

RESPONDING, REIMAGINING, REALIZING

OUT-OF-SCHOOL TIME COORDINATION IN A NEW ERA

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Executive Summary

The Wallace Foundation commissioned Research for Action and McClanahan Associates to study how **out-of-school time intermediaries (OSTIs)** responded to the COVID-19 pandemic and the role they could play in supporting communities moving forward. Citywide **out-of-school time (OST) systems** encompass a wide variety of afterschool and summer programs and associated provider organizations, youth participants, and their families. These systems were stretched during the COVID-19 pandemic and the national racial reckoning to respond to community needs in new and more equitable ways. Also impacted were **OSTIs** that manage OST systems within individual cities. OSTIs operate through various governance structures and perform a range of coordination functions intended to ensure quality, access, and equity in OST systems so that all youth have access to the unique out-of-school resources and opportunities they need to thrive.

Background

The study set out to understand:

- how OSTIs contributed to citywide pandemic response efforts and if and how their contributions during the pandemic were different from historical OSTI contributions in their cities;
- how OSTIs considered racial equity in their coordination efforts;
- the value of these contributions as perceived by system-level partners, providers, and caregivers; and
- the opportunities pandemic-era efforts suggest for the work of OSTIs moving forward.

This report draws on data from more than 100 interviews that gathered perspectives from OSTI staff and leaders, other system-level leaders, and OST providers in 12 cities. In addition, interviews with caregivers and surveys of OST providers were conducted in six of the 12 cities.

The research details the broad range of activities OSTIs conducted as they responded to the pandemic and finds that system-level leaders, OST providers, and caregivers perceived important benefits from their efforts. OST providers, school districts, cities, and other partners highlighted the significant support OSTIs provided to ensure the continuity of services and fill gaps in services for children, youth, and families. The findings are organized into four key areas of work: adaptation of traditional functions, advocacy, partnerships, and racial equity.



Findings

The pandemic highlighted the capacity of OSTIs to adapt to changing conditions and manage significant shifts in OST systems to meet new community challenges. OSTIs supported OST system pivots, allowing

for continued OST programming despite school closures and ensuring the programming was responsive to the new realities of young people and their families. Providers and system-level partners across cities valued the work of the OSTIs, and these adaptations offer lessons for their work in the future. OST coordination adaptations included:

- **Virtual OST programming:** OSTIs played a key role in supporting the shift to virtual OST programming early in the pandemic through the provision of professional development, as well as quality standards and assessment rubrics in some cities. Caregivers were grateful that virtual programming was available when onsite programming was not.
- **Support for Peer-to-Peer Learning:** The OSTIs' virtual convenings were often spaces for OST providers to share resources, learning, and innovation, as well as receive emotional support.

- **Addressing Social, Emotional, and Mental Health Concerns of Staff and Youth:** OSTIs adapted their training and convenings to address the emerging social and emotional needs of staff and youth. They offered professional development and programming resources and, in some cities, prepared staff to provide social justice-oriented social and emotional programming. Caregivers confirmed the need for current and future OST programming to address their children’s social, emotional, and mental health needs.

The lessons learned about how to make these shifts suggest several recommendations that can strengthen OST systems and communities in the future, especially the following:

- OSTIs can look for ways to continue providing emotional support to OST staff, such as access to counseling, self-care resources, or affinity groups to enhance their capacity to offer safe and supportive OST spaces.
- Because OSTIs can adapt and move OST systems in new directions, policymakers and funders should view OSTIs and their OST systems as resources for addressing chronic and emerging gaps in support and enrichment for youth.



The pandemic highlighted the importance of OSTIs’ local advocacy efforts to advance and sustain OST systems and address issues of racial equity.

OSTI advocacy on behalf of OST systems aimed to ensure that the systems received the resources needed, and flexibility in using those resources, so that they could continue to support youth and families. In addition, OSTIs advocated with policymakers and funders to advance racial equity goals for the systems, such as increased wages for OST provider staff and access to funding for smaller, grassroots OST organizations. Surveys of OST providers found that advocacy for OST systems was, on average, the most valued OSTI activity from the perspective of OST providers across all cities; interviews with providers confirmed this finding. Facing the impending end of COVID-relief funding, OSTIs, OST providers, system-level partners, and funders recognized the importance of OSTI advocacy for resources to support continued movement toward a more healthy and equitable OST system. These lessons suggest a host of recommendations for influencing policymakers in the future, including:

- If not already in place, OSTIs should develop formal policy and advocacy arms to sustain or increase local funding for OST programming and partner with state-level advocacy networks to ensure state-level funding streams for OST programming.
- Policymakers should involve OSTIs and their OST networks in identifying equitable funding approaches and priorities for OST systems.



The pandemic experience highlighted the capacity of OSTIs and other ecosystem leaders to form strategic partnerships to address economic, health, and educational inequities.

When the COVID-19 pandemic began, OSTIs and other ecosystem leaders formed new partnerships and deepened existing cross-sector partnerships to support families in new ways. District and city leaders developed an increased appreciation for the role OST providers could play in supporting families and new appreciation for OSTIs’ capacities to mobilize these providers. These partnerships address economic, health, and educational inequities that existed before the pandemic and continue today, making this collaborative work of ongoing importance. However, obstacles such as funding or funding restrictions can undermine such efforts.

- **Partnerships to distribute material resources:** Many OSTIs partnered with other systems to support families with material resources, such as food and technology. Caregivers in some cities recounted that their OST providers were valued points of contact for information about where to access resources and

that providers were nonjudgmental in their approaches to offering support.

- **Partnerships to promote public health and mental health:** OSTIs, through strategic partnerships, shared public health information and preventative resources, such as masks and vaccination information, with families and OST staff through their OST provider networks. They also identified mental health referral sources and facilitated access to mental health resources.
- **Partnerships with school districts:** From the perspective of city system leaders, the most significant OSTI partnerships formed or deepened during the pandemic were those with schools. OSTIs engaged with school districts to create academic learning centers that were designed to keep children engaged in learning through their virtual schooling, support school district summer schools, and help districts and schools connect with families. Caregivers who accessed these supports valued them. However, not all were aware of these resources, and some would have liked additional supports, such as virtual tutoring.
- **Partnerships with parks and recreation and public library systems:** OSTIs' efforts to operate academic learning centers also deepened their partnerships with city parks and recreation systems and public libraries, which hosted the centers in four of 12 cities. Importantly, this pandemic-initiated collaboration increased these public systems' appreciation for the youth development approaches of the OSTIs.

The lessons learned about cross-system partnerships point to numerous recommendations, among them the following:

- OSTIs and partners in the learning and development ecosystem should maintain or reestablish strategic partnerships that leverage the capacity of the OSTI and citywide OST systems to distribute resources for the whole family, including food, public health, mental health, economic, and educational resources.
- Policymakers and funders should fund partnerships or align separate funding streams so they can be used for complementary purposes to support ecosystem priorities.



The pandemic and the national racial reckoning also highlighted and exacerbated ongoing racial equity gaps in the OST system. OSTIs began to work on several fronts to move the systems toward greater racial equity. Although a commitment to and focus on racial equity was at the forefront for most OSTIs in the study before the pandemic, they reported that this focus deepened, and their thinking expanded during the pandemic and the national racial reckoning that was catalyzed in 2020. In five out of the six cities participating in the provider

survey, OST providers reported a steady increase in work toward equity in the OST system. OSTIs varied in their approaches, but categories of equity work included the following:

- **Equitable funding strategies:** Several OSTIs examined and adjusted their funding distribution to address the variation in funding distribution across the city and in the funding needs of providers who serve different populations of youth.
- **Support for grassroots, OST provider organizations:** OSTIs also offered tailored technical assistance and infrastructure support for smaller grassroots OST organizations, which are often led by people of color and deeply connected to the community. These organizations face administrative barriers, including limited human resources to apply for large public funding opportunities. While most of the OSTIs provided some support to grassroots OST providers, some also served as fiscal sponsors or backbone organizations.
- **Recruitment and retention of staff representative of communities served:** OSTIs in at least six of 12 cities described intentional efforts to ensure that OSTI and OST provider staff demographics reflected students served. OSTIs also recognized that pay, opportunities for growth, and working conditions needed to be improved, and they began developing strategies to address these concerns.

- Youth and community input about OST systems: OSTIs in the study also identified the importance of including youth voices and community input in system-level visioning and decision-making. Several OSTIs created councils or committees that include youth and/or community members to guide their organizational priorities and decisions.

Many of these efforts to address racial equity were nascent at the time of the research but show promise for more equitable OST systems. OST provider organizations that serve the highest proportions of Black, Indigenous, and other people of color (BIPOC) youth reported that they became much better connected to each other through the pandemic. They also reported more connections to a subset of other well-connected OST organizations. However, despite this boost in connectivity, in some cities, these organizations still were not as integrated into the broader OST network as other organizations that served fewer BIPOC youth, suggesting that OSTIs should continue to support them in connecting to the network.

These pandemic-era efforts to advance racial equity suggest many recommendations for current efforts to make OST systems equitable, including the following:

- OSTIs should continue to expand OST system networks to engage grassroots, BIPOC-led OST organizations and provide capacity-building support that facilitates their ability to secure and receive public funding.
- Policymakers could work with OSTIs to create more equitable funding mechanisms that support smaller, grassroots OST organizations and allow OST providers to attract and serve youth who experience more significant barriers to participation.

From the perspective of many system leaders, OST providers, and caregivers around the country, OSTIs contributed to their cities', organizations', and families' abilities to navigate the crisis of the pandemic. The pandemic stretched OSTIs and shed light on OSTI's flexibility and innovation. Continuing investments in OST coordination efforts will allow them to remain nimble, develop and nurture partnerships, and address equity in the OST system to create an enriching and healthy ecosystem where young people and their families can thrive.



Introduction

The COVID-19 pandemic was an unprecedented crisis and recent data suggests that children and youth continue to struggle in its wake.¹ For children from historically marginalized communities, the pandemic exacerbated the historical inequities within the systems that exist to support them, exposing them to even greater risk. For example, already underfunded schools had to quickly pivot to virtual schooling without the existing technological infrastructure or capacity to support families in this transition. Due to widespread facility closures, organizations had to find new ways to provide breakfast and lunch to children and youth who had previously relied on school and community-based programs to receive those meals. New strategies had to be developed to provide communities with the added physical and mental health services that were needed. At the same time, a national racial reckoning, emerging from the murder of George Floyd in 2020 and the Black Lives Matter protests that followed, spurred urgent calls for societal systems to rectify historical racial injustice.

The dual pressures of the pandemic and the racial reckoning stretched community service systems and their coordination structures to respond in new and more equitable ways. Among those systems and structures were **citywide out-of-school time (OST) systems**. OST systems² encompass a wide variety of afterschool and summer programs and OST provider organizations, as well as youth participants and their families. OST systems are often managed by **out-of-school-time intermediaries (OSTIs)**,³ which seek to ensure the quality and accessibility of OST programs in a community. OSTIs operate through a variety of governance structures and perform a range of coordination functions intended to ensure equity in OST systems, and that all youth have access to the unique out-of-school resources and opportunities they need to thrive.⁴ These resources include both cognitive and social-emotional services that address the needs of the whole child.⁵

OST systems and OSTIs faced significant disruptions during the pandemic, including its impact on the frontline workers who grappled with personal health and economic concerns. At the same time, they were confronting the same concerns among youth and families who relied on their programming. To aid their efforts, multiple rounds of federal COVID relief funding, with set-asides allocated for OST programming, flooded cities to cushion the economic, academic, and socioemotional impact of the pandemic. With this new funding came the potential for new opportunities for the OST sector. However, these funds were often allocated to city governments and school districts, which posed challenges for OST providers in accessing these new resources and for OSTIs in ensuring equity in their distribution within the OST system. OSTIs also grappled with the implications of the racial reckoning for their coordination efforts.

To learn what this experience revealed about OSTIs and the role they could play in supporting communities moving forward, the Wallace Foundation commissioned Research for Action and McClanahan Associates, Inc., to study how OSTIs responded to the COVID-19 pandemic. The study set out to understand:

- how OSTIs contributed to citywide pandemic response efforts and if and how their contributions during the pandemic were different from historical OSTI contributions to their cities;
- how OSTIs considered racial equity in their coordination efforts;
- the value of these contributions as perceived by system-level partners, providers, and caregivers; and
- the opportunities pandemic era efforts suggest for the work of OSTIs moving forward.

Other publications have described the contributions of OST providers⁶ and OSTIs⁷ during this period; however, these studies have been limited in scope and draw on data collected primarily from OSTIs themselves. This study draws on data from more than 100 interviews gathering perspectives from OSTI staff and leaders, other system-level leaders, and OST providers in 12 cities. In addition, interviews with caregivers and surveys of OST providers were conducted in six of the 12 cities. To date, this is one of the largest and most comprehensive studies of OST coordination activities during the pandemic.

The research details the wide range of activities OSTIs conducted in responding to the pandemic and finds that system-level leaders, OST providers, and caregivers perceived important benefits from their efforts.

They expanded their services and partnerships to address the growing racial and socio-economic disparities in their communities. Additionally, they shifted their coordination activities to ensure the viability of OST systems and their support for youth and families. The findings underscore the potential for a more engaged role for OSTIs in citywide initiatives aimed at addressing ongoing and persistent challenges facing communities. Moreover, the research highlights new OST coordination opportunities to advance racial equity in OST systems (i.e., ensuring youth from racially marginalized communities have the resources and supports they need to thrive). The report provides valuable insights for OST coordination leaders, city and school district officials, and other policymakers to effectively harness the potential of OSTIs and citywide OST systems in the future.

The report begins with a review of the traditional work of OSTIs and their positioning within the Learning and Development Ecosystem. It then turns to an overview of research methods before sharing insights gained from research on OST coordination during the pandemic. The report concludes with a summary of findings and recommendations for leveraging the lessons of this tumultuous period to suggest new possibilities for OST coordination in the future.



OST Coordination in the Learning and Development Ecosystem

To understand the role of OSTIs and why they are important for youth and families, this discussion situates OSTIs within the broader ecosystem that shapes the development of youth. These broader systems and structures can be referred to as the **learning and development ecosystem (L&D ecosystem)**, defined by Akiva, Hecht, and Blyth⁸ as “collections of people, places and possibilities that constitute an environment full of learning and development opportunities” for young people. Figure 1 below displays the L&D Ecosystem and the role of OSTIs within it. It also shows the ways in which OSTIs work within these nested systems – within an OST system, across an L&D ecosystem, and outside an L&D ecosystem. Two of these categories of coordination—activities within an OST system and activities outside of an L&D ecosystem—have the goal of supporting the OST system and the youth and families that access OST programming. Partnerships across the L&D ecosystem, however, typically have broader goals for supporting families and communities. Each of these types of coordination is described in the next section.

Figure 1. The Role of OSTIs in the Learning and Development Ecosystem



Coordination within an OST system: The role of OSTIs is, first and foremost, to manage the OST system and ensure it is healthy (i.e., prepared and equipped to offer equitable, accessible, and high-quality OST programming so that all youth can thrive).⁹ Different types of organizations can serve as OSTIs, including nonprofit intermediaries, community foundations, networks of OST providers, and offices within city government. OSTIs typically operate a step removed from frontline activity and take a citywide view of the resources and needs of children and families in the community. However, some also provide their own programming.

OSTIs manage the OST system through a set of coordination functions. These functions include setting quality standards for programming, providing professional development for OST provider staff, and collecting data on enrollment, participation, and outcomes to understand ecosystem needs. They also engage in public communication with families about available program opportunities and advocate for the needs and elevate the accomplishments of the OST system. (See Table 1 for a full list of coordination functions, including those that have been previously documented and those found in this research.)

Table 1. OST Coordination Functions

Coordination Functions	Description
Within the OST system	
OST quality standards	An OST system's formal definitions of the elements that constitute quality OST programming. ¹⁰
Common OST data collection/analysis	The collection of data "about children's participation in OST programs from multiple providers [that is] managed collectively" ¹¹ as well as data on program quality.
Shared vision/goals for OST system	The facilitation of conversations with groups across the OST/youth development sector to develop a shared vision or set of goals for OST.
Professional development on providing OST	The provision of "professional development resources and opportunities for OST organizations;" professional development can be available citywide or just to partner organizations. ¹²
Public communications about OST programs	Communications from the OSTI that elevate the value and benefits of the OST sector and advertise about OST programs to "inform parents and children [and the wider community] about OST options, [services] and program locations." ¹³
Sustainability planning support, including staffing	Aid to OST providers on fundraising and long-term sustainability planning, including assistance with staff recruitment and retention.
Funding provided by OSTI	Grant funding to OST providers in the city, using the OSTIs own resources or pass-through funding.
Convening of OST providers	"Lead[s] meetings with provider staff" and conversations to "build consensus on issues in the field." ¹⁴
OST program logistics: transportation, meals, space	Logistical support for OST programming, such as securing programming space, assisting with transportation, and connecting providers with programmatic resources.
External to the OST system	
OST policy advocacy at the city and/or state levels	Advocacy "at the state and local levels to build public support and influence OST policy and funding decisions." ¹⁵

Coordination across the Learning and Development Ecosystem: A citywide OST system is only one of many systems and structures that make up the L&D ecosystem. In addition to the citywide OST system, the L&D ecosystem includes one or more school systems, the parks and recreation system, physical and mental health systems, and others. Healthy Learning and Development Ecosystems that help youth to thrive are characterized by coordination between systems.¹⁶ Therefore, the whole L&D ecosystem becomes healthier for young people when OSTIs and other system leaders (e.g., school superintendents and parks and recreation commissioners) partner to share and align resources that support the same youth and families. Cross-system coordination is essential to a healthy, equitable L&D ecosystem because one subsystem does not possess all the community's assets and cannot, in isolation, provide all that children need. However, this cross-system coordination does not

always happen, as time and resources to support it may be lacking, and system leaders may not perceive the benefits of partnerships in achieving their goals.

Coordination to manage forces outside of the Learning and Development Ecosystem: Forces outside of the Learning and Development Ecosystem also affect the extent to which OST system can help youth to thrive. These forces include local, state, and federal policies that allocate resources for the OST system and may guide OST system priorities. Policy is shaped by broader cultural and political forces, such as those arising during the COVID-19 pandemic, which generated various iterations of health guidelines and policies that impacted the ways in which the Learning and Development Ecosystem could support youth and families, as well as waves of funding to respond to the crisis. OSTIs look to partner with policymakers and influence policies as they shift at the local level to ensure the health and equity of the OST system.

Systemic racism (historical and present) is another broader cultural and political force that has shaped policy and resource distribution and contributed to chronic inequities of opportunity for Black and Brown youth. The national racial reckoning catalyzed in 2020 has brought systemic racism into clearer focus for many and has called on policymakers and system leaders at all levels, including OSTIs, to reflect on new strategies and investments needed to promote racial equity.



About This Study

This study explored how OST coordination in each of the three nested systems (within the citywide OST system, across the L&D ecosystem and outside the L&D ecosystem) changed in response to the COVID-19 pandemic and urgent calls to address racial inequality. The overall goal of the study was to learn what these experiences revealed about OSTIs and the role they could play in supporting communities moving forward. It aimed to answer three central research questions:

1. *How, if at all, did OST coordination change to address emerging community needs and racial and economic disparities exacerbated by the pandemic?*
2. *What OST coordination functions were seen by OST system constituents (OSTIs, OST providers, and caregivers) as most critical, or most in need of change, for advancing racial equity in the OST system?*
3. *What were cross-sector leaders, OST providers, and caregivers perceptions of the value of OST coordination during the pandemic, and what types of coordination did they perceive to be most useful?*

To answer these questions, we designed a three-phase qualitative study to understand the national landscape of OST coordination and support sampling (Phase 1), conduct in-depth case studies of the roles and contributions of OSTIs during the pandemic (Phase 2), and understand provider and caregiver perspectives on OST coordination (Phase 3).

- **Phase 1. Understanding the landscape, selecting cities for Phase 2, and conducting a federal policy scan:** This phase included interviews with national experts to collect background information and input on the study design and select an initial sample of 20 cities. The research team then conducted leadership interviews with an OSTI staff leader in each of the 20 sample cities to better understand the L&D ecosystem overall and, more specifically, the variation in OST coordination shifts in response to the

pandemic. The research team coded these interviews in Dedoose and conducted thematic analysis by topic area. This analysis, as well as a document review and a preliminary state and federal policy scan, informed the selection of 12 cities to participate in Phase 2 of the research. Phase 1 was conducted in 2021 and early 2022. See Appendix A for more details on the sampling criteria.

- **Phase 2. Understanding the shifts in OST coordination during the pandemic, what was most valued, and how issues of equity influenced the sector:** In Phase 2 the research team conducted in-depth case study research in 12 cities to inform our understanding of the L&D ecosystem, the citywide OST system, and the policy landscape. In each of the 12 cities studied in Phase 2, the research team conducted interviews or focus groups with OSTI staff, city government staff, school district staff, funders, OST coordination partners, state OST network representatives, and providers. Table 2 displays the total number of each type of interview¹⁷ conducted across the 12 cities.

Table 2. Total Phase 2 Interview and Focus Group Data Collection Activities

OST Coordination Interviews	School District Interviews	City Government Interviews	State Network Interviews	Partner Interviews	Funder Interviews	OST Provider Focus Groups (Participants)	Total
39	19	16	13	15	12	22 (81)	136

Case study data was coded in Dedoose and then analyzed by city through the development of city profiles to understand coordination in the local context. Profiles were then shared with the OSTI for review and feedback. Using these profiles, the research team then conducted an analysis across study cities to compare coordination functions and identify higher-level cross-city themes. This phase was conducted in 2022 and early 2023.

- **Phase 3. Examining how OST coordination builds capacity, addresses equity, and forms strong OST networks:** The third phase of the research explored the configuration and strength of OST networks and the perspectives of caregivers in a subset of six Phase 2 cities. Phase 3 data collection included a survey of providers (N=163 total, with respondents per city ranging from 14 to 59) to explore their perspectives on the extent to which their city’s OST sector is networked (i.e., connections, teamwork, and communication among providers) and how the network changed over time, perceptions of the value of supports provided by the OSTI, and the extent to which the network worked together to address racial equity over time. The characteristics of inter-organizational relationships and networks were a focus because they are likely related to the collective capacity of organizations in a city to work together to adapt and accomplish shared goals generally and in times of stress. Phase 3 also included in-depth interviews with caregivers¹⁸ to gather families’ perspectives on how the OST sector has supported them during the pandemic, any gaps in services, and the equity of sector responses. Preliminary findings for the provider survey and caregiver interviews are included throughout this report, and more detailed findings will be released in the future.

Sampling

Sampling for this study was a multiphase process, starting first with the identification of eligible cities from across the country and then selecting samples for Phases 1 (20 cities), 2 (12 cities), and 3 (six cities). See Appendix A for a more detailed description of the sampling process.



The cities selected for Phase 2 and 3 of the research, and the organization that hosted the research, are listed below in Table 3.

Table 3. Phase 2 Study Sample by Region

Regions	Study Cities and Primary OST Coordination Organizations
Northeast	Providence: Providence After School Alliance (PASA)*
Midwest	Cleveland: My Commitment, My Community (MyCom)* Grand Rapids: The ELO (Expanded Learning Opportunities) Network Omaha: Collective for Youth St. Louis: ARCHS (Area Resources for Community and Human Services) and United 4 Children
South	Baltimore: Family League of Baltimore Chattanooga: Out-of-School Time Alliance* El Paso: BOOST Network Nashville: Nashville After Zone Alliance (NAZA)* Tulsa: The Opportunity Project*
West	Anaheim: None (Network Anaheim supported this research) ¹⁹ Denver: Denver Afterschool Alliance (DAA)*

*Participated in both Phase 2 and Phase 3

Limitations and strengths of this research. It is important to note that for all phases of the research, there were limitations to the representativeness of study samples that reduced the generalizability of the findings. (For more details on the study’s limitations, see Appendices A and B.) At the same time, the study’s robust dataset makes it one of the largest and most comprehensive studies to date on OST coordination activities during the pandemic.

Findings: How OST Coordinating Entities Adapted and Contributed During the Pandemic

The next section of the report shares findings from the research on the experiences of OST coordination in 12 cities during the COVID-19 pandemic. Preliminary findings from a survey of OST providers and interviews with caregivers in six cities are also shared where relevant (see textboxes). **The study documented multiple ways in which OSTIs contributed to their communities during this tumultuous period and suggested possibilities for the work of OSTIs moving forward.**

- **Adapting OST coordination functions:** Coordination functions, particularly professional development and convenings, were critical in supporting the citywide OST system to offer accessible and responsive OST opportunities for children and youth.
- **Increased advocacy:** OST providers described OSTIs' advocacy with policymakers, funders, and partners on behalf of the citywide OST system as critical to the system's viability.
- **Partnerships to support families:** In addition, the pandemic created conditions in which OSTIs also needed to place more emphasis on partnering across the L&D ecosystem to support families.
- **Racial equity focus:** The national racial reckoning furthered OSTIs' thinking about racial equity and led to the development of new and expanded racial equity-focused approaches and considerations in their work.

This section is organized to address these four areas of coordination.



A. Adapting OST Coordination Functions to Support the OST System

During the pandemic, OSTIs played a vital role in managing and advocating for their OST systems so that they could continue to provide OST opportunities for youth—opportunities that were critically important given school closures and the isolation students were experiencing. Consistent with the OST field's whole-child approach,²⁰ they also supported and advocated for the OST system with respect to the provision of OST programming that was responsive to the emerging social and emotional needs of children and youth. **They drew on and adapted their core functions, primarily professional development and convenings, to support the OST system.** Providers and system-level partners across cities valued their work, and these adaptations offer lessons that may be important in the future work of OSTIs.

FROM THE PROVIDER SURVEY: OSTI SUPPORT OF PROVIDERS



Six cities participated in a deeper investigation into the perspectives of OST providers through a survey. Providers who were members of each OSTI's OST network (identified by the OSTIs), were asked to complete a survey (see Appendix C for more information about the survey administration and responses). The survey asked about their overall satisfaction with the support that the OSTI provided to their organization at three points in time: before the pandemic, during the height of the pandemic, and during the pandemic recovery phase.



As shown above, on average, across all three time periods, respondents' satisfaction with the OSTI's support was high (on a scale from 1 [not satisfied] to 5 [extremely satisfied]).

As shown in the table below, providers were asked to rate how much they currently valued (in the pandemic recovery period) the 10 OSTI functions on a scale from 1 [highest value] to 10 [lowest value]. On average, providers across cities rated the value of all coordination functions as a 3 or better—indicating that all the functions were offering some value to providers. In line with interviews, advocacy was, on average the most consistently valued support (ranked 1 on average), followed by professional development and public communication about OST programs, but there was also variation by city in the value they saw in different coordination functions. Additional information about these and other findings from the six-city survey by city can be found in Appendix D.

Providers' perceptions of the value of 10 OSTI coordination functions ranked from highest value (1) to lowest value (10)	
Coordination Functions	Average Ranking
OST Policy Advocacy at the City and/or State Levels	1
Professional Development on Providing OST	2
Public Communications about OST Programs	3
Shared Vision/Goals for OST System	4
Funding Provided by OSTI	5
OST Quality Standards	6
Convening of OST Providers	7
Common OST Data Collection/Analysis	8
Sustainability Planning Support, including Staffing	9
OST Program Logistics: Transportation, Meals, Space	10

Finding 1. OSTIs drew on professional development, convenings, and quality standards to support the shift to virtual programming modes.

OST programming shifted to virtual platforms in the early phase of the pandemic, and OSTIs played a key role in helping OST providers develop the expertise to implement high-quality virtual programming, a skill set with a steep learning curve. They supported providers primarily through the provision of professional development, but also in some cities, offered quality standards and assessment rubrics for virtual programming. **OST providers in at least four of the 12 cities named support for virtual programming as the most useful support offered by their OSTI during this time.** One provider explained that “the professional development that they offer[ed] was actually very helpful because it was tailored to what we were experiencing and trying to operate in a virtual setting.” At the same time, OSTIs in four of 12 cities changed their quality standards to adapt to virtual programming, and one OSTI created a new set of quality standards for virtual programming. Although most virtual programming stopped once in-person programming again became feasible, the adapted quality standards remain useful for OST providers that continue to use virtual programming modes to enhance their in-person programming offerings. More importantly, the efforts of the OSTIs to shift the entire system to a new mode of programming during this period point to their capacity to keep the larger OST system relevant and adapt to new modes of programming in the future.

FROM THE CAREGIVER INTERVIEWS

OST VIRTUAL PROGRAMMING

In interviews with caregivers in six cities, some caregivers described how their OST provider shifted service delivery to support children when schools closed. They described Zoom calls and at-home academic enrichment materials sent by their OST providers. From caregivers' perspectives, these resources were integral in supporting child and youth learning and wellbeing when they were not able to be in school buildings with their peers. One caregiver commented on her OST provider's efforts to support her granddaughters, explaining that,



Normally what happened around the pandemic was that people weren't able to go to work...and they did a lot of remote learning. And I believe that [they] had an afterschool remote learning program that they kind of talked with the girls [...]. Then, the mail would bring the boxes to them. They were like activity boxes, and the activity boxes would have just a lot of different things in there that they could work on. And they even had seeds one time. I remember the girls were really excited... but they were really excited about learning all these things about how a seed can grow into a plant [...].

As this quote suggests, caregivers appreciated the remote OST programming, which OSTIs supported behind the scenes, for the regular connections and enriching activities it offered their children who were isolated by the pandemic.



Finding 2. Virtual convenings fostered collaboration, connection, and innovation among OST providers.

Through the pandemic experience of shutdowns and remote work, OSTIs learned to convene providers virtually, which was then a novel approach that respondents reported yielding higher levels of consistent participation, and which leaders reported would continue to be used, along with in-person meetings, in the future. While pre-pandemic convenings typically had an agenda or an expert presenter, the unprecedented nature of the pandemic meant that providers and OSTI staff were all learning from each other. Across cities, we heard that these meetings were often places for providers to share resources, learnings, and innovations, as well as receive emotional support. **Provider descriptions of these convenings suggest that they supported OST providers in learning from each other and these opportunities were one of the most useful and valued supports offered by the OSTIs.** An OSTI leader in one city, similar to comments from other OSTI leaders, described this as a new approach:

I think the network did a good job, when things were trying to come back online and everyone was really stressed out, providing opportunities for just getting together, sharing frustrations, trying to help support one another. I don't think we did that before. I don't think we focused so much on, other than the professional development training...the, hey, we really need to support one another and work through all this. ... There's a little more understanding from one another and wanting to just help support one another, get through every day.

Providers appreciated the opportunity to share resources and innovations, as well as support each other emotionally. Like other leaders, one OST provider in another city expressed the following reflection on these meetings:

It was just a safe place for us as leaders to actually be vulnerable and just really soak up wisdom; some of us were open sooner than others, and so, learning, what was working, what was not working, this person did this, this person did that, because everything had to be readjusted There were some really cool innovative things that people had figured out that I didn't have to figure out.

Another leader in the same city praised the combination of sharing strategies, developing “emergent best practices” with others, and “the follow-ups, one-on-one, with members of [OSTI] staff... I think this was a triangulated approach to really trying to identify what folks needed at both the micro and macro levels.”



FROM THE PROVIDER SURVEY: COMMUNICATION ACROSS THE OST SECTOR



OST providers in six of the cities were surveyed about the extent to which the OSTI helped them work together at three points in time: before the pandemic, during the height of the pandemic and during the pandemic’s recovery phase on a scale from 1 (not at all) to 5 (a great deal). On average, respondents felt that their OSTI was helping them work together at all three time points (e.g., averages at each time point were greater than 3). And all 6 cities reported that the OSTI is more helpful in this respect during the recovery period than before the pandemic, suggesting that OSTI’s new strategies resulted in more collaboration and partnership among providers.

Frequency of communication among OST providers in the city... Six-City Average



As shown above, providers were also asked about their frequency of communication with other OST organizations in their city (on a scale from very infrequent [1] to very frequent [5]) at three points in time: before the pandemic, during the height of the pandemic and during the pandemic recovery phase. Prior to the pandemic, the average frequency was rated at just under 3 (2.83). On average across the six cities, communication dropped slightly during the height of the pandemic, but there was variation by city. In other words, in two of the six cities, communication increased during the height of the pandemic. Finally, during the recovery period, communication improved across all six cities to, on average, 3.43. This likely reflects a learning curve—the newness of adapting the tools and practices that virtual convening required, followed by the incorporation of new technologies and facilitation techniques for convening organizations alongside the return of in-person gatherings. Similarly, most cities experienced no or very small reductions in collaboration and competition among providers during the peak pandemic period, with increases during the recovery period. Additional detail is provided in Appendix D.

CONTACTS AMONG PROVIDERS

OST provider organizations were asked about their awareness of and contact with other OST provider organizations in their city that were also part of the OSTI’s network. For organizations they indicated contact with, they were also asked whether the contact had been established since the beginning of the pandemic. Contact between providers provides insights into the levels of awareness among OST system actors, and the changing levels of communication between them. Organizations with more communication ties might be better able to adapt and address community issues, and changes in city-level OST provider communication networks would provide insights into how OST systems changed and adapted during this challenging time.

The number of other providers in the network that each responding provider had contact with varied widely across organizations, as did the number and proportion of those relationships that were reported to be new since the start of the pandemic. However, there is evidence that the pandemic may have changed inter-organizational communication networks and that some of that change may have been influenced by the OSTI. Across all cities, the average percent of current contacts that were newly established since the pandemic was 25.5% (with a range of 4 to 22). Furthermore, while new contacts established during the pandemic were broadly distributed among organizations, several provider organizations with fewer contacts pre-pandemic gained the most new contacts as compared with other organizations, perhaps making them more central in the network. Newer ties appear to be disproportionately among the organizations most involved with the OSTI suggesting that the OSTI likely played a role in the formation of new communication ties during the pandemic period. Additional detail is provided in Appendix D.

Finding 3. OSTIs enhanced their professional development and programming resources and provided direct social and emotional support for staff to aid OST providers in addressing youth's social and emotional needs.

OSTIs across the study recognized that many OST program providers and young people were experiencing emotionally stressful and even traumatic events during the pandemic. OSTIs again drew on their professional development and convening capacity and adapted training and convenings, sometimes in a planned way but other times spontaneously, to meet these emerging social and emotional needs of staff and youth. Their efforts point to opportunities for making more OST programs emotionally safe spaces in which young people can process the stresses they were experiencing during and in the aftermath of the pandemic.

3a. OSTIs supported the mental health and emotional well-being of OST provider staff. Positive adult-youth relationships are the cornerstone of any high-quality OST program and critical for programs to be impactful.²¹ However, research has shown that the emotional wellbeing of adults is essential to their ability to provide the social and emotional support youth need in these relationships.²² In four cities, particularly during the quarantine period, OSTIs reoriented their professional development to support the wellbeing of OST provider staff and leaders, who were experiencing many of the same stresses and traumatic experiences of loss as the youth they served. In two cities, their professional development focused on social and emotional learning (SEL) for adults and offered staff space for reflection and strategies for dealing with their own stress. In two other cities, professional development highlighted the need for OST provider staff self-care more broadly, offering space for staff to share how they were feeling with peers. One OSTI also partnered with a mental health counseling agency to make free counseling available to OST provider staff.

3b. Professional development and programming resources for staff supported the social and emotional well-being of youth. Several OSTIs in the study offered professional development and programming resources (i.e., activities or strategies) for staff with a focus on SEL and trauma-informed care (i.e., an approach to relating to people that accounts for prior trauma someone may have experienced²³). Two of 12 OSTIs expanded the SEL professional development that was already in place, based on the increased demand for these training courses while another OSTI built off its existing programming to create a toolkit with resources to support parents and staff in integrating more social and emotional learning activities into programs and everyday interactions. A fourth OSTI addressed the need for more social and emotional learning focused programming differently, putting out a call to organizations that already offered social and emotional learning focused programming and funding these organizations to bring their programming into existing OST programs. One of the OSTIs also sought external training and support for its own organization to ensure the social and emotional training and resources it offered providers was anti-racist²⁴ and considered the lived realities of youth.

3c. OSTIs also saw a need for professional development and convenings to support OST providers and OSTI staff in offering social justice-oriented social-emotional programming for youth. Across cities, OSTIs and their providers shifted more attention to addressing issues of systemic racism through programming. They spoke of the importance of creating safe spaces in which young people could express their emotions, feelings, and ideas about issues of racial injustice. Creating “identity-safe” spaces²⁵ requires adults to understand, respect, and appropriately respond to lived experiences youth bring to their OST programs. Several OSTIs offered resources to OST provider staff as well as their own staff so they could develop the competencies needed to create these spaces for young people. They offered book groups, racial affinity groups, training, and other collective spaces where staff could learn about and discuss racial injustice.²⁶



CONCERN FOR CHILDREN’S MENTAL HEALTH

Caregivers expressed concerns about learning loss, mental health, and socio-emotional well-being of their children. They worried that children were “left behind” by the pandemic and felt ill-equipped to support their child’s development. For example, when asked what providers should know about her child’s needs, one respondent commented that, “I just feel like [my child is] just left behind.” Another caregiver echoed this view and shared how social isolation has left her children behind “socially and educationally.”



I think they just need to know that the kids are a little bit behind socially and educationally, and I think they just need that, the extra love to say, ‘Hey, we’re here to support you. We got you. Don’t worry. We’re here for you.’

Other caregivers observed depression and other mental health challenges among children. One caregiver wanted OST providers (and OSTIs) to understand and address how social isolation contributed to children’s depression, explaining that:



Well, they need to know that the kids were kind of depressed because of being stuck in the house for so long and away from all their friends, but I think they pretty much know that and have addressed the issue.

When asked what OST providers (and OSTIs) should know about their child’s needs, a caregiver emphasized how difficult it was for their child to lose structure, routine, teachers, and friends that school provided, explaining that,



It was really hard for her, and she was really emotional, and she missed her friends a lot. She missed her teachers a lot. She just loves being in school. She loves the structure of it. She really connects with all of her teachers, and I think that that was kind of the hardest part and having to have Mom as the primary instructor, you know, that’s also just hard on our own relationship.

The reports of these caregivers align with the perceptions of OSTIs, OST providers and system-level partners about need for OST providers to be involved in expanding access to mental health supports for young people. OSTIs were working to equip OST providers with the skills, tools, and external resources to support the mental health and social and emotional development of young people.



PRACTICE EXAMPLE: ONE OSTI HOSTED BIWEEKLY JUSTICE TALKS FOR FRONTLINE OST STAFF

The OSTI leader described this initiative saying,

We do biweekly justice talks which I feel have been extremely helpful. They're primarily for our AmeriCorps members, but staff members within the OSTI can join the training/seminars. We've been able to talk about everything from police profiling amongst our youth, behavioral management, restorative justice, and I felt like it's been great because we're getting these topics out into the air. We're having open and honest conversations about really difficult things to talk about oftentimes, especially for people that don't identify as people of color, they're extremely difficult conversations to have. But these optional justice talks have provided our staff with a platform to be completely candid about their beliefs, their views and very receptive to new information as well.

This initiative illustrates one approach to supporting OST provider staff in developing competencies needed to support young people as they cope with injustice.



B. Advocating on Behalf of the OST System

Across cities, OST providers and OSTIs reported that advocacy on behalf of the OST system became a more central focus of the OSTI's work. OST providers in almost all cities report the OSTIs advocacy was critical to the OST system's survival during the pandemic.

Finding 4. Increased OSTI advocacy ensured that the OST system received the resources it needed to support youth and families.

OSTIs in nine of the 12 cities advocated with city and school district leaders as well as private funders to ensure the reporting requirements for existing funding streams were relaxed or made more flexible during the pandemic and that new COVID relief funding went to OST providers. OST providers across eight of 12 cities described the importance of flexibility with existing funding streams, which allowed them to disregard pre-pandemic enrollment and attendance requirements. Providers also appreciated OSTI advocacy that led to added resources being funneled into the system. As one OST provider described,

I know that the [OSTI] had to do a lot of advocacy work to make sure that OST was actually carved out as an important priority for where those funds went...They're able to advocate differently than us as individual organizations.... It's getting in front of the "right people" who have the ability to enact changes or to move resources differently. And so, I think that's the really critical link in terms of their advocacy is who they have access to, who could they get a meeting with that individual leaders could not.

Advocacy for funding was also important to OSTI efforts to create a more equitable OST system. As the wages of OST staff became a central equity concern for the field, the advocacy of at least one of the 12 OSTIs was credited by providers as primarily responsible for increased funding that helped them offer competitive

wages to OST staff. OSTIs in a few cities also described advocating for resources to flow to neighborhood-based, grassroots organizations that may not have had the administrative capacity to write large and complex grant proposals. One OSTI leader described their advocacy efforts saying,

We are able to step in and advocate on behalf of the smaller organization and say they have these youth outcome surveys through our networks, look at how they compare to these other nonprofits. They are smaller, so they don't have this capacity, but what would it look like if we helped build their capacity?

OSTI advocacy with other system leaders, funders, and policymakers was, then, critical for sustaining the citywide OST system in a tumultuous time and ensuring durable changes and investments in the system.



C. Developing and Deepening Partnerships to Support Families

The broader learning and development ecosystem in which the OST sector operates includes schools, city agencies, health providers, and others concerned with young people's wellbeing.

When the COVID-19 pandemic began, **OSTIs and other ecosystem leaders formed new partnerships and deepened existing cross-system partnerships to support families in new ways.** Interview respondents described the pandemic-driven sense of urgency and shared mission to support families that undergirded the creation of new partnerships. These partnerships, particularly with school districts, were further supported by the influx of COVID relief funding and the funding flexibility allowed by existing OST funders, which enabled OST providers to do more than OST programming. Lessons from this period suggest that OSTIs can provide families with expanded support through partnerships in the future.

Finding 5. OSTIs partnered to acquire and distribute material resources to families.

Early in the COVID-19 pandemic, OSTIs in eight of the 12 Phase 2 sample cities facilitated at least one type of support, often through partnerships, to address the basic needs of families. They partnered with a range of system leaders including city government agencies, funders, school districts, food banks, social service agencies, and housing organizations, to directly distribute material resources (food, technology, or other basic supplies) or publicize information about these and other resources. For several OSTIs, these were new referral relationships (i.e., the OSTI had established a relationship with an agency to refer providers or families for their services), while for others the partnerships were in place prior to the pandemic but expanded during this time. As mentioned earlier, all OSTIs convened OST providers, and these convenings were also opportunities for providers to share information about partnership resources with each other.

Many of the new partnerships that were formed to address the basic needs of families were unfunded and fell away as workplaces and schools reopened. But OST providers expressed a desire to see them renewed, noting that the need to support families in these ways is ongoing and an extension of their commitment to racial equity. Interview respondents spoke about the intersecting issues of inequity and inequality within their communities at large and how those issues are mirrored within the OST sector. For instance, one OST provider observed that those facing housing and food insecurity were also not as connected to OST programming. Another provider found it eye-opening to realize, when they began distributing food during the pandemic, how difficult it was to purchase healthy food in some of their service neighborhoods. They expressed a desire to have the OSTI develop a pipeline for OST providers to help address this issue:

I think with the [problem of] food deserts, being able to connect with an agency that has the capacity to provide the food [is important]. So, it's one thing to know who has the food, it's another thing to get the food to a provider that can distribute the food out into the community. So really, just being able to have that pipeline and make that connectivity [is needed].

OST providers across cities saw immense value in system-level partnerships to support the basic needs of families and wanted to continue providing this support for families in the future. They encouraged OSTIs to sustain these partnerships.

FROM THE CAREGIVER INTERVIEWS



MATERIAL RESOURCES DURING HARD TIMES

In interviews, caregivers discussed the material resources that they were able to access through their OST providers, resources which OSTIs were working behind the scenes to distribute through their OST provider networks. They described how these resources helped them make ends meet amidst recent job loss or reduced work hours. For example, one caregiver relied on information from OST providers on the various resources in her community. This caregiver appreciated how the organization shared information without judgment to caregivers in need.



Like.... they'll give you a [list] of job fairs [...]. They gave us a list where someone was doing a clothing closet at a school. {...} when it's holiday time they're going out and they're doing some, what is it like drives and stuff like that.... So, I like that they're there and they're able just to say, here you are. You never know what people are going through. I like that about that program.

Another caregiver shared a similar experience. An OST provider supported their family with online learning resources and connected them to organizations for material resources. This caregiver shared that they could approach their provider with questions about where to get help.



If I had questions on where to get help with utilities or groceries or something, you know they would. They were there to help, you know, lead me in the direction I needed for that. Or, you know, if I needed help with the kids, you know their online schooling and stuff. And they were there to help but yeah, I think everything was pretty much...you know they were on top of everything.

For these caregivers, OST providers were a valued resource for information about other resources available in the city.

Finding 6. OSTI partnerships were leveraged to promote public health and mental health for youth and families.

During the pandemic period, OSTIs, through strategic partnerships, began responding to public health issues in ways that show promise for addressing current and future public health concerns.

6a. OSTIs shared public health information and preventative resources through their OST provider networks. In response to the unprecedented public health emergency of the pandemic, OSTIs partnered with city and county health departments and hospitals, leveraging their OST provider networks, to share the latest health guidelines, personal protective equipment (PPE), and testing and vaccination resources with OST provider staff and with families. Hospitals and health departments had access to federal and state COVID relief funding, which likely supported these partnership efforts.

6b. OSTIs identified mental health referral sources and facilitated access to mental health resources. OSTIs in six of 12 cities developed new partnerships for their OST system to address the mental health needs of youth and families—needs that pre-existed the pandemic and continue to be significant.²⁷ Mental health support was provided by a range of organizations across cities, including nonprofit organizations, universities, and hospitals. OSTIs again leveraged their OST networks to distribute information about these mental health partners, which were often referral sources, which OST providers could share with families seeking mental health support. However, in one city, an OSTI arranged for counseling to occur on site. OSTIs also participated in citywide initiatives addressing mental health often initiated by mayors' offices or school districts. Despite these initiatives, interview respondents at all levels noted that gaps in mental health support remained, and OSTIs were exploring additional ways to bring mental health resources to the OST system.

6c. OSTIs engaged OST providers in programming to address gun violence. OSTIs in several cities also began to consider how to respond to the public health issue of gun violence, which increased in the reopening period following pandemic shutdowns.²⁸ One OSTI began leading antiviolence efforts in its community and connecting violence interrupter organizations with OST providers to offer mentoring. These partnerships were supported in part by an antiviolence grant obtained by the city from the federal Office of Juvenile Justice and Delinquency Prevention within the U.S. Department of Justice.

Finding 7. OSTI partnerships with school districts were perceived as the most important partnerships that OSTIs strengthened and developed during the pandemic.

OSTIs and other stakeholders reported that the most significant and impactful partnerships they deepened and developed during the pandemic were with school districts. These partnerships highlighted OSTIs' capacity to support learning both directly and indirectly, as they created and supported connections between families and schools. The numerous ways they supported schools and families are described next.

7a. OSTIs created academic learning centers to support children and families: In half of the 12 cities in our study, OSTIs coordinated learning centers where children could attend school online while their parents were at work. OSTIs partnered with school districts to connect families to these centers. The OSTIs also helped to identify viable spaces outside of school buildings; recruited trusted OST provider organizations to run the learning centers; and facilitated the funding, technology, and other support needed to offer the programs. City and district leaders in two cities praised the nimbleness and speed with which OSTIs were able to launch these centers.

These learning centers also offered more than just academic support for youth. Multiple providers described the importance of these learning centers for caregivers, as well. One provider, typical of other respondents, stated:

...there were so many families that were overwhelmed with technology and just didn't know what to do with their kids during the time period. But [the learning centers] also provided basic PPE resources, food, [and] just all those basic needs.

Another provider in a different city similarly shared:

We opened the gates, and parents flooded us. They came in droves, and we were able to serve them during the school day, and then a lot of them stayed on into the afternoon for the afterschool portion too, which was a great benefit because we watched grades go up. We watched the anxiety go away, both among parents, grandparents, foster parents, and the kids because it gave them an outlet because for a lot of them, they were shut up at home, couldn't go anywhere, couldn't do anything. And this was a great outlet for them.

In addition to the academic learning centers that took place during the school year, two OSTIs helped school districts with summer school. In one city, the OSTI recruited provider staff to work in the district's summer school initiative when the district could not find teachers to staff it. In another city, the OSTI recruited retired teachers to offer credit recovery programming during the summer.



PRACTICE EXAMPLE: CREATING A SHARED VISION FOR THE SCHOOL DISTRICT AND THE OST SECTOR

As a result of partnering to offer academic learning pods, a relatively new OSTI was invited to partner with the school district more deeply. This partnership, which began to develop in the pandemic recovery period, allowed the OSTI and the district to align their goals so that, a representative from the district said, they created "one message from the district and from OST." This OSTI was invited to take part in a new pilot initiative to support students in the school district, which enabled school personnel to provide personalized support to every student. Through this partnership, children and youth who were struggling academically were referred to OST providers for added support. When an OST provider agreed to be an initiative partner, it was given access to data about students' academic performance.

In the six cities where OSTIs played a leading role in launching academic learning centers to support children with virtual school, system leaders and OST providers pointed to this effort as the most valuable support for youth and families provided by the OSTIs during the pandemic. The OSTIs' efforts to provide educational support to youth and families during the pandemic led to tangible growth in their partnerships with school districts in four of 12 cities. In these cities, during the pandemic and early recovery period, they were asked to take over or expand programming within the district and/or invited to take on a more significant thought-partnering role.

At the time the data was collected (summer of 2022), it was not clear if this level of partnership would continue, but school district leaders in at least four of the 12 cities expressed an increased appreciation for the ways in which OST providers could support the districts' goals educationally and create stronger ties to communities. One school district leader described the district's learning about the value of the OST support for educational goals:

And we recognize that these people were not professional educators, they were nonprofit people [...].But at the end we did our own internal assessment and we realized the kids that were in the learning centers had better academic outcomes than the kids who were not....And that helped inform the decision to say, "...We have these nonprofits that rose to respond to our community and a lot of them do programming with our kids. Let's anchor an extended learning opportunity every day.

Districts described several capacities of OSTIs they appreciated in their partnerships. First, district leaders in two cities described the nimbleness of OSTIs in quickly convening and mobilizing OST providers throughout the city to support the work of the school district. One district leader stated the *"ability [of the OSTI] to convene partners in a more strategic way to quickly meet the needs of the district, which were also the needs of children and families at the time,"* was critical to their efforts. Another district leader stated,

I would say their ability to convene, not just the providers, but the neighborhood itself, people in the neighborhood. Because what happens is, each provider has their own doorways into their community. So [the OSTI], their ability to convene the community through their partners, is very strong.

District leaders and funders in other cities praised the OSTIs' deep familiarity with neighborhood and community resources. As one system leader described, *"Their on-the-ground knowledge...If we hadn't had them, we wouldn't have been able to do what we did in the pandemic because no one else had that granular knowledge."* A district leader in another city reported,

Because I would say really just their relationships with community organizations are just absolutely invaluable. Because it's not just the relationship cultivation that they do, but because they focus on that so heavily, they have such a clear picture of what's available across the city.



BENEFITS AND GAPS IN REMOTE LEARNING SUPPORT

In interviews, some caregivers also reflected on the value of the remote learning support they received from their OST providers, who remained open when schools closed and operated during the day to support families. This mother explains how her OST provider helped her family. She could drop her sons off during the day and for activities at the center on Friday evenings.



They would just let you know if you needed support, then you could bring your children to the [center] during the day, daytime hours. And then when we were allowed to get back together, we started back having our kickbacks, which is on Friday evenings. The boys get together from six to eight and have all types of activities.

However, remote learning resources varied across cities. In some cities, caregivers identified gaps in the supports that were offered and additional supports they would have liked to see, such as virtual tutoring and workshops for parents to understand technology. One caregiver shared:



I think maybe more resources virtually. I think the virtual school was okay, but I think it could have been a lot better. I think if they had more virtual tutoring, and maybe they did, I just didn't know about it. But I think more virtual tutoring would've been better. Things like that would've been helpful.

Another caregiver shared:



Or even workshops helping the parents, because I think some of the parents didn't even understand the technology themselves. And so how does a kid learn if the parent doesn't know themselves?

These interviews suggest that not all caregivers had access to resources OST providers were offering and point to a continued challenge for OSTIs to reach all caregivers with information about available resources.

7b. OSTIs connected districts and families: OSTIs reached out to help connect districts and families in several other ways. In one city, the OSTI conducted wellness checks with families during the quarantine period on behalf of the school district. In a second city, the OSTI worked with the school district to identify students who had not returned to school after it had reopened and coordinated an effort to reach out to these families. In a third city, the OSTI helped the district distribute technology to families. The OSTI director described their role in connecting to families early in the pandemic:

At the start of the pandemic, the school district didn't even have accurate addresses for everybody, right? So how are you going to get them computers? ...who knows those families? Community school coordinators and out-of-school-time coordinators. They know the families. They've walked them home after school or after program. They're trusted, right? So, they could walk in communities and get response, right? Get a loving response and trusted response.

Coming out of the pandemic, one school district representative described the district's new recognition of the possibilities for connecting with families through out-of-school time saying, "out-of-school time is a really great space for us to also lean heavily into community and into a true partnership with families that we might not be able to do during the school day."

Finding 8. School districts and mayors' offices valued OSTIs' capacity to support OST program quality and OSTI data systems.

As system-level stakeholders began to place greater value on OST programming, they also recognized the importance of the role played by the OSTI in ensuring a strong OST system. In addition to the capacities demonstrated by OSTIs in opening the academic learning centers, city and district leaders in seven of 12 cities also highlighted coordination functions, such as quality standards, professional development, and data capacity, as useful and important for their engagement with the OST system. District leaders valued the OSTI's support for quality, including both quality standards and professional development, because these functions helped them to trust that the OST programming they were inviting into their schools in new and expanded ways was high-quality. Regarding what they valued about the OSTI, a school district representative in one city stated:

Their ability to provide technical assistance because we can't be all to everyone. While we need the community-based organizations to provide the services, we can't be their governing body, their coordinating body, and their technical assistance. But [the OSTI] can do that...

In four of 12 cities, district and city leaders and funders also valued the data collection function of the OSTI as the city was emerging from the pandemic. One city leader explained,

I know that the data collection that they are doing or want to do is, will be very helpful in driving the discussions of where resources need to go and how, what needs to be, how our community needs to be served... We do need the data collection to help drive our priorities and where funding will go.

In another city, however, the OSTI did not have a data system that could report on student enrollment, participation, and outcomes, and this lack of data, raised questions about the OSTIs impact and value during a leadership transition in the school district.

Finding 9. OSTIs strengthened partnerships with parks and recreation and public library systems, expanding opportunities for more community-based youth development programming.

OSTIs' efforts to operate academic learning centers not only strengthened their partnerships with school districts but also deepened partnerships with city parks and recreation systems and public libraries, which hosted the centers in four of 12 cities. Although these systems had worked together in the past, they frequently operated independently, despite all offering out-of-school time programs. The deepening of these partnerships was important because this pandemic-initiated collaboration with the OSTI increased these public systems' appreciation for the youth development approach brought by OST providers and the OSTI. In one city, the experience of working closely with the OSTI during the pandemic led the Parks and Recreation department to invite community OST providers to run their Friday night teen programming. In another city, the OSTI reported that their partnership with the Parks and Recreation department had led the department to shift its operational mindset from recreation programming (i.e., offering an open facility) to youth development programming, which was more structured. They also shifted from viewing their staff as "facilities operators" to "youth workers." These examples suggest the potential for deeper partnerships across these systems to expand access to high-quality youth development programming.

In summary, the pandemic created a context in which it was possible for OSTIs to reach across the L&D ecosystem to offer new services and support to whole families. Cross-system partnerships like these strengthened the ecosystem during a tumultuous time and suggest that OSTIs and the OST system can be leveraged by cross-system partners to address broader community needs even after the crisis has passed.

Cross-Cutting Themes: Social and Emotional Learning and Racial Equity in School District Partnerships

Tensions emerged in some of the partnerships between OSTIs and school districts regarding the whole-child focus endorsed by the OSTI. School districts, through COVID-relief funding, became significant funders of OST programming. In some cases, they had the ability to set priorities for the focus of OST programming while in other cases it was set by state legislatures. Across cities, the priorities for the OST funding distributed by districts, as described by district interview respondents, ranged from an exclusive focus on social and emotional development and recreation in two cities, to an exclusive focus on academic supports to address learning loss in five cities. **OSTIs in cities in which district funding for OST programming was focused on academic support still strove to keep to their holistic goals and offer both academic as well as other types of programming.** An OSTI in one city eventually declined to take funding from its school district, which focused too narrowly on academics.

For multiple OSTIs, the focus on SEL was also connected to their broader focus on equity. As one OSTI leader described, “so we have put together a whole vision for holistic youth development, which does focus on equity, racial equity, justice, and all of social-emotional learning growth, more holistic skills, and [we are] investing in all.” At the same time, districts were subject to state policies, and OSTIs in two states described policies that were being debated, which would limit districts’ ability to discuss issues of race and engage in SEL programming. Such policies would affect OSTIs and OST providers efforts to implement this programming in schools as well. One OSTI leader forecasted more challenges in the future with keeping an equity-focused whole-child approach in partnership with schools. They described:

I'm hearing more and more from colleagues from other states that there are a lot of restrictions around social-emotional learning...We can still talk about social-emotional learning, and that's a big part of our out-of-school time system, but equity and talking about race and racial equity is also a big part of our work...[State] is in a stage where they're restricting certain books, like banning books...in the schools and stuff like that. So how we operate, how [do] we do what we said we will do with those restrictions coming in...

The insights of this leader suggested that OSTI partnerships with school districts may become more complex as state policies around the teaching of Black history in schools shifts and as the field grows in its recognition that discussions of racial justice are part of a whole child approach.



D. Advancing Racial Equity in the OST System

In their role as system managers, OSTIs are uniquely positioned to address equity in the OST system. Equity in an OST system, as defined by Hill & Vance (2019, p.3-4), means *“when young people have the tools, resources and other supports they need to meet desired outcomes...the set of resources that helps meet the unique needs of each young person.”*²⁹

OSTIs have historically drawn on multiple coordination functions to address equity. These include data systems to identify service deserts and redistribute programming. As advocates and funders, they can ensure equitable distribution of resources, and as communicators of program opportunities they can help create awareness of opportunities to facilitate access for families.³⁰

The majority of OSTIs in our study (10 of 12) explained that the birth of their organization came from a commitment to equity. Respondents in multiple cities recognized that they worked in the context of historical disinvestment in Black and Brown communities and inequitable funding of local school districts, an inequity that they saw mirrored in the OST systems. While a commitment to, and focus on, racial equity was in the forefront for many OSTIs in the study prior to the pandemic, they reported that this focus deepened, and their thinking was furthered during the national racial reckoning that was catalyzed in 2020.

The OSTIs defined racial equity in the OST system in terms of access to quality OST programming for youth from racially marginalized communities. But they also expanded on traditional definitions of program quality to include other program features they saw as important to the thriving of BIPOC youth, such as program staffing that was racially representative of youth in the program. In addition, they identified system-level gaps in racial equity, including a lack of representation of BIPOC-led organizations and communities in planning and funding decisions.

Nearly all the OSTIs reported increased attention to issues of racial equity and a recommitment or new commitment to putting issues of race front and center.³¹ In the next section, we describe the changes they identified that needed to be made as well as new strategies to advance racial equity in the OST system.

Finding 10. OSTIs examined racial equity in their own internal structures and practices.

OSTIs started deepening their racial equity work by reflecting on changes they needed to make in their own practices to better exemplify and promote racial equity. Two organizations participated in official equity audits with external partners, while others took on such examinations in-house. The audits examined the OSTIs organizational culture, as well as policies and practices, which for at least one OSTI included their program funding structure. One of these organizations was also building out an equity audit for the OST programs it served.

Across the eleven OSTIs that undertook this internal equity work, most organizations identified a gap in the diversity of their own staffing, that is, a lack of staff working for the OSTI who reflected the communities they served. In response, they revisited their hiring practices. For example, one organization changed job descriptions to be more explicit about the organizational culture they want to build, as one strategy to attract more diverse candidates. They also included equity-centered questions in interviews to screen all candidates for alignment to their organizational values. These questions included asking about experience working with communities of color as well as questions about how candidates conceptualized social justice. However, some OSTIs were further along in this work. One OSTI had, as a standard practice, hired all bilingual staff to serve a bilingual community and pointed to their staffing approach as critical to equitably serving their community. In addition to examining their own staffing, two OSTIs also reported considering the diversity of their board of directors as well.

Coming out of these internal reflections, OSTIs identified changes that were needed in their OST coordination efforts to ensure greater racial equity in their OST system. The changes identified across cities are described in the next section.

Finding 11. OSTIs furthered racial equity by adjusting their funding approaches to acknowledge the disparate levels of needs across different programs.

Several OSTIs examined and adjusted their funding distributions to acknowledge the variation in funding distribution across the city and to acknowledge the variation in the needs of providers who served different populations of youth. One OSTI changed its cost-per-seat equation, which had been based on attendance. It recognized that this approach disincentivized providers to serve youth with greater barriers to participation, as these youth may attend programs less frequently. To address this, it provided baseline funding for all providers and adjusted funding over the baseline to respond to the variation in program needs.

Similarly, OSTIs as well as providers recognized that serving older youth required a different funding approach (e.g., creating resources for participation stipends). Providers explained that older youth who are in high school may need or want to work to support their families, so offering stipends would allow those students to participate in programming. One provider who offers programming with and without stipends said, “I oversee two different programs, and I see the drastic difference [in participation levels] with the program where we can provide them a stipend and the one that we can’t.” With this in mind, several OSTIs have begun providing stipends or paid internships to high school students.

Finding 12. OSTIs sought to broaden their convening network to include more grassroots OST provider organizations, often BIPOC-led, and offer infrastructure support.

Another strategy OSTIs identified for advancing racial equity in the OST system was providing infrastructure support for smaller grassroots organizations—which are also often organizations led by people of color and deeply connected to the community. During the pandemic, OSTIs recognized that these organizations could support youth and families in ways that providers from outside the community could not because of their relationships and knowledge of their community. The OSTI leader in one city described how its continuous funding of grassroots organizations at the height of the pandemic was invaluable, as the staff members of these organizations were able to knock on doors and check in with families.

However, OSTIs also recognized that these organizations often face many barriers to funding. They do not always have the administrative and financial infrastructure to qualify for or access some funding streams. This disparity became especially apparent when significant federal COVID relief funding, as well as private philanthropic funding, began flowing into cities to support the pandemic response. Eight of the 12 OSTIs spoke of the importance of supporting smaller, grassroots organizations to ensure they could access this funding as well as other funding in the future. Most of these eight OSTIs had or were beginning to do meaningful work in this area, while others had identified it as an area of growth. Infrastructure support included serving as the fiscal sponsor or backbone organization for some smaller providers that did not have insurance or sufficient administrative staff. OSTIs also offered technical assistance to organizations to position them to apply for grants. In one city, the OSTI opened its professional development offerings to the public (not just already-funded organizations) and designed targeted workshops on administrative practices to support small grassroots organizations. One small provider commented on this work, saying:

[The OSTI] is beginning to break the stereotype of what has happened in the past for many years [when] we were not invited into the room...Now that the grassroots, or the people with boots on the ground, are in there, things are starting to change.

Another OSTI intentionally sought out grassroots and BIPOC-led organizations as partners when they were applying for grants. In another city, the OSTI in partnership with funders, was examining funding processes that created barriers for grassroots groups in accessing funding.

Finding 13. OSTIs sought to support the recruitment and retention of a more diverse and equitably compensated OST workforce.

Another racial equity concern identified by OSTI leaders and OST providers, related to the OSTIs own concerns about the diversity of its staff described in Finding 10, was the need for OST provider leaders and staff to better reflect the population of young people they are serving. One OSTI leader reported that they had heard from across their network that BIPOC young people want to be at organizations where staff look like them.

OSTIs in at least six of 12 cities described intentional efforts to ensure that OST provider staff demographics reflected students served. They did this, in some cases, by building relationships with organizations that already had leadership and staff reflective of the communities they served. In addition, OSTI staff also supported recruitment of staff for provider organizations. One member described these efforts and how the diversity of afterschool staff differentiated them from school-day staff:

We have intentionally recruited staff from the neighborhoods of the schools and from the neighborhoods of the families who go to the schools. And so, the strength I would say of our out-of-school-time sector is our staff do actually represent the student populations we serve, and that's intentional. And so, we have been able to build some of those relationships where maybe [school district] staff haven't.

OSTIs recognized the importance of OST providers hiring staff reflective of the community they served. However, they also saw that pay, opportunities for growth, and working conditions needed to be improved. One OST provider described this link saying, "We pride ourselves...on being able to hire from within the community and hire staff that look like our kids.... But we can't give them a good wage with some of the funding and limitations." At least one OSTI advocated for more resources to ensure higher compensation for OST staff. In addition, OSTIs in a majority of cities also identified the need to create a professional pipeline for part-time programming staff. However, cities were early in this work and still developing their plans to support the OST workforce at the time of the research.³²

Finding 14. OSTIs furthered racial equity by seeking youth and community input to inform funding decisions and the vision for the OST system.

While OSTIs worked to create more inclusive and representative networks of provider organizations, half of the OSTIs in the study also identified the importance of including youth voice and community input in system-level visioning and decision-making. Several OSTIs created councils or committees that include youth and/or community members to guide their organizational values and decisions. For example, one OSTI organized neighborhood-based youth councils that guided programming planned for their neighborhood.

In summary, OSTIs reflected on their own work to advance racial equity in the OST systems and identified limitations or gaps in their traditional approaches. To address these gaps, they sought to revise their funding approaches, broaden their network membership, tailor their supports to address the needs of grassroots BIPOC-led organizations, diversify staff within their own organizations and in OST provider organizations, and seek more youth and community input in their work. Many of these efforts were nascent at the time of the research but show promise for ensuring a more equitable OST system.

While OSTIs were beginning to address the racial equity gaps in the OST systems identified above, OST providers identified other chronic equity gaps that were not yet being addressed. These chronic equity issues included transportation barriers to OST programming, OST programming supports for youth experiencing

homelessness, gaps in interpretation and translation services to support EL youth and families, and resources and training to support LGBTQ+ youth. A few OSTIs were doing work in these areas already, but where these issues were not yet being addressed, OST providers hoped OSTIs could address them in the future.



FROM THE PROVIDER SURVEY: GROWTH IN CONTACTS FOR ORGANIZATIONS THAT SERVE LARGE PERCENTAGES OF BIPOC YOUTH



OST providers in the six cities where the provider survey was distributed were asked about their contact with other OSTI network member organizations. For those they indicated contact with, they were also asked whether the contact had been established since the beginning of the pandemic. OST provider organizations that serve the highest proportions of BIPOC youth reported becoming much better connected through the pandemic, both amongst each other and with a subset of other well-connected OST organizations. (See Appendix D for a full explanation and visualization of this finding.) In other words, they became more central to the communication networks in the OST sector in this city. However, despite this boost in connectivity, in some cities these organizations still were not as connected as other organizations, suggesting that OSTIs should continue to support connecting them to other OST providers.

Additional analysis of the data revealed that organizations that served higher proportions of BIPOC youth formed more new contacts with other OST providers than others during the pandemic, accounting for organization size, organizational culture, and the number of collaboratives/alliances/coalitions the organization is a part of. These results, especially when interpreted alongside other findings presented in this report, provide added evidence that OST systems were prioritizing work toward equity to a greater extent than before the pandemic and racial reckoning. Additional detail is provided in Appendix D.





Summary and Recommendations: Opportunities for the Field

The COVID-19 pandemic represented an unprecedented disruption across society. This report showcases the role OSTIs played in enhancing the resilience of their communities during this tumultuous period. While their contributions as intermediary organizations were less visible than those of frontline OST providers, OST providers, school districts, cities, and other partners highlighted the significant support OSTIs provided to ensure the continuity of services and fill gaps in services for youth and families.

OSTIs worked to pivot and support the OST systems, particularly through their professional development and advocacy functions, so that they could adapt to support the emerging, holistic needs of youth and families and have the resources to do so. Caregivers observed the benefits of the ongoing virtual OST programming for their children and confirmed the need for current and future OST programming to maintain a holistic focus that addresses children’s SEL and mental health needs.

The pandemic also created the opportunity for OSTIs to partner across the Learning and Development Ecosystem more deeply. Many OSTIs partnered with other systems, some for the first time, to support whole families with material resources such as food, technology, health care, and other supports. Caregivers across the six cities participating in interviews recounted that their OST providers were valued points of contact for information about where to access resources and nonjudgmental in their approaches to offering support.

The most significant partnerships, however, were with school districts where they created academic learning centers to keep children engaged in learning through their virtual schooling. System-level partners as well as caregivers acknowledged the gap these organizations filled when schools were closed, and the trusting relationships some OST providers held with families that made them effective in this work. However, caregivers in some cities were not always aware of the resources offered by OST providers and identified other resources, such as virtual tutoring, which would have been, and still could be, helpful for their children.

As they responded to the pandemic, OSTIs were deepening their racial equity work within the OST system in response to the national racial reckoning. Through reflection on their own systems and processes, they identified and began work on multiple fronts to create more equitable OST experiences for BIPOC youth. OSTIs varied in their approaches, but categories of equity work included the following:

- developing more equitable funding strategies;
- seeking more youth and community input in planning and funding;
- offering infrastructure support and training for small grassroots, often BIPOC-led, organizations so they could position themselves to access more funding; and
- developing strategies to recruit diverse staff and address low pay and lack of professional growth opportunities in the OST workforce.

OST providers in six cities participating in the OST provider survey confirmed that the racial equity focus of OSTIs has increased. On the provider survey, they reported steady growth in equity-focused work led by the OSTI since before the pandemic.

While the crisis of the pandemic has receded, the strategies OSTIs developed to manage this crisis illuminate possibilities for their work moving forward. Next, we share recommendations for OSTIs, policymakers, and funders, based on the findings of this research.

Coordination Opportunities to Respond to Emerging Challenges Facing Communities

The pandemic highlighted the importance and capacity of OSTIs to manage significant shifts in the OST system to meet new ecosystem challenges. During the pandemic, OSTIs helped OST systems navigate significant barriers to supporting youth and families. The lessons learned about how to make these shifts can strengthen OST systems and enable these systems to be even more responsive to both chronic and emerging challenges in the future.

For OSTIs:

- Continue offering less structured, virtual convenings that enable peer-to-peer learning and foster innovation. Ensure grassroots providers have access to these convenings.
- Look for ways to continue providing emotional support to OST staff, such as access to counseling, self-care resources, or affinity groups to enhance the supportiveness and safety of OST spaces.
- Continue to monitor emerging youth and community challenges, including through seeking formal input from caregivers and youth, and continue to update and adapt programming modes, materials, and professional development offerings to meet those needs.

For policymakers and funders:

- Provide funding for initiatives that address the social and emotional needs and competencies of OST staff, including affinity groups for staff of common backgrounds.
- Engage OSTIs and their OST systems in addressing both chronic and emerging obstacles for young people, even if their existing work may not yet address these topics.

Advocacy Opportunities to Support and Sustain Equity in the OST System

During the pandemic, OSTIs' local advocacy efforts increased and became more important in advancing and sustaining equity in OST systems. As they faced the impending end of COVID relief funding, OST providers, system-level partners, funders, and OSTIs themselves recognized that ongoing advocacy by the OSTIs for resources for OST systems was going to be needed to ensure the systems did not lose ground in becoming healthy and equitable. The lesson learned about influencing policymakers during the pandemic suggests the following recommendations for the future:

For OSTIs:

- If not already in place, develop formal policy and/or advocacy divisions to ensure adequate local and state funding for OST programming, and partner with state-level advocacy networks.
- Advocate with local and state-level policymakers to address equity concerns in the OST system, such as the need for increased OST staff wages and equitable funding approaches.
- Advocate for funding OST system priorities that foster a whole child approach and address the mental health needs of children as identified by caregivers.

For funders and policymakers:

- Fund OSTIs to do local and state-level advocacy work on behalf of their OST systems.
- Involve OSTIs as well as their OST networks in identifying funding priorities for the OST system.

Partnerships Opportunities to Support Families

The pandemic experience highlighted the capacity of OSTIs and other partners in the ecosystem to form strategic partnerships to address economic, health, and educational inequities. These inequities existed prior to the pandemic and persist coming out of the pandemic, making these partnerships of ongoing importance. However, obstacles such as funding or funding requirements can undermine such efforts. The lessons learned about cross-system partnerships point to the following recommendations:

For OSTIs and partners in the L&D ecosystem:

- Maintain or reestablish strategic partnerships that leverage the capacity of the OSTI and the citywide OST system to distribute resources for the whole family, including food, health care, mental health services, and economic and educational resources.
- Link with grassroots organizations and networks that are knowledgeable about existing community resources and are trusted messengers in their neighborhoods.
- Expand and deepen partnerships between school districts and OSTIs that leverage OSTIs' capacity to connect with families and offer academic, as well as social and emotional support for young people. These partnerships could be used to address chronic absenteeism and learning loss documented across the country as young people emerge from the pandemic.

For policymakers and funders:

- If not already in place, create system-wide convenings that bring together critical actors in the Learning and Development Ecosystem, including OSTIs, and collaboratively set ecosystem priorities, collectively examine root causes of community problems, and leverage the assets of all partners in developing solutions.
- Fund partnerships or align separate funding streams so they can be used for complementary purposes to support ecosystem priorities.
- Fund research and evaluation that assesses and documents the impact of these types of partnerships for youth and families.

Coordination Opportunities to Advance Racial Equity in the OST System

The pandemic also revealed ongoing racial equity gaps in the OST system and OSTIs began to work on several fronts to move the system towards greater racial equity. Each of these suggests recommendations for the future:

For OSTIs:

- Continue to expand the OST system networks to engage grassroots, BIPOC-led OST organizations, and provide capacity-building support that facilitates their ability to secure public funding.
- Commit to involving BIPOC youth and communities in setting OST system-level priorities, and encourage OST providers to seek youth and community input for local OST programming.
- Adjust funding approaches to support grassroots organizations and OST providers that serve older youth and youth with greater barriers to participation.
- Implement strategies that create a more diverse and equitable OST workforce, including supporting recruitment of diverse OST provider staff, advocating for higher OST staff wages, and supporting the creation of system-wide career pipelines for OST staff.
- Join with leaders addressing workforce issues in allied fields, such as early childhood and K-12 education, to consider if cross-system opportunities exist to address career pipelines and staffing shortages in each system.
- Deepen equity work to provide supports for youth experiencing other forms of marginalization and inequity, such as youth who are homeless, immigrant youth, and LGBTQ+ youth.

For policymakers and funders:

- Prioritize living wage salaries for OST staff when funding OST organizations and partner with OSTIs to develop systems to support career pipelines for OST staff.
- Consider other types of compensation that could be offered to the OST workforce beyond wages, including career development opportunities, student loan forgiveness, housing stipends, and educational awards.

- Work with OSTIs to create more equitable funding mechanisms that support smaller, grassroots OST organizations and allow OST providers to attract and serve youth who experience more significant barriers to participation.
- Work with OSTIs to solicit youth and community input on the priorities for the entire citywide youth learning and development ecosystem.
- Fund intermediary organizations that involve grassroots, community-based organizations in visioning and decision-making processes for the OST system.
- Fund research that examines these and other OST coordination strategies for advancing racial equity to understand how they are implemented and the degree to which they lead to more equitable opportunity for racially marginalized young people.

From the perspective of many system leaders, OST providers, and caregivers around the country, OSTIs contributed to their cities', organizations', and families' abilities to navigate the crisis of the pandemic. The pandemic stretched OSTIs and shed light on OSTIs' flexibility and innovation. Continuing investments in OST coordination efforts will allow them to remain nimble, develop and nurture partnerships, and address equity in the OST system to create an enriching and healthy ecosystem where young people and their families can thrive.

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31. While OST providers and OSTIs across cities identified the need for supports for youth experiencing other forms of marginalization and inequity, including for youth who were homeless, immigrant youth, and LGBTQ+ youth, during the time our research, we heard primarily about strategies to address racial equity.
32. For more information about the challenges facing the OST workforce, see <https://www.afterschoolalliance.org/workforce.cfm>

Appendix A

Sampling Strategies by Phase

Cities were selected for participation in the research through a multi-phase sampling process. In phase one, the research team identified 20 cities for exploratory interviews with an OSTI leader. In Phase 2, 12 of the 20 cities were selected for Phase 2 case studies. Six of the 12 cities were selected for Phase 3 where the research team conducted an OST provider survey and interviews with caregivers. The criteria for sampling for each phase are described below.

PHASE 1 SAMPLING

The criteria we used to select the Phase 1 study sample of 20 cities included the following:

- **Population Size and Demographic Characteristics**
 - *Population size:* The first criteria we set for Phase 1 study sample cities was population, specifically cities with a population of 200,000 residents or greater. We selected this population threshold because it encompasses most of the cities with documented OSTIs or other coordination efforts.
 - *Demographic Characteristics:* Among cities with a population over 200,000, we also selected potential sample cities that meet the following criteria: 1) the city child poverty rate is above 17% (the national average) and 2) a minimum of 20% of the city's residents are Black or Latinx. Research shows that more entrenched segregation and deeper racial disparities are evident when the population of Black and Latinx residents reaches 20.ⁱ
 - Prioritizing indicators of racial inequities in the sampling strategy enabled us to put equity concerns at the forefront of the research across all case studies.

The initial background interviews conducted with national experts generated a list of 10 additional cities, some of which did not meet our initial set of population and/or demographic criteria but were considered for the study based on being innovative in addressing one or more of the following: the COVID-19 pandemic, issues of equity, or citywide OST coordination.

Next, the research team narrowed down the number of eligible Phase 1 study cities through the following process and criteria:

- **Presence of OST Coordination:** Based on a document- and web-based review of information on potential sample cities, the research team determined whether there was evidence of OST coordination (defined as at least one coordination function) in each city. If evidence of OST coordination could not be

found based on this research, the city was removed from the list of potential sample cities.

- **Ecosystem Conditions for OST Coordination:** Drawing on background interviews and a policy scan, (a review of state and federal legislation related to out-of-school time) the research team identified a set of conditions (see Table 4) that were suggested by background interviewees as supporting OST coordination and innovation. Based on these four conditions, cities were rated on a 0-4 scale, where a “4” demonstrates optimal conditions in place on all criteria and a “0” indicates that optimal conditions were not in place on any criteria. The Phase 1 sample reflected the full range of conditions for OST coordination.

Table A-1. Ecosystem Conditions included in Phase 1 Sampling Criteria

Ecosystem Conditions	Description	Data Source
Federal Funding Grantees	State allocates federal funds (ESSER 3) to Local Education Agencies (LEAs), community-based organizations, or both.	State Policy Scan
State Funding for Afterschool Programs	State allocates funds dedicated to afterschool programs and/or initiatives that are allowed to include afterschool programs.	National Conference of State Legislatures data on allocation of state funds for afterschool programs ⁱⁱ
Local Dedicated Children’s Fund	City, county, or school district dedicates revenue to child/youth services beyond school day.	Children’s Fund Project Interactive Map ⁱⁱⁱ
Cross-System Collaborative Structure	A city-level collaborative infrastructure (beyond the OSTI) exists to address youth needs.	Lists of local children’s cabinets and StriveTogether Cradle to Career Networks ^{iv}

The research team also worked to ensure that the sample represented the regions of the country identified by the U.S. Census Bureau and variation in the partisan composition of the states and cities based on the political makeup of state legislatures and governors, as well as the political affiliation of the cities’ mayors, as these factors shape the policy context for coordination efforts and were suggested by background interviewees as potentially important.^v As a result, the sample of 20 cities was divided proportionally by region of the country and reflected variation in partisan composition.

- **OST Coordination Characteristics:** In addition to the state and city conditions in which OST coordination operates, the Phase 1 sample also represented the characteristics of the coordination efforts themselves, as listed in Table 5. The five characteristics listed below were developed based on a review of the literature and input from interview respondents. The Phase 1 sample reflected variation in all these criteria. Selecting for variation in the criterion “Coordination Scope” enabled us to choose a sample that reflected a continuum of coordination.

Table A-2. OST Coordination Characteristics included in Phase 1 Sampling Criteria

OST Coordination Characteristics	Description	Data Source
Governance	Governance: Public Agency, Nonprofit, or Network ^{vi}	Research reports and OSTI website review
Coordination Scope	Level of coordination provided	OSTI website review
Partners	<ul style="list-style-type: none"> Whether OSTIs have partnerships with public and private organizations and school districts Whether OSTIS partner with non-traditional public partners such as workforce, juvenile justice etc. 	OSTI website review
Age Range of Children and Youth Served	The focus ages of the youth organizations the OSTI coordinates	OSTI website review
Network Size	The number of youth organizations the OSTI works supports	OSTI website review

The 20 cities and OSTs selected for leadership interviews in Phase 1 are listed in Table A-3 below.

Table A-3. Phase 1 Sample Cities

City	OSTI
Northeast	
Boston: Massachusetts	Boston After School & Beyond
Rochester, New York	Greater Rochester Afterschool & Summer Alliance
Philadelphia, Pennsylvania	Office of Children & Families
Providence, Rhode Island	Providence After School Alliance
Midwest	
Chicago, Illinois	After School Matters
Grand Rapids, Michigan	The ELO Network
St. Paul, Minnesota	Sprockets
Omaha, Nebraska	Collective for Youth
Cleveland, Ohio	MyCom (My Commitment, My Community)
South	
Jacksonville, Florida	Kids Hope Alliance
Nashville, Tennessee	Nashville After Zone Alliance
Louisville/ Jefferson County, Kentucky	BLOCS (Building Louisville’s Out-of-School Time Coordinated System)
Baltimore, Maryland	Family League of Baltimore
Tulsa, Oklahoma	The Opportunity Project
El Paso, Texas	BOOST (Borderland Out-of-School Time) Network
Houston, Texas	CASE for Kids
Richmond, Virginia	NextUp RVA
West	
Fresno, California	FRESH (Fresno’s Recreation, Enrichment and Scholastic Help)
Denver, Colorado	Denver Afterschool Alliance

PHASE 2 SAMPLING

Based on the initial sampling strategy for Phase 1 and the learnings from a round of interviews with OST coordination leadership in 20 cities, the research team conducted seven additional exploratory interviews to expand the range and level of coordination activities that were present in the sample of selected cities. From these 27 cities, the 12 Phase 2 sample cities were selected. The sampling criteria for Phase 2 included:

Ecosystem Conditions

As in Phase 1, the research team recommended sampling cities that vary on multiple dimensions of this larger ecosystem. In most cases, the indicators remained the same as the original Phase 1 sampling criteria, but some minor adjustments were made. The research team also updated the data related to state and mayoral partisan control based on the November 2021 election results, as well as data on the presence of cross-system collaborative structures, such as a Children’s Cabinet. The amended conditions criteria included the following:

- **Federal, State, and Local Funding:** Policy is often operationalized through funding, and variation in the level of support for the OST sector is captured through indicators of federal, state, and local funding:
 - The indicators related to federal funding and state funding for afterschool programs remained in the sampling criteria based on our interview findings.
 - The data on local dedicated children’s funds that had been used for sampling was not comprehensive, so it was removed as a criterion. It was replaced with interview data on whether the city government helps fund the OSTI, in part as an indication of local support for the work of OST intermediaries.
- **OSTI Participation in Cross-System Collaborative Structure:** We found through our Phase 1 interviews that the resilience of city-level cross-system collaborative groups (e.g., Children’s Cabinets) varied during the pandemic, and these did not necessarily play a significant role in OST coordination during this period. Therefore, we changed the indicator to reflect whether the OSTI reported participating in any type of cross-system collaborative effort to support children and youth.

Coordination Characteristics

As in Phase 1, the research team also wanted the sample to represent the characteristics of the coordination efforts themselves. Interviews enabled us to explore whether the Phase 1 criteria included meaningful dimensions of variation while also identifying new dimensions. They also allowed for the verification of data collected through web review regarding each dimension. For example, in some cases our interviews revealed a different governance model than our initial web review suggested. This criterion remained a priority for sampling in Phase 2. In addition to governance, the Phase 2 sampling criteria that were revised based on the interview findings are described below:

- **Coordination Scope:** To select the Phase 1 cities, we sampled for variation in the number of traditional coordination functions at each OSTI (i.e., quality standards/assessments, common data collection and analysis, shared vision or goals for OST, public communications, and fundraising/sustainability) through a review of OSTI websites. Through our interviews, however, we discovered the limitations of the web-based review and found that most of the intermediaries had at least five functions, with some up to eight, limiting the usefulness of coordination scope as a sampling criterion. Therefore, we expanded our sample through additional interviews with seven cities to identify cities where OST coordination was more limited. In addition, our interviews suggested that it would be useful to focus on individual aspects of coordination, in particular: 1) degree to which the OSTI adapted services during the pandemic based on community needs and 2) whether the coordination organization provided funding to OST providers.

- **Partnerships:** Our Phase 1 sampling included the types of partnerships that OSTIs reported on their websites, including partnerships with school districts, public and private organizations, and more non-traditional partnerships, defined as publicly funded organizations that work in housing, workforce development, or juvenile justice, as well as library systems and parks and recreation programs/ departments. However, the list of partnerships identified through web-review was more expansive than the partnerships identified in interviews. Without additional data, it is difficult to consistently determine the reasons for these discrepancies and therefore, except for LEA partnerships, we no longer prioritized other types of partnerships for sample selection. However, we continued to track this data as background information.
- **Strength of Equity Focus:** A focus on issues of equity permeated many sectors, including OST. Most OSTIs reported a core commitment to equity but have shifted to a more intentional focus on racial equity. However, OST coordination efforts varied in the reported number of intentional activities designed to address equity concerns. To address research questions about equity, this variation was an important consideration for sampling.

In addition, the age range of children and youth served by OST coordination efforts continued to be included in sampling due to concerns that many OSTIs do not work with providers that serve high school-age students. However, most OSTIs reported working with high school students to some extent, and therefore, we found little variation. Nonetheless, sampling prioritized inclusion of the few programs that focus only on middle and high school students.

Table A-4. Phase 2 Sample Cities

Regions	Phase 2 Study Cities and Primary OST Coordination Organizations
Northeast	Providence: Providence After School Partnership
Midwest	Cleveland: MyCom (My Commitment, My Community) Grand Rapids: The ELO Network Omaha: Collective for Youth St. Louis: ARCHS (Area Resources for Community and Human Services)
South	Baltimore: Family League of Baltimore Chattanooga: Out-of-School Time Alliance of Chattanooga 2.0 El Paso: BOOST (Borderland Out-of-School Time) Network Nashville: Nashville After Zone Partnership Tulsa: The Opportunity Project
West	Anaheim: None (Network Anaheim supported this research) Denver: Denver Afterschool Alliance

PHASE 3 SAMPLING

Our sampling method for Phase 3 built on the variation in Phase 2 with the research team again prioritizing cases that vary by ecosystem conditions and coordination characteristics hypothesized to be relevant to how OST coordination shifted during the COVID-19 pandemic. The research team then identified three additional factors relevant to the Phase 3 research with caregivers and OST providers:

- Whether they adapted their services based on community needs during the pandemic (i.e., offered services beyond traditional OST programming that served whole families);
- The strength of their racial equity focus; and
- Governance structures.

We also upheld some of the sampling priorities of Phases 1 and 2 and maintained variation across the sampling indicators. Finally, the research team prioritized cities that had been the most responsive in facilitating the data collection process in Phase 2 and therefore more likely to aid additional data collection for network analysis and caregiver interviews. In this sense, our case selection strategy reflects both a convenience sample of cities where data collection would be most feasible and our efforts to select on key criteria and maximize variation on other criteria across cities.

Table A-5. Phase 3 Sample Cities

Regions	Phase 3 Study Cities and Primary OST Coordination Organizations
Northeast	Providence: Providence After School Alliance
Midwest	Cleveland: MyCom (My Commitment, My Community)
South	Chattanooga: Out-of-School Time Alliance of Chattanooga 2.0 Nashville: Nashville After Zone Partnership Tulsa: The Opportunity Project
West	Denver: Denver Afterschool Alliance

Limitations of the sampling in this research: There were several limitations to the research, based on the sampling approach. First, while the sample strategy emphasized variation which provides greater confidence in common themes that emerged, the sample is not representative of the full range of coordination experiences in all U.S. cities. We limited the sample to urban centers of a certain size and therefore the data cannot speak to a potentially more diverse landscape of OST in rural and tribal communities for example, where Intermediaries may be defined quite differently or across a wider stretch of land. In addition, while the sample of interviewees in each city captured cross-system perspectives from leaders in each system most knowledgeable about OST coordination efforts during the pandemic, the research typically included only one or two interviews per system in each city (i.e., one-two school district representative) which does not allow us to triangulate what was reported by these key respondents about their system’s views on OST coordination with individuals situated elsewhere in the system.

Appendix B:

Methodology for the Caregiver Interviews

Forty-nine caregivers were interviewed between November 2022 and September 2023. Caregivers were recruited through OST coordinating entities by responding to emails and social media flyers about the study. Interviews were an hour long on average and caregivers received gift cards for participating in the study.

Characteristics of the study sample are displayed here:

Table B-1. Caregiver Sample Characteristics

Characteristics	Sample	Characteristics	Sample
Average Age	40.1	Average Number of Children	2.43
Race^{vii}		Average Age of Children	12.26
White	15 (30.6%)	Employed	38 (78%)
African American	28(57.1%)	Average Monthly Income	4,296
Native American	3 (6.1%)	Cities	
Multiracial	2 (4.1%)	Nashville	17
Hispanic	9(18.4%)	Chattanooga	4
Gender		Cleveland	8
Women	3 (6.1%)	Tulsa	12
Men	46 (93.9%)	Denver	8
Marital Status			
Single	20 (40.8%)		
Married	16 (32.7%)		
Divorced	5 (10.2%)		
Widowed	5 (10.2%)		
Separated	3 (6.1%)		

Most of the respondents were African American women in single-parent households with two children. Caregivers were 40 years old on average with children around 12 years old. Most of the caregivers interviewed were employed (78%) and earned an average monthly gross income of \$4,296.

Data analysis focused on caregivers' responses to questions that asked how OST providers supported their families throughout the pandemic, what providers should know about how the pandemic affected children and families, and the kinds of resources they wanted but could not access during the pandemic during and after the pandemic.

Appendix C

Methodology for the OST Provider Survey

Six of the twelve cities (those sampled for Phase 3 – see Appendix A) were asked to participate in a deeper investigation into the perspectives of OST providers in their network. The purpose of the survey was to gain insights into provider organizations’ characteristics, their communication and collaboration networks, their views of the OST sector, and of the OSTIs’ coordination efforts. These characteristics of inter-organizational relationships and networks could be related to the collective capacity of organizations in a city to work together to adapt and accomplish shared goals. For instance, the extent to which OST providers are in contact with one another and how that contact changes over time provides insights into the levels of awareness among OST system actors and the changing levels of communication between them. Additionally, organizations with more communication ties may have access to more information and be better able to adapt and address community issues. Therefore, changes in city-level communication networks would provide insights into how OST systems changed and adapted during and beyond the pandemic. Finally, more collaborative, and less competitive relationships between organizations are likely to enable information and resource sharing as well as collective action.

The research team worked with the OST coordinating entity in each of the six cities participating in the survey to identify and list OST provider organizations in each city’s OST sector that were members of their network and, therefore, involved in coordination and collaborative efforts. This list then became the set of organizations that were recruited to complete the survey, which was made available online using Qualtrics software. Efforts were made by each OSTI to recruit a minimum of one knowledgeable person who could respond on behalf of each organization on the list. Response rates by city for the full network are provided next.

Table C-1. Whole Networks - Responses by City

	City 1	City 2	City 3	City 4	City 5	City 6	Total
Number of OST provider organizations invited to take the survey	30	103	336	47	56	94	666
Number of complete survey responses (total with incomplete responses)	23 (35)	25 (43)	59 (78)	20 (22)	14 (14)	22 (27)	163 (219)
Number of organizations with at least one survey response	21	22	52	18	14	20	147
Network response rate	70%	21.4%	15.5%	38.3%	25%	21.3%	22.1%

Some analyses use all survey responses regardless of the number of responses per organization. For some analyses at the organizational level, we needed to select only one respondent per organization to ensure comparability. In cases with more than one response per organization, we scrutinized the level of detail in the responses (and screened for the number of “don’t know” responses) to select the respondent who appeared to be most knowledgeable about the organization’s perspectives and relationships.

Due to the difficulty of recruiting respondents from large numbers of local organizations, the research team also worked with each city’s OSTI to identify the most relevant sub-groups of organizations to prioritize in survey recruitment efforts (i.e., each city’s “focal network”). This was the set of organizations that the OSTI had indicated were very engaged in the network. In some cases, this list was populated by a representative of the OSTI’s staff, and in other cases, pre-existing lists or designations were used (e.g., provider organizations that were receiving funding from the OSTI, or provider organizations serving on specific committees related to OST coordination efforts). Response rates by city for the focal network are provided here.

Table C-2. Focal Networks - Responses by City

	City 1	City 2	City 3	City 4	City 5	City 6	Total
Focal network organizations invited to take the survey	16	64	12	25	9	12	138
Number of organizations with at least one complete response	14	13	12	16	6	7	68
Network response rate	87.5%	20.3%	100%	64%	66.6%	58.3%	49.3%

Limitations of the research: The sample of OST providers that were asked to complete a survey in Phase 3 were members of the OSTI’s network, and not all OST providers in the city. Furthermore, not all invited providers completed a survey. Therefore, survey findings may not represent the experiences and perspectives of all providers in Phase 3 cities.

Appendix D

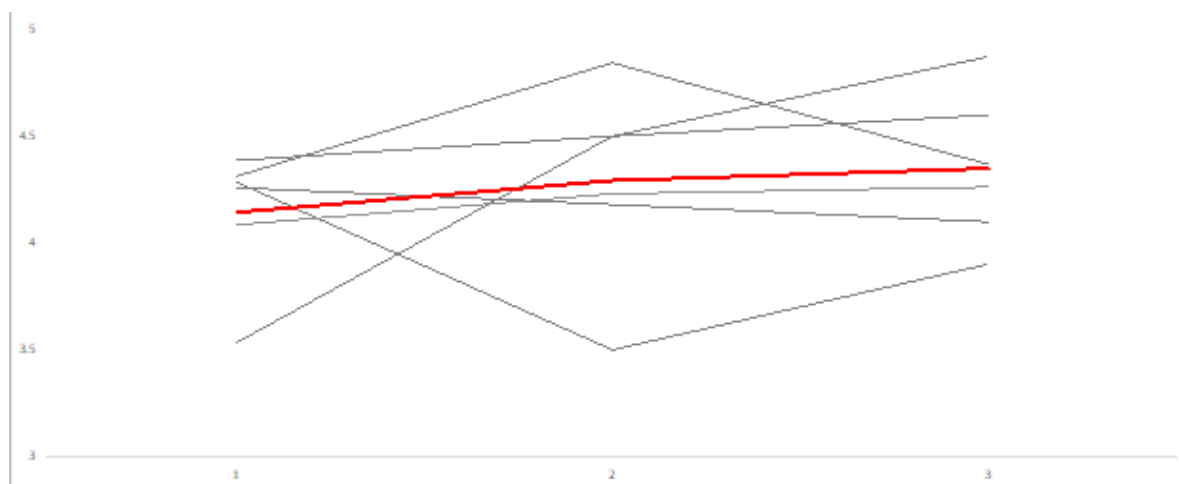
Detailed Findings from The Six-City Provider Survey

This appendix, authored by Dr. Brian Christens and Dr. Krista Haapanen, provides a detailed description of the Phase 3 provider survey findings presented in the main report. OSTIs from six cities worked with the researchers to administer a survey to their network of provider OST organizations. The purpose of the survey was to better understand the nature and extent of providers' connections with each other, and their perceptions of the support provided by the OSTI. In total, 163 organizations were represented. The findings shared here are related to this study's research questions; however, analysis of the data continues, and will be published in a peer-reviewed journal at a later date.

Satisfaction with OSTI Support

Survey respondents were asked about their overall satisfaction with the support that the OSTI provided to their organization (along a five-point scale from "very dissatisfied" = 1 to "very satisfied" = 5). Respondents were asked to respond about their overall satisfaction across three time periods: (1) before the pandemic (e.g., 2019), (2) during the height of the pandemic (i.e., March 2020–May 2021), and (3) during the recovery phase of the pandemic (June 2021–present) (see Figure D-1).

Figure D-1. Overall satisfaction with the OSTI in six cities (1.) before the pandemic, (2.) during the peak pandemic period, and (3.) during the recovery from the pandemic.



This chart displays the averages of perceptions among respondents across the three time periods. The red line indicates the averages of all six cities participating and the grey lines are the averages for each of the six cities. As the chart indicates, **satisfaction with the local OSTIs fluctuated in some cities during these three time periods, but on average satisfaction was high to start and stayed high.**

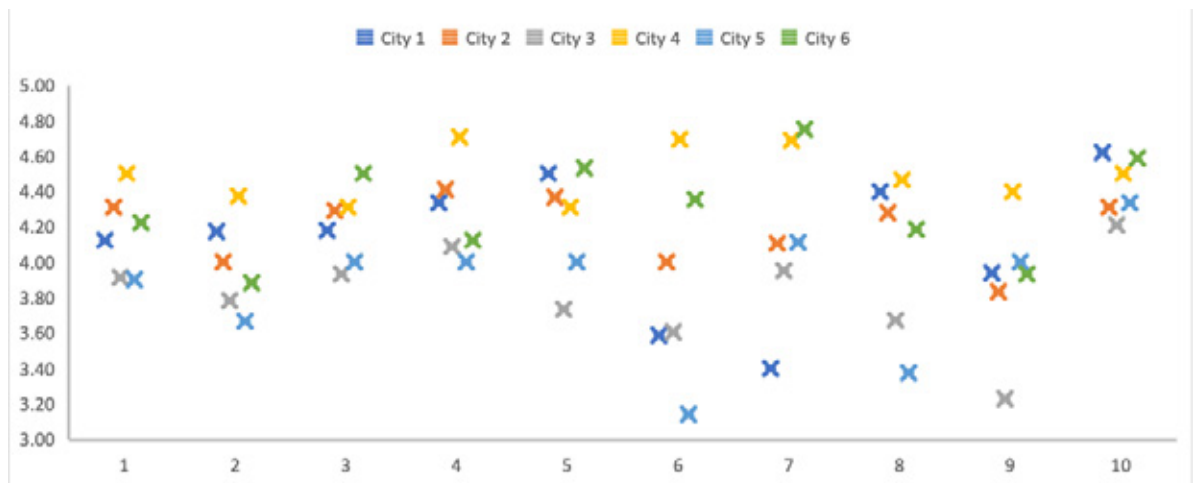
Value of Coordination Supports Provided by the OSTI

On a five-point scale from 1 to 5 where 1 is “not valuable at all” and 5 is “extremely valuable,” providers were asked to rate how valuable each of the following coordination supports provided by their city’s OSTI currently were to their organization:

1. Out-of-school time quality standards
2. Common OST data collection and analysis
3. Shared vision and goals for out-of-school time in the city
4. Professional development opportunities on providing OST programming
5. Public communications about OST programs
6. Sustainability planning and support
7. Funding Provided by the OSTI
8. Convenings of OST providers
9. Program logistics and delivery
10. OST policy advocacy at the city and/or state levels

They also had the option to indicate that they didn’t know, or that a particular form of support was not provided.

Figure D-2. Average levels of perceived value in ten different forms of support provided by OSTIs in six cities.

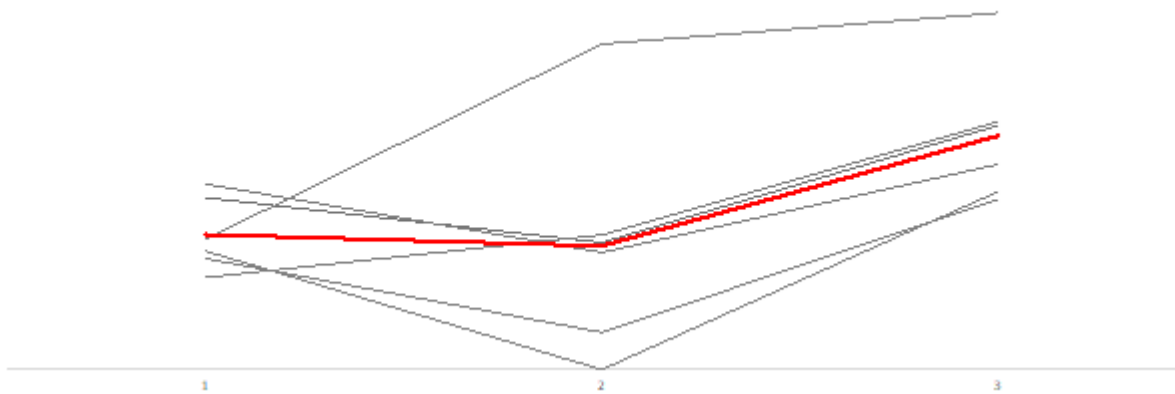


As Figure D-2 indicates, most provider organizations found all ten forms of support to be valuable. Across all six cities, the averages for all forms of support were never rated below “3,” the mid-point of the scale, indicating that provider organizations generally found all forms of support to be at least somewhat valuable across all surveyed cities. There was variance, however, in the value placed on different forms of support, with the greatest variance between city-level averages in supports 6-9 (supports related to funding, convening, and program logistics). OSTIs varied in the supports they provided and prioritized. These findings demonstrate that, despite some variance between OSTIs in different cities and different forms of support, across all cities there are many ways that OSTI are providing valuable supports to provider organizations in their local OST sector.

Communication, Collaboration, and Competition Among Providers

Survey respondents in the six Phase 3 cities were asked about the frequency of communication between organizations in the sector (along five-point scales from “very infrequent” = 1 to “very frequent” = 5) across three time periods: (1) before the pandemic (e.g., 2019), (2) during the height of the pandemic (i.e., March 2020–May 2021), and (3) during the recovery phase of the pandemic (June 2021–present) (see Figure D-3).

Figure D-3. Frequency of communication among organizations in the OST sector in six cities (1.) before the pandemic, (2.) during the peak pandemic period, and (3.) during the recovery from the pandemic.



The red line represents averages across the six cities for each period. As Figure D-3 makes clear, reported frequency of communication among organizations in the OST sector in most Phase 3 cities declined during the peak pandemic period but then rebounded and, in many of these cities, reached even higher levels during the ongoing recovery phase of the pandemic. This likely reflects the initial struggle to adapt to the tools and practices that virtual/remote convening required, followed by the incorporation of new technologies and facilitation techniques for convening organizations alongside the return of in-person gatherings.

Survey respondents were also asked about their perceptions of the levels of collaboration and competition in the OST sector across these same three time periods (along four-point scales from “no collaboration/ competition” = 1 to “a good deal of collaboration/ competition” = 4). See Figures D-4 and D-5.

Figure D-4. Levels of collaboration among organizations in the OST sector in six cities (1.) before the pandemic, (2.) during the peak pandemic period, and (3.) during the recovery from the pandemic.

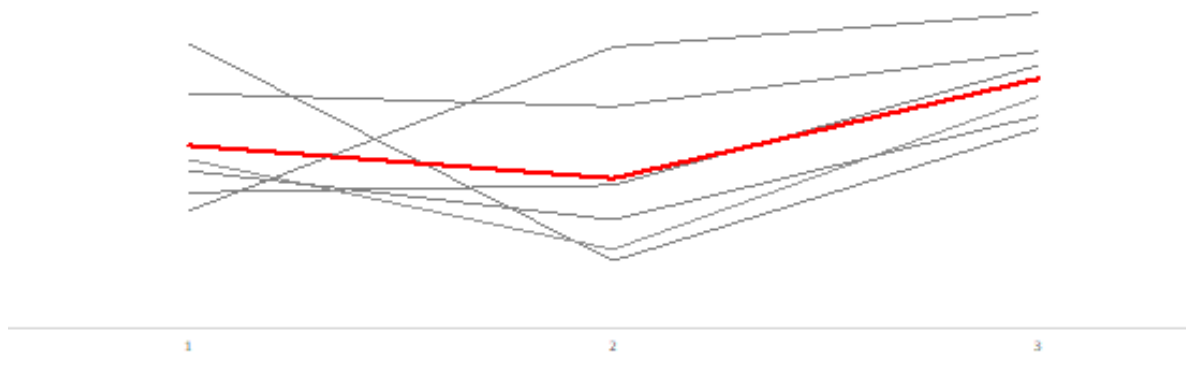
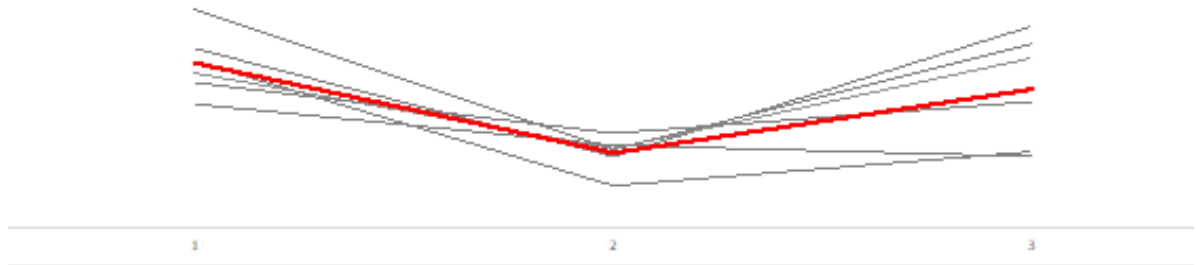


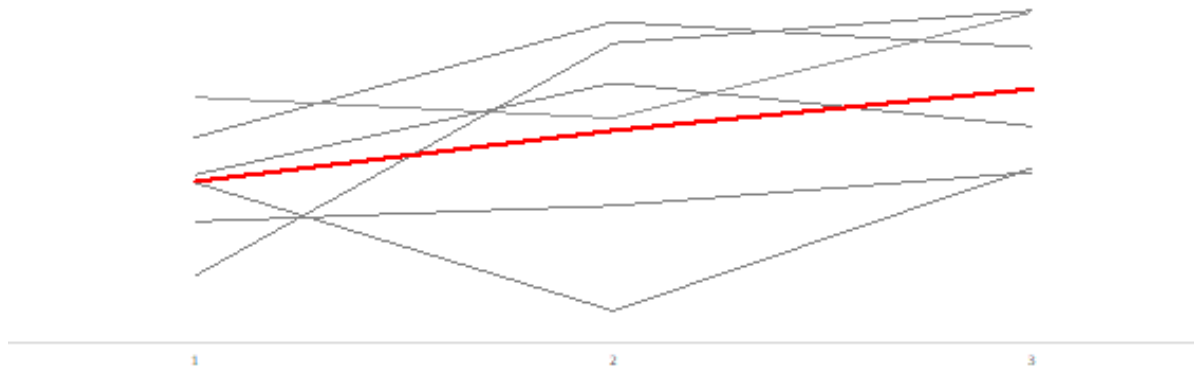
Figure D-5. Levels of competition among organizations in the OST sector in six cities (1.) before the pandemic, (2.) during the peak pandemic period, and (3.) during the recovery from the pandemic.



As Figures D-4 and D-5 make clear, most cities experienced declines in both collaboration and competition from the pre-pandemic period to the peak pandemic period, and then rebounds in collaboration and competition among organizations in the OST sector between the peak pandemic and the recovery period. It is interesting to note that collaboration and competition demonstrated similar patterns (moved together, rather than inversely). It's possible to conceptualize collaboration and competition as opposite ends of a spectrum, such that as one decreases, the other declines. Findings on organizational relationships in these six Phase 3 cities would suggest that instead, perceptions of competition are likely to increase as communication and collaboration increase.

Figures D-3, D-4, and D-5 all describe OST providers' perceptions of what was happening between organizations in the local OST sector, but they do not address the question of what roles OSTIs played in establishing communication and collaboration among local organizations. Another set of survey questions was asked to the same set of respondents asking them about the extent to which the OSTI helped local OST providers to work together (rated along a five-point scale from "not at all" = 1 to "a great deal" = 5). Figure D-6 displays these data. Looking at the figure, it is clear that there was a good deal of variance between cities and across time periods in the extent to which providers perceived the OSTI to be helping OST providers to work together. However, in almost every city, the average response on this question for the current (recovery) time period is higher than it was in the pre-pandemic period, regardless of whether that increase has been steady over time or represents a recovery after declines during the peak pandemic period.

Figure D-6. Extent to which OSTI helped local OST provider organizations work together in six cities (1.) before the pandemic, (2.) during the peak pandemic period, and (3.) during the recovery from the pandemic.

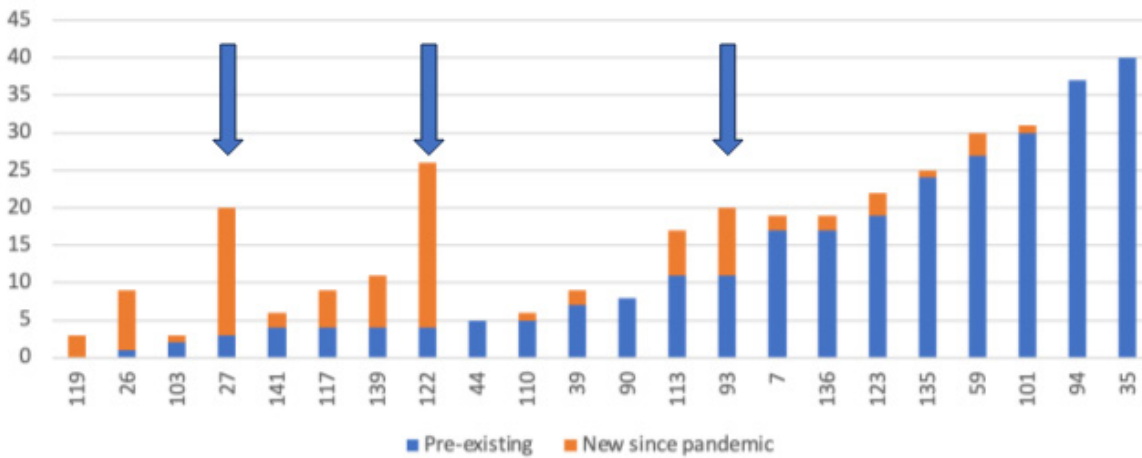


Connections Among Providers

Survey respondents were asked several questions about a list of other OST provider organizations in their city. For each city, this list of organizations was the same set of organizations that was recruited to take the survey. They were asked to indicate their awareness of other local organizations, whether their organization was in contact with other organizations, and, if so, whether this contact had been established since the beginning of the pandemic.

The number of ‘in contact’ relationships varied widely across OST provider organizations, as did the number and proportion of those relationships that were reported to be new since the start of the pandemic. For instance, Figure D-7 displays one city’s (labeled as “City 2” in Figure D-2) organizational respondents, and the number of ‘in contact’ relationships that they identified with other OST sector organizations. The portion of the bar that is blue indicates the relationships that pre-existed the pandemic, whereas the portion of the bar that is orange indicates the new relationships.

Figure D-7. Organization-reported contact ties with other OST provider organizations in a single city, sorted by number of pre-existing contact ties.



For this city, the 25 respondents indicated that their organizations were in contact with an average of 17.4 other organizations active in the OST sector (min = 3; max = 40), which was 16.9% of the listed organizations. Among the 103 organizations listed on the survey, the average number of incoming “in contact” links was 2.95 (which is 11.8% of responding organizations) (max = 19). The total number of “in contact” links between organizations was 436. Specifically, 111 (25.5%) of these were “new” contacts that were formed since the start of the pandemic. Figure D-7 sorts the 22 responding organizations (3 organizations had more than one respondent, and only one representative was selected for each of these) by their number of contacts with other organizations that pre-existed the pandemic. The numbers on the horizontal axis are random numbers used to identify provider organizations that responded to the survey. This display shows that **new contacts established during the pandemic were broadly distributed among organizations, but that several provider organizations with fewer contacts pre-pandemic gained the most.** Specifically, organizations 27, 122, and 93 were the provider organizations that reported the greatest number of newly formed contact ties with other OST provider organizations.

Figure D-8. Organization-reported contact ties with other OST provider organizations in a single city, sorted by total number of current contact ties, including new ties.

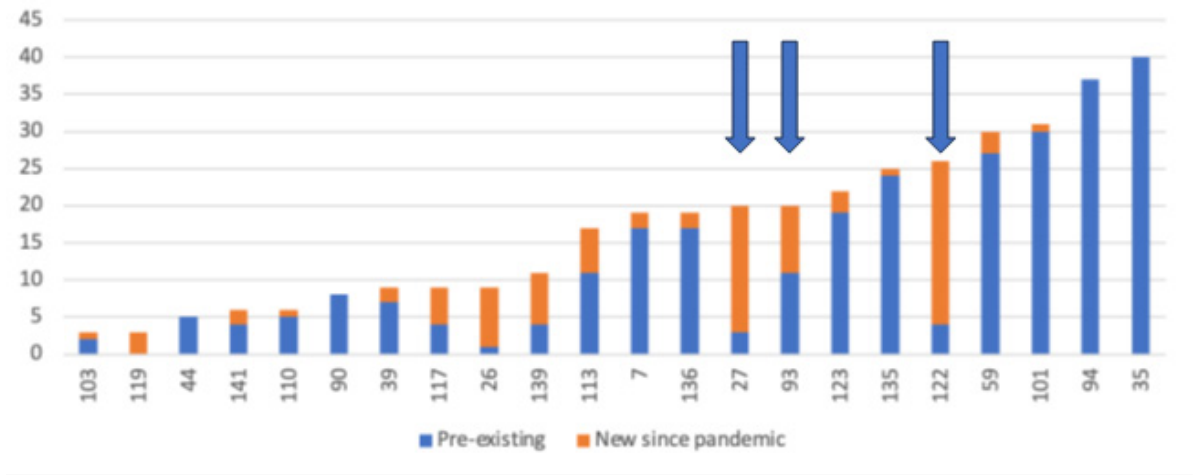
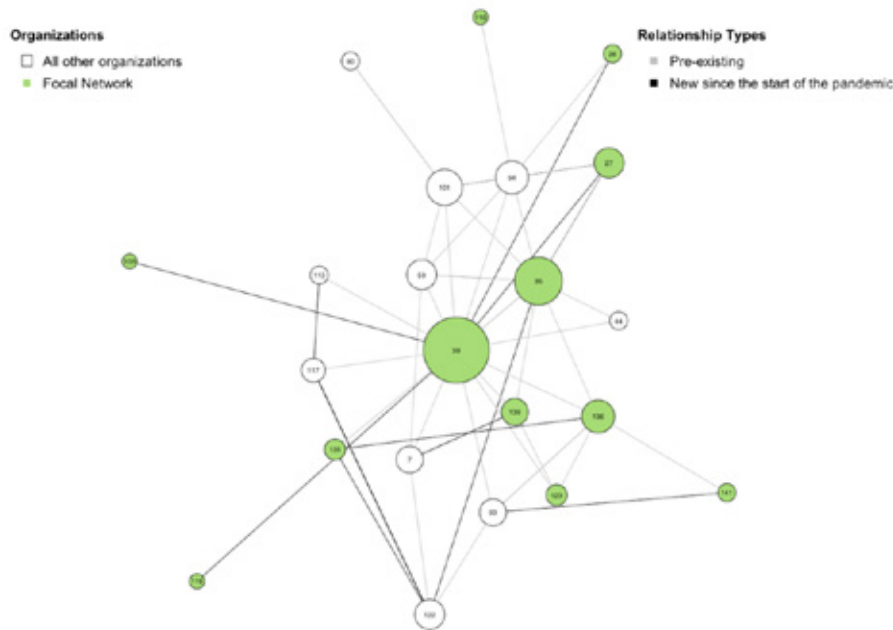


Figure D-8 displays the same data as Figure D-7, but with the order sorted by the total number of contact ties (whether pre-existing or new since the start of the pandemic). Note that the three organizations that saw the largest numerical gains moved into the top 10/top half of organizations in terms of organizational contacts (only organization 93 was in the top 10 pre-pandemic). **Similar patterns were observed in all six cities that were surveyed, suggesting meaningful changes in the inter-organizational communication networks over the course of the pandemic.**

Another way to think about these connections is as a network of organizations connected by incoming, outgoing, and reciprocally reported contact ties. The data can be analyzed in ways that enable visualization of these network structures. For instance, Figure D-9 is a display of the contact tie data from the same example city whose data were presented in Figures D-7 and D-8. Each OST provider organization is represented by a circle (the numbers are organizational IDs, which are the same as in the previous two displays). Those that are more central in this display are more interconnected within the network structure (i.e., more connections to more highly connected organizations) and those that are located around the periphery are more isolated.

All circles are sized according to the total number of incoming and outgoing contact ties (known as “degree” in social network analysis terms). The color of the circles in this display indicates how closely each provider organization was working with the OSTI, from the perspective of the OSTI. Those that are unshaded were rated as either “not very engaged” or as “somewhat engaged” with the OSTI, whereas those shaded in green were rated as “very engaged” with the OSTI. The lines between the organizations are lighter shaded if they pre-existed the pandemic, and darker shaded if they were newly formed since the start of the pandemic.

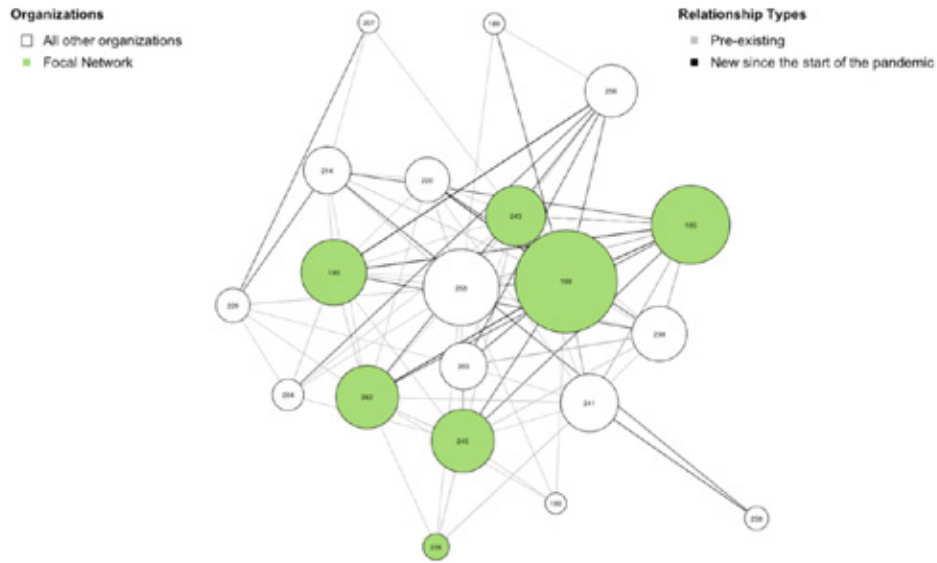
Figure D-9. One city's network of contact ties among OST provider organizations: New ties and those that pre-existed the pandemic.



Looking at Figure D-9, it is clear that although new ties were formed throughout the network during the pandemic, newer ties appear to be disproportionately among the organizations most involved with the OSTI. This suggests that the OSTI likely played a role in the formation of new communication ties during the pandemic period. Despite the strengthening of some ties among already densely connected organizations, however, the network of OST organizations in this city appears to have multiple very inter-connected organizations at its core (many of which were identified as being very engaged with the OSTI, but others which were not). Yet, it does appear to have several organizations acting as key brokers. Graphics like these were shared with each OSTI taking part in Phase 3 of the study, including recommendations based on interpretations. For instance, for this city, the report suggested that “a goal might be to diversify connections within the local network since broad interconnectedness tends to facilitate communication, coordination, and collaborations in local communities.”

Although relationships between OST provider organizations appear to have changed meaningfully during the pandemic in all six surveyed cities, there were also some apparent contrasts between the networks in different cities. For example, Figure D-10 displays the same type of network analysis as Figure D-9, but for a different city.

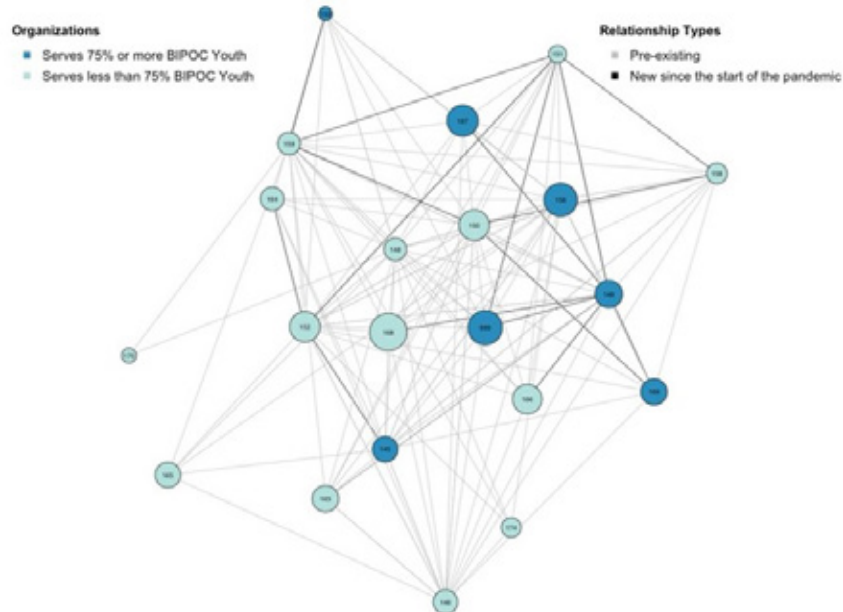
Figure D-10. For comparison: A second city’s network of contact ties among OST provider organizations: New ties and those that pre-existed the pandemic.



The network of OST provider contact ties is very broadly distributed, and there were many new contact ties formed within the core of network, among organizations that were very engaged with the OSTI and those that were less engaged. However, some organizations that formed no new ties likely became more peripheral in this network (e.g., 235, 180) as other provider organizations formed more new ties.

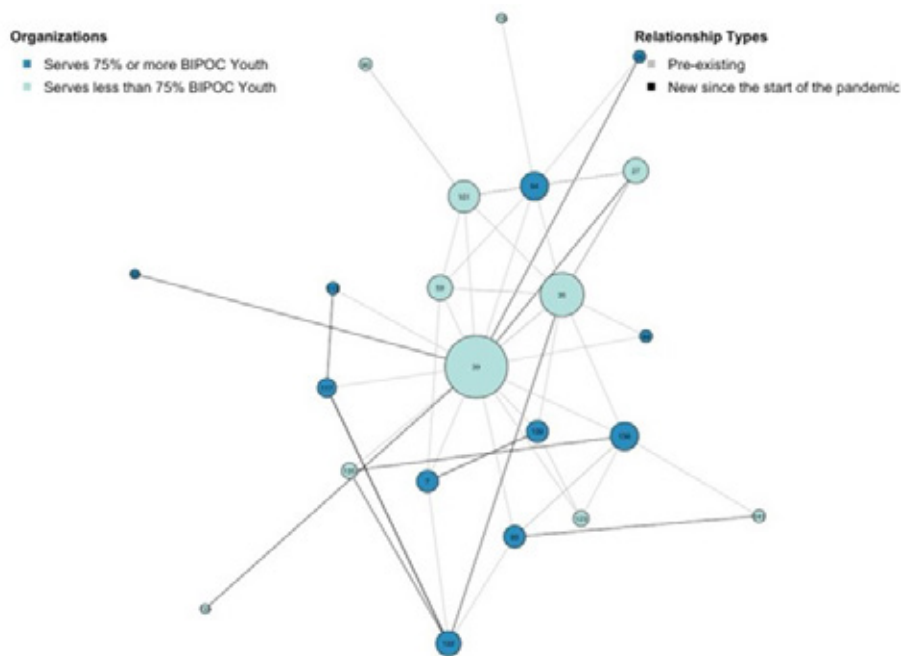
The survey findings also suggest that organizations serving higher percentages of BIPOC youth gained more connections. Figure D-11 displays one city’s network of contact ties. This graphic is similar in most ways to Figures D-9 and D-10 (i.e., size of circles represents degree, and the shading of the lines connecting the circles indicate whether the ties are new or pre-existed the pandemic) but the shading of the circles in this graphic represents whether the provider organization reported serving greater than 75% BIPOC youth (dark blue) or less than 75% (lighter blue).

Figure D-11. One city’s network of contact ties among OST provider organizations: New ties and those that pre-existed the pandemic among organizations serving higher and lower proportions of BIPOC youth.



Looking at Figure D-11, it is apparent that the OST provider organizations that serve the highest proportions of BIPOC youth became much better connected through the pandemic, both amongst each other, and with a subset of other well-connected organizations. In other words, they became more central to the communication networks in the OST sector in this city. Similar dynamics were evident in the other five cities that were surveyed in Phase 3. For example, Figure D-12 displays the same network analysis for the same city as displayed in Figures D-7 through D-9).

Figure D-12. For comparison: A second city’s network of contact ties among OST provider organizations: New ties and those that pre-existed the pandemic among organizations serving higher and lower proportions of BIPOC youth.



The graphic suggests at least two things: 1.) that many of the OST provider organizations serving high proportions of BIPOC youth in this city have become more interconnected with other organizations since the pandemic started, and 2.) despite this, the most interconnected organizations are not those that serve the highest proportions of BIPOC youth. In the report to this city’s OSTI, we suggested that “one strategy for addressing inequities in the city may therefore involve continuing to build connections between organizations serving different populations and/or working in different areas of the city.”

To further examine the changes in contact tie networks, we ran a linear multivariate regression predicting the total number of new contact ties with other local OST providers that were reported by each provider (n = 144 with complete data for relevant variables) since the start of the pandemic. We included four independent (predictor) variables in this analysis:

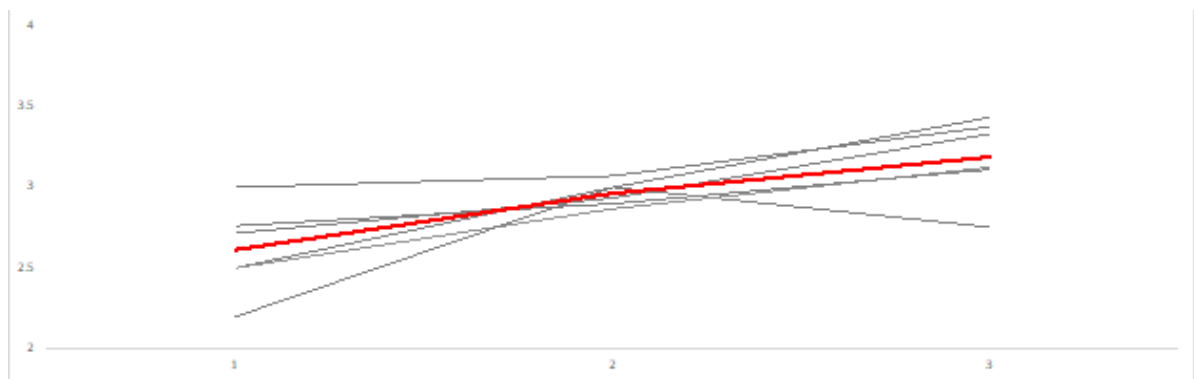
1. The number of young people the organization reported serving annually (a proxy for the size of the organization, measured in five tiers from “1 to 25” to “200 or more”);
2. The total number of local collaboratives, alliances, coalitions, or other formalized efforts to connect local organizations that each OST provider organization reported taking part in currently;
3. The level of “organizational system alignment” reported by the organization as part of our assessment of organizational learning capacity (see details on this measure under Finding 2); and
4. A binary indicator of whether the provider organization served more or less than 75% BIPOC youth (the same threshold as in the displays in Figures 12 and 13).

Results indicated that these predictor variables together accounted for approximately 5.2% of the variance in the total number of new contact ties across provider organizations ($R^2 = .052$). The number of multi-organizational collaboratives (coalitions, etc.) was not a significant predictor. The size of the organization was a significant but weak positive predictor ($p < .05$), meaning that larger organizations were somewhat more likely to form new contact ties during the pandemic. Scores on organizational system alignment and serving more than 75% BIPOC youth were both strong positive predictors ($p < .001$). We interpret this to mean that: 1.) there is a significant association between forming new ties during the pandemic and the internal capacity of organizations (i.e., whether they have organizational culture and leadership that supports internal and external system alignment), and 2.) controlling for this and the possible influence of other variables in the model, there is an additional significant association between serving higher proportions of BIPOC youth and forming new contact ties during the COVID-19 pandemic. **These results, especially when interpreted alongside the network analytic displays and results from qualitative data analysis, provide additional evidence that OST ecosystems were prioritizing work toward equity to a greater extent than before the pandemic and racial reckoning.**

Working Toward Equity for Families and Youth

Survey respondents were asked about the extent to which OST providers in the city had worked together to address issues of racial and socioeconomic equity for children, youth, families, and communities in the city (along four-point scales from “never” = 1 to “very often” = 4) across the three time periods described for other questions. As Figure D-13 shows, in five out of six cities, there was a steady increase in work toward equity among OST provider organizations. In one city, work increased during the peak of the pandemic period, and has since declined, but remains more extensive than before the pandemic.

Figure D-13. Extent to which OST provider organizations worked together to address issues of racial and socioeconomic equity in six cities 1.) before the pandemic, (2.) during the peak pandemic period, and (3.) during the recovery from the pandemic.



Endnotes for Appendices

- i. Massey, D. S., & Denton, N. A. (1993) *American apartheid: Segregation and the making of the underclass*. Harvard University Press.; Tomaskovic-Devey, D., & Vincent, J. R. (1997). Uneven development and local inequality in the U.S. South: The role of outside investment, landed elites, and racial dynamics. *Sociological Forum*, 12(4), 565-597.
- ii. <https://www.ncsl.org/research/education/expanding-learning-opportunities-through-afterschool-programs.aspx#funding>
- iii. <https://childrensfundingproject.org/wp-content/uploads/201805-FTNG-PlanningGuide-v25-web.pdf>
- iv. <https://www.strivetogether.org/>
- v. Based on National Conference of State Legislatures state party control data for 2021: <https://www.ncsl.org/research/about-state-legislatures/partisan-composition.aspx#> and the Ballotpedia list of mayors of the top 100 cities in the United States: https://ballotpedia.org/List_of_current_mayors_of_the_top_100_cities_in_the_United_States
- vi. Three distinct models of afterschool system governance: Public Agency, Nonprofit, Network: <https://wallacefoundation.org/sites/default/files/2024-01/governance-structures-for-city-afterschool-systems-three-models.pdf>
- vii. One respondent did not offer information about their racial identity.



About the Authors

Tracey A. Hartmann, Ph.D., is Senior Research Fellow of Informal Learning at Research for Action (RFA), where her research centers on driving equity and access for youth in under-resourced communities through out-of-school time (OST) programs and systems. Dr. Hartmann's career at RFA encompasses extensive collaborations with both local and national OST organizations, channeling her expertise into research projects aimed at enhancing high-quality OST experiences for young people and supporting local and national OST systems in their pursuit of enhancing support for OST provider organizations, youth, and families.

She was Director of Qualitative Research at RFA from 2018 to 2023, overseeing an array of research and evaluation projects in the K-12 education field. Grounding her research in her early career experiences as a youth worker and educator in Philadelphia, Dr. Hartmann remains steadfast in her commitment to fostering positive change for youth and their communities. She earned her Ph.D. in Human Development from the University of Pennsylvania.

Wendy McClanahan, Ph.D., is McClanahan Associate's (MAI) President and CEO. Wendy uses her research and evaluation expertise to help programs, initiatives, and organizations maximize their impact, improve their practice, and fuel systemic change. Her approach centers the expertise and assets of the organizations she works with and the people they serve.

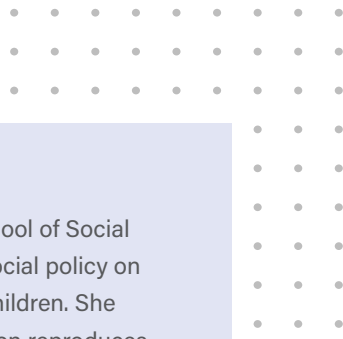
Throughout her career, Wendy has led studies of out-of-school time and mentoring programs, violence and crime reduction programs, health equity initiatives, and employment and training programs. She also works with organizations to help them grow their evaluation and learning capacity.

Prior to forming MAI, Wendy was senior vice president for research and evaluation at Public/Private Ventures. She has a Ph.D. in Criminology from the University of Pennsylvania and a master's degree in Human Development from The Pennsylvania State University.

Brian D. Christens, Ph.D., is a professor of Human and Organizational Development at Vanderbilt University. He studies organizations' efforts to change systems and benefit their communities. He conducts research into the mechanisms linking civic participation to individual and community well-being, and into how different organizational approaches to civic action can lead to different outcomes. He is especially interested in young people's involvement and leadership in efforts to change systems, and the ways that these experiences relate to other aspects of human development.

Through action research partnerships, Christens works with groups seeking to improve neighborhoods and public schools, and with initiatives to change policies and systems that lead to social problems and disparities. He has collaborated with and studied community and youth organizing initiatives in many parts of the United States.

He directs the interdisciplinary Ph.D. program in Community Research and Action at Vanderbilt. He is the editor of the Contemporary Social Issues book series published by Cambridge University Press and the author of Community Power and Empowerment (Oxford University Press). He is also an associate editor of the American Journal of Community Psychology. Christens holds a Ph.D. in Community Research and Action from Vanderbilt.



Carolyn Barnes, Ph.D., is an associate professor in The University of Chicago's Crown Family School of Social Work, Policy, and Practice. Her research broadly explores the social and political implications of social policy on low-income populations in the areas of childcare policy, family services, and supports for young children. She has initiated a new line of interdisciplinary research that examines how social policy implementation reproduces racial inequality in rural southern communities.

Her book *State of Empowerment: Low Income Families and the New Welfare State* (University of Michigan Press) is an in-depth organizational ethnography that examines how publicly funded after-school programs shape the political behavior of low-income parents. Her research has been published in numerous journals, including *Policy Studies Journal*, *Journal of Public Administration Research and Theory*, *Children Youth Service Review*, and *Race and Social Problems*.

Barnes completed a bachelor's degree in political science at the Virginia Polytechnic Institute and State University, followed by an master's degree in political science and a Ph.D. in political science and public policy at the University of Michigan. Most recently, she was an assistant professor at the Sanford School of Public Policy at Duke University.

Leana Cabral is a senior research associate at Research for Action. She serves on the Out-of-School Time (OST) Coordination: Infrastructure for Supporting Healthy OST Ecosystems project which explores how city level OST coordination can contribute to community, family, and youth resilience moving forward from the COVID-19 pandemic into the future. She is also leading the Educator Diversity study, examining the root causes of Black teacher attrition in Philadelphia and promising practices in teacher diversification efforts.

Cabral has extensive experience working in out-of-school settings as an educator and administrator as well as in school settings as a researcher. Additionally, Cabral leverages her mixed methods training as a PhD candidate at Teachers College in Sociology and Education in support of her projects at RFA. Her research interests include the racial politics of public education, K-12 educational inequality and educational program evaluation and she is broadly committed to educational and racial justice and equity for all students.

Mark Duffy is a senior research associate at Research for Action. He has worked in the field of education policy and practice research for nearly two decades, focusing on both K-12 and postsecondary reform in areas such as standards-based assessment and accountability systems and developmental education.

In K-12 education, Mark has led RFA's work on community schools and personalized education and contributed to research on the implementation of curricular tools, as well as evaluations of afterschool programs in Philadelphia and the Say Yes to Education initiative in Cleveland. In postsecondary education, Mark led RFA's work on diagnostic assessment and multiple measures placement, contributed to RFA's research on outcomes-based funding, and is working with Jobs for the Future on their Student Success Center initiative across 15 states. Mark has also contributed to briefs on multiple education policy issues, including trauma-informed care in education, teacher evaluation and performance pay, charter school authorization, high school exit exams, and school vouchers.

Mark has been published in a number of articles and reports and has co-authored multiple book chapters. He holds a master's degree in public policy from the Bloustein School of Planning and Public Policy at Rutgers University.

The logo for Research for Action consists of a stylized 'R' and 'A' formed by overlapping geometric shapes in blue, orange, teal, and light blue. To the right of these shapes, the words 'RESEARCH' and 'FOR ACTION' are stacked vertically in a bold, dark blue, sans-serif font.

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