



ILLINOIS PARTNERS

for

HUMAN SERVICE

FEDERAL CHANGES, COMMUNITY CONSEQUENCES: THE STATE OF HUMAN SERVICES IN ILLINOIS

TRENDS • IMPACTS • PROVIDER PERSPECTIVES

FINAL REPORT: Beyond Resilience, A Call for State Action



"The heightened fear that the current administration is creating in the community we serve has increased the challenges our clients and staff face, which only speaks to the intensity of support needed. While these times have strained our resources and added administrative burdens, they also reinforce our commitment to our mission. The evolving landscape is strengthening our ability to adapt and continue serving as a trusted resource, amidst times of uncertainty."

Executive Summary/Series Recap

From July 2025 through June 2026, Illinois Partners for Human Service released quarterly surveys to learn how changes in federal funding and policies were affecting community-based health and human service provision in Illinois. The surveys were designed to shed light on financial and operational impacts resulting from social, political, and economic shifts, as well as the effects of Executive Orders and proposed program cuts on service delivery.

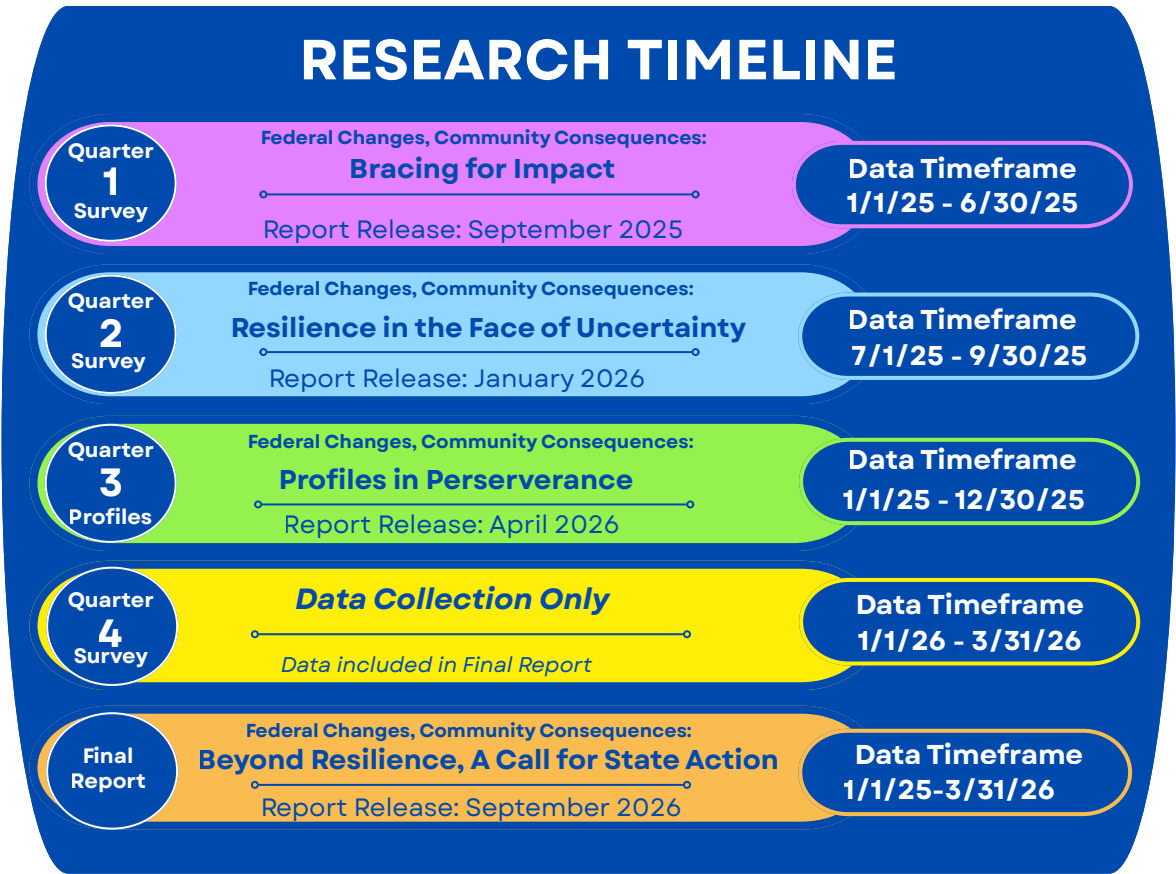
The Quarter 1 report, "[Bracing for Impact](#)," established a baseline using data from January through June 2025, before many new federal policies and orders had gone into effect. At that time, most organizations had experienced limited financial impacts, although some had already had federal grants terminated, reduced, frozen, or delayed. Many organizations expected conditions to worsen and began taking precautionary steps to prepare for potential funding losses and operational disruptions. There was also evidence of a "chilling effect" as fear or mistrust among certain populations deterred eligible individuals and families from seeking essential services.

The second report, "[Resilience in the Face of Uncertainty](#)," released in January 2026, revealed a human services sector still largely in limbo, but increasingly characterized by frustration rather than the fear. This frustration stemmed from ongoing uncertainty as federal policies and executive orders were issued, revised, rescinded, or challenged in court, while providers navigated changing requirements and increased government scrutiny. Pressures were compounded by federal staffing upheaval, concerns about immigrant safety, uncertainty surrounding SNAP and Medicaid, and rising demand for services. Despite these challenges, organizations continued to demonstrate resilience and a renewed sense of purpose, serving as a critical lifeline for communities and remaining steadfast in their commitment to community well-being.

The Quarter 3 report, “[Profiles in Perseverance](#),” shifted from anonymized, financially focused data to deeper individual narratives of six diverse organizations. Their experiences revealed how federal policy changes have created funding freezes, compliance burdens, shifting priorities, and operational disruptions, often exacerbated by state-level delays and bureaucratic challenges. Through it all, these organizations continue to adapt, innovate, and advocate, keeping the needs of their communities and staff at the center of their work. Their stories demonstrate the resilience of the human services sector and its capacity to navigate instability while reimagining how it operates without compromising its commitment to the people and communities it serves.

This report, the final one in the series, synthesizes lessons learned across all four quarters, including the results of our last survey administered in June 2026. While the data collected from that survey largely corroborated previous findings, it also completed a full arc of information from an ongoing period of unprecedented volatility. In this report, we trace the threads that connect all the data - the financial pressures, policy changes, operational challenges, workforce impacts, and evolving community needs to create a map for moving forward. We consider the consequences that may emerge if current conditions persist. We also discuss how state intervention and actions could mitigate risks for the sector, and how more responsive policies could fortify provider capacity and safeguard well-being for communities across Illinois.

Together, these four reports tell the story of the real-time impact of policies and executive orders on service delivery across Illinois, capturing how organizations are experiencing, responding to, and adapting to changes as they unfold.



*"Welcome to our collective new reality - a surreal place where it is now possible to upend nine years of impactful work providing evidence-based health and wellness support for hundreds of people experiencing multiple, intersecting forms of marginalization - all because we were told to comply with unchecked power and assuage the collective group agenda of misinformed, self-aggrandizing ideologues. Caring for our most vulnerable neighbors shouldn't have to be **this** difficult or exhausting."*



What Did We Learn?

Common Themes

The challenges prompted by upheaval at the federal level extended beyond funding to touch many aspects of organizational operations and sustainability. Planning, staffing, administration, service delivery, and organizational capacity were all impacted. At the same time, providers continued to adapt and respond to growing community needs, often relying on their own resilience and ingenuity to navigate an increasingly unstable environment. Across the course of this research, we mapped these broader impacts. The following five themes emerged and highlight both the pressures facing the sector and the limits of expecting individual organizations to absorb them without broader policy support.

Federal uncertainty became organizational uncertainty.

Changes in federal funding, policy, requirements, and priorities made it harder for providers to plan, budget, staff, and sustain services.

"The chaos with HUD and their funding for housing through the local CoC funding has been a rollercoaster. The initial restrictions and changes were delayed and now will still be implemented next year. That creates uncertainty about what that will look like and if we can meet the new restrictions."

"We are operating under tremendous uncertainty. We have two federally funded positions that are vital to our work that we will need to find a way to fund internally. It has put a tremendous strain on our development team to close a widening budget deficit. And our clients are becoming more and more vulnerable as financial safety nets are threatened or disappear."

"We have learned to pre-plan for future disallowances. We are raising dollars on the private and corporate side to make up for what we lose on the state and federal side so that our clients and staff do not take the burden of what is going on in government. Our future concerns are "how long can we keep in this race?" We wake up to something different and adverse everyday."

Human Service providers faced more pressure while community needs remained high.

Organizations were navigating increased or more complex demand while simultaneously trying to manage new financial and administrative constraints.

"The increased burden of helping families get recertified for benefits more frequently has been transferred to organizations. While our population is often exempt from the work requirements, helping people to understand the changes adds a burden for our organization."

"Our clients are more heavily reliant on us for food. We had to convert an office into a food pantry for supportive housing clients."

"Since January 20, 2025, federal actions have created uncertainty for many of the families we serve, particularly around immigration and access to public resources... Looking ahead, we remain concerned about the potential impact of policy changes and funding instability on vulnerable families and the nonprofit sector's ability to meet growing demand."

The effects of federal upheaval extended beyond simple matters of funding.

Administrative burden, workforce strain, changing requirements, and service-delivery challenges all affected organizational capacity.



"We're all exhausted and frustrated. You can also see that it's affecting state staff, so when they interact with us, there are more errors in emails and documents, and even more reporting requirements, which is making it harder for providers on every end. In the middle of all of this, providers are also seeing increased stress in our clients, and more threats to staff safety. I don't think people realize the degree that this is happening to nonprofits, and what a burden it is for staff to get paid less than a state employee, get no pension, and worry about their safety walking into work."

"The messaging and doomsday narratives that are being talked about causes a lot of stress for my staff and those we serve and it can create a negative work atmosphere at times - which is difficult to manage as leaders."

The threat of federal actions at times changed behavior before action occurred.

Concern about potential scrutiny, penalties, or policy changes led some providers to make decisions to reduce risk, a form of anticipatory compliance.

"We've been more careful about how we word things externally and in assessing risk before we apply for funding where we have to certify compliance with EOs. It's hard to navigate internally when we are still committed to our values but have to be more thoughtful about our broader publicity of that externally."



"We provide disability & inclusion work and attempt to stress the importance of intersectionality of other sectors who are being suppressed. We have community trainings and provide systemic advocacy. In an effort to not put our funding at risk we had to rephrase or remove language from our website, printed materials, trainings, curriculum, etc."

"We have depended on a semi-predictable stream of consulting opportunities offered through our partnerships with traditional providers that help to sustain our program's ever-burgeoning service capacity. We are justifiably concerned that our partnered orgs may decide to not renew the majority of our contracting opportunities in fear of risking federal scrutiny and the subsequent loss of grant funding if the feds connected any public-facing reference as proof of implied support or association with a known harm reduction organization."

"We work to extract language from proposal submissions that will hurt us."

Provider resilience is not a solution.

Organizations innovated and adapted, but continued reliance on staff adaptability, reserves, partnerships, and organizational flexibility is not a sustainable model or an adequate substitute for bold policies to ensure a stable human services infrastructure.



"We're adaptable so we've managed but it is alarming to see the slow demise of human services. I'm fearful it will be death by a thousand cuts for some organizations that weren't on strong financial footing going into this chaos. That will leave a big gap in safety net services. The services most at risk are those most needed for life-saving support."

"I am really proud of our staff and their great work, but it's exhausting, and I think providers across our state feel really unappreciated right now."

“Across both organizations and communities, one of the clearest findings was the extent to which providers relied on resilience and adaptability to absorb the effects of federal uncertainty. Staff took on additional responsibilities, organizations adapted their practices, and providers leveraged partnerships and other resources to maintain services. While this resilience helped mitigate the immediate consequences of policy and funding instability, it also underscored its limits. The continued reliance on providers to absorb systemic disruptions is not a sustainable substitute for a stable and adequately supported human services sector.”



Impacts of Federal Uncertainty

While the specific challenges varied across organizations, their consequences were remarkably consistent. Federal uncertainty and organizational instability affected the people doing the work and the communities they serve. Employees faced increased workloads, administrative demands, emotional strain, and uncertainty about the future, while communities encountered growing demand for services, more complex needs, and, in some cases, greater barriers to accessing essential supports. As organizations stretched to absorb these pressures, staff capacity and organizational resources were increasingly diverted toward managing uncertainty rather than responding directly to community needs.

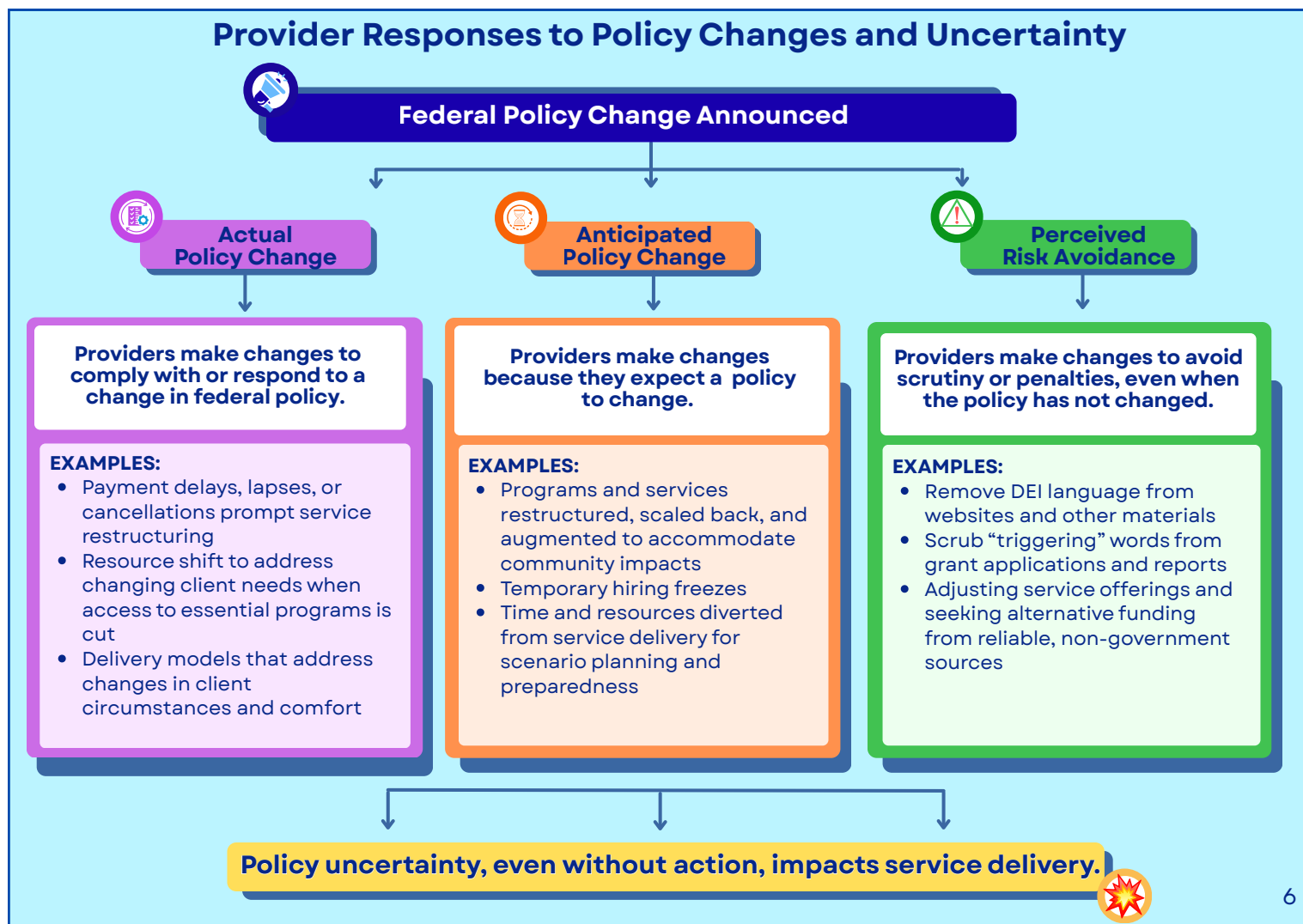
Organizational Impacts:

- **Increased Workload and Administrative Burden.** Providers reported increased administrative demands as funding rules, eligibility requirements, and federal directives changed. In Quarter 1, 65% reported increased administrative burden, and subsequent reporting found continued increases in both administrative burden and overhead expenses.
- **Staffing Uncertainty.** When organizations cannot predict how funding models, program requirements, or administrative supports will shift, it becomes harder to make decisions about staffing, compensation, and long-term employment scenarios.
- **Staff Morale and Elevated Stress.** Employees experience added emotional strain when they work in environments characterized by uncertainty, fear, and frustration. This stress is compounded when serving populations experiencing heightened anxiety and instability and even further when workers, themselves, are managing personal challenges related to external factors.
- **Mission Conflict and Compliance Pressure.** Providers were faced with increasing federal requirements and mandates that felt at odds with their missions, sometimes causing them to alter the language they used to describe their work or services in order to avoid scrutiny or penalties.
- **Reduced Organizational Capacity.** As providers devote more resources to navigating uncertainty, compliance, and administrative demands, they have less capacity to focus on direct service, long-term planning, and organizational growth. Rising overhead costs without additional funding further exhaust resources.
- **Escalating Financial Pressure.** Providers report that rising costs attributed to broad inflationary factors continue to pose a significant challenge. Everything from food, transportation, and office supplies to compensation, overhead, and capital expenses is on the rise and, as such, providers must find ways to maintain operations without compromising the quality of the services they deliver.

Community Impacts:

- **Greater Demand for Services.** As economic and policy changes created additional hardship, more people sought assistance, raising concerns about client and community well-being, including health, housing and food security.
- **More Barriers to Accessing Essential Services.** Changes to SNAP, including confusion around work requirements, redetermination, documentation, and enrollment processes, made it harder for some people to obtain benefits.
- **Individuals with Greatest Needs Facing Greatest Obstacles.** Individuals and families already experiencing economic, health, housing, or food insecurity were often navigating both greater need and greater difficulty accessing the systems designed to support them.
- **Fear Undermining Service Utilization.** Providers reported client reluctance to access resources, including food pantries or to attend in-person interviews for other services because of concerns about ICE activity.
- **Reduced Organizational Capacity Undermining Service Delivery.** When providers divert resources and reduce capacity, direct service recipients feel the effects through fewer service options, longer wait times, and diminished resources.

Across both organizations and communities, one of the clearest findings was the extent to which providers relied on resilience and adaptability to absorb the effects of federal uncertainty. Staff took on additional responsibilities, organizations adapted their practices, and providers leveraged partnerships and other resources to maintain services. While this resilience helped mitigate the immediate consequences of policy and funding instability, it also underscored its limits. The continued reliance on providers to absorb systemic disruptions is not a sustainable substitute for a stable and adequately supported human services sector.



Provider Perspectives



"We had to close one home and are considering closing an employment program due to lost revenue. We have definitely increased our fundraising efforts, which leads to more advocacy, lobbying, and administrative burden."

"The immediate changes to Medicaid have not had an impact on our organization. However, in stating this, the expected shortfall in Illinois for the next fiscal year (FY2028) is expected to be \$5 Billion. If this happens as projected, there will be a ripple effect on the funding that is available for our programs. This is not a good thing!"

"Our budget has gotten tighter. Inflation has increased operational expenses and fundraising has gotten harder. We also are trying to figure out how to help staff who are feeling the crunch of a high cost of living."

"We have been on shaky ground for a couple of years now. Some of that has to do with the age of our population and having some people who receive our services pass away. We have also experienced dramatic loss in revenue over the past couple of years due to changes in the funding model. This has led to cuts in programs and positions within the agency, thus leading to a reduction in quality of services for the people we support."

"We are OK for the time being but planning for worst case scenarios should the funding for our programs change dramatically in the next fiscal year."

"Our revenue has decreased drastically over the past two years, while our compensation and overhead expenses continue to increase. It is an unsustainable model."

"The changes in government funding coupled with the lack of clear guidance on how to implement what has been created [with HR1] have created reactions ranging from "fear of the unknown" to a lack of confidence things will be OK moving forward. While the people we serve are not supposed to be impacted by the changes in federal Medicaid funding, the question now turns to what will happen at the State level and will the state continue to fund initiatives that are not going to be supported at the federal level and if so, how will this affect others who are not supposed to be impacted?"

"While we have not eliminated any programs, we began to plan for the elimination of those programs that could not operate with a surplus. We are preparing for the worst case scenarios given the signals we see in the current economy."

"We just analyzed the SNAP benefits for those we serve and over the past month, we had about 20% of those we serve see their SNAP benefits drop from over \$250/month to \$20/month.

We serve people with developmental disabilities and according to the regulations, they should not have seen a reduction in benefits."

"We are terrified. Our population is expendable in the eyes of the federal government and the nation's most vulnerable are going to pay the price as a result of this viewpoint of people with intellectual and developmental disabilities."

"Inflation across a number of costs has affected our business. The impact is substantial."

"We feel very connected and focused on our mission right now as we are doing everything in our power to support the needs of the community. We saw a drastic decrease in people calling for services during ICE raids in our community. However, this has changed and demand has resumed in the past few months."

"We encourage the State to continue providing clear guidance, stable funding, and strong support for community-based organizations serving vulnerable populations. Ongoing advocacy and investment in programs that promote access to education, mental health, and family services will help ensure organizations can continue meeting community needs despite federal uncertainties."



What Comes Next?

A Roadmap for the State of Illinois to Mitigate Federal Uncertainty

Stabilize funding. Simplify systems. Center Equity. Protect access.

Provider resilience has protected Illinois communities from some of the immediate consequences of federal instability. However, resilience should not be mistaken for evidence that the system can absorb unlimited pressure. The strength and creativity of providers has been a lifeline for many communities, but this is not a sustainable model in any way. Reserves of all kinds can only last so long.

Therefore, the State of Illinois needs to intervene at the systems level, rather than relying on individual nonprofits to find strategies on their own to mitigate threats. The recommendations below call for sustained State action to stabilize providers, preserve access to essential services, and ensure that federal instability does not prompt even more challenges for providers and communities across Illinois.

- **Restructure funding models and create mechanisms to address federal funding gaps.** Illinois should create more flexible and emergency funding mechanisms to prevent federal delays, freezes, or cuts from immediately translating into layoffs, program reductions, or service closures. Survey respondents specifically called for funding that can cover gaps and, importantly, include resources to cover some capital and infrastructure costs.
- **Streamline state government administrative processes.** A major and frequently expressed concern is that organizations are spending more time navigating administrative requirements while demand for services is rising. Solutions include streamlined applications, reporting, and reimbursement practices, along with better coordination across state agencies so that providers do not have to repeatedly supply the same information.
- **Protect access to supports for basic needs.** Reporting points particularly to SNAP, Medicaid, food access, housing stability, and workforce development. The State must expand or protect state-level funding and, where necessary, restore programs such as the State Food Program to cushion federal reductions.
- **Create clear communication systems and resources.** Providers need clear, timely information that they can actually use with clients. For SNAP, they recommended simplified enrollment, staff training, FAQs/webinars explaining changes and timelines, multilingual materials, exemption forms, and targeted resource lists for populations such as older adults, people with disabilities, immigrants, and people experiencing housing insecurity.
- **Take bold stances and actions to protect service recipients and communities.** Illinois must use all of its policy and legal resources and authority to protect marginalized communities, including immigrants and transgender residents, and to challenge federal actions that undermine community well-being or exceed constitutional authority.
- **Recognize the human services infrastructure as essential and invest in it accordingly.** The State can not continue to expect community-based human service providers to absorb the impacts of federal upheaval indefinitely. The state must enact sustainable increases in human-services funding that reflect the true cost of delivering services, and implement measures, such as group insurance options, to address rapidly rising operational costs.

Beyond responding to the immediate consequences of federal changes, the state of Illinois must address long-standing challenges within the human services system and move the sector toward greater stability, sustainability, and equitable access over the long term. By working together, the state and human service providers can turn these recommendations into meaningful action and build a more equitable future for people and communities across Illinois.



“State actions and guidance have helped provide stability amid federal funding uncertainties, allowing [us] to continue serving families with confidence. However, evolving policies and funding concerns have required ongoing planning and flexibility to ensure uninterrupted services and compliance.”

From Resilience to Stability

Provider resilience has helped protect Illinois communities from some of the immediate consequences of federal instability. However, resilience comes at a cost, and that cost is being felt by the people who deliver and rely on essential services. Across the state, providers are stretching staff capacity, shifting resources, drawing on reserves, and adapting how they work to keep services available for children, families, older adults, people with disabilities, and communities facing the greatest challenges.

These efforts reflect the commitment and care of Illinois’ human service providers. Even so, communities should not have to depend on the extraordinary efforts of providers to receive the services and support they need. A system that depends on providers continually absorbing uncertainty and rising costs is neither sustainable nor equitable.

Illinois has an opportunity and a responsibility to create greater stability for the people and communities who rely on human services. A stronger state response can reduce uncertainty, close funding gaps, minimize interruptions in services, and ensure that providers have the resources they need to support people with dignity and consistency.

The path forward is clear:

Stabilize funding. Simplify systems. Center equity. Protect access.



STATE ROADMAP

FOR MITIGATING FEDERAL UNCERTAINTY FOR THE HUMAN SERVICES SECTOR

STABILIZE FUNDING

Restructured Funding Models



More flexible funding mechanisms to prevent federal funding lapses from translating into layoffs and program disruptions.

Simplified applications, reporting, and reimbursement processes to reduce administrative burden.

Streamlined Administrative Processes



SIMPLIFY SYSTEMS

PROTECT ACCESS

Basic Needs Access Protection



Expand or protect state-level funding and restore programs such as the State Food Program to cushion federal reductions.

Offer clear, timely policy updates and opportunities for providers to learn about resources and information they can share with their clients.

Clearer Communication Systems



CENTER EQUITY

Bold Stances on Federal Policy Decisions



Use all of its policy and legal resources and authority to protect marginalized communities and challenge federal actions that undermine community well-being.

Enact sustainable measures and increases in human-services funding that reflect the true value of these essential services and address rapidly rising operational costs and other existential challenges the sector faces.

Recognize the Value of Human Services and Invest in the Sector



COMMUNITY
WELL-BEING



Additional Resources

HR1 Impact on Illinois

The Center for Tax and Budget Accountability presents [The Ugly Reality of the Big Beautiful Bill: Impacts on the State of Illinois and the Path Forward](#).

SNAP

The United States Department of Agriculture defines the [SNAP Percent Error Rate](#) (PER).

The National Conference of State Legislatures provides an [overview of various state approaches](#) to addressing federal SNAP changes ranging from appropriations to cover shortfalls to investing in data sharing systems with some creative options in between.

The Food Research and Action Center reports [state by state data](#) on number of beneficiaries, percent error rates, and more, including Illinois' anticipated cost share of \$700M to maintain the state's \$4B program.

Illinois introduces the [Fresh Program](#) as a bridge for Illinoisans who have lost SNAP benefits due to changes in federal work requirements.

SNAP Ed presents its [final report](#) on how their work to improve food access and health outcomes also returned \$5.36 and \$9.54 per dollar spent.

Cook County Government presents a [timeline of SNAP changes](#) that have occurred in 2026.

Medicaid

The Center for Budget and Policy Priorities provides an [overview of various state approaches to addressing federal Medicaid changes](#) that range from implementing restrictive policies, like Illinois, to protecting access.

Department of Housing and Urban Development (HUD)

HUD's controversial [2026 Continuum of Care Notice of Funding Opportunity](#) (NOFO).

Illinois Attorney General Kwame Raoul announces the [August 7, 2026 judgement against the 2026 Continuum of Care NOFO](#).

Substance Abuse and Mental Health Services Administration (SAMHSA)

[Funding was restored](#) the next day after SAMHSA announced \$2B in grants for were cut.

Executive Orders

The National Conference of State Legislatures provides a [list of Executive Orders](#) from January 20, 2024 to present that includes updates and current EO status.

National Council on Nonprofits tracks ongoing Executive Orders and federal actions and their impacts on the nonprofit sector. For the most up-to-date information you can [sign-up for their newsletter](#) or [bookmark this page on their website](#).

Resources for Community Based Organizations

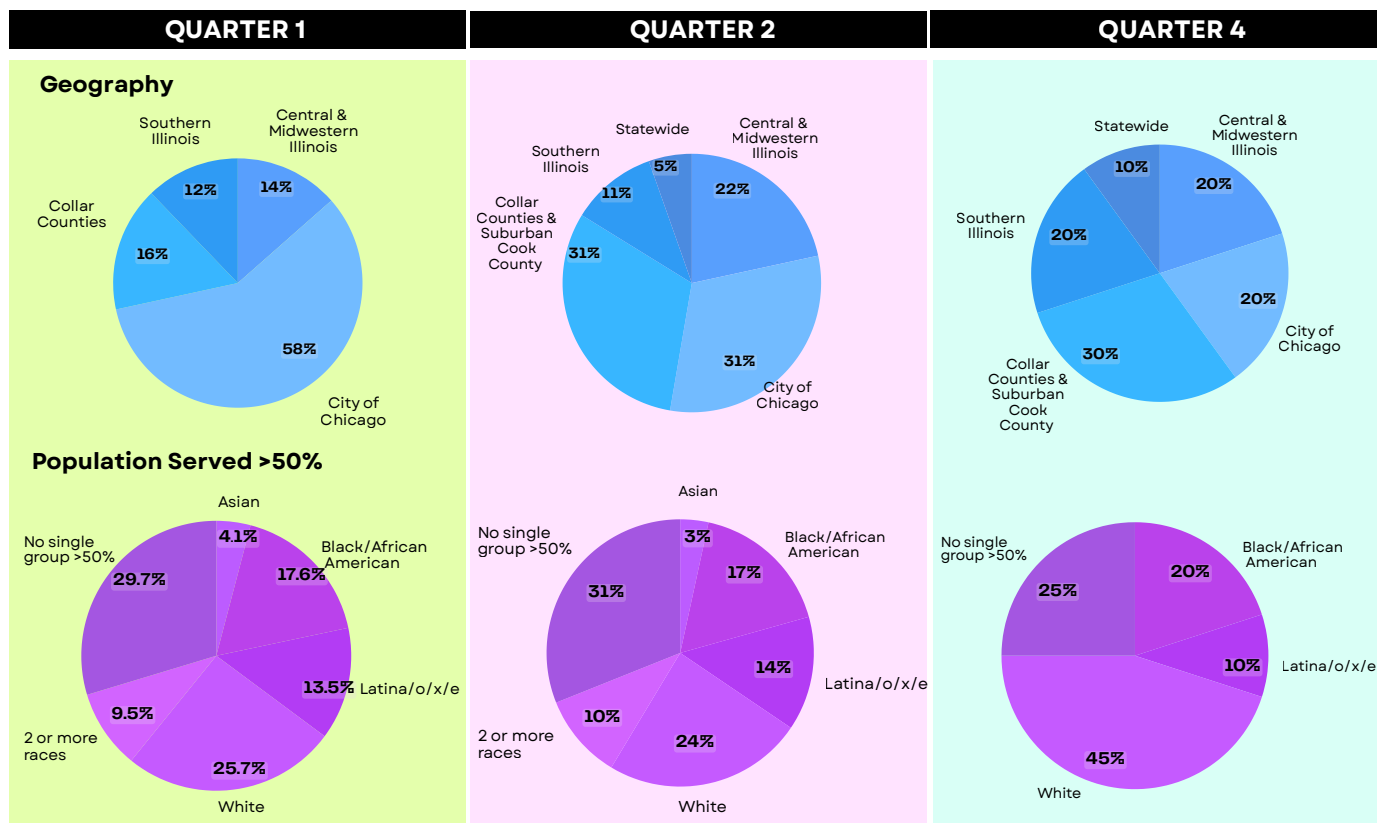
The Nonprofit Resilience Hub, managed by Forefront, is a [confidential resource for Illinois nonprofits](#) with operating budgets of \$10 million or less that are affected by federal actions. It offers a structured starting point to help organizations assess challenges inherent in a changing federal landscape and identify pathways forward.



Addendum: Q1, 2 & 4 Survey Respondent Data

Across the three surveys there were a total of 168 respondents. The following is the breakdown, by Quarter, of the participants in terms of geography represented and areas of service provision.

RESPONDENT DEMOGRAPHIC DATA



TOP PRIMARY AREAS OF SERVICE PROVISION REPRESENTED IN SURVEY RESPONSES

QUARTER 1		QUARTER 2		QUARTER 4	
1.	Developmental Disability Services	1.	Developmental Disability Services	1.	Developmental Disability Services
2.	Housing	2.	Housing	2.	Mental & Behavioral Health
3.	Adult & Older Adult Services	3.	Adult & Older Adult Services	3.	Housing
4.	Mental & Behavioral Health	4.	Food & Nutrition	4.	Healthcare Services
5.	Advocacy	5.	Youth Services	5.	Youth Services
6.	Child Welfare (including Foster Care)	6.	Child Welfare (including Foster Care)	6.	Adult & Older Adult Services
7.	Health Care Services	7.	Advocacy	7.	Child Care
8.	Workforce Development	8.	Mental & Behavioral Health	8.	Violence Prevention & Recovery
9.	Youth Services	9.	Healthcare Services	9.	Substance Use Treatment
10.	Child Care	10.	Violence Prevention & Recovery	10.	Workforce Development

Respondents were asked to report on organizational financial factors, including any shifts in direct and pass-through federal funding, as well as other revenue sources such as earned income or private philanthropy. In addition, they provided data regarding changes in expenses, specifically staff compensation and overhead costs. The following is a breakdown, by Quarter, of their responses.

Bolded boxes indicate highest percentage of respondents in each category.

RESPONDENT FINANCIAL FACTORS: CHANGES IN REVENUE, EXPENSES, & FUNDING

QUARTER 1				QUARTER 2				QUARTER 4			
FINANCIAL FACTOR	% of Respondents who have seen:			FINANCIAL FACTOR	% of Respondents who have seen:			FINANCIAL FACTOR	% of Respondents who have seen:		
	+	NO	-		+	NO	-		+	NO	-
	INCREASE	CHANGE	DECREASE		INCREASE	CHANGE	DECREASE		INCREASE	CHANGE	DECREASE
Fed Gov Contracts & Grants	1	80	19	Fed Gov Contracts & Grants	5	70	24	Fed Gov Contracts & Grants	0	85	15
Fed Pass Through Dollars	1	78	20	Fed Pass Through Dollars	9	70	20	Fed Pass Through Dollars	0	80	20
State Gov Contracts & Grants	14	74	12	State Gov Contracts & Grants	16	67	16	State Gov Contracts & Grants	10	70	20
Fee for Service Revenue	12	81	7	Fee for Service Revenue	14	74	12	Fee for Service Revenue	10	75	15
Foundation Grants & Corporate Giving	19	54	27	Foundation Grants & Corporate Giving	24	58	18	Foundation Grants & Corporate Giving	25	60	15
Investment Income	7	74	19	Investment Income	22	72	7	Investment Income	15	70	15
Staff Compensation	43	51	5	Staff Compensation	46	51	3	Staff Compensation	15	80	5
Overhead Expenses	73	22	5	Overhead Expenses	70	28	1	Overhead Expenses	65	25	10

Respondents also answered questions regarding trends and changes in operational factors, such as demand for services, fundraising, and administrative responsibilities, as well as internal activities related to advocacy and policy work. The following is a breakdown, by Quarter, of their responses.

Bolded boxes indicate highest percentage of respondents in each category.

CHANGES IN RESPONDENT OPERATIONAL FACTORS

QUARTER 1				QUARTER 2				QUARTER 4			
OPERATIONAL FACTORS	% of Respondents who have seen:			OPERATIONAL FACTORS	% of Respondents who have seen:			OPERATIONAL FACTORS	% of Respondents who have seen:		
	+	NO	-		+	NO	-		+	NO	-
	INCREASE	CHANGE	DECREASE		INCREASE	CHANGE	DECREASE		INCREASE	CHANGE	DECREASE
Number of Programs/Services Offered	19%	58%	23%	Number of Programs/Services Offered	19%	65%	16%	Number of Programs/Services Offered	10%	75%	15%
Demand for Services	58%	35%	7%	Demand for Services	73%	22%	5%	Demand for Services	50%	45%	5%
Administrative Burden	68%	32%	0%	Administrative Burden	69%	30%	1%	Administrative Burden	65%	35%	0%
Staffing	30%	51%	19%	Staffing	23%	57%	19%	Staffing	20%	60%	20%
Diversity, Equity, and Inclusion Policies	10%	74%	16%	Diversity, Equity, and Inclusion Policies	11%	69%	19%	Diversity, Equity, and Inclusion Policies	10%	65%	25%
Advocacy, Lobbying, and Legal Support	54%	43%	3%	Advocacy, Lobbying, and Legal Support	50%	49%	1%	Advocacy, Lobbying, and Legal Support	60%	40%	0%
Data Collection and Analysis	35%	65%	0%	Data Collection and Analysis	39%	58%	3%	Data Collection and Analysis	55%	45%	0%
Fundraising	54%	34%	12%	Fundraising	45%	43%	11%	Fundraising	50%	35%	15%