

An Interview with Stacy Smith and Sofia Allison

Perspectives from the COVID-19 Pandemic: Leadership and Learning in Nevada

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Each interviewee had the opportunity to review their transcript. All measures have been taken to preserve the style and language of the interviewee. This interview features Stacy Smith, CEO of Nye Communities Coalition and Sofia Allison, Manager of Coalition and Community Building, and was conducted on 4/13/22 by Kelliann Beavers and Elia del Carmen Solano-Patricio. This interview covers topics including reflections on leadership, organizational challenges, and opportunities for collaboration.

Interview with Stacy Smith & Sofia Allison

Date: 4-13-22

SPEAKERS: Kelliann Beavers, Stacy Smith, Sofia Allison, Elia del Carmen Solano-Patricio

Kelliann [00:07]

Okay. So the recordings started. And then, just for confirmation purposes, you both confirmed that you're comfortable with us using your names, and you're also comfortable with us doing the recording. And again, you'll be able to review the transcript before we would use your name.

Sofia [00:22]

Yes, yes.

Stacy [00:23]

Nods "yes."

Kelliann [00:25]

Okay, great. Thanks so much. So, Carmen, I'll let you introduce yourself.

Carmen [00:33]

Thank you. My name is Carmen. I'm an undergraduate researcher, urban studies major, with a minor in public policy and another one in criminal justice. I worked at BMW for five years, and I'm assisting on this project, and I'm excited to learn from you guys.

Kelliann [00:49]

Thank you. And Carmen was present in Jamie's interview, who shared your information with us – suggested that we reach out to you. So I know she's particularly eager to connect with you. So we'll get started. I'll start with the general questions, and then Carmen will chime in with some that are more relevant to your work specifically.

And so the first question is very broad. If you would just describe your position and your role in your organization.

Stacy [01:22]

Okay. Sofia, do you want to go first?

Sofia [01:26]

Yeah, I'll go ahead. I do want to apologize with the recording and everything. My allergies – this wind has just kicked up so much gunk. It's been pretty – and I'm so sorry. I'm getting spams

(phone rings) likely all day. So I do apologize for my voice and just not showing my face as much. I found a better angle – usually with my camera, you can't see it.

Kelliann [01:45]

Oh, no worries. That just makes it easy for us to remember the things that happened.

Sofia [01:49]

Of course.

Kelliann [01:51]

So we appreciate your being here.

Sofia [01:52]

Thank you so much. So I am Manager of the Coalition. (phone rings) I am so sorry. Manager of Coalition and Community Building with my community's coalition. I oversee most of our prevention and wellness grants. Also, with our outreach grants, consisting of us making partnerships with our local prevention organizations, or those that are interested in giving out prevention evidence-based programming to our communities.

A lot of what I deal with is our community partnerships and connecting people with resources. So I do oversee some of our general coalition meetings. This is where we have all of our partners come together, sharing what they see and what's going on in the community. How we have certain community trends that are going on, how can we tackle those together? I'm not sure how in-depth you want me to go into it, because I could keep going on.

Kelliann [02:57]

That's great. I'm sure we will learn so much more about what you do as we move through the questions. And in general, for any of the questions, feel free to share anything you're inspired to share, even if it's beyond the bounds of the question. And Stacy, I'll let you introduce yourself now as well.

Stacy [03:11]

Okay. So I'm the CEO of Nye Community's Coalition. We've got three counties that we primarily cover Nye, as well as Lincoln counties. Although we do have some programs that stretch across other rural counties and even into some of the urban counties. So we've got a couple of projects that encompass – pretty much the whole state is offered the opportunity. That's one of the grants that Sofia is just wrapping up with AmeriCorps.

We have different divisions within our department. We're going through a reorganization process right now with Nye Community's Coalition. But in addition to the coalition and community building piece of the pie that Sofia manages, we also have prevention and wellness, where we take on anything from family planning, diabetes, Medicaid, things of that nature.

Then we've got our Safety and Mental Health Division, and we work with the Sheriff's Department. We're developing a fast, most dynamic-type team working both with the Nye County Sheriff's Department and the Lincoln County Sheriff's Department. It also has a Crisis

Mental Health side to it, and we're just now getting some funding for some street works, and so we're doing a lot of systems development there.

We have Workforce, so you all are probably familiar with people like – it used to be – Nevada Job Connects is probably what you all are familiar with in Las Vegas. And so we received some of that similar funding, and we have both adult programs and youth programs. And our youth programs, we also braid some leadership, some family planning, some relationships, and some sex ed into those. So that it's kind of an all-about transitioning into adulthood programs.

We also have some other programs, such as car seat safety, crib safety. And then we operate a whole community health worker response system for the counties. Where, if somebody's having just about any problem, they can come to us. And then we connect them with services, or we provide some ongoing support for them.

We are an organization that serves in a backbone to other nonprofits, and even, in some cases, government. We don't have a health district in Mount Esmeralda or Lincoln, and so, we sometimes step into that role. Key in developing and putting social workers into our public school system. We were the ones that got the first grant. The social workers were our employees. And then, when the Governor brought that funding in for the other social workers, we handed it over to the school district, helped them develop policies, and handed it off. We've also done that with public transportation just this last year. We wrapped up our [06:17] grant and handed that over to a newly-formed nonprofit. We had public transportation that we'd worked on for years, and we finally got some actual – and it's kind of an on-demand system. It doesn't have bus routes yet, but it's on-demand public transportation, and then we handed that off.

So we do lots of systems development, lots of infrastructure building, that kind of thing. And we're more than willing to build something, give it away if it comes back to us. Sofia's dealing with one of those things right now. We had built a system around school readiness, we gave it away, and it ended back up in our laps again. So we will play that role as we need to in the community. I think that's it.

Kelliann [07:01]

Wow, that's fascinating. I'm so excited to learn from you both and you're doing such important work. And thank you for explaining a bit more about what you do. It does help me get my head around just generally, the role you're playing, which is huge.

So the next question is, how do you see your role, or your organization's role during the pandemic, or over the course of the pandemic, has it ten folded? So you can speak to either the height of the pandemic or as it's evolved into what it is now.

Stacy [07:34]

Okay. So I would say, our biggest role during that time was not letting systems fall apart. And so, in rural and frontier communities, oftentimes our support services and our systems are one layer deep, and sometimes that's one person. And all of the food banks in Esmeralda and Lincoln County are volunteer-based. And we also support the food security system. We receive grants,

and then we purchase food, and we fill in and help with the volunteer recruitment and everything for the food banks.

So when COVID first hit, obviously, one of our first priorities was to take care of and protect the staff and the clients that were coming in. We knew, as the unemployment started getting filed – there's not an unemployment office here, and we're one of the few places where people can come and fill out the paperwork and having access to computers was super-important.

And so we figured out a way. We were also in the middle of doing some remodeling here, and so we moved things around. And we're on an old elementary school campus, and so we made it where we could create a flow of traffic and limit people. Most/all staff went remote, except for the staff that needed to be here to assist people with unemployment applications. And so we had a very limited staff, very limited access. People came through, and we were able to support the community in that way, getting people access to unemployment, and opportunities to have some money coming through.

The next thing that happened within just a few days to weeks is, I had started talking about how our food pantries are all volunteer-based, and they're all, pretty much, in churches. And we do have some – like Health and Human Services has a food pantry. A couple of other places have a food pantry, but it's very limited and it's one-time use for their clients only. So all of our public food pantries are volunteer-run and it's predominantly older people.

And so when this hit, older people felt very vulnerable, and they were. And so we tried to step in and support them. We had had a pretty robust community health worker in the AmeriCorps program that Sofia was operating at that time. And the school shut down, and so our AmeriCorps were predominantly younger, and they were wanting to continue to work. And so we transitioned them with AmeriCorps' permission over to the food pantries. And so they were going in and working at the food pantries, and they were starting to deliver some food to people's homes. Then some funding opportunities started coming out, and we built this community health worker more robustly from that process, and we started bringing on more and more community health workers that would then go and deliver food to people's homes.

And then we realized the other vulnerability was technology, and that a lot of kids were isolated, and a lot of seniors were isolated. And so the school district was pretty much stepping in and taking care of the kids. So we worked with ADSD to get some funding so that our staff could provide very basic technical support. And we could buy like a camera, or a microphone, or headphones, and things like that for the people that were needing to connect with other people.

We also started then, probably about – gosh, this all just runs together, doesn't it? Maybe nine months, 10 months into it was when we really started seeing the mental health issues and we started to fill in the mental health issues. And so we started hearing about things in the community, the ongoing isolation, and some of the things that people were talking about, self-harming, threats of harm, a little bit of aggressiveness, and maybe even some violence. There were several attempted suicides. So there's just – all this stuff was really starting to happen.

And I was talking to the Chief of EMS and the Sheriff, and it was just obvious that there was lots of emotional upset. And so we got permission from one of our funders to kind of shift our focus a little bit, and we were able to bring in that training that was being pushed down from the State, the psychological first aid. Fortunately, at the same time, we had had that impact grant direct from SAMHSA. Where I was able to – I had staff members that were trained, and had been delivering for several years-

Kelliann [13:08]

Where was the grant from? You said an acronym, and I just want to make sure.

Stacy [13:12]

Impact Mental Health Awareness Training Grant. It was a SAMHSA grant. And so we were in our second year when COVID hit with that, and so we already had our people trained on youth mental health first aid crisis intervention training. And so we were already rolling out some of these trainings, and they let us add psychological training to it. And then we got permission from the state with a grant that we had, where we trained people that were like hairdressers, clergymen, anyone that kind of had a client list and weren't working because we were all in a lockdown situation. So we trained them on psychological first aid, and then we paid them to reach out to their client list. That way, that put a little bit of money in their pocket, but it also let – so, if I'm a hairdresser, I got trained on psychological first aid. Then I called my client and said, "Hey, I'm just checking in on you. How are you doing?" And they followed with what they were trained with in psychological first aid. And so we were able to have a little bit of outreach there.

A lot of the staff at the same time were starting to adapt their programs. So our SNAP-Ed programs, we started adapting stuff so that it was drive-through – some of our youth development stuff, our staff would go and buy food, that normally, the kids would be here at this program, and they'd get the opportunity to engage and have a team meeting, while we would our food funding and we'd buy food that was going to go home to the kids. And then the kids would drive through, pick it up, and we'd have a recipe in there. And then, everybody would get on Zoom together, and they would hold their leadership or their support meeting, and then they would also cook a meal while they were on Zoom together. And so we were just doing everything that we could to limit isolation, and we were doing it with staff too. We would have after-hours trivia nights. We would have after-hours game nights. Just anything to break up that monotony, keep ourselves together, and support the community.

So that got us through a good portion of it. I don't know, that's all I can think of so far. Sofia, how about you?

Sofia [15:44]

Yeah. I think just going on the side of working with our partner organizations. I think one of the big roles that I took is, we fund a lot of our partners to do programs within their own communities. And the biggest thing that we saw was – it was kind of two ends of the spectrum. One, we were losing that in-person ability, that in-person touch. But transitioning to remote virtual access for some programs, I think we saw almost a larger reach than what we were able to do. We had people coming to meetings that never would have driven down to Pahrump or Tonopah to come to. And then we have these people in really good partnerships attending these

meetings and reaching out their hands to help out. So, I think one of the good things that we saw was that extended reach with the virtual way of providing programs and providing meetings. But everything else, I think Stacy handled very nicely.

Stacy [16:48]

We were fortunate. We had been doing a pilot project for the state, with Stanford University, on implementing tele-education for our diabetes self-management. And we were in, like, year six or seven of that pilot. And so, I had like four or five staff that had really picked apart how [to engage people in a tele-education setting. What worked, what didn't work. And they also had that technical side of it, you know. They knew how to operate Zoom and things like that.

And so, just having that four – there are about 50-60 staff members here that worked for Nye CC. So just having those three or four people that really knew it, then they were able to spread that knowledge around. And so that was so, so helpful having that core group of people that knew it and that was comfortable with it. And yeah, Sofia's right. There have been takeaways that are still going on and probably, will continue.

We took our yoga and our qigong karate. We took all those classes remote. And there's still a qigong that is – the participants in that prefer – they're predominantly older, and they prefer that it be over Zoom than coming back to the classroom. So there are certain populations that it works better with – once they're comfortable. What COVID did is, it forced the comfort. It forced you to get used to it.

Kelliann [18:18]

Wow. I'm astounded by how many things you all do. It's very impressive.

The next question is, which groups do you believe were the hardest hit by the COVID recession or the pandemic broadly?

Stacy [18:40]

Gosh. Everybody was hit. Certainly, if you lived in a larger home, I think that that was beneficial to people. I've talked to people, that there are six to seven people in a smaller home. And they talked about just falling over each other, and that was rough. The isolation of both the older and the younger, the isolation of kids was just horrendous, but also, the isolation of our older population is and has been very upsetting. If you were low-income and you don't have internet, then you're driving – like we keep an open Wi-Fi here where somebody can park in our parking lot – the library's got an open Wi-Fi – and then a couple of fast food places. So there were places in town that people could go, but that also meant that they had to get there somehow. They're either walking or taking a car over so that they can get access to Wi-Fi. If you did not have regularly working Wi-Fi, I can only imagine how rough this was for everything. For filling out paperwork, for getting access, for getting medical help, for knowing what's going on in town. I mean, anybody that's in any type of vulnerable mental health or medical situation, this just intensified it.

So the concept of having a medical home and having your primary care doctor doesn't always really work in rural communities. We have such turnover. And if you go further if you go Beatty,

anybody goes to Tonopah, some of these other communities, there is no primary care provider. So now they're having to go to Vegas or Reno. And then, getting there, getting access, getting an appointment, all of that. And then getting sick and being that far from medical care, I'm sure was very scary.

I think anyone that's in an at-risk population is LGBTQ population. Anyone that's in an abusive situation, and then you're there. I still worry about – there were kids in situations where how much abuse happened that wasn't reported and dealt with. I think it was probably horrible in some places to be in that situation. There are some kids, that they go to school, and that's where they get food, and that's where they get some love. And so for some people, it was probably pretty rough.

Sofia, do you have any thoughts on any specific populations with partners or anything you came across or saw with AmeriCorps?

Sofia [21:54]

No, no. I think you hit the home round of specific demographics that we saw as most effective. Really, it was those that were just so used to being connected, so used to going into work every day. Their routines were just completely taken off. And we saw that internally with our staff, with our volunteers, with our National Service numbers, the AmeriCorps. But no, I think Stacy hit it pretty good.

Kelliann [22:27]

A quick follow-up question to what you shared when you were talking about those who don't have access to wireless. I'm wondering, are there various – of the rural counties, where you said that people can't have access to wireless, in addition to the fact that some people might not be able to afford wireless in their home? Are there places where you just can't get wireless or get internet set up?

Stacy [22:52]

There are some areas. I mean probably in every town and little town, and community across the three counties have some internet somewhere. But if you go further, like if you're an individual that lives out, or are just one or two families, you may be in a setting that has no internet. If you go into Lincoln County, for example, there is internet in each of the little communities, but the cell phone coverage is extremely spotty. So I have AT&T, I've got limited coverage. But if you have T-Mobile, then you have no coverage. And so, it just depends on what your service is, and usually, the people that are there know. But we have staff members in Lincoln County, and we have staff members in Tonopah. Like the wind that was here two days ago, I lost my staff in Tonopah, left early because they lost internet in the afternoon when the wind started to come through. And that is a typical thing for them to lose internet, for it just to go down. So it's definitely very limited in some of the areas that we serve.

Kelliann [24:20]

Thanks for explaining that a bit more.

Stacy [24:23]

Yep.

Kelliann [24:26]

The next question. Well, let's see. There are a few we could do. You've spoken some to this, but if you want to elaborate on any collaborative efforts that you saw happen across non-governmental organizations.

Stacy [24:49]

I think that even within the governmental – when they would run a pod where – once the vaccines were out. And so, our local EMS partners, with our state health nurse's office, and they're going to run a pod. What they do then is, they reached out to us and said, "Hey, we need maybe 10 more volunteers." And they reached out to the school district and "Hey, we need maybe 10 more volunteers," and to other nonprofits. And so we would send volunteers, as we needed, to respond to some of this. And I feel like our county stepped up really well in managing this, considering the politics that sometimes comes into play in our community. I felt like we had our EMS chief, our sheriff, our county manager, and our public relations person for the county were all on the same page. And it didn't matter about the politics that sometimes would swirl around also. We just continued to move forward with what was recommended out of the governor's office and out of Southern Nevada Health District, and out of the CDC.

And so it was nice as a nonprofit partner to have that clarity of thought and to have that joint kind of purpose. And so it was very easy to when you were asked by them, to support activities, to join into it. The nonprofits and the faith-based partners, the food pantries specifically, there was such support, and even from the business community. We [26:44] Rotary, Albertsons, they knew that we kept the relationship with the food pantries, and that we would know who needed food, and that we went across Nye as well. And so they would give us very generous donations and say, "Use it for food, and use it for anything else that you need with COVID."

And so our partners and our business agencies, they were really good about stepping up and helping protect the community and do what they could to contribute to it. And so, where we were impacted because, at one point, we mostly relied Three Square. And Three Square's a super-amazing agency, and they're the bank that provides us the food. But they got to a point where they were overwhelmed by what was happening in Vegas, and they were probably short-staffed because we were all short-staffed at one time or another. And they were not able to make the regular deliveries out that they had been making out here. And we were able to partner with Cisco Foods, whose – they didn't have restaurants at one point to supply to, so they had extra food. And so, just by figuring it out, and then we were able to purchase, and then we were able to disseminate to the food pantries. And so, just individuals stepping forward and taking care of things. There would be times of gaps, but we would generally find a way to make it work.

Sofia [28:20]

Yeah. And then, I just wanted to add, I know Stacy had hit on student readiness as some of the things that we work on there. We usually perform with our partners' back-to-school fairs. So backpacks, school supply drive for the students. And so, for the past two years, we were able to continue that partnership with those organizations. But instead of the in-person fairs that we

would usually do, we transitioned to more of a drive-through event. So the students and parents stayed in their cars, and they just drove on through. The school district allows us to set up at their alternative education building.

And so we were just out there handing pre-filled backpacks. One of our biggest partners for that event is Desert View Hospital, and their subcontractors, they donated all of the backpacks, and there are just various amount of partners that donated school supplies. So we usually have sports physicals for the students. And so our local chiropractor, Spring Mountain Medical, they, instead of being there on site, they allowed us to create a sort of coupon specific for that event. And then the students got to make appointments for later.

Kelliann [29:31]

Wow.

Sofia [29:32]

Yeah. So they definitely stepped up. It was incredible. We were really able – and then we also do vaccinations, so at our community health fairs, we were able to put information in on how they can check what vaccines they need, so for Web NV or Web IZ – whatever that system is called – and make appointments with them as well. So it was a really great partnership to see them step up and change how it's usually been. Yeah, it was pretty amazing.

Kelliann [30:04]

Definitely.

Stacy [30:08]

What it showed, in general, was our – anywhere we had gaps, and where we had vulnerabilities, and where we had one layer, it showed that, and in some cases, it broke it. And we've still got some of those vulnerabilities as we're starting to come back, and it just made them glaring and obvious. Anywhere we had the ability for volunteers, our adaptations to create an urgent fix, we generally could step up. I mean, our town's really good about – the whole counties are good about just kind of making it work, you know? You just make it work.

But it showed, and it's continuing to show that where we've got one layer, where we've got one person that used to do it, you are seeing our, you know, not full systems. We are seeing it and we are filling it.

Carmen [31:10]

Stacy, glad that you talked about counties and those local organizations having that advantage, even though there's limitation of there being the number one volunteers that you have. I want to ask you, what do you think is the advantage to being a regional coalition, right, for the geographic scope, with a broader scope of beyond any partnerships that you may have with the national nonprofits, for example, that have more specific goals? What is your advantage as a regional coalition?

Stacy [31:39]

The good thing is that we can – and partly for being regional, and partly for being so broad-based

is we hear all the pieces of the pie. And so, when there's an ability to make a connection between this system and this system – so we know what's happening with Workforce, and then we can complement, or marry that, or connect that with the food security system. That works.

And then the regional effect that's beneficial is sometimes, there are benefits to connect this sheriff's department to that sheriff's department, and have them say, "Hey, I know that our sheriff's department is doing this," or "Our school district is doing this. Have you tried that in your community? Or can I get somebody from the school district over here to tell you what you're doing in this way?" So that kind of stuff helps, and it helps that we're kind of neutral. As a nonprofit, you're kind of just the neutral conveyor of this, you know? We're not a political body. We're not looking at getting reelected. We're not the government. We have government grants but we're not the government per se, and we're also considered people that do good things. And so it's just other people want to help us when we're trying to do something good.

Carmen [33:12]

Yeah, I like that. And I like that you mentioned the cooperation between law enforcement agencies. Because I mentioned that I studied criminal justice, and I know that that's something we need a lot more of. So thank you for making that happen. It will lead me into my next question. So, I know that you provide data, and distribute it or collect it from your member organizations. Can you tell us about those data collection efforts and what your goals are with implementing them, or what your methods are, or your distribution strategies?

Stacy [33:50]

So that is one of the areas we were just on another phone call, talking about the opioid settlement dollars. And this is one of the areas that I just brought up that I feel like could benefit from that funding. And this is one of the vulnerability areas that COVID has – it's always been there, and I've always known that it's a little bit vulnerable. But COVID has put it in even more awareness.

So oftentimes there is one person at – let's go with the sheriff's department or somewhere else – that collects the data, and then has to enter the data. And let me give you a very specific example. We have a grant, the Overdose "OD Maps" Grant, and we are supposed to report the overdoses that are happening, and then whether or not naloxone is administered. We've got one sheriff's deputy that's trained on that data entry in addition to his other 15 hats that he's wearing. And his general work in law enforcement, he also has to enter that data in. Fortunately, he is really good at it, and he's really reliable, and he's done that for us.

But there are other systems that, where someone – they're with EMS, or with law enforcement, or with the county, or with a nonprofit, or with a school, is supposed to be entering data somewhere. And we do not have dedicated people doing that, and we struggle – or if we do, it's one person. And then, when that person goes away, that knowledge and that ability to keep that goes away. Nevada does not have systems in place for this collection of data. And so it interferes with our ability to compete for federal funding. There have been many times I'm writing grants, and the feedback – and I find that the state is great. I'm not faulting anybody. I can call the state, and I can call UNR – no offense, I know you all are UNLV – But UNR is who I typically go to, and I can call them because they do the YRBSS, and so I use a lot of that data. And so I can call

them, and they give me everything that they've got. But we do not have a robust amount of data out there when you start really getting to these local levels.

And if we're looking at anything statewide, it's heavily influenced by Las Vegas. I'm fine with that interpretation for Pahrump because we are heavily influenced by Las Vegas. But if I'm writing for Tonopah or Lincoln County, then that's not an appropriate leap for me to make.

Carmen [36:44]

I'm sorry Stacy. I didn't mean to interrupt you. But you mentioned an important data source or the kind that UNR uses, and the reasoning-

Stacy [36:55]

The YRBSS is the Youth Risk Behavior Surveillance System.

Carmen [36:58]

Okay.

Stacy [37:00]

Yeah.

Carmen [37:01]

Thank you.

Stacy [37:02]

And so, as a coalition, I use that data; BRFSS and YRBSS are two of my primary data sources. But the numbers with that are typically so small, also, that they lump Nye, Esmeralda, and Lincoln together, which is great because they lump it based upon the coalition region. But the bad thing is, I'd literally, on Monday, finish a grant for Lincoln County. Finding data on marijuana use in Lincoln County was impossible. I put the data that I got from the YRBSS, but it is heavily skewed by Pahrump's. I mean we've got 50,000 people. Lincoln County has 4,700 people. So I know the data is skewed.

Carmen [37:47]

Right.

Stacy [37:50]

So I don't know how to fix that. This is bigger than me, but I know it's a problem for me. And if it's a problem for me, it's got to be a problem for people that write bigger grants than I do.

Carmen [37:57]

No, we have that problem creating factsheets at our organization as well, in terms of where we get our data. And then we have to make decisions about how to group them, and most of the time, for me anyway, it's regional, like the geospatial analysis.

So I'm going to ask you a question about – I'm speaking on the partnership still with your organizations, and you are a coalition builder. What can be done policy-wise, right? So you work

for the government, and you have a "magic wand." What can be done policy-wise to remove barriers for agencies that limit their potential for securing resources?

Stacy [38:36]

Hmm...so the biggest thing is time and knowledge to write the grants, and to be completely honest, and to implement the grants. So I write probably 60-70 percent of our grants, and then I'm training people, like Sofia and other people, constantly to write grants. You're not going to find a lot of executive directors or CEOs that also write their grants. But in rules, that's, unfortunately, the only way it's going to work. Because I can't pay for a grant writer too.

So what the government could do is allow funding for us to operate our system. So many of the grants that we get from the state are all about the program implementation program implementation, and I get it. But if there's not base funding for a nonprofit just to be a nonprofit, then you're just constantly trying to squeeze another hour out of people and get more work-

Kelliann [39:55]

Is what you're saying that they preferred to fund organizations that already exist? And so, where you might be proposing to create a group, that becomes not a thing you can do.

Stacy [40:09]

It's difficult. And I've tried to grow other nonprofits – well, we've been helpful in growing a couple of other nonprofits, but it is difficult. That part's difficult. But it's also – if you are up and running as a nonprofit if you could get operations, you know. You are a nonprofit that is valuable to your community because you do x, y, z. Here is just this operations money; here is money for a grant rider; here is money for an internal trainer. That would be amazing because somebody just has to absorb those duties when you've got a nonprofit because they'll pay me to implement prevention programming in the school. They'll pay me to implement Snap-Ed in the schools and in the community. But who's going to train all the staff to run the programs, to be a program manager, and to write the grants, and to do the rest?

And so that structure of nonprofits being able to just have that operating cost if there was some way to address that. And I think the De Minimis was helpful. That intention with the federal pushdown of having De Minimis was-

Kelliann [41:28]

What is that?

Stacy [41:30]

De Minimis is where all nonprofit and governmental entities are; if you don't have an established indirect rate, then you can just operate off of De Minimis. However, our state people do not understand how De Minimis was intended, and so they tried to tell me how to define it. And so then I have to hire a lawyer or an accountant to come and discuss and educate our state people on the way that De Minimis was intended by the feds.

And so a large part of what our struggles are right now is we've had a huge turnover in our state systems, and we have people that are working there that have no concept of what it's like to

actually operate a nonprofit business. It is a bigger struggle than I've ever had. I've been doing this for almost 30 years now. And I get why it's a struggle right now because we have never had turnover like this. My agencies had a turnover. So I get it. I'm not talking spec about the state. I empathize with them. I'm in that same situation. But gosh, it's difficult when I have to – and when there's not an opportunity to come to a joint decision, I am just directed from something, and I know it's wrong. And so then you have to go to the lawyer, and you have to go to the accountant and say, "Can you help me with this information?"

Kelliann [43:08]

Is that something – and feel free to say this is a "rabbit hole" question and you don't know how to answer it. But is that something that you feel like the federal government could do better at making clearer so that you didn't have to do this-

Stacy [43:20]

I've asked – yeah. Both my accountant and I have sent a request to the IRS to define the indirect and to define De Minimis. We've made it into the grants management unit at the federal government – not GMAC – it's – oh, gosh. I can't remember what it's called now. But it's like the federal-level GMAC. We submitted those requests for further clarification. But it's like you said, everything moves slow, and now, especially with COVID and everything that hit with that, it's going to be a while. But they've offered some – they issued out the De Minimis ruling probably six years ago, five years ago. And then about two or three years ago, they gave some clarification to it. And then now they're eventually going to give some more clarification to it.

But because we receive about 50 grants, and a good portion of ours go through the state – we deal with the Nevada Department of Transportation, and we deal with DHHS. We deal with DCFS. We deal with the Department of Ed, and so we touch all these state agencies. And so we're kind of in a unique scenario because usually, in nonprofit, all receive their funding from like Division of Health and SAMHSA, so they kind of all go with this angle. Because we're so broad-based, we touch all of these different departments. And so we can see which department understands stuff, and you know, is interpreting things in the way that we've been trained by the federal government that it should be interpreted, and we can see those departments that are not interpreting it in the same way. And so, it can be extremely difficult. And then we're one entity trying to account to these different funding sources that are totally interpreting rules in a different way. So the state, having a consistent system across states, where they agreed – but I mean, that's – the feds don't even all agree. So you know, EPA and DHHS don't agree, so how's that going to happen?

Kelliann [45:41]

Right.

Stacy [45:44]

But yeah, it's rough. And then, in rural communities, you're more likely to have to marry – you're going to have to wear layers of hats. Because we may have a grant for \$12,000, and we may have a grant for \$40,000, and so we have these little grants, and then we layer them together. You kind of braid them.

Kelliann [46:05]

Right. The next question, I realize your organization may have been different at that time. But if you have been doing this kind of work for 30 years, I'm interested to see what you think about effective policies or programs that may have been in place to deal with The Great Recession vs. The COVID Recession. So, looking back to 2008 and the things that were sort of really challenging then? We know that it's very different things. But if you think that things that were better or worse, or federal, or state, or private sector. Anything that comes to mind, if anything, we're interested to know.

Stacy [46:45]

I think part of the difference is, even when that first – when 2008 hit, that was – we did see some of the changes with – some people took early retirements. And so you saw some – a little bit of shuffling at the state, and you saw some shuffling here locally. And you started seeing some of the cuts that came. There was a six percent cut, a 10 percent cut. And so there were these little cuts that came. But it seems like it kind of rolled out slower, and we had a little bit more resilience to deal with it as a community. There were certainly some huge impacts to individuals.

And so I'm thinking specifically around – there were people that had been unemployed and hit by this that had never been economically hit before. And so it was striking here in Nye County. We had people that had worked in the service industry and things that were used to working in the construction industry that was used to working anywhere from \$50,000 to \$120,000 a year, and all of a sudden, they had no income coming in. And they were having to sell off like their toys, and then they had to sell off their house. And then the other people were walking away from houses.

And so it was a very patchwork impact. It was not community-wide. There were also still people in 2008, 9, and 10 that were economically doing fine. So it was some – it was little pockets of industry. And our nation was not as good about coming in – and you know, like the funding that came in to help with the COVID, I think the money that came in for everyone, and then the money that came in for parents was extremely helpful with keeping families stabilized. And that didn't happen in 8, 9, 10, and so you saw individual families devastated. But then you saw other people that were just fine. And so it was weird.

But then with this one, you saw everyone emotionally, psychologically impacted, physically, and medically impacted. But you didn't see – there were not these people that were as economically impacted, and I think part of it was the quick rollout of the unemployment. And then there was – we were funded, other people were funded to help support, and so there was more of a wrapping around of services this time. So I think that that was beneficial, yeah.

Carmen [49:41]

I like that answer, Stacy. Thank you.

Kelliann [49:44]

Sofia, is there anything you'd like to add? Don't feel obligated to, but I just wanted to give you the opportunity if anything came to mind.

Sofia [49:52]

Yeah – no. I appreciate that. No. I was still in school then, so I really don't have a point on this (laughs).

Kelliann [50:00]

Oh, sure. No worries.

This has been so meaningful. I want to be sure; that if there is anyone else that comes to mind, that you think we should talk to, that we note them. We're doing our best to interview leaders in the community who do work like you, and across a broad range of fields because you're so connected to many of them who may have a sense of other people you think we should gain their perspective.

Stacy [50:33]

Okay. And you've got – Jamie gave you all the names of the coalition directors across the state?

Carmen [50:38]

No, she gave us yours. And I can definitely see why now, Jamie would – I can hear her thoughts during that interview. But she did not give us – I found – the contact table is where I found your information in fact. So it's from that list, you had a specific group of people-

Stacy [51:01]

I would say, Wendy Nelson, with – nope, not Nelson – Wendy Madson with Healthy Communities Coalition. They operate real similar to us, and we build off of each other. And she's the one that actually has been the push with the community health workers that has helped put so many across the state. So yeah, Wendy Madsen would definitely be somebody that I would encourage you to talk to.

If you're wanting to speak with somebody at a school district, I'd encourage you to talk to Karen Holley here at Nye County School District. She's had to adjust – she does the grant management and federal funding, and she kind of does the special projects for the school district. And she works with a lot of the other rural districts across the state. Because Pahrump's kind of that size where we're big enough to be a 'big sister' or a 'big brother,' but we're not so big that we've just got a totally different system. It's hard for some of the rural communities to connect with Clark or Washoe because it's so big and so different. And so we're just at that size that I think sometimes we can help out a rural partner. And she's really good at those connections.

Carmen [52:20]

Do you work with unions by any chance? You mentioned a lot of different types of groups, but I haven't heard "union."

Stacy [52:25]

We actually just had the opportunity. We've had a little bit of limited experience. Unions are not as active in rural Nevada as they are in the urbans, with the exception of the Mines. However, we just had an opportunity, we're working with the Iron Workers Union on a project for the solar plant that's being built. And so we've been working – we've identified about 30 potential

employees for them. We've got them trained on all the basics. And I think some of them are supposed to start building solar collection units within the next week or two.

Carmen [53:04]

Is that a group you think we should be interviewing?

Stacy [53:06]

As far as the impact out here, there's not going to be that much interaction – in rural Nevada. If you want a business, I don't know how you could get – I think if you could find somebody in the food industry, that would be interesting. But if you're wanting a contact – like Kinross Gold would give you a concept about – like they're up in Round Mountain, right outside of Tonopah. And so Kinross Gold would be interesting to find out how they dealt – how did they keep business going? How did they support their employees? And like I said, they're one of the people that supported us and helped our community stabilize with food.

Carmen [53:54]

That's great. Thank you so much.

Stacy [53:57]

One last thing, that I didn't bring up, that is still something that's worrying me, and still, something that's out there impacting stuff is, women in the workplace and childcare. I believe that that has been one of the things that are impacting us now and is going to continue to impact us. I'm hopeful that some of the funding that's coming in is going to address this. We're flexible with – we've allowed staff that isn't client-facing to bring their babies and children with them when they were little. And certainly, we were flexible and understanding when we were all at home with having your children around you. But childcare in rural Nevada, childcare anywhere, I'm assuming. But man, it is rough out here. And there are women that have left the workforce, that have told me, "You know what? We're making it okay. We can't fund childcare. I can't afford it. It's going to cost more than I'm going to make, and so I just don't think I'm going to go back into the workforce." And so I'm worried about that.

Kelliann [55:15]

Thank you for speaking to that. I think that's really important, and it does seem like the kind of thing that with the right energy generated behind it. Government or nonprofit effort could really make a difference in that if it was coordinated well. So I appreciate you highlighting that.

Stacy [55:35]

And I think the one thing that I've asked for some help with, and I think that they're supposed to have some options. And I've heard that there's going to be an entity in Las Vegas that's funded, that will help agencies and businesses put childcare – because I've wanted – I'm on an old elementary school campus. We lease it from the school district. And so I've wanted childcare here on our campus for our employees. But trying to maneuver that with the childcare licensing facility place in Las Vegas has been pretty rough. So I need somebody that's got some knowledge that can come in and say, "Okay, this is what you've got to have. This is what you've got to do, and this is the business plan to make it work." So we'll see.

Kelliann [56:24]

Okay, well, I think that's it for me. Carmen, does anything else come to mind for you? I want to be respectful of both Stacy, and Sofia, and your time. And thank you all so much. This is really, really meaningful for me and for the project.

Stacy [56:37]

Good.

Carmen [56:38]

That was it for me. Thank you, Kelliann. And there was – I will just say that there were several things that you said, both of you, that brought up a lot of the research. So we've been doing, for example, you talked about the opioid settlement dollars, which is something that we as an organization have been following since before that was settled, right? And so, glad to be able to talk to folks like you, who can watch this stuff be implemented live. So thank you again.

Stacy [57:07]

Yep, you're very welcome.

Kelliann [57:13]

Well, I hope you both have a great evening, and it's really nice to meet you. Perhaps we will meet in real person someday. And in the meantime, good luck with your work, and thank you so much for everything that you do.

Carmen [57:24]

Yeah. If there's anything that we can do for you, please let us know.

Kelliann [57:27]

Yes, please do.

Carmen [57:29]

Thank you so much.

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