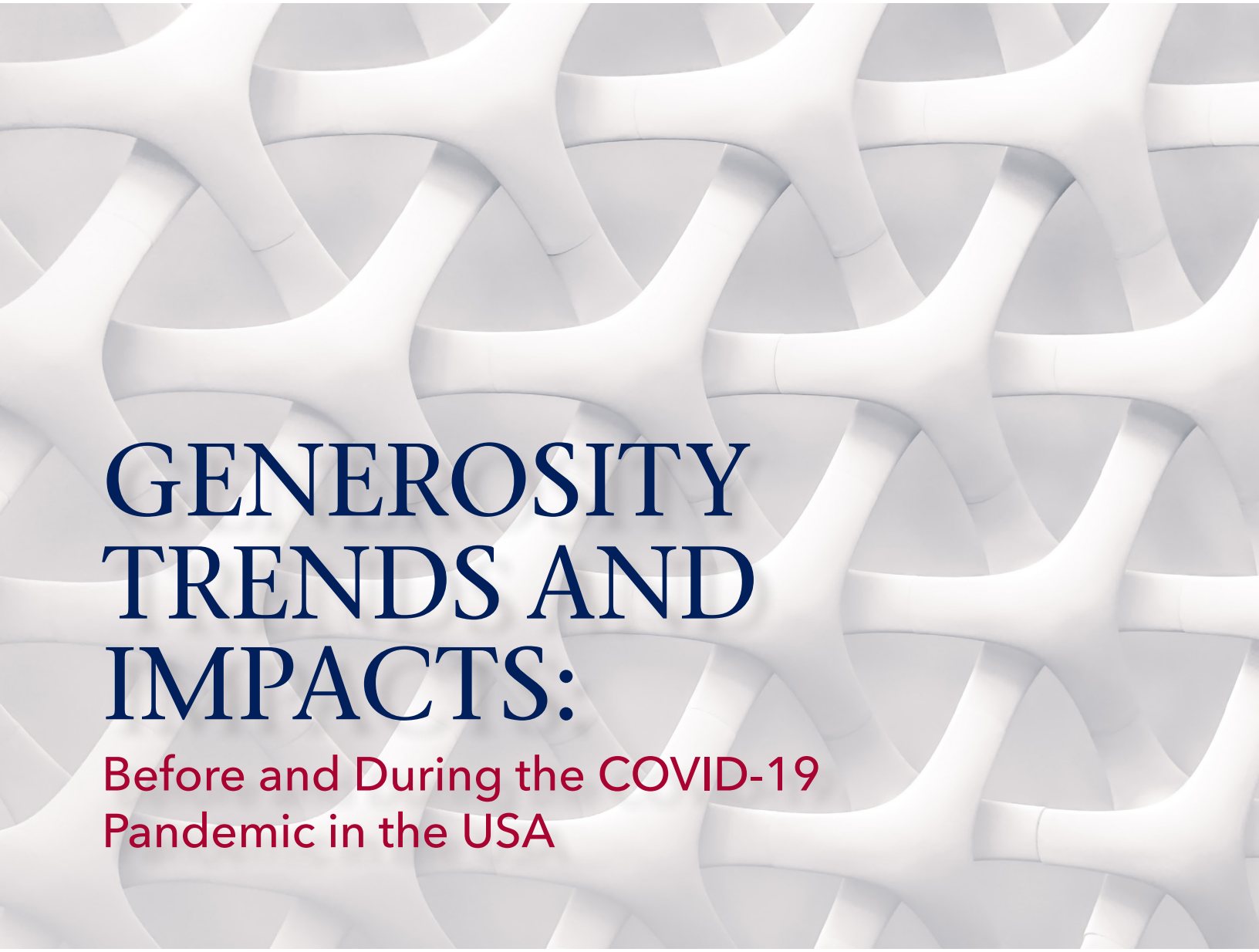

GENEROSITY TRENDS AND IMPACTS:

Before and During the COVID-19 Pandemic in the USA

National findings and initial impacts of the Covid-19 pandemic on volunteering, donation, and other prosocial behavior trends from 2020 through 2021

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Executive summary

Major findings on formal volunteer behavior

- **About a quarter of those who volunteered for an organization before the pandemic stopped volunteering during the pandemic.**
- **Of those that volunteered for an organization before or during the pandemic, their reported frequency declined during the pandemic.**
- **Most areas of volunteering saw a decrease in volunteer behavior with the exception of religious organizations, environmental and animal care organizations, health and disaster relief organizations, and refugee organizations.**
- **The most frequently cited reasons for never volunteering are the lack of resources, never being asked, not wanting to volunteer, facing restricting family obligations, and health reasons.**
- **Those that stopped their formal volunteer behavior during the pandemic attributed it to the impact of the pandemic**
- **During the pandemic, virtual volunteering increased and in-person volunteering decreased**
- **The pandemic did not significantly impact people's reasons for engaging in formal volunteer behavior**
- **Who Gives:** Volunteers had a diverse range of socio-economic identities. Taken as a whole, respondents who were middle-aged, more educated, and earned more were more likely to volunteer in both periods. **Age**: People ages 50-64 were least likely to stop their formal volunteering behavior during the pandemic. All age cohorts, with the exception of 65+, were equally likely to volunteer in both periods. **Gender**: For those that volunteered in both periods, men and women were equally generous with their time. For those that changed their volunteer behavior, women were more likely to stop. **Education**: More educated adults were more likely to volunteer in both periods. People with lower levels of education were more likely to start formal volunteering behavior during the pandemic but they also had the highest percentage of people who never volunteered.

Major findings on formal donation behavior

- **Formal donation behavior decreased slightly during the pandemic compared to before the pandemic**
- **Total number of donors decreased during the pandemic while average donation amount increased significantly by over 200%**
- **Giving to religious organizations dominated where donors chose to give and only four areas (Disaster Relief Organizations, Civic, Political, Professional Organizations, Social Justice Organizations, and Refugee/Immigrant Organizations) saw an increase in donation behavior.**
- **Non-donors reported financial constraints as the primary reason for not donating**
- **Reasons that people donated for either period remained constant with altruism being the leading reason.**
- **Who Gives:** The socio-economic profile of donor cohorts indicates that respondents who were in cohorts that were older, more educated, and with higher incomes were more likely to donate in both periods and that their donor behavior did not change significantly due to the pandemic. **Age**: Older adults, aged 65 and above, donated more in both periods, with this value decreasing as age cohorts decrease. The youngest cohort (18-29) had the largest percentage among those who did not engage in any donating behavior. **Gender**: Men and women are equally generous. Women were more likely to stop donating during the pandemic (8.70%), while men were more likely to start donating (5.1%). **Education**: The highest education cohorts, respondents with college degrees, were more likely to report donating both before and during the pandemic. Higher numbers in the cohort of high school graduates started donating during the pandemic (7.3%), while the cohort with some college experience was the most likely to stop giving during the pandemic (7.7%).

Major findings regarding informal volunteering and/or donations

- **With the exception of giving above average tips, areas of informal volunteering and/or donation behavior remained stable during the pandemic.**
- **Not participating in informally volunteering and/or donating was explained by many reasons but no one reason was salient.**
- **Who is involved in informal giving and/or volunteering:** The socio-economic makeup of those engaged in informal giving and/or volunteering indicates that they were likely to be older, more educated, and have higher income levels. This was the case overall, and also among those who started to engage in these behaviors during the pandemic. **Age**: Older people (50 and older) were both less likely to stop their informal generous behavior and more likely to start during the pandemic. **Gender**: Women reported higher rates of informal volunteering and/or donation behavior but changes during the pandemic were marginal. **Education**: Respondents with higher education levels were more likely to be engaged in informal volunteering and/or donations in general, and also more likely to increase their involvement during the pandemic. **Income**: Respondents with higher income were more likely to be engaged in informal volunteering and/or donations in general, and also to increase their involvement during the pandemic.

Major findings regarding other prosocial behavior

- **While showing gratitude to first line workers and buying and buycotting intensified during the pandemic, donating blood decreased.**
- **Major shifts occurred in reasons for not engaging in other prosocial behavior from before to during the pandemic.**
- **Who is involved in other prosocial behavior:** The socio-economic makeup of those engaged in other prosocial behavior indicates that they were likely to be older, more educated, and have higher income levels. **Age**: Older people (50 and older) were both less likely to stop their informal prosocial behavior and more likely to start during the pandemic. They were also more likely to engage in other prosocial behavior. **Gender**: There were no noticeable differences between men and women. **Education**: Respondents with higher education levels were more likely to engage in other prosocial behavior. All age groups equally stopped these activities while a higher percentage of younger people started, though in all cases, the percentages of those who changed behavior were very small. **Income**: Respondents with higher income were more likely to be engaged in other prosocial behavior in general, and also increase their involvement during the pandemic.

Introduction

It is a universally recognized truth that nonprofits in the United States are vital to civic infrastructure. Nonprofit organizations are essential in our ability to meet people's needs, sustain arts and culture, preserve the environment, strive for social justice, and strengthen communities. It is very 'American' for people to organize and collaborate within their communities rather than rely on the government or private businesses. This was famously noted by Alexis de Tocqueville (1839), who pointed to the persistence of civic participation as a major underpinning of democracy with "Americans of all ages, all stations of life and all types of disposition … forever forming associations." Such associations, including nonprofit organizations, continue to thrive. This is evident by the staggering size of the nonprofit sector, which accounts for nearly 6% of the GDP. Giving USA 2021 reported that "individuals, bequests, foundations, and corporations gave an estimated $471.44 billion to U.S. charities in 2020". Out of this amount, individual giving is estimated at $309.66 billion.

In addition to monetary donations, one can consider the donation of physical objects, time, labor, and skills as pertinent entities in supporting the nonprofit sector. Due to the nature of donating these things, such features are more likely to go undocumented. For example, many nonprofits rely on volunteers to keep their services afloat, but these organizations are not required to report metrics on the participating volunteers. One attempt to fill this gap, the Current Population Survey, measures civic engagement and volunteering as reported by individuals. The 2019 edition of this questionnaire concludes, "an estimated 30 percent of Americans or 77.9 million people reported they volunteered for an organization or association."

Recognizing the breadth and depth of generous behavior, it is important to provide a general categorization to aid in the grouping and analysis of such behavior. The previous paragraphs point to two of the most widely studied forms of generous behavior, formal volunteering and formal donations. These are defined as volunteering and donations that are connected to established nonprofits such as volunteering at a local food bank or donating to a registered charity. In addition to this form of civic activity, volunteering and donating can also occur in the informal sphere such as donating items to buy-nothing groups, supporting each other with monetary donations, providing transportation to an ailing friend, and shoveling driveways. These behaviors are less likely to be measured and recorded. The last considered area of generosity consists of behavior performed voluntarily by Americans to enhance our civic society that do fall neither under volunteering nor donations. This may include formal settings such as donating blood or informal settings such as lending a neighbor tools. With these categorizations, we have four major areas of interest that comprise generous behavior: (1) formal volunteering, (2) formal donations, (3) informal volunteering and/or donations, and (4) other prosocial behavior (See Figure A) .

In considering the long run of Americans' civic participation, questions arise about trends in generous behavior with respect to these four categories. An original motivator for funding this research was to examine the purported decline in formal involvement measured by "the number of Americans who give and volunteer." If such a decline is a reality, the basic fabric of our society may be at risk. Answering this question comes with a variety of challenges including the acquisition of accurate measures of American behavior and the assurance of their comparability to previous metrics.

The Generosity Commission of Giving USA provided funding to address these challenges and create a robust picture of generous behavior. Our research was intended to take the pulse of American engagement and assess what sustains (or weakens) it. An extensive body of existing research links well-being and civic life, including mortality risks, health outcomes, and life satisfaction (Konrath, 2014). Understanding the trends in volunteering and donating is vital for understanding the well-being of individuals and society. In addition to this necessity, previous studies are limited by their focus on one instance in time and the consideration of a subset of generosity behavior. Some existing research focuses on people's donations at a given moment, while others follow people's volunteering. Some studies focus on political engagement, while others focus on helping strangers. It is important to understand American generosity as a dynamic phenomenon inclusive of its breadth and depth in a modern context (Cnaan & Park, 2015).

With the start of the COVID-19 pandemic, our original research took a new direction. We witnessed significant life changes. Overnight, schools closed, businesses shuttered, and grocery store shelves emptied. Companies grappled with mass furloughs, supply chain issues, and a shift to virtual operations. Large-scale events, from professional sports to religious gatherings, were forbidden – meetings with family and friends were sanctioned and unadvised. Life transformed in a manner hitherto undreamt of. At the time of writing this report (July 2022), we continue to experience ripple effects of the pandemic, such as product shortages, increased inflation, and labor instability.

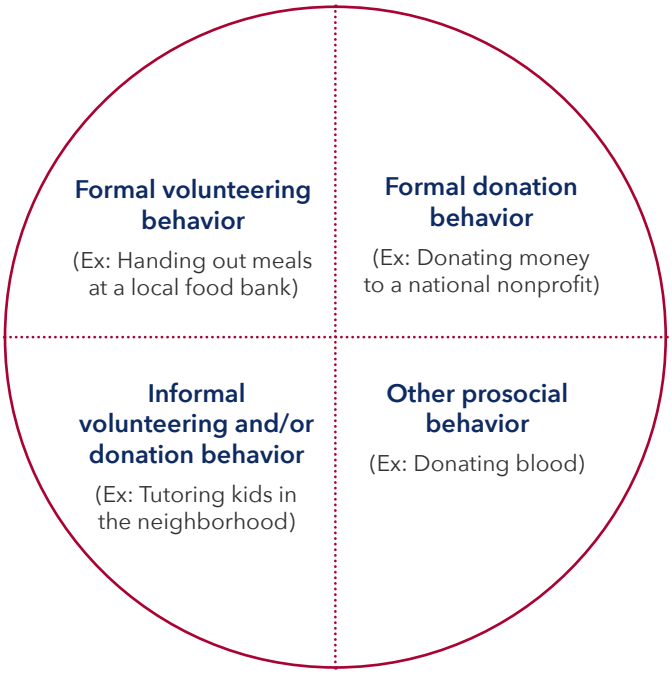
It is reasonable to assume that individual generosity was affected by the pandemic. For this study, we revised our original goals in collaboration with our funders in the Generosity Commission. To understand trends in the behaviors we were interested in, we focused on individuals' generosity before and during the pandemic. This pivot in our survey meant that we asked respondents to report their behaviors a year before March 2020 and their behaviors after March 2020. We use March 2020 as the watershed moment when the World Health Organization declared COVID-19 a pandemic (Cucinotta, & Vanelli, 2020).

It is too early to assess the long-term effects of the pandemic on generosity. However, we can ascertain how the pandemic impacted people's generosity during the height of the outbreak. Ex ante, it is impossible to know the overriding direction of generous behavior. The pandemic may have caused a decline in this behavior as people stopped volunteering due to health risks or donated less due to monetary constraints. It is also possible that COVID-19 incited an increase in generous behavior due to more visible demands and the presence of more leisure time. To the best of our knowledge, this study is the first nationally representative study aiming to understand the pandemic's impact on individual generosity.

We define generosity as the ways in which individuals help others independent of or through organizations for various purposes, ranging from acts that improve quality of life, protect the environment, enhance tolerance and coexistence, strive for equity, and promote sports, culture, and education. More specifically, we are interested in the domains of formal volunteering, formal donations, informal volunteering and/or donations, and other prosocial behavior. Formal volunteering and donations are ways in which individuals choose to help other people via organizations. However, individual generosity is not limited to donating money and volunteering with organizations. There are many ways in which people contribute to society such as informal activities or other prosocial behavior. Informal volunteering and/or donations include activities such as tutoring a local kid twice a week or giving money to a neighbor. Other prosocial behavior outside of informal volunteering and/or donations include donating breast milk and lending books to others. Below we list the driving questions behind this study and provide a visualization, Figure A, for the considered categories of generosity.

FIGURE A.1

GENEROUS BEHAVIOR



*NOTE: The division of quadrants does not denote the frequency or importance of each category. Lines are drawn for illustrative purposes.

Impact on formal volunteering behavior: Formal volunteer behavior responds to the needs provided by neither government nor market institutions. Many nonprofits, including social clubs, human service organizations, food banks, health clinics, museums, and sports clubs, rely on the donation of time and skills from individuals. The COVID-19 pandemic shut down many pathways that enabled this volunteering. This diminished in-person volunteering opportunities dramatically, and many organizations responded by shifting to virtual volunteering, hybrid volunteering, or no volunteering at all (Grotz et al., 2020; Kulik, 2022; Lechance, 2020; Pickell et al., 2020; Sun et al., 2020; Trautwein et al., 2020; Walshe et al., 2021). In some cases, new modes of online/virtual volunteering emerged that included, but were not limited to, tutoring, counseling, moral support, and online shopping. In contrast, there were those considered to be 'essential volunteers' who were called to continue volunteering in-person. These included emergency volunteers, such as EMS and firefighters, and volunteers involved in food preparation and distribution. The question therefore arises: How have formal volunteering behaviors changed before and during the pandemic?

Impact on formal donation behavior: Large swaths of individuals lost their jobs and suffered income losses during the pandemic, yet others saw their work altered only minimally while they incurred fewer expenses. For the former, the loss of income or jobs meant economic insecurity. Government checks helped alleviate some insecurity but not all. The demand for the goods and services provided by nonprofits increased. However, those who continued working did not suffer a loss of income. They often worked from home and thus did not spend money on transportation, restaurants, bars, vacations, and found themselves with a surplus. These households, similar to trends seen with other historic disasters and emergencies, rose to the challenge of helping and supporting others (Bergdoll, et al., 2019). While many continued to support individuals and nonprofits, the extent of the aid is unclear. The question therefore arises: How have formal donation behaviors changed before and during the pandemic?

Impact on informal volunteering and/or donation behavior: Given that people were forced to stay home or close to home during the pandemic, it is reasonable to assume that much help happened in the informal sphere (independent of organizations). The pandemic also brought about new needs that people responded to in innovative ways. They did so spontaneously and informally, such as tutoring online, shopping for the elderly, making and distributing masks, and providing monetary donations to those in the service industry. Many of these informal actions required careful planning and execution due to health and safety measures. Therefore, the question arises: How have informal volunteering and/or donation behaviors changed before and during the pandemic?

Impact on other prosocial behavior: There are numerous ways that people help each other outside of formal/informal volunteering and/or donation behavior. Such actions contribute to the community in positive ways but are also the most likely to go undocumented. This includes actions such as boycotting products based on personal values, showing gratitude to frontline workers, and engaging in civic advocacy. It is undeniable that the pandemic impacted these features of life through multiple channels. The highlighting of certain careers (such as essential workers) may have induced a higher frequency of generous behavior between community members while the restrictions on gatherings may have limited the opportunities for people to practice this behavior. With the intention of creating the fullest picture of Americans' generous behavior, it is important to ask: How have generous behaviors that cannot be categorized as volunteering or donations changed before and during the pandemic?

The research grant from the Generosity Commission of Giving USA has enabled us to undertake a national survey, which provides the first large nationally representative data on volunteering, donating, and other prosocial behavior before and during the pandemic. In the following pages of this report, we offer an initial set of findings from the survey.

Respondent characteristics

A total of 2026 survey responses were obtained with the help of SSRS, a full-service survey and market research firm. The process included survey development, pretest interviews, survey administration, data cleaning, and response weighting. Further information on the methodology regarding data collection can be found in Appendix A.

Table B.1 displays the demographics of the sample. It should be noted that these values are weighted to ensure they represent population targets along the dimensions of sex, age, education, race, region, population density, religion affiliation, internet use frequency, party ID and civic engagement. Total population sources include the Current Population Survey, the 2020 Census Planning Database, and the Pew Research Center's National Public Opinion Reference Survey. Further details and visuals can be found in Appendix A.

The variables displayed in Table B.1 have reasonable counts for each considered cohort. About a quarter of the sample falls into each age category. White Non-Hispanics make up about 6 out of 10 of the respondents while Hispanics and Black Non-Hispanics are the second two most populous cohorts (15.7% and 12.4%, respectively). Gender is split evenly between men and women, with a small cohort (0.5%) identifying with another gender. 61.3% of respondents have at least some college education while 8.8% have less than a high school degree. The South is the most populous region followed by the West and North Central. About 4 in 10 respondents earn between $15,000 and $50,000 and about 3 in 10 respondents earn $50,000 to $100,000. The majority of respondents are full-time workers with the next largest groups being retirees and part-time workers. These demographics elucidate the representation inherent in the survey data.

TABLE A.1
SAMPLE DEMOGRAPHICS

Demographics	Count*	Percentage
Age		
18-29	416	20.90%
30-49	628	31.60%
50-64	512	25.70%
65+	433	21.80%
Race/Ethnicity		
White Non-Hispanic	1262	63.40%
Black Non-Hispanic	247	12.40%
Hispanic	313	15.70%
Asian	120	6.00%
Other	49	2.50%
Gender		
Men	962	48.40%
Women	1015	51.10%
Another Gender	11	0.50%
Education		
Less than HS	178	8.80%
Hs Graduate	606	29.90%
Some College	551	27.20%
College Graduate	690	34.10%
Region		
North Central	423	20.90%
North East	354	17.50%
South	763	37.70%
West	483	23.90%
Income		
Less than $15,000	220	11.40%
$15,000 but less than $50,000	821	42.50%
$50,000 but less than $100,000	605	31.30%
$100,000 or over	287	14.90%

*Note: Totals may not reach full sample size due to some participants choosing not to answer

A note about language

Below are a few terms of interest. The structure of relevant survey questions and report definitions draw inspiration from the Census Bureau's Current Population Survey (CPS) and its Volunteering and Civic Life Supplement.

COVID-19 Pandemic: A global phenomenon declared as a pandemic in March 2020 by the World Health Organization with respect to the highly transmissible and infectious coronavirus disease (COVID-19) caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2)

COVID-19 Pandemic, before: the time between March 2019 and March 2020

COVID-19 Pandemic, during: the time after March 2020.

Donation behavior: an act of giving money without the expectation of goods or services in return. Respondents were asked: "...have you donated … without the expectation of goods or services in return?"

Donation behavior, formal: an individual's gift of $25 or more per year to an organization without the expectation of goods or services in return.

Donation behavior, informal: an individual's gift of an unspecified amount independent of an organization without the expectation of goods or services in return (i.e., a crowd-fund).

Other prosocial behavior: an act of support for others not falling under either formal or informal volunteering and/or donation behavior. In preparation for the study, we found other generosity acts that were not otherwise covered. We called them "other prosocial behavior". This was not explicitly defined as such for survey takers, rather they were asked to indicate which actions they performed from a list (i.e., donating blood and engaging in political advocacy).

Race/ethnicity: Race/ethnicity is a pre-recorded variable included in the SSRS Opinion Panel. Respondents self-identified with listed options. The authors recognize the lack of universally accepted terminology around race and ethnicity and note the potential for bias.

Sex/gender: We acknowledge that sex and gender are not binary. Participant gender is a pre-recorded variable included in the SSRS Opinion Panel. Participants self-identified with this response. Most responses fall into the categories of men/women and relevant conclusions within the report focus on these categories. The authors note potential bias in these responses.

Volunteer behavior: an act for which people are not paid except perhaps for expenses. Respondents were asked about "... unpaid activities (except maybe for expenses)" that they performed "virtually or in-person to benefit others."

Volunteer behavior, formal: an individual's unpaid (except perhaps for expenses) activities performed through an organization.

Volunteer behavior, informal: an individual's unpaid (except perhaps for expenses) activities *independent of an organization* (i.e., distributing food to elderly neighbors or sewing masks for coworkers and other acquaintances).

Case study of a small, charitable program during the pandemic

Tom Frey and Saint Miriam's Human First Program

To illustrate how the pandemic tangibly affected people's volunteering, donating, and helping behaviors, we feature the story of Tom Frey and Saint Miriam's Human First Program. Tom, a successful plumbing contractor, is an individual who cares for those in need. He has always had a passion to help those experiencing homelessness and substance use disorders. In 2015, Tom joined Saint Miriam Parish and Friary, a Catholic church in Flourtown, PA. Tom added that although he's not pious, he joined St. Miriam because of their commitment to homeless outreach work through their "Blessing Bag Program."

The Blessing Bag Program involved packaging and distributing a day's worth of nutrition in non-perishable food to those experiencing homelessness. The ministry started with 30-100 "Blessing Bags" per week distributed by church members. Moreover, according to Tom, the bags continue to be given to anyone free of discrimination and conditions. The latter was significant to Tom, as he dislikes providing items with conditions attached, such that an individual agrees to say a prayer or even convert to a faith tradition.

The Blessing Bag Program has since pivoted to the Human First at Saint Miriam Program in recent years, extending the program to the greater Philadelphia area to include its suburbs. The bags were renamed "Nutrition Bags" in favor of "Blessing Bags." Human First, according to their website, also opens up the church's main campus "to allow persons living in their cars to have a safe place, along with support… nutritional and hygiene support to those living on the streets… care for pets of those living on the streets and also feminine hygiene products and care for those who are transgender, as well." Additionally, Human First partners with the city of Philadelphia and local organizations to provide meals Monday through Friday at three different locations to those experiencing food and housing insecurity. In all of these operations, Tom and his team make every effort to place the dignity of the human person first and provide what he considers "compassionate, comprehensive care with a harm reduction approach". However, these efforts have not been without its challenges, which has been especially true since the onset of the COVID-19 pandemic.

Within three weeks of the COVID-19 pandemic, distribution skyrocketed from 30-100 Nutrition Bags per month to 1,600 Nutrition Bags per week. Tom noted that in the early stages of the pandemic, individuals had a strong interest in helping the program. Coupled with exposure through the Philadelphia Inquirer and FOX29, Human First received so many food donations that they struggled to store them. It wasn't unusual for Tom and his team to keep items in their homes because St. Miriam ran out of space. Tom added that monetary donations were also abundant. Unfortunately, the wave subsided, and now Tom and his team struggle to secure regular food and monetary donations to match the demand, which has only continued to grow. Tom estimates that between March 2020 and September 2021, he's spent 2,910 hours volunteering for the Human First program, half of which was spent procuring food. Currently, Tom is working to secure partnerships with organizations like Philabundance, Small Things, and Charity Crossing to ensure a steady stream of food donations. While Tom appreciates the opportunity to serve and help, he also recognizes the logistical challenges for someone who works a full-time job and has a family. Yet, Tom continues on because of the gratitude and thanks of those he serves. Furthermore, he realizes that many rely on him, and there is still more work to be done as needs have continued to remain high while donations have dwindled.

Tom's story mirrors the experience of many small, semi-formal programs. Soon after the onset of the pandemic, needs grew dramatically yet donations and in-kind support were able to match the needs. Over time, however, the needs remained high while donations waned. It's people like Tom who are the engines behind the very small, semi-formal programs that sustain our society. As an individual, Tom falls into each of our categories. He volunteered, donated money, organized a charity program, cared for the needy, and used his own truck to deliver food to individuals wherever they were. In the next four sections, we share our findings from our attempts to capture generous behaviors that are similar to that of Tom Frey's outreach efforts.

Charles Fox

Philadelphia Inquirer
Staff Photographer

Charles Fox

Philadelphia Inquirer
Staff Photographer

Section 1: Findings on formal volunteering behavior

The first section of the survey focused on respondents' volunteer behavior that was facilitated through organizations. The intention was to uncover how COVID-19 influenced the presence, frequency, and type of volunteering activities. Additionally, we were able to connect these responses to participant demographics to understand trends for different cohorts. To reduce bias and increase reliability, wording from the Current Population Survey by the Census Bureau was closely followed and prompts with examples were provided when necessary (Cnaan et al., 2011). The last segment of the formal volunteer section focused on reasons people do and do not volunteer to elucidate the driving forces behind individual behavior. These conclusions, when considered all together, paint a telling picture of how the pandemic influenced formal volunteer behavior.

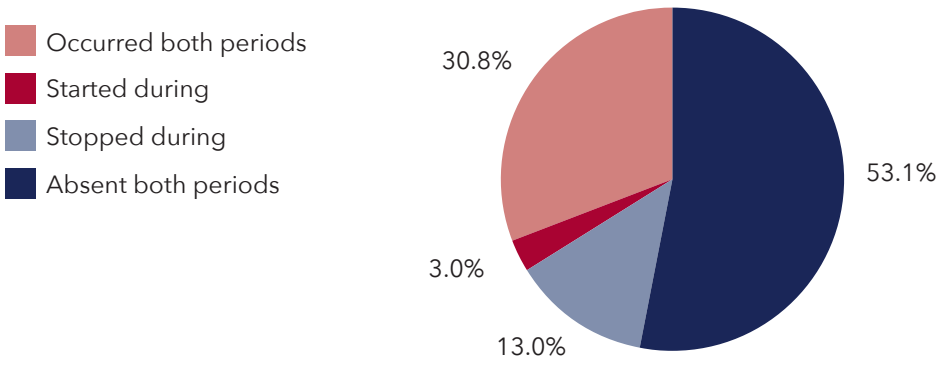
A larger share of individuals stopped their formal volunteer behavior during the pandemic than those that started

As seen in Table 1.1, more than half of the sample did not volunteer in either period whilst 13% of the population stopped volunteering during the pandemic. Put differently, *more than a quarter of people involved in volunteering before the pandemic ceased to volunteer during the pandemic*. A small group of those who did not initially volunteer started to do so during the pandemic (3%). We assume that these individuals were those who felt secure and wished to find meaningful activities while other areas of life were restricted. Further research is required to confirm this explanation, and future studies will need to assess if this decline in volunteering was temporary or if it reflects a new post-pandemic reality.

TABLE 1.1
FORMAL VOLUNTEER BEHAVIOR BEFORE AND DURING THE PANDEMIC

	Volunteer behavior occurred in both periods	Volunteer behavior started during pandemic	Volunteer behavior stopped during pandemic	Volunteer behavior absent in both periods
Percentage	30.85%	2.96%	13.03%	53.16%

FIGURE 1.1
FORMAL VOLUNTEER BEHAVIOR BEFORE AND DURING THE PANDEMIC



People ages 50-64 were the least likely to stop their formal volunteering during the pandemic

Looking at Table 1.2, volunteering within each age cohort decreased during the pandemic. However, among those between the ages of 50-64, the decline was the smallest (7.7% as compared to an average of 14.4% for all other age groups). It is possible that people at these ages had fewer young children at home or were less physically limited (relative to say, those older than 65 years of age). It is also noteworthy that the overall percentage of those who did not volunteer before and during the pandemic is largest for those 50 and older.

TABLE 1.2

AGE BY FORMAL VOLUNTEER BEHAVIOR BEFORE AND DURING THE PANDEMIC

Demographics	Count*	Volunteer behavior occurred in both periods	Volunteer behavior started during pandemic	Volunteer behavior stopped during pandemic	Volunteer behavior absent in both periods
Age					
18-29	416	32.40%	3.60%	15.20%	48.80%
30-49	628	32.50%	4.00%	16.10%	47.40%
50-64	512	32.40%	1.60%	7.70%	58.30%
65+	433	24.70%	2.50%	12.10%	60.70%

*Note: Totals may not reach full sample size due to some participants choosing not to answer

More women than men stopped their formal volunteering during the pandemic

In general, women reported a higher percentage of ever volunteering (48.8%) compared to men (44.6%). Women were also more likely than men to start volunteering during the pandemic (3.1% versus 2.6%, respectively). Despite these conclusions, women were also more likely to stop their volunteer behavior (15.7%) during the pandemic compared to men (10.4%). The categorization of "another gender" is too small to generalize but it indicates a similar and stronger trend than that which was common among women; a high rate of stopping volunteering along with a high rate of starting volunteering.

TABLE 1.3

GENDER BY FORMAL VOLUNTEER BEHAVIOR BEFORE AND DURING THE PANDEMIC

Demographics	Count*	Volunteer behavior occurred in both periods	Volunteer behavior started during pandemic	Volunteer behavior stopped during pandemic	Volunteer behavior absent in both periods
Gender					
Men	962	31.60%	2.60%	10.40%	55.40%
Women	1,015	30.00%	3.10%	15.70%	51.30%
Another Gender	11	13.30%	13.60%	26.80%	46.40%

*Note: Totals may not reach full sample size due to some participants choosing not to answer

People with lower levels of education were more likely to start formal volunteering during the pandemic

Our findings indicate that individuals with higher levels of education were more likely to volunteer during either period (i.e., while 47.4% of those with less than high school education never volunteered, only 22.2% of those with college education never volunteered). In each education group, about 7% of its members stopped volunteering during the pandemic. Furthermore, during the pandemic, a higher percentage of those with the lowest level of education started to volunteer (7.3%), relative to those with higher educational levels (ranging from 2.5% to 5.7%).

TABLE 1.4

EDUCATION BY FORMAL VOLUNTEER BEHAVIOR BEFORE AND DURING THE PANDEMIC

Demographics	Count*	Volunteer behavior occurred in both periods	Volunteer behavior started during pandemic	Volunteer behavior stopped during pandemic	Volunteer behavior absent in both periods
Education					
Less than HS	178	38.10%	7.30%	7.30%	47.40%
HS Graduate	606	52.60%	5.70%	7.00%	34.60%
Some College	551	58.50%	2.50%	7.70%	31.30%
College Graduate	690	66.90%	3.80%	7.10%	22.20%

*Note: Totals may not reach full sample size due to some participants choosing not to answer

As income increases, people reported less stopping in formal volunteer behavior but also less starting

Similar to education, individuals with higher income levels were more likely to volunteer for organizations (i.e., among those with incomes of $100,000 or more, 86.0% volunteered during at least one period compared with 53.7% of those with incomes of less than $15,000). At the same time, as income increased, fewer people started volunteering for an organization during the pandemic compared to the lowest income cohort. That is, a higher percentage of individuals with low-incomes started volunteering for organizations during the pandemic. In considering possible explanations, available resources during the pandemic may have impacted the readiness to volunteer for those with lower incomes. This topic should be an area of focus for future studies.

TABLE 1.5

INCOME BY FORMAL VOLUNTEER BEHAVIOR BEFORE AND DURING THE PANDEMIC

Demographics	Count*	Volunteer behavior occurred in both periods	Volunteer behavior started during pandemic	Volunteer behavior stopped during pandemic	Volunteer behavior absent in both periods
Income					
Less than $15,000	220	33.00%	8.70%	11.90%	46.30%
$15,000 but less than $50,000	821	50.50%	3.90%	6.70%	38.90%
$50,000 but less than $100,000	605	65.40%	2.70%	7.60%	24.30%
$100,000 or over	287	74.70%	5.30%	5.90%	14.00%

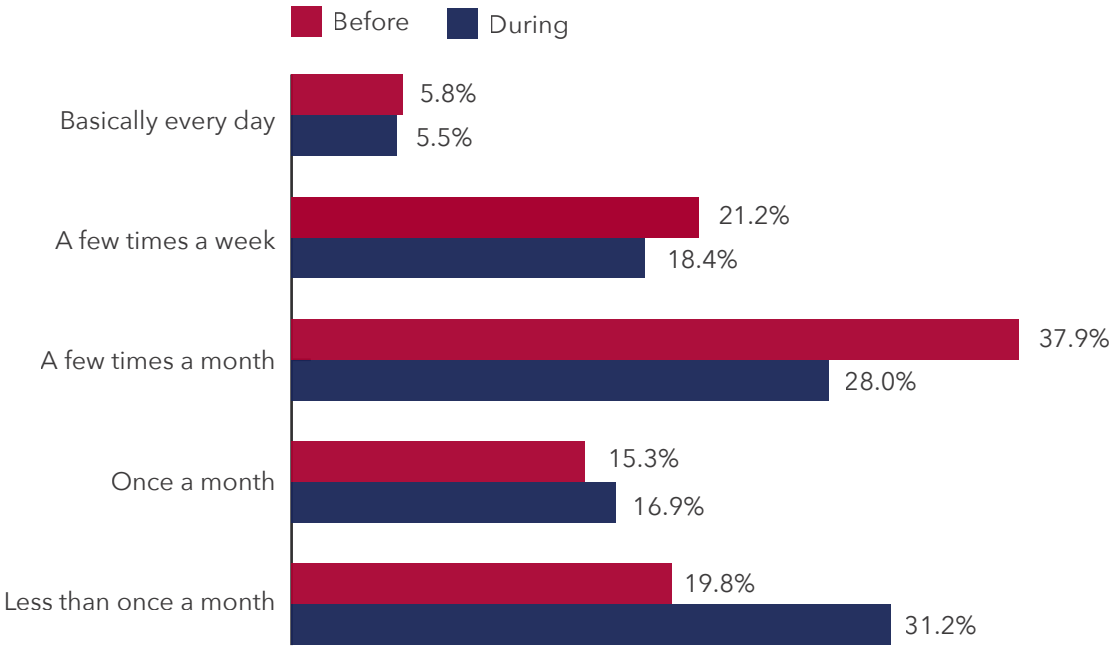
*Note: Totals may not reach full sample size due to some participants choosing not to answer

Of those that volunteered for an organization, their frequency declined during the pandemic compared to before

As noted from Table 1.1 above, the number of people who volunteered during the pandemic declined. In considering this, Figure 1.2 shows there was also a decline in the frequency of volunteering. Committed volunteers who volunteered with an organization both daily or weekly showed a slight decline in this commitment (combined, this group dropped from 27.1% of the total volunteers to 23.9%). A greater decline was noticed among those volunteering once or less a month. Before the pandemic, only 19.8% of the volunteers reported this low a frequency of volunteering. However, this percentage rose to 31.2% during the pandemic. This change is not surprising as many individuals were homebound, children could not attend school in person, and many volunteer opportunities were unavailable due to health and safety concerns.

FIGURE 1.2

FREQUENCY OF FORMAL VOLUNTEERING BEHAVIOR BEFORE AND DURING THE PANDEMIC



Most areas of formal volunteering saw a decrease with the exception of religious organizations, environmental and animal care organizations, health organizations, disaster relief organizations, and refugee organizations.

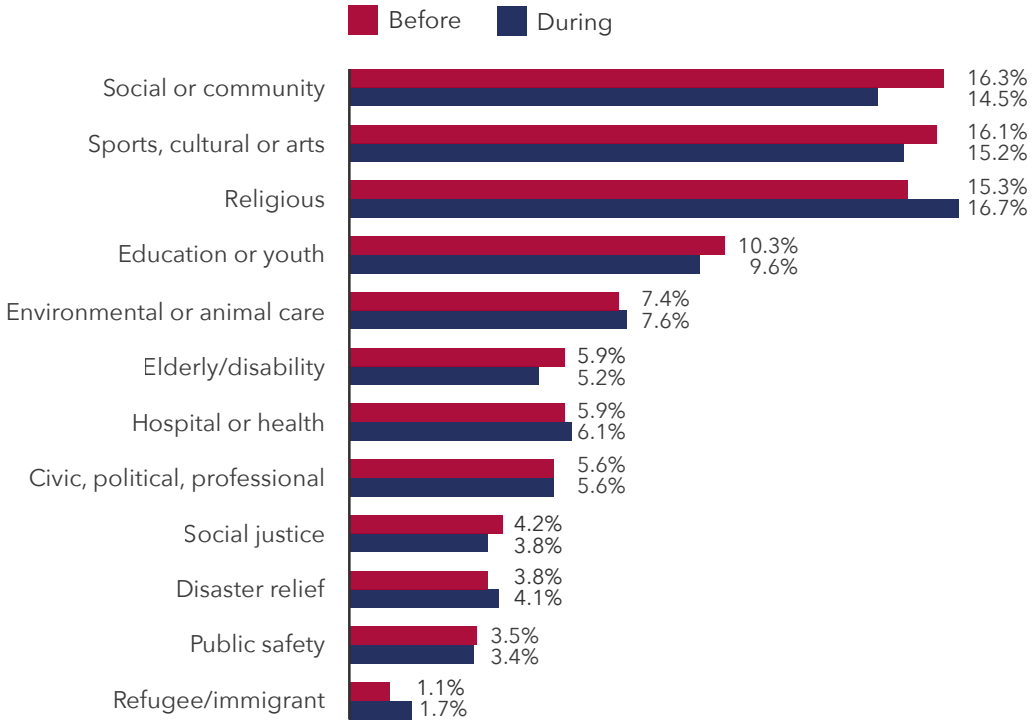
Volunteers serve diverse causes. To understand areas of involvement, we provided survey takers with a list of 12 types of organizations in addition to examples for each type to help with respondent recall. An open ended option was also provided to account for the possibility of other organization areas. The organization types and the examples were:

1. Civic, political, professional or international organization (e.g., Amnesty International, Global Citizen)
2. Education or youth service organization (e.g., Boys and Girls Club, Big Brother/Big Sister)
3. Environmental or animal care organization (e.g., National Wildlife Foundation, The Humane Society)
4. Hospital or other health organization (e.g., health clinics)
5. Public safety organization (e.g., Fire departments, Mothers Against Drunk Driving)
6. Religious organization (World Vision, Catholic Charities USA)
7. Social or community service organization (e.g., Habitat for Humanity, soup kitchens, shelters)
8. Sports, hobby, cultural, or arts organization (e.g. YMCA, museums)
9. Immigrant/Refugee assistance organizations (HIAS, National Immigrant Justice Center)
10. Elderly or disability assistance organizations (e.g. Meals on Wheels, Easterseals)
11. Disaster relief organizations (e.g. Red Cross, Doctors Without Borders)
12. Social justice/Human Rights groups (e.g. ACLU, NAACP)

Results from this question show that the three organizations volunteers engaged in most frequently before and during the pandemic remained the same: (1) social and community service organizations, (2) sports, cultural, and arts organizations, (3) and religious organizations. Given the decline in overall count and frequency of volunteering during the pandemic as discussed in previous sections, we expected a similar decline in all types of volunteering. This was not the case. While some decline is evident as shown in Figure 1.3, some areas saw increases. These areas are religious organizations, environmental and animal care organizations, health organizations, disaster relief organizations, and refugee organizations.

FIGURE 1.3

FORMAL VOLUNTEERING AREAS BEFORE AND DURING THE PANDEMIC

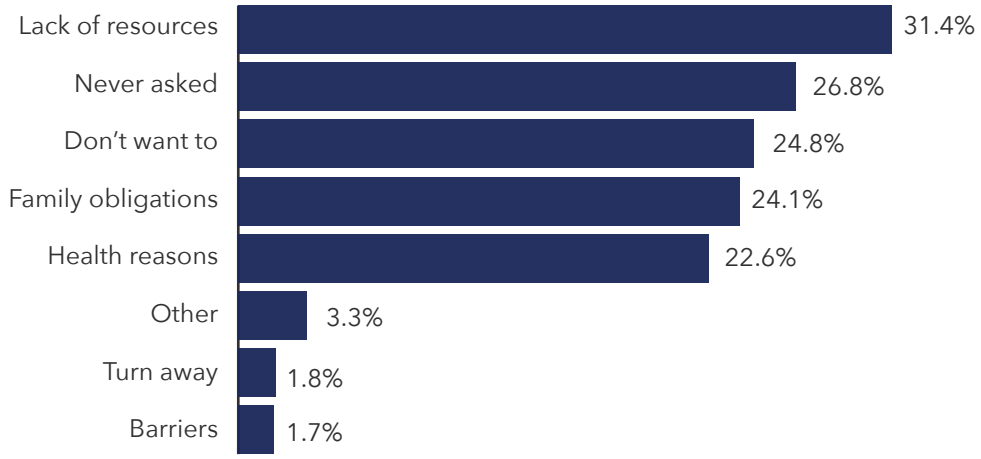


The reason most frequently given for never volunteering for an organization is lack of resources

Respondents whose formal volunteer behavior was absent in both periods were asked to select all reasons for never volunteering. Five reasons were reported by a fifth or more of the respondents. The reasons most frequently given, in descending frequency order, were the lack of resources, never being asked, not wanting to volunteer, facing restrictive family obligations, and health reasons.

FIGURE 1.4

REASONS FOR NEVER PARTICIPATING IN FORMAL VOLUNTEERING

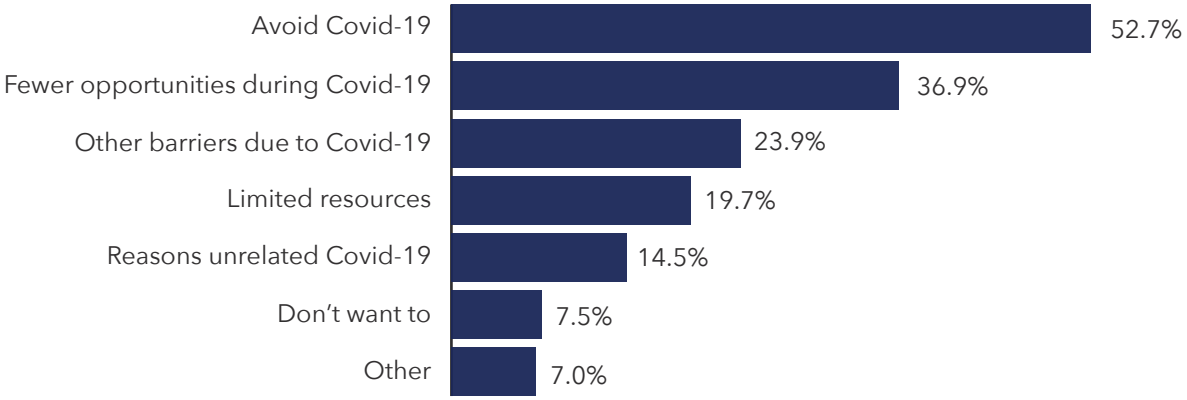


Those that stopped their formal volunteer behavior during the pandemic attributed it to the impact of the pandemic

Respondents that stopped their formal volunteer behavior during the pandemic (about a quarter of those who volunteered before the pandemic) were asked to select all reasons that led to this change in behavior. The number one reason provided was that they wanted to avoid COVID-19 (52.7%). Between worrying about contracting the virus, the lockdowns, and the suspension of many volunteer programs, it is clear that the pandemic caused havoc in the world of volunteering. About a third of those who stopped volunteering reported that there were fewer opportunities during the pandemic and a smaller percentage cited reasons that are not related to the pandemic (14.5%) .

FIGURE 1.5

REASONS FOR STOPPING FORMAL VOLUNTEER BEHAVIOR DURING THE PANDEMIC

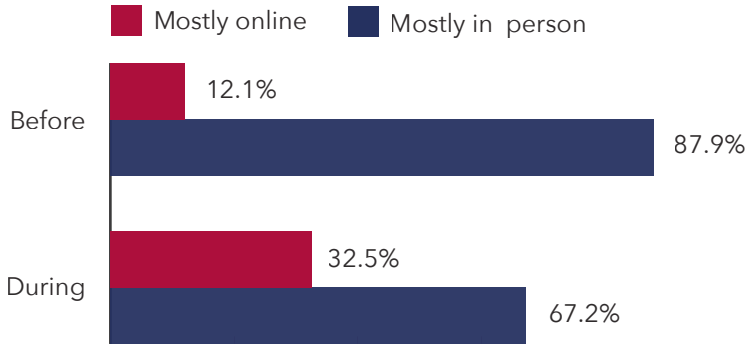


During the pandemic, virtual volunteering increased and in-person volunteering decreased

People who volunteered both before and during the pandemic were asked about volunteering in-person versus volunteering virtually (online). As can be seen in Figure 1.6, most volunteering before the pandemic was in-person. However, during the pandemic, the share of virtual volunteering almost tripled and in-person volunteering decreased. Note that even during the pandemic, the rates of in-person volunteering was still double virtual volunteering.

FIGURE 1.6

MODES OF FORMAL VOLUNTEERING BEFORE AND DURING THE PANDEMIC

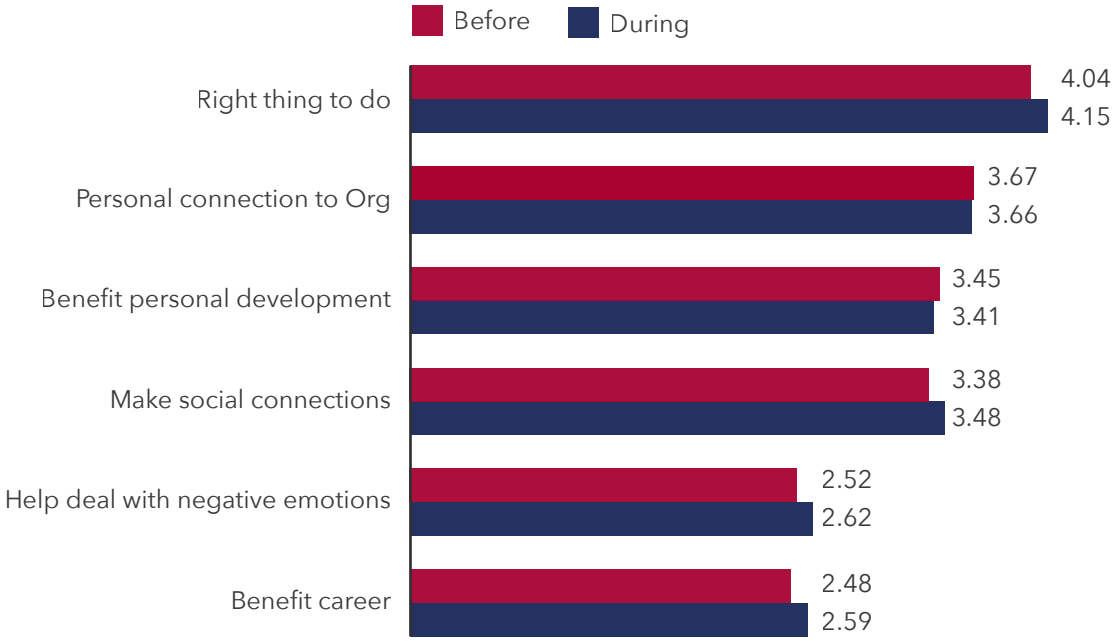


The pandemic did not impact the reasons for formal volunteering behavior

As can be seen from Figure 1.7, reasons to volunteer were not impacted significantly by the pandemic. The same reasons that were rated highly before the pandemic stayed the same during the pandemic. This implies that while circumstances and volunteer levels changed, the underlying reasons remained constant.

FIGURE 1.7

REASONS FOR PARTICIPATING IN FORMAL VOLUNTEERING BEFORE AND DURING THE PANDEMIC



Section 2:
Findings on formal donation behavior

The second major section of the survey focused on respondents' donation behavior with respect to formal organizations. We wanted to understand how the pandemic influenced one's charitable giving. The first question in this section asked whether one made donations in the period before and during the pandemic. Responses enabled donation behavior to be connected to the respondent's demographic information. To increase recall ability, these questions also asked respondents to select the types of organization to which they donated. Next, we asked about the donation amounts for the period before and during the pandemic. To reduce bias and increase reliability, we followed wording from the Current Population Survey. Those that did not volunteer during at least one period were also asked about their reasons for not donating. Finally, donor motivations were acquired through a validated scale. This section presents the general conclusions on formal donations and relevant charts.

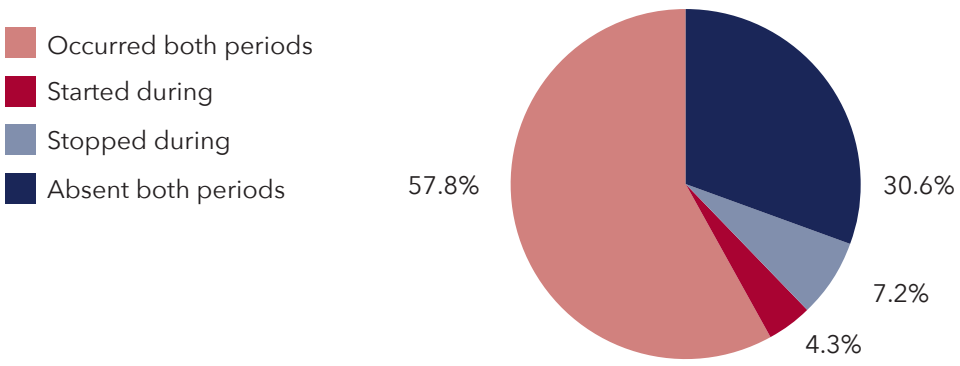
Formal donation behavior decreased slightly during the pandemic compared to before the pandemic

The number of respondents that reported donating during the pandemic did not change drastically. Those that reported donating before the pandemic (65%) are nearly equal to those that reported donating during the pandemic (62.1%). Overall, more than 60% of respondents reported donating at least once in the periods before and during the pandemic. We note that a significant number of individuals did not donate in either period (30.6%). Only a few donors either started (4.3%) or stopped (7.2%) donating during the pandemic.

TABLE 2.1
FORMAL DONATION BEHAVIOR BEFORE AND DURING THE PANDEMIC

	Donation behavior occurred in both periods	Donation behavior started during pandemic	Donation behavior stopped during pandemic	Donation behavior absent in both periods
Percentage	57.80%	4.30%	7.20%	30.60%

FIGURE 2.1
FORMAL DONATIONS BEHAVIOR BEFORE AND DURING THE PANDEMIC



Across age cohorts, change in formal donation behavior before and during the pandemic is marginal

Donors of different age cohorts behaved marginally differently in terms of their donation behavior. Table 2.2 shows that older adults, aged 65 and above, reported the highest percentage of donation behavior (an average of 78.4% per period); and this behavior decreases with age. The youngest cohort (18-29) has the largest percentage among those who did not engage in any donating behavior (44.2%). Before and during the pandemic, the change in donation behavior across the cohorts is less than 10 percentage points, suggesting that change in donations is relatively small. The biggest change occurred in the 30-49 year old cohort where 8.8% stopped donating during the pandemic.

TABLE 2.2

AGE BY FORMAL DONATION BEHAVIOR BEFORE AND DURING THE PANDEMIC

Demographics	Count*	Donation behavior occurred in both periods	Donation behavior started during pandemic	Donation behavior stopped during pandemic	Donation behavior absent in both periods
Age					
18-29	416	43.00%	6.20%	6.60%	44.20%
30-49	628	52.30%	3.60%	8.80%	35.30%
50-64	512	63.00%	3.80%	7.30%	25.80%
65+	433	73.70%	4.10%	5.30%	17.00%

*Note: Totals may not reach full sample size due to some participants choosing not to answer

Men and women were equally generous in formal donations

Our findings imply that men and women, absent of controls, were equally generous. Men, in equal numbers, were likely to have stopped or started donating during the pandemic (about 5%). The number for women fluctuates, with more women likely to have stopped donating (8.7%) than to have started donating (3.6%). Nonbinary or non-conforming gender identities had the highest percent of absent donation behavior, but we must note that the small sample size for this group limits generalizability.

TABLE 2.3

GENDER BY FORMAL DONATION BEHAVIOR BEFORE AND DURING THE PANDEMIC

Demographics	Count*	Donation behavior occurred in both periods	Donation behavior started during pandemic	Donation behavior stopped during pandemic	Donation behavior absent in both periods
Gender					
Men	962	58.80%	5.10%	5.20%	30.90%
Women	1,015	58.20%	3.60%	8.70%	29.50%
Another Gender	11	22.00%	9.90%	28.00%	40.10%

*Note: Totals may not reach full sample size due to some participants choosing not to answer

Respondents with a college degree were more likely to give to organizations than those without

Much of the empirical literature on donor behavior has found that the level of education is positively correlated with making charitable donations (Yen, 2002). Our findings align with said literature. The rates of donating in both time periods increased as the level of education increased. Moreover, of those that never donated, those with less than a high school degree had the highest levels (47.4%). Similar percentages of each educational cohort stopped donating during the pandemic. Surprisingly, those with less than a high school degree were more likely to start giving during the pandemic (7.3%).

TABLE 2.4

EDUCATION BY FORMAL DONATION BEHAVIOR BEFORE AND DURING THE PANDEMIC

Demographics	Count*	Donation behavior occurred in both periods	Donation behavior started during pandemic	Donation behavior stopped during pandemic	Donation behavior absent in both periods
Education					
Less than HS	178	38.10%	7.30%	7.30%	47.40%
Hs Graduate	606	52.60%	5.70%	7.00%	34.60%
Some College	551	58.50%	2.50%	7.70%	31.30%
College Graduate	690	66.90%	3.80%	7.10%	22.20%

*Note: Totals may not reach full sample size due to some participants choosing not to answer

Donors with the highest income are the most likely to report donating to an organization

Similar to education, much of the empirical literature on donor behavior has found that individuals' income levels are highly correlated with making charitable donations (Yen, 2002). Our findings point in the same direction. Nearly 3 out of 4 individuals in the highest income cohort reported donating in both periods, relative to 1 out of 3 in the lowest income cohort. Donation behavior in both time periods decreased as income decreases. Interestingly, those in the lowest income cohort were more likely to have started donating (11.9%) than those in any other cohort.

TABLE 2.5

INCOME BY FORMAL DONATION BEHAVIOR BEFORE AND DURING THE PANDEMIC

Demographics	Count*	Donation behavior occurred in both periods	Donation behavior started during pandemic	Donation behavior stopped during pandemic	Donation behavior absent in both periods
Income					
Less than $15,000	220	33.00%	8.70%	11.90%	46.30%
$15,000 but less than $50,000	821	50.50%	3.90%	6.70%	38.90%
$50,000 but less than $100,000	605	65.40%	2.70%	7.60%	24.30%
$100,000 or over	287	74.70%	5.30%	5.90%	14.00%

*Note: Totals may not reach full sample size due to some participants choosing not to answer

Total number of donors decreased during the pandemic while average donation amount increased

Table 2.6 shows the total count of donors and their average donation contribution before and during the pandemic. The pandemic had a similar, but less dramatic effect on the rate of formal donations relative to volunteering (formal donation behavior saw a 5% percent drop whereas volunteering saw a 13% drop).

Although the number of individuals who reported making donations of $25 or more decreased during the pandemic, those who did make donations increased their donation amounts substantially. In fact, the size of the average donation increased by over 200%. Like many other disasters, the pandemic encouraged donors to respond to the calls for help issued by many organizations that struggled to meet demand for those in need. There was an increase in demand from food banks, health agencies, and the like in response to COVID-related hardships. One such hardship was evident in May 2022 as 1.8 million individuals reported that they had been unable to work because their employer lost business or closed up shop entirely due to the pandemic (BLS, 2022).

TABLE 2.6

TOTAL DONORS AND AVERAGE DONATION AMOUNT BEFORE AND DURING THE PANDEMIC

	Before pandemic	During pandemic	Change
Total donors	1318	1259	-4.48%
Average donation amount	$4,537.30	$14,408.00	217.55%
Standard error	1378.9	3313.4	140.29%

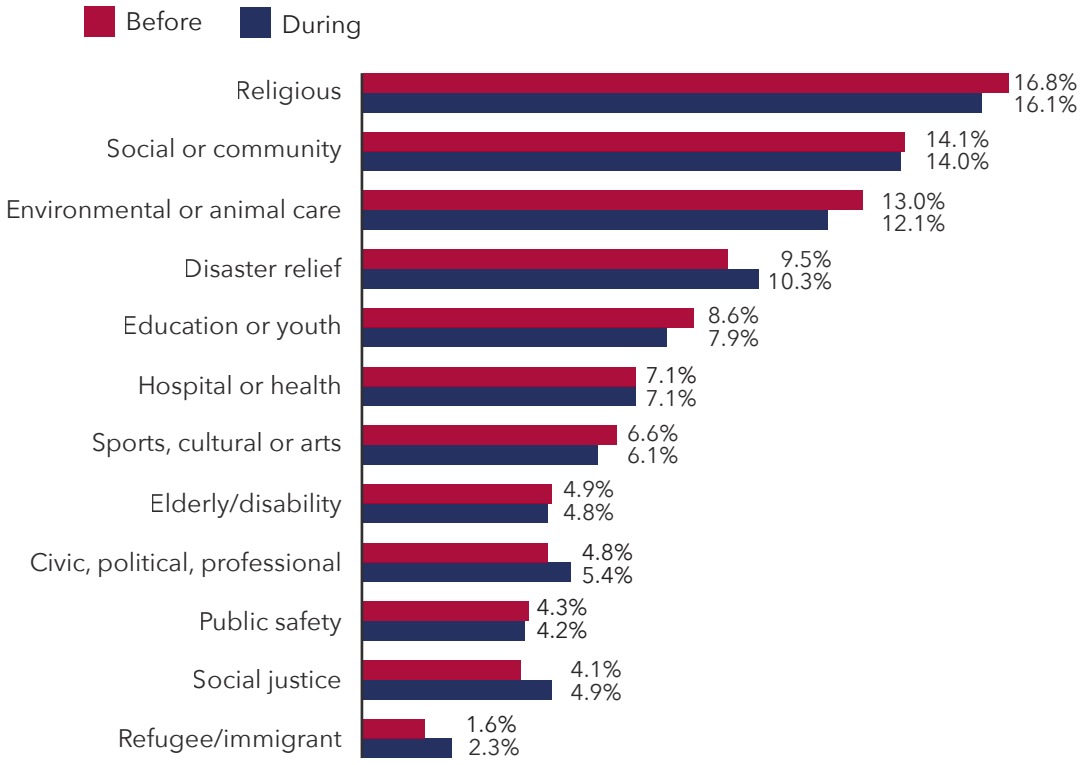
Giving to religious organizations dominates where donors chose to give

Figure 2.2 shows the types of organizations people donated to before and during the pandemic. To understand donors at the individual level, we asked respondents, "What types of organizations, if any, have you donated at least $25 per year without the expectation of goods or services in return?" We provided them with the same list of 12 types of organizations as seen in Section 1: Findings on Formal Volunteer Behavior.

We found a decline in donors choosing most areas. That is, fewer respondents gave to religious organizations. Eight of twelve areas saw a decrease in donors among our respondents. Four areas that saw an increase in the number of respondents making donations were: Disaster Relief Organizations, Civic, Political, Professional Organizations, Social Justice Organizations, and Refugee/Immigrant Organizations. Nevertheless, all positive and negative changes were marginal, being under one percentage point.

FIGURE 2.2

FORMAL DONATION AREAS BEFORE AND DURING THE PANDEMIC



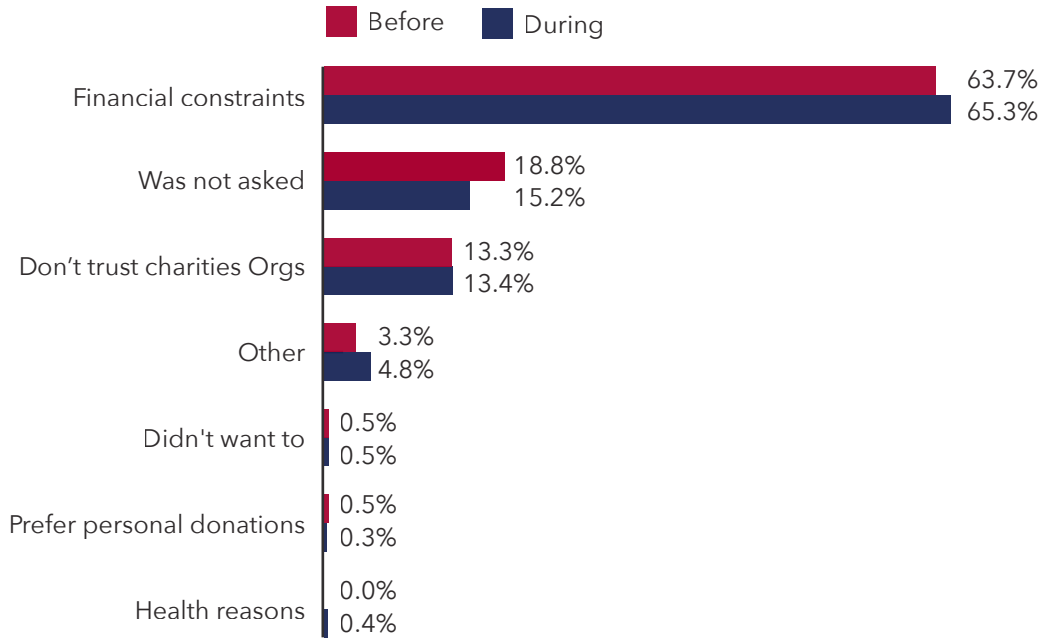
Non-donors reported financial constraints as the primary reason for not donating

To understand the absence of donor behavior, we asked non-donors their reasons for not donating in the relevant periods. The main reason chosen was the lack of financial resources and this was the leading reason given in either period.

Figure 2.3 shows differences between non-donors before and during the pandemic. The frequency of selected reasons is similar for respondents in both time periods. Financial constraints increased slightly during the pandemic (63.7% to 65.3%). Respondents were less likely to say they did not donate because they were not asked to donate (18.8% to 15.2%). And the share of those who do not trust charities and therefore refused to donate remained constant (about 13%), with the pandemic having little effect on the trustworthiness of charities, at least among non-donors.

FIGURE 2.3

REASONS FOR NOT PARTICIPATING IN FORMAL DONATIONS BEFORE OR DURING THE PANDEMIC

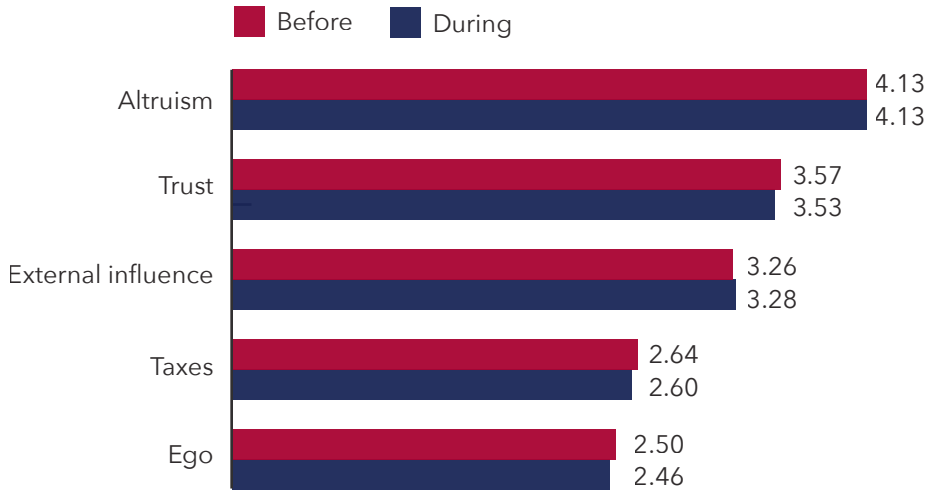


Donor reasons were relatively stable before and during the pandemic

We presented donors with a list of reasons from a validated "Motives to Donate" scale and asked them to rate each motivation using a 1 to 5 Likert Scale (Konrath & Handy, 2018). The reasons most highly scored by donors (before and during the pandemic) was altruism, measured by higher responses to the statements: "I give because I am concerned about those less fortunate than myself" and "People should be willing to help others who are less fortunate." The second highest reason was trust in nonprofits measured by high ratings to the statements "Many charitable organizations are honest" and "My image of charitable organizations is positive." This stands in direct contrast to non-donors' third most popular reason for not donating: a lack of trust in charities (see figure 2.3). Overall, motivations were stable, both before and during the pandemic.

FIGURE 2.4

REASONS FOR PARTICIPATING IN FORMAL DONATIONS BEFORE AND DURING THE PANDEMIC



Section 3: Findings on informal volunteering and/or donation behavior

Tom Frey, who is depicted in our case example above, is one who volunteers many hours a week and donates money to charities. However, Tom also helps others in many other ways. Tom often provides in-kind items (e.g., food that he delivers with his work vehicle), and emotional support to those experiencing homelessness and/or substance use disorders. He has come to know many of the individuals that he serves personally and on a first name basis. These and similar behaviors often go unnoticed but are an essential part of people's generosity. In this section, based on our reading, interviews, and focus groups, we aim to provide a picture of Americans' informal volunteering and/or donating.

The third major section of the survey focused on respondents' volunteer and/or donation behavior with respect to individuals that are not performed through formal organizations. We wanted to understand how the pandemic influenced one's volunteering and/or charitable giving to assist neighbors, people in the community, distant relatives, or strangers in need.

The first question in this section asked whether the individual gave "above average tips to service employees" which was assumed to be a possible response to the pandemic. This was followed by asking respondents if they gave money to other people in order to help them. Other questions asked about tutoring or teaching not through an organization and monitoring youth in an informal capacity. The full range of possible informal volunteer and/or donation behavior appears in Figure 3.2.

The photo below is an example of the many book houses that sprang up around the country for people to leave or take books for free. Our experts and focus groups expected a rise in this sort of generous behavior. Yet, our findings, as shown in Figure 3.2, did not support this expectation.

Informal volunteering and/or donation behavior remained stable at its high levels during the pandemic

The percentage of respondents who reported informal volunteering and/or donating was hardly affected by the pandemic. Additionally, the rate of reported informal volunteering and/or donating was higher than both reported levels of formal volunteering and donating. About two-thirds of the respondents engaged in informal volunteering and/or donating before and during the pandemic. About one-fifth of all respondents abstained in both periods, while a very small percentage of respondents either stopped or started informal volunteering and/or donating during the pandemic (roughly 5% in each group).

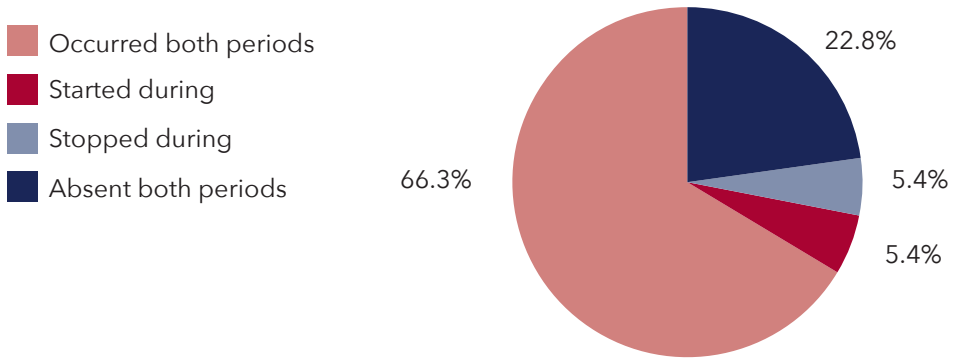
TABLE 3.1

INFORMAL VOLUNTEERING AND/OR DONATION BEHAVIOR BEFORE AND DURING THE PANDEMIC

	Informal volunteering and/or donations occurred in both periods	Informal volunteering and/or donations started during pandemic	Informal volunteering and/or donations stopped during pandemic	Informal volunteering absent in both periods
Percentage	66.31%	5.43%	5.43%	22.83%

FIGURE 3.1

INFORMAL VOLUNTEERING AND/OR DONATION BEHAVIOR BEFORE AND DURING THE PANDEMIC



Fewer older people (50 and older) reported stopping their informal generosity while more reported starting during the pandemic

People who are young (18-29 years of age) and older (65+ years of life) reported relatively higher rates no engagement in either informal volunteering and/or donation behavior (29.1% and 25% respectively). However, while the younger group reported the highest rate of stopping of their informal generosity behaviors during the pandemic, the older group reported the lowest rate of stopping. Furthermore, the two older groups (50 or older) reported the highest rates of starting to informally volunteer and/or donate during the pandemic.

TABLE 3.2

AGE BY INFORMAL VOLUNTEERING AND/OR DONATION BEHAVIOR BEFORE AND DURING THE PANDEMIC

Demographics	Count*	Informal volunteering and/or donations occurred in both periods	Informal volunteering and/or donations started during pandemic	Informal volunteering and/or donations stopped during pandemic	Informal volunteering and/or donations absent in both periods
Age					
18-29	416	59.10%	4.50%	7.20%	29.10%
30-49	628	70.70%	4.40%	6.10%	18.80%
50-64	512	67.90%	6.90%	4.20%	21.10%
65+	432	64.00%	6.30%	4.70%	25.00%

*Note: Totals may not reach full sample size due to some participants choosing not to answer

Women reported higher rates of informal volunteering and/or donation behavior but changes during the pandemic were marginal

As can be seen from Table 3.3, women were more likely than men to engage in informal volunteering and/or donation behavior (25.1% of men as compared to 20.5% of women did not engage in both periods). However, with regards to changes during the pandemic (i.e., either stopping or starting this behavior) the findings were very similar.

TABLE 3.3

GENDER BY INFORMAL VOLUNTEERING AND/OR DONATION BEHAVIOR BEFORE AND DURING THE PANDEMIC

Demographics	Count*	Informal volunteering and/or donations occurred in both periods	Informal volunteering and/or donations started during pandemic	Informal volunteering and/or donations stopped during pandemic	Informal volunteering and/or donations absent in both periods
Gender					
Men	961	64.60%	5.30%	5.00%	25.10%
Women	1,015	68.60%	5.30%	5.60%	20.50%
Another Gender	11	35.30%	26.80%	28.00%	9.90%

*Note: Totals may not reach full sample size due to some participants choosing not to answer

Respondents with higher levels of education were more likely to be engaged in informal volunteering and/or donation behavior. They also increased their involvement during the pandemic

Across the two time periods, educational attainment level had a positive correlation with informal volunteering and/or donation behavior. For example, while 16.7% of college graduates reported no engagement in informal volunteering and/or donating before and during the pandemic, this percentage was almost double among people with less than a high school education (32.9%). Similarly, a higher percentage of college graduates (7.1%) began to engage in informal volunteering and/or donating during the pandemic than any other educational level cohort. Similarly, the rate of those that stopped their informal generous behavior was the lowest (3.8%) among college graduates. This set of findings is compatible with the findings regarding formal volunteering and formal donations.

TABLE 3.4

EDUCATION BY INFORMAL VOLUNTEERING AND/OR DONATION BEHAVIOR BEFORE AND DURING THE PANDEMIC

Demographics	Count*	Informal volunteering and/or donations occurred in both periods	Informal volunteering and/or donations started during pandemic	Informal volunteering and/or donations stopped during pandemic	Informal volunteering and/or donations absent in both periods
Education					
Less than HS	178	52.10%	5.90%	9.20%	32.90%
Hs Graduate	606	56.00%	5.90%	6.20%	31.90%
Some College	551	74.60%	2.60%	5.50%	17.30%
College Graduate	689	72.40%	7.10%	3.80%	16.70%

*Note: Totals may not reach full sample size due to some participants choosing not to answer

In general, respondents with higher incomes were more likely to be engaged in informal volunteering and/or donation behavior. They were also more likely to increase their involvement during the pandemic

People with higher levels of income were more likely to be involved in informal volunteering and/or donation behavior than those with lower levels of income across both time periods. While only 15.7% of those with an annual income of $100,000 or more reported no engagement in informal volunteering and/or donation behavior in both periods, this percentage was almost double that among people with annual income of $15,000 or less (32.2%). Furthermore, the highest income cohort was the most likely to begin some form of informal generous behavior during the pandemic (9.3%). Similarly, the rate of those that stopped their informal generous behavior was the lowest (2.6%) among the highest income cohort. This set of findings is compatible with the findings of formal volunteering and formal donations.

TABLE 3.5

INCOME BY INFORMAL VOLUNTEERING AND/OR DONATION BEHAVIOR BEFORE AND DURING THE PANDEMIC

Demographics	Count*	Informal volunteering and/or donations occurred in both periods	Informal volunteering and/or donations started during pandemic	Informal volunteering and/or donations stopped during pandemic	Informal volunteering and/or donations absent in both
Income					
Less than $15,000	220	48.10%	4.70%	15.10%	32.20%
$15,000 but less than $50,000	821	62.40%	4.20%	5.80%	27.60%
$50,000 but less than $100,000	604	72.80%	5.70%	3.10%	18.40%
$100,000 or over	287	72.40%	9.30%	2.60%	15.70%

*Note: Totals may not reach full sample size due to some participants choosing not to answer

With the exception of giving above average tips, areas of informal volunteering and/or donation behavior remained stable during the pandemic

The list of informal generosity behaviors in Figure 3.2 represents the findings from our literature review and focus groups as well as consultations with related experts. We added three additional items that were attributed to the pandemic: giving above average tips to service workers, giving books, and donating air miles. Their distribution was very uneven. Giving above average tips was the most reported informal generosity behavior, giving air miles was the least reported, while giving books was somewhere in the middle. Some acts saw a small rise or decline during the pandemic but none of them so drastic as giving above average tips to service workers. This act of informal generosity grew from 18% before the pandemic to 22.5% during the pandemic. This was likely an act of support for people who were likely to experience income instability as fewer people frequented restaurants or bars.

FIGURE 3.2

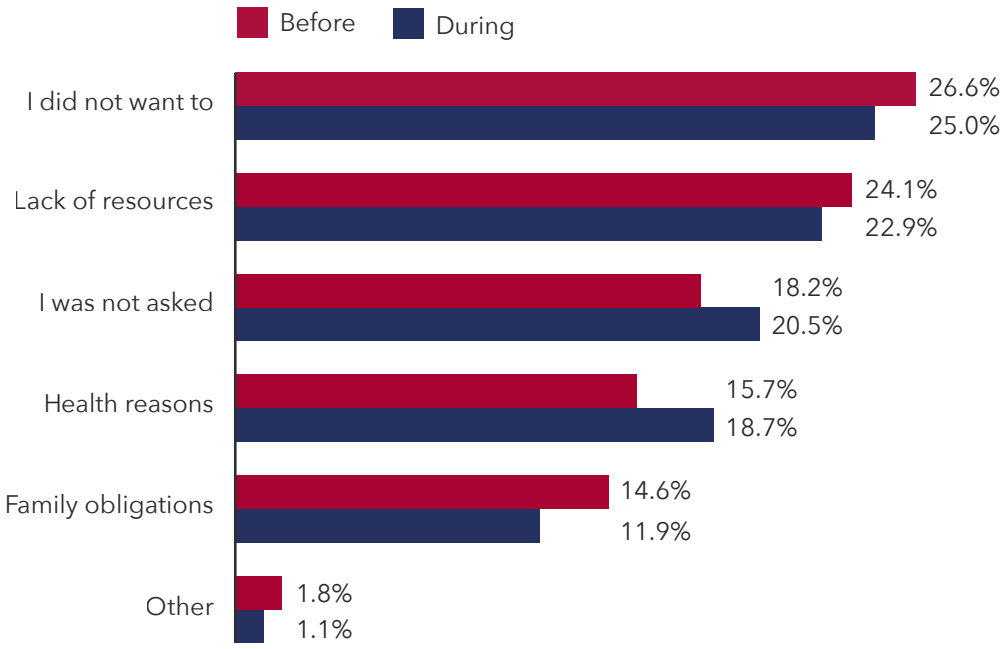
INFORMAL VOLUNTEERING AND/OR DONATION AREAS BEFORE AND DURING THE PANDEMIC

The choice to not informally volunteer and/or donate was explained by several reasons

Respondents who reported no informal volunteering and/or donating were a small group (22.8% of all respondents) and they cited many reasons for why. It's important to note that people could choose more than one reason. About a quarter selected not wanting to do so, lack of resources, and not being asked; followed by health reasons and family obligations. Of all these reasons, not being asked and health reasons were more likely to be cited during the pandemic than before the pandemic.

FIGURE 3.3

REASONS FOR NOT PARTICIPATING IN INFORMAL VOLUNTEERING AND/OR DONATION



Section 4:
Findings on other prosocial behavior

A few, somewhat less traditional, types of generous behavior emerged based on our preparation for the study. We find via the literature, our discussions with experts, and focus groups that other forms of generosity exist that do not fall into our previous sections. These include various activities that aim to preserve and restore the environment, using one's purchasing power to enhance ethical business (buying ethically and Buycotting unethical corporations), activities of biological donation (such as blood, hair, or breast milk), political engagement (such as advocating for a cause or participating in a demonstration), being a good neighbor (lending tools to neighbors), actively contributing members of organizations, and engaging in cultural and artistic events. Some of these activities are performed through formal organizations and some are informal. The people who engaged in these activities support civic society in their own ways, which are often omitted from the generosity literature and discourse. In this section, we provide findings regarding these other prosocial behaviors and how the pandemic impacted them.

Prosocial behavior remained stable at its high levels during the pandemic

Only a small segment of respondents reported not engaging in these prosocial behaviors before or during the pandemic (18.3%). The portion of respondents who did report engaging in prosocial behavior was hardly affected by the pandemic. In fact, the rate of reported engagement in prosocial behavior was the highest among our studied sections (the others were: formal volunteering, donating, or informal volunteering and/or giving). A very small percentage of respondents either stopped or started informal volunteering and/or donating during the pandemic (about 6.5% combined in both groups).

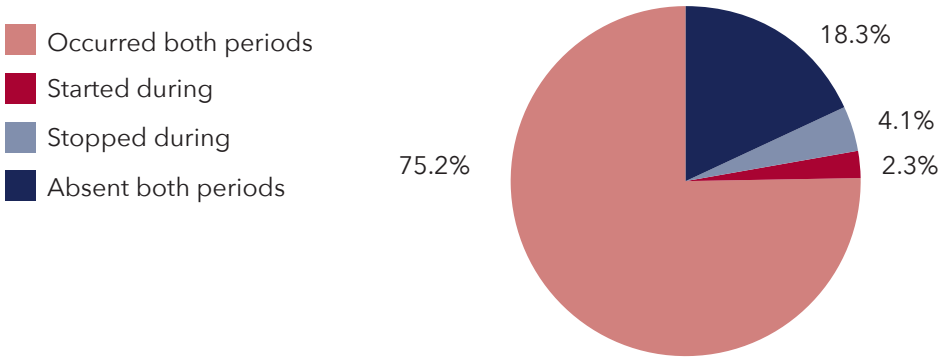
TABLE 4.1

OTHER PROSOCIAL BEHAVIOR BEFORE AND DURING THE PANDEMIC

	Other prosocial behavior occurred in both periods	Other prosocial behavior started during pandemic	Other prosocial behavior stopped during pandemic	Other prosocial behavior absent in both periods
Percentage	75.20%	2.32%	4.15%	18.28%

FIGURE 4.1

OTHER PROSOCIAL BEHAVIOR BEFORE AND DURING THE PANDEMIC



People younger than 50 were more likely to stop other prosocial behavior and also least likely to start during the pandemic

As can be seen in Table 4.2, young people (18-29 years of age) were the least likely to be engaged in other prosocial behavior. About a fifth of them (21.1%) did not perform any of these activities either before or during the pandemic. Among the elderly group (65+ years of age), only 16.4% did not engage in other prosocial behavior. Along with the next age group (30-49 years of age), young people reported relatively higher rates of stopping their engagement in other prosocial behavior. However, they were also relatively more likely to start engaging in other prosocial behavior. While these differences are not extremely large, they indicate higher flexibility among younger people.

TABLE 4.2

AGE BY OTHER PROSOCIAL BEHAVIOR BEFORE AND DURING THE PANDEMIC

Demographics	Count*	Other prosocial behavior occurred in both periods	Other prosocial behavior started during pandemic	Other prosocial behavior stopped during pandemic	Other prosocial behavior absent in both periods
Age					
18-29	416	71.60%	2.30%	5.00%	21.10%
30-49	628	72.30%	3.20%	5.70%	18.80%
50-64	512	77.10%	1.80%	4.00%	17.10%
65+	433	80.00%	1.90%	1.70%	16.40%

*Note: Totals may not reach full sample size due to some participants choosing not to answer

Gender made little difference regarding engagement in other prosocial behavior

Looking at Table 4.3 reveals very few differences between men and women. In both genders, three-quarters of respondents were engaged in other prosocial activities before and during the pandemic. Those who did not engage in other prosocial behavior were also within a range of one percent, and so were those who either started or stopped other prosocial behavior.

TABLE 4.3

GENDER BY OTHER PROSOCIAL BEHAVIOR BEFORE AND DURING THE PANDEMIC

Demographics	Count*	Other prosocial behavior occurred in both periods	Other prosocial behavior started during pandemic	Other prosocial behavior stopped during pandemic	Other prosocial behavior absent in both periods
Gender					
Men	962	75.50%	2.40%	4.40%	17.70%
Women	1,015	75.10%	2.40%	3.90%	18.60%
Another Gender	11	63.60%	0.00%	0.00%	36.40%

*Note: Totals may not reach full sample size due to some participants choosing not to answer

Respondents with higher levels of education were more likely to be engaged in other prosocial behavior

As can be seen in Table 4.4, as education rises, the percentage of those engaged in other prosocial behavior also rises. For example, while only 10.9% of college graduates reported no engagement either before or during the pandemic, this percentage was more than double that amongst people with less than a high school education (29.9%). Regarding changes during the pandemic, the differences were small (less than 8.1% of the total members of any age group). Regardless of the small percentage of people who changed their other prosocial behavior, in every age group, more stopped than started engaging in other prosocial behavior.

TABLE 4.4

EDUCATION BY OTHER PROSOCIAL BEHAVIOR BEFORE AND DURING THE PANDEMIC

Demographics	Count*	Other prosocial behavior occurred in both periods	Other prosocial behavior started during pandemic	Other prosocial behavior stopped during pandemic	Other prosocial behavior absent in both periods
Education					
Less than HS	178	62.90%	3.50%	3.70%	29.90%
Hs Graduate	606	65.30%	3.20%	4.90%	26.50%
Some College	551	79.00%	1.50%	4.60%	14.80%
College Graduate	690	83.90%	1.90%	3.20%	10.90%

*Note: Totals may not reach full sample size due to some participants choosing not to answer

In general, respondents with higher incomes were more likely to be engaged in other prosocial behavior. They were also more likely to increase their involvement during the pandemic

People with higher levels of income were more likely to be involved in other prosocial behavior than those with lower levels of income across both time periods. While only 9.2% of those with an annual income of $100,000 or more reported no engagement in other prosocial behavior in both periods, this percentage was more than double that for those with annual income of $15,000 or less (25.7%). Furthermore, the highest income cohort was the most likely to begin these other prosocial behaviors during the pandemic (3.2%). Similarly, the rate of those that stopped their informal generous behavior was the lowest (2.1%) among the highest income cohort. This set of findings is compatible with the findings from the previous three sections.

TABLE 4.5

INCOME BY OTHER PROSOCIAL BEHAVIOR BEFORE AND DURING THE PANDEMIC

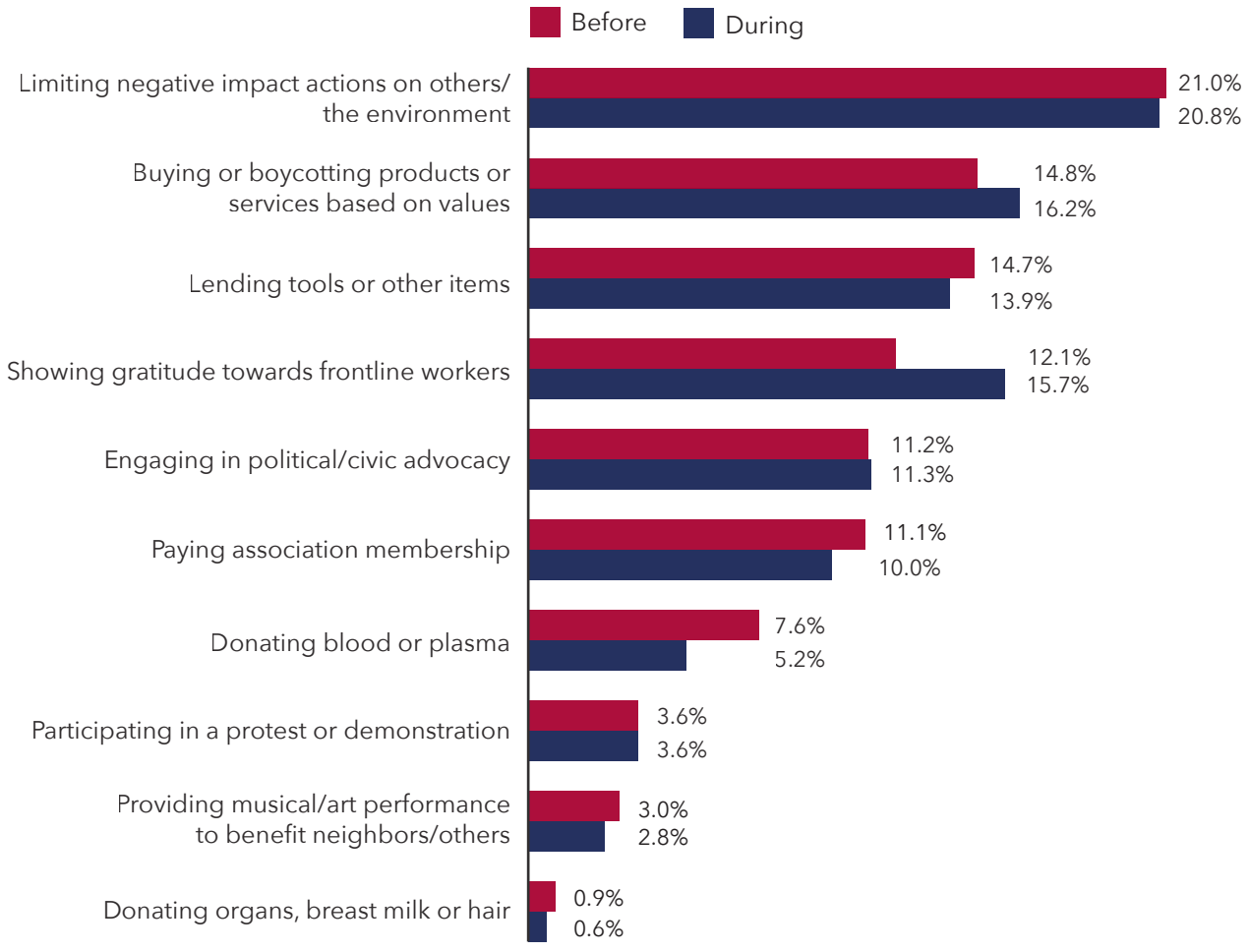
Demographics	Count*	Other prosocial behavior occurred in both periods	Other prosocial behavior started during pandemic	Other prosocial behavior stopped during pandemic	Other prosocial behavior absent in both periods
Income					
Less than $15,000	220	62.20%	2.20%	9.90%	25.70%
$15,000 but less than $50,000	821	69.70%	2.70%	3.90%	23.70%
$50,000 but less than $100,000	605	80.50%	1.80%	3.40%	14.40%
$100,000 or over	287	85.50%	3.20%	2.10%	9.20%

*Note: Totals may not reach full sample size due to some participants choosing not to answer

While showing gratitude to frontline workers and buying and buycotting intensified during the pandemic, donating blood decreased

Looking at Figure 4.2, we see a trend of continuation. The percentage of respondents' participation in various other prosocial behavior remained stable during the pandemic. There are three exceptions to this trend. First, and most noticeable is showing gratitude to frontline workers. This was an issue that was widely discussed in the peak of the pandemic and as such, this finding was expected. Second, there was a noticeable decline in the number of people who donated plasma and/or blood. This was also a clear impact of the pandemic because people were warned against congregating at or visiting health facilities, where blood drives are usually held. The third was financial buycotting or boycotting according to one's principles related to ethics and other values. It is likely that when most purchases moved to be online, more people became aware of the impact of their financial choices on society as a whole.

FIGURE 4.2
OTHER PROSOCIAL AREAS BEFORE AND DURING THE PANDEMIC

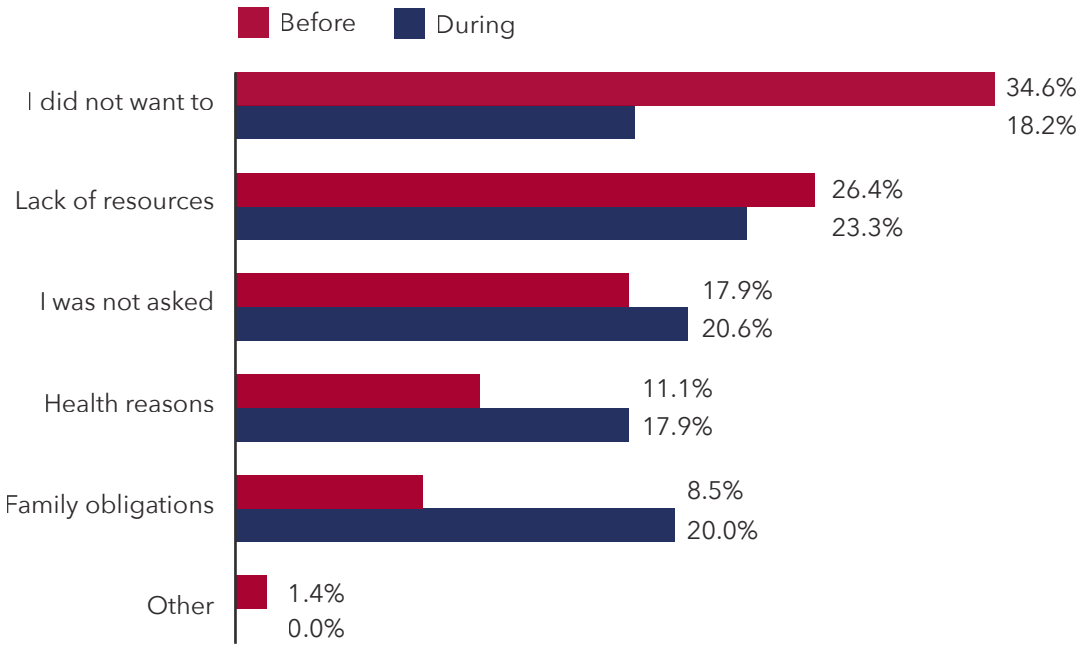


Major shifts occurred in reasons for not engaging in other prosocial behavior from before to during the pandemic

The results reported in Figure 4.3 show the greatest difference between the two time periods. Some reasons not to engage in prosocial behavior show clear decline during the pandemic. For example, "not wanting to do so" went down from 34.6% of those not engaging in the other prosocial behavior to only 18.2%. A profound trend was reported regarding lack of resources as this reason decreased during the pandemic. However the other three key reasons not to be engaged in other prosocial behavior reported dramatic increases during the pandemic. For example, health reasons cited for not being engaged went up from 8.5% of the people before the pandemic to 20% during the pandemic! Similar increases in reasons not to be engaged in other prosocial behavior were reported for health reasons and not being asked.

FIGURE 4.3

REASONS FOR NOT PARTICIPATING IN OTHER PROSOCIAL BEHAVIOR



Appendix: sample and methodology

Data collection for this project was performed through the survey company SSRS. Questionnaire development, administration, and checking was performed from January 1 to April 18 in partnership with the researchers. The following sections come from the methods report provided by SSRS at the completion of this project.

Sample design

Respondents for the poll were reached through the SSRS Opinion Panel[1], a nationally representative probability-based web panel. Since it is a probability-based panel, findings are statistically projectable to the adult general population.

Members are randomly recruited in one of two ways: (1) Through invitations mailed to respondents randomly sampled from an Address-Based Sample (ABS). (2) From a dual-frame random digit dial (RDD) sample, through the SSRS Omnibus survey platform.

The SSRS Omnibus survey was a nationally representative bilingual telephone survey designed to meet standards of quality associated with custom research studies. Each weekly wave of the SSRS Omnibus consisted of 1,000 interviews, of which 700 were obtained with respondents on their cell phones, and approximately 35 interviews completed in Spanish. Respondents of the SSRS Omnibus represent the full U.S. adult population (English- and Spanish-speaking). From this base, SSRS screened for internet access and then recruited those who have Internet access[2] to be part of the SSRS Probability Panel. Sample for the SSRS Omnibus is obtained through Marketing System Groups (MSG).

ABS respondents are randomly sampled from the U.S. Postal Service's Computerized Delivery Sequence (CDS), a regularly-updated listing of all known addresses in the U.S. For the Opinion Panel, known business addresses are excluded from the ABS sample frame.

Questionnaire design

The questionnaire was developed by researchers at SP2 with consultation from the SSRS project team. The questionnaire was then formatted and programmed into Confirmit Computer Assisted Web Interviewing (CAWI) software. SSRS conducted 11 pretest cognitive interviews to get feedback on the questionnaire. SSRS researchers set up interviewing times with respondents from the SSRS Opinion Panel and sent each respondent a unique link to the online survey via email. At the time of the interview, the researcher called the respondent and talked through the program with respondents as they took the survey. From these interviews, the researcher collected information about wording used in the questionnaire, whether the topics and ideas mentioned were relevant, and impressions of the survey's look and feel. Based on this feedback final changes were made to the survey and it was translated into Spanish so respondents could choose to complete the survey in English or Spanish.[3]

Prior to the field period, SSRS programmed the study into Confirmit Computer Assisted Web Interviewing (CAWI) software. Extensive checking of the program was conducted to ensure that skip patterns and sample splits followed the design of the questionnaire.

Survey administration

In appreciation for their participation, panelists received a modest incentive for participation (in the form of an electronic gift card). The field period for this study was April 1 through April 18, 2022.

Response rate/cooperation rate

In total, 5,858 SSRS Opinion panelists were sent email invitations with a link to the poll. Multiple invitations to participate were sent to ensure people had the opportunity to participate. Web-panel response rates are a product of (1) response rates to the original invitation to participate in the panel; and (2) the cooperation rate among panelists with the invitation to participate in the study.

[1] https://ssrs.com/opinion-panel/ [2]According to a Pew Research Center report, approximately 90% of adults nationally have internet access: http://www.pewinternet.org/fact-sheet/internet-broadband/ [3] In total, 68 respondents completed in Spanish.

TABLE 4.6 COOPERATION AND RESPONSE RATES

	SSRS opinion panel
Invited to particiapte	5,858
Completed	2,538
Completion rate/study response rate	43%
Composite response rate	1.8%*

* Product of the registration rate among ABS (or Omnibus response rate) invitees and completion rate.

Quality control

To ensure data were accurately recorded, SSRS included the following processes:

- SSRS project managers tested the web program extensively to ensure that skip patterns were working correctly, and the program could be used effectively by the respondents and interviewers.[4]
- After data collection was complete, the data were thoroughly cleaned with a computer validation program that establishes editing parameters in order to locate any errors including data that do not follow skip patterns, out of range values, and errors in data field locations.
- For each online record, a set of quality control standards were applied.
  - Two respondents who spent less than 3 minutes on the survey were removed
  - Four cases were removed due to incorrect responses to two quality control questions

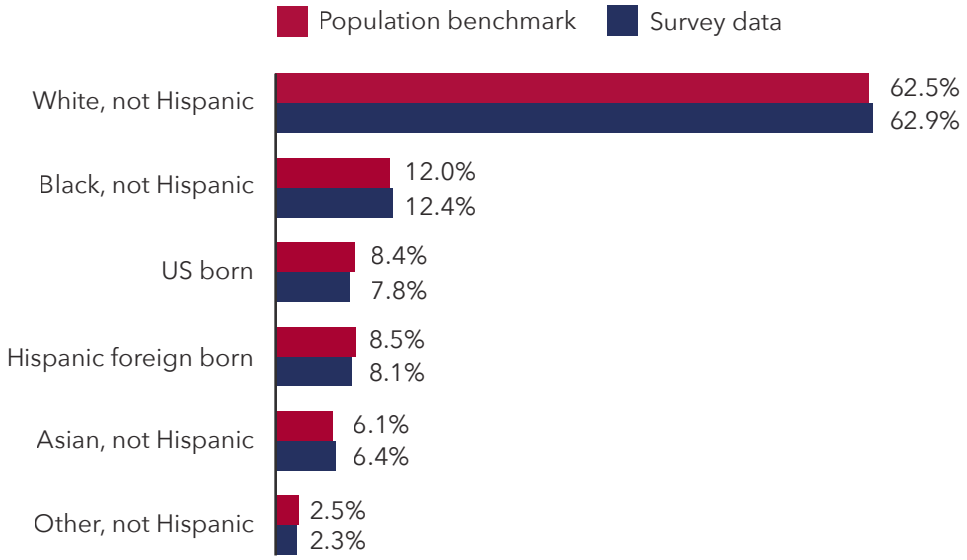
Weighting procedures

Weighting is generally used in survey analysis to compensate for sample designs and patterns of non-response that might bias results. The weighting ensures that the demographic profile of the sample matches the profile of the target population.

The data consisted of a representative sample of the U.S. adult population 18 years of age and older. The weighting consisted of three stages: 1) application of base weights; 2) non-internet propensity score adjustment; and 3) calibration to population parameters. Further detail on weighting is available on request.

Figures A.1 - A.5 show the breakdown of respondents included in this study as compared to the population benchmarks. Benchmarks are composed of data from the Current Population Survey, the Census Planning Database, and the Pew Research Center's National Public Opinion Reference Survey. The provided visuals indicate that respondents are well matched by race (see Figure A.1), education (Figure A.2), age (Figure A.3), gender (Figure A.4) and region (Figure A.5) .

FIGURE B.1 RACE OF POPULATION BENCHMARK COMPARED TO SURVEY DATA



[4] At the end of the field, during the final data checking and cleaning process, SSRS found that the programming specifications in the questionnaire were incorrect for Q22 resulting in 69 respondents not seeing a question they should have been asked. SSRS recontacted these responses and was able to retrieve information from 54 of them.

FIGURE B.2
EDUCATION OF POPULATION BENCHMARK COMPARED TO SURVEY DATA

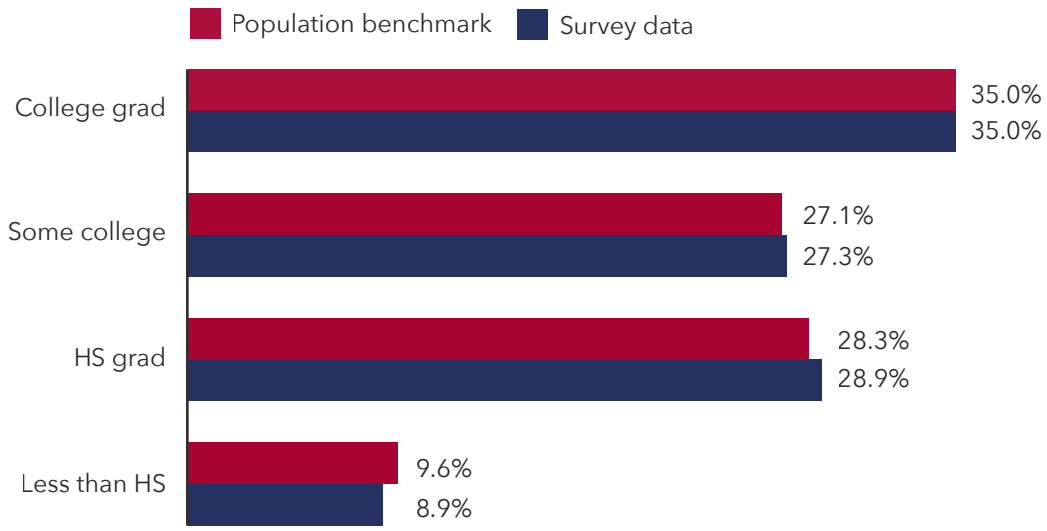


FIGURE B.3
AGE BY EDUCATION OF POPULATION BENCHMARK COMPARED TO SURVEY DATA

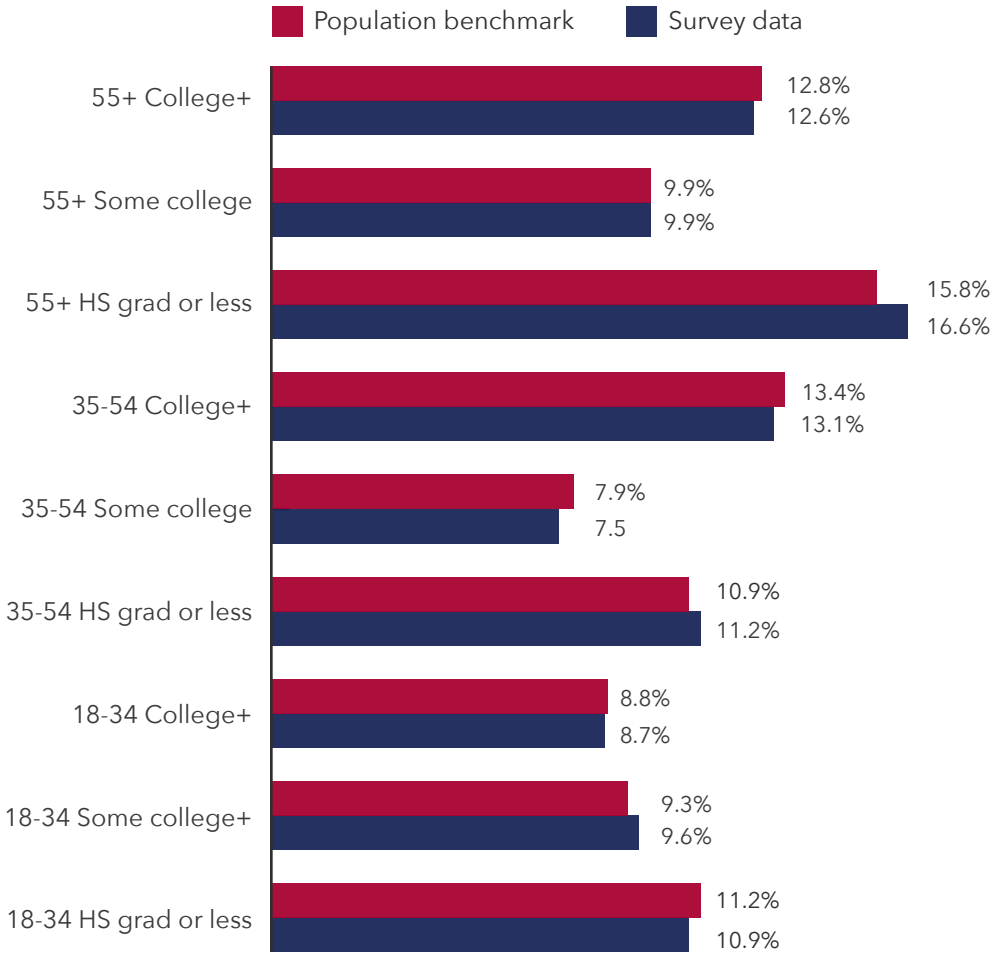


FIGURE B.4

GENDER BY AGE OF POPULATION BENCHMARK COMPARED TO SURVEY DATA

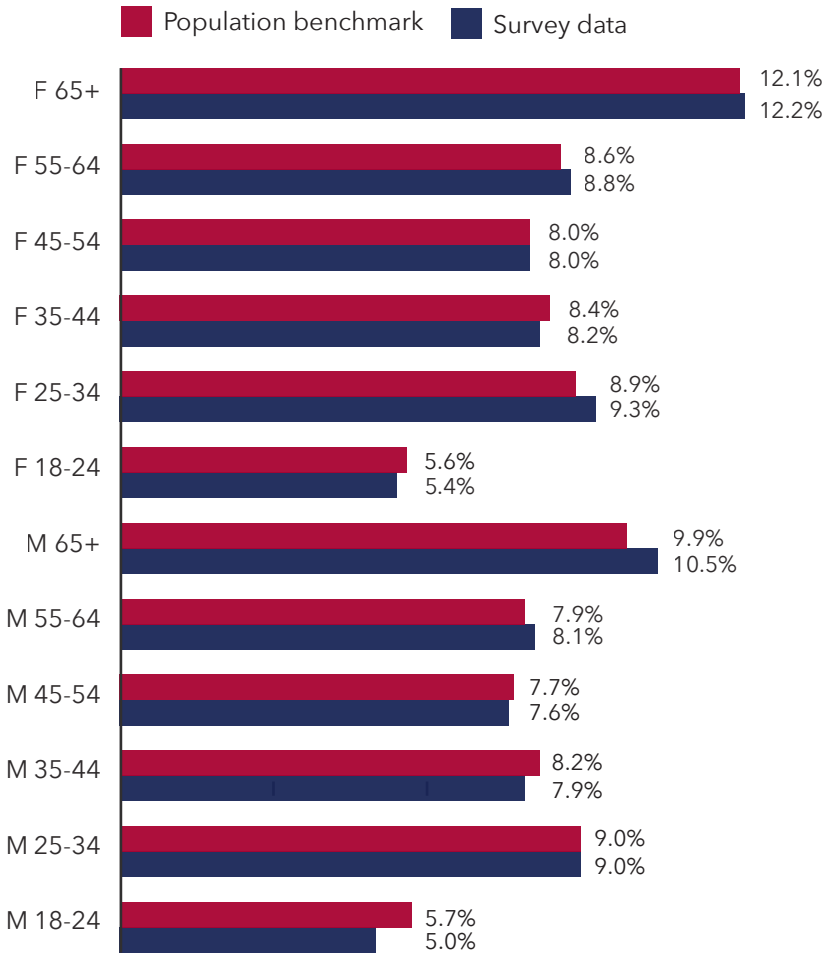
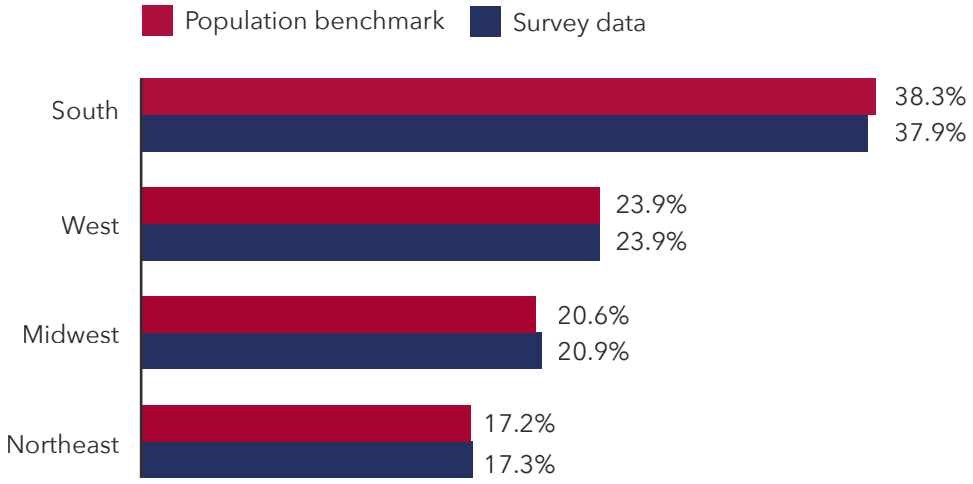


FIGURE B.5

REGION OF POPULATION BENCHMARK COMPARED TO SURVEY DATA



Validity and recall bias

One concern around the structure of our survey was the potential to introduce recall bias when respondents were asked to remember two separate time periods. To understand whether this format biased responses, we administered two additional surveys to independent populations as a sort of validity check. While 2026 people received the full survey with questions pertaining to their behavior before and during the pandemic, 262 additional people received a survey that only asked about their behavior before the pandemic while 250 people received a survey that only asked about their behavior during the pandemic. We then compared the responses of each group within the relevant time periods to assess whether outcomes varied significantly. No major change in frequency or distribution of answers was detected and in fact, the findings were quite similar. This in turn increases confidence in the validity of this survey and report. Further charts and explanations are available upon request.

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