordination for securing local, state, and federal support; and ideas for fundraising during the pandemic.

Section III: Impact of COVID-19 on Residents/Clients

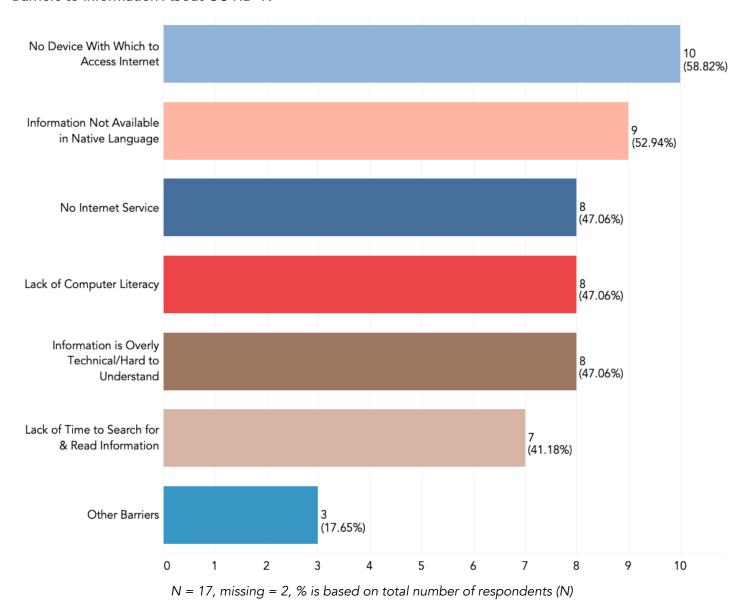
Resident/Client Concerns



N/A were treated as missing when calculating the mean score for each concern

Respondents who worked directly with affordable housing residents, individuals experiencing homelessness, and other client populations were asked to rank how often residents reported various concerns on a scale of 1 to 7, with 1 being most often and 7 being least often. Employment/job loss had the lowest mean score (2.31), followed by housing (2.82), indicating these were the most frequently voiced concerns. Lack of access to the internet had the highest mean score (5.33), indicating that this was the least frequently voiced concern. Other resident concerns (write-in response) included loss of social interaction/isolation, inability to practice social distancing in congregate living environments, uncertainty regarding when the stay-at-home order will end, inability to stay up-to-date on virus-related news and information, inability to pay rent, fear of applying for federal aid programs for undocumented residents, and concerns about workplace safety for residents who are frontline workers. We will continue to track changes in resident concerns related to COVID-19, and incorporate the additional concerns raised in subsequent surveys.

Barriers to Information About COVID-19



Respondents who worked directly with affordable housing residents, individuals experiencing homelessness, and other client populations were asked what barriers residents/clients report prevent them from accessing information about the COVID-19 virus. No device with which to access the internet was the most frequently reported barrier to accessing virus-related information (58.82%), followed by a lack of information in residents' native languages (52.94%). Other barriers (write-in response) included feeling overwhelmed by the volume of information available, and the challenge of getting in touch with individuals with information, and obtaining accurate information. One respondent also noted the residents/clients they serve have not reported any issues accessing information about the virus.