



### Review of the Interim Emergency Pass/Fail Guidelines

<b>PRESENTED BY</b>	John Lea-Cox, Academic Procedures & Standards (APAS) Committee, Chair
<b>REVIEW DATES</b>	SEC – March 14, 2022   SENATE – April 6, 2022
<b>VOTING METHOD</b>	In a single vote
<b>RELEVANT POLICY/DOCUMENT</b>	N/A
<b>NECESSARY APPROVALS</b>	Senate, President

### ISSUE

On March 30, 2020, the University moved to a virtual learning environment due to the exigent circumstances associated with the Covid-19 pandemic. The University’s grading policies, including its pass-fail guidelines were adapted to support students and faculty through the remainder of the Spring 2020 semester. The University returned to standard grading and pass-fail measures in the Fall 2020, but it soon became clear, through student advocacy, that there was still a significant impact from the ongoing pandemic that ranged from mental health concerns, to responsibilities with caring for older family members or younger siblings, or taking on a job to help support the family.

In response, Provost Rankin worked with a variety of stakeholders and ultimately with the Senate leadership and the Senate Executive Committee (SEC) to take steps to help support the students during the Spring 2021 semester. As a result the SEC acted on behalf of the Senate to amend the University of Maryland Grading Symbols and Notations Used on Academic Transcripts Policy (III-6.20[A]) to change the Pass minimum grade equivalent from a “D-“ to a “C-“; develop Emergency Pass-Fail Guidelines with provisions on taking up to seven credits pass-fail and associated guidelines that could be invoked by the President and Provost for any future emergency; and have President Pines approve both items on an interim basis pending formal Senate review, so that the new provisions would be in place for the Spring 2021 semester.

The interim policy and guidelines were then charged to the APAS Committee sequentially. Once the committee’s recommendation to codify the Pass minimum grade equivalent at a “C-“ was approved by the Senate and President Pines in September 2021, it was then charged with reviewing the Interim Emergency Pass/Fail Guidelines, reviewing other associated University and peer policies and data; consulting with stakeholders; considering whether the guidelines should be removed or revised and maintained; and with considering whether the current interim guidelines are general enough to be used for any type of emergency, address all relevant principles during an emergency, or have a positive or detrimental impact on the short and long term educational goals of students.

### RECOMMENDATION(S)

The APAS Committee recommends that its recommendations that the current interim Emergency Pass-Fail Guidelines be removed, and that the University follow a broad set of principles, best

practices, and other procedures to help guide the development of any future academic guidelines based on the type of emergency that the University is facing at the time, as defined in the Recommendations section of the report immediately following this transmittal.

## **COMMITTEE WORK**

---

The APAS Committee began its consideration of the charge in September 2021. The committee reviewed the Interim Emergency Pass-Fail Guidelines the Amendment to the University of Maryland Grading Symbols and Notations Used on Academic Transcripts Policy ([Senate Document #20-21-32](#)), the Review of the Interim University of Maryland Grading Symbols and Notations Used on Academic Transcripts Policy ([Senate Document #20-21-38](#)). In addition, data on the implementation of the interim Emergency Pass/Fail Guidelines from the Office of the Registrar was also analyzed and considered: the number of courses that students chose to take pass-fail during the Spring 2021 semester; data on the impact of pass-fail grades on student success rates in subsequent years and with subsequent courses that build on the same subject material; and the impact on the success of our graduates' competitiveness for employment opportunities and in the admissions process for graduate programs. Throughout its review of the charge, the committee consulted with key stakeholders including representatives of the Senior Vice President and Provost, the Office of Undergraduate Studies, the Office of the Registrar, the Graduate School, and the Office of Institutional Research Planning & Assessment (IRPA). Early in its review, the committee met with representatives from Undergraduate Studies, the Office of the Registrar, and the Graduate School.

The APAS Committee deliberated on the information it collected and reviewed through its consultations to come to a consensus on the general direction of its recommendations. The committee then formed a working group with the goal of developing draft recommendations for the full committee's consideration when it reconvened in early 2022. The working group deliberated during winter, 2021 on the information that the committee had compiled thus far; notes from its consultations; and two relevant scholarly articles co-authored by one of the ex-officio members of the committee, Brooke Liu. The working group found these articles to be incredibly insightful and used them as a foundation for its draft recommendations. It also developed additional recommendations based on best practices from the University's own trials through the three semesters during the height of the pandemic and principles associated with prioritizing health and safety, including mental health; engaging relevant units and subject matter experts; consideration of marginalized communities; engagement of shared governance; and an ongoing feedback mechanism.

The APAS committee reviewed and discussed the working group's draft recommendations at its meeting on February 2, 2022. Following deliberation and some minor revisions, the APAS Committee unanimously voted to approve the recommendations detailed in the Recommendation section of the report.

## **ALTERNATIVES**

---

The Senate could choose not to approve the proposed recommendations. However, doing so would leave the current interim Emergency Pass-Fail Guidelines in place for future emergencies, which likely will not address all potential types of emergencies that may occur.

## **RISKS**

---

There are no risks to the University in adopting the recommendations.

## **FINANCIAL IMPLICATIONS**

---

Adoption of the proposed recommendations may have some minimal financial implications.



## Review of the Interim Emergency Pass/Fail Guidelines

### 2021-2022 Committee Members

**John Lea-Cox** (Chair)  
**John Bono** (Faculty)  
**John Buchner** (Faculty)  
**William Cohen** (Ex-Officio – Provost’s Rep)  
**Linda Coleman** (Faculty)  
**Nicole Coomber** (Faculty)  
**Adrian Cornelius** (Ex-Officio – Registrar’s Rep)  
**Alice Donlan** (Staff)  
**Caroline Eades** (Faculty)  
**Lee Friedman** (Faculty)  
**Alka Gandhi** (Faculty)  
**Shannon Gundy** (Ex-Officio – Director of Undergraduate Studies Rep)

**Lisa Kiely** (Ex-Officio – Undergrad Studies Rep)  
**Daniel Levy** (Undergraduate Student)  
**Marilee Lindemann** (Faculty)  
**Brooke Liu** (Ex-Officio – Graduate School Rep)  
**Kellie Rolstad** (Faculty)  
**Zeena Zakharia** (Faculty)

### Date of Submission

March 2022

## BACKGROUND

---

In December 2019, the novel virus was first identified from an outbreak in the Chinese city of Wuhan and attempts to contain it there failed, allowing it to spread across the globe. The World Health Organization (WHO) declared a Public Health Emergency of International Concern on January 30, 2020 and a pandemic on March 11, 2020. The COVID-19 pandemic is an ongoing global pandemic of coronavirus disease 2019 (COVID-19) caused by severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2).

Early in the pandemic, on March 10, 2020, then President Loh announced that the University would be moving to an online environment starting on March 30, 2020 and continuing until at least April 10, 2020. He noted that the University would be closed for Spring Break March 16 - 22, 2020; classes would be canceled March 23-29, 2020, and classes would resume virtually starting on March 30, 2020. The University used the week of March 23rd to prepare for virtual learning by ensuring that all online teaching and learning resources were in place for faculty and students; faculty received training and were provided workshops to support their move to the online environment; and students had internet access and laptops to fully participate in e-learning. These measures had a significant impact on how successful UMD was with the fast turnaround that was required for the situation, compared to other institutions who had gone straight from Spring Break to virtual learning without taking the extra time to develop a more comprehensive approach.

As a result of the rapid onset of the pandemic in March 2020 and the uncertainty that laid ahead for the remainder of the semester, Provost Rankin moved quickly to adapt the University’s grading policies, including its pass-fail grading to support students and faculty through the remainder of the Spring 2020 semester. In the hope that the pandemic was coming to an end, the University returned to standard grading and pass-fail measures in the Fall 2020. It soon became clear, through student advocacy, that there was still a significant impact from the ongoing pandemic. Students noted mental health concerns; issues with having to help with older family members or younger siblings because K-12 schools were still closed; and having to take on a job to help support their family because other family members were sick or lost their job. As a result, Provost Rankin worked with a

variety of stakeholders and ultimately with the Senate leadership and the Senate Executive Committee (SEC) to amend the relevant policy and develop emergency pass-fail guidelines that could be invoked by the President and Provost for any future emergency; and have both items approved by President Pines, on an interim basis pending formal Senate review.

### Prior Policy & Prior Standard Grading Guidelines

Prior to the start of the pandemic, the University of Maryland Grading Symbols and Notations Used on Academic Transcripts Policy (III-6.20[A]) included a Pass minimum grade equivalent of a “D-”. The regular provisions for pass-fail grading include:

- Eligibility for taking courses pass-fail requires a student to take 30 or more credit hours of college credit with a GPA of at least 2.0. At least 15 of these credit hours must have been completed at the University of Maryland, College Park with a University of Maryland GPA of at least 2.0.
- Courses for which this option applies must be electives in the student's program. The courses may not be college, major, field of concentration, or general education program requirements.
- Only one course per semester may be registered for under the pass-fail option.
- No more than 12 semester hours of credit may be taken under the pass-fail option during a student's college career.
- Students may not choose this option when re-registering for a course.
- When registering under the pass-fail option, a course that is passed will count as hours in the student's record but will not be computed in the grade point average. A course that is failed will appear on the student's record and will be computed both in the overall average and the semester average.
- Students registering for a course under the pass-fail option are required to complete all regular course requirements. Their work will be evaluated by the instructor by the normal procedure for letter grades. The instructor will submit the normal grade. The grades A+, A, A-, B+, B, B-, C+, C, C-, D+, D or D- will automatically be converted by the Office of the Registrar to the grade P on the student's permanent record. The grade F will remain as given. The choice of grading option may be changed only during the schedule adjustment period for courses in which the student is currently registered.

### Charge

Initially, the SEC charged the Academic Procedures & Standards (APAS) Committee with separate reviews of the revised interim policy and the emergency guidelines. Following feedback from Interim Provost Wylie, on March 12, 2021, the Senate leadership amended the charge and requested the committee to review the interim University of Maryland Grading Symbols and Notations Used on Academic Transcripts Policy. Following the completion of that review, a separate review of the Interim Emergency Pass/Fail Guidelines would then be charged to the APAS committee.

On September 24, 2021, the Senate Executive Committee (SEC) charged the Academic Procedures & Standards (APAS) Committee with reviewing the Interim Emergency Pass/Fail Guidelines, reviewing other associated University and peer policies and data; consulting with stakeholders; considering whether the guidelines should be removed or revised and maintained; and with considering whether the current interim guidelines are general enough to be used for any

type of emergency, address all relevant principles during an emergency, or have a positive or detrimental impact on the short and long term educational goals of students.

## **TIMELINE**

---

### Spring 2020

In Spring 2020, due to the onset of the COVID-19 pandemic and the exigent circumstances associated with it the University implemented an all-pass-fail grading model as the default without restrictions, and students were required to ask to receive a letter grade in a course. Regular probation and dismissal policies did not apply. The Pass minimum grade equivalent was a D-, which led some students, particularly those in math and science classes, who were given a Pass grade, to be unprepared for class content in subsequent courses. Faculty were encouraged to be flexible and empathetic with students. In addition, the Excused Absence Policy's provision for self-certified notes could serve as documentation for COVID-19-related absences or missed course expectations; the Arbitrary & Capricious Grading Policy would not apply to approaches to excused absences that provide alternative ways for students with COVID-related absences to make up missed work; and the expectation that every undergraduate course will have a final exam was waived with graded "lower stakes" assessments throughout the course being encouraged as an alternative.

### Fall 2020

In Fall 2020, the University returned to its standard grading method and pass-fail guidelines. Faculty were encouraged to be flexible and empathetic with students. In addition, the Excused Absence Policy's provision for self-certified notes could continue to serve as documentation for COVID-19-related absences or missed course expectations; the Arbitrary & Capricious Grading Policy would not apply to approaches to excused absences that provide alternative ways for students with COVID-related absences to make up missed work; and the expectation that every undergraduate course will have a final exam was waived with graded "lower stakes" assessments throughout the course being encouraged as an alternative. However, students strongly advocated for an extension of the Spring 2020 pass-fail guidelines because of the ongoing impact of the pandemic.

Provost Rankin did not want to make any changes to the pass-fail guidelines in the middle of the Fall 2020 semester but was willing to consider potential revisions for the Spring 2021 semester. The Provost's Office consulted extensively with student leaders, faculty, department chairs, deans, advisors, and staff to help develop the framework for what would later become the Interim Emergency Pass/Fail Guidelines. However, one of the most significant concerns expressed by the Deans and the Provost was that the Pass minimum grade equivalent was a "D-". Provost Rankin and the Deans agreed that a "D-" should not qualify as a passing grade and did not indicate mastery of the subject matter. Changing the Pass minimum grade equivalent to a "C-" would better align the University with its peers and other Big10 institutions.

### Winter 2020-2021

In December 2020, Provost Rankin approached the Senate Leadership in response to substantial concerns from the student population about the ongoing impact of the Covid-19 pandemic and to discuss strategies to provide support to the students. Following consultation with the Senate leadership, it was agreed upon to change the Pass minimum to a C-, and develop guidelines that were general enough that the President and Provost could invoke them for any potential future emergencies.

In January 2021, the Senate leadership and Provost Rankin asked the SEC to consider proposed revisions to the University of Maryland Grading Symbols and Notations Used on Academic Transcripts Policy (III-6.20[A]) that would change the Pass minimum grade equivalent from a “D-” to “C-”.

Provost Rankin suggested to the Senate leadership that the University should also consider the development of Emergency Pass-Fail Guidelines that were general enough that they could be invoked by the Provost or President during any potential future emergencies. The guidelines were developed based on significant feedback from campus stakeholders. The SEC also acted on behalf of the Senate to approve the guidelines and the President approved them on an interim basis, pending Senate review. The SEC and Presidential approvals were timed so the amendment and guidelines would be effective at the start of the Spring 2021 semester.

Following consultations with key administrators, a review of peer institution research, and extensive deliberation, on January 21, 2021, the SEC acted on behalf of the Senate (which was not in session until February 2021) to both amend the the Grading Symbols and Notations policy to change the Pass minimum grade equivalent from a “D-” to a “C-” and approve the Emergency Pass-Fail Guidelines. On January 25, 2021, President Pines approved the amendment to the policy and the Emergency Pass-Fail Guidelines on an interim basis, pending Senate review. These approvals were timed so that the provisions would be effective at the start of the Spring 2021 semester.

### Spring 2021

The interim Emergency Pass-Fail Guidelines specified that students would be allowed to opt in to take up to a maximum of seven credits as pass-fail without limitation, with an opportunity for students experiencing exceptional circumstances to request an exception to the seven-credit limit through their advisor and with the approval of their Dean. In addition, the deadline for both choosing the pass-fail grading option and dropping a course with a “W” in the course was extended to 10:59 p.m. on the last day of classes. Faculty were also encouraged to keep in-course grades current, so students would have a good idea of the grade they had earned in the course by the last day of classes and it was clarified to students that faculty would not be aware of which students in their course were taking it pass-fail, which alleviated the potential for bias.

Major contributors to the improvement in implementation in Spring 2021 included: the prior work done in Spring 2020, strong communication, and guidance given to faculty related to not requiring a final, providing feedback throughout the semester, and being understanding with their students. Prior to the implementation of the Interim Emergency Pass/Fail Guidelines, students were educated about the potential graduate school and employment-related consequences of having multiple semesters of Pass grades on their transcripts. Allowing students up to seven credits of classes taken pass-fail was considered a good number, to mitigate the risk that students may not be competitive applicants for graduate schools and employment and that having students opt in for a pass-fail grading option in Spring 2021 was more successful. After the confusion of Spring 2020, messaging to the campus community was more precise in Spring 2021, such as the communication of the extended deadline to withdraw from a course.

## **COMMITTEE WORK**

---

The APAS Committee began its consideration of the charge (Appendix 1) in September 2021. The committee reviewed the Interim Emergency Pass-Fail Guidelines (Appendix 2), the Amendment to the University of Maryland Grading Symbols and Notations Used on Academic Transcripts Policy ([Senate Document #20-21-32](#)), the Review of the Interim University of Maryland Grading Symbols



and Notations Used on Academic Transcripts Policy ([Senate Document #20-21-38](#)). In addition, data on the implementation of the interim Emergency Pass/Fail Guidelines from the Office of the Registrar was also analyzed and considered: the number of courses that students chose to take pass-fail during the Spring 2021 semester; data on the impact of pass-fail grades on student success rates in subsequent years and with subsequent courses that build on the same subject material; and the impact on the success of our graduates' competitiveness for employment opportunities and in the admissions process for graduate programs. Throughout its review of the charge, the committee consulted with key stakeholders including representatives of the Senior Vice President and Provost, the Office of Undergraduate Studies, the Office of the Registrar, the Graduate School, and the Office of Institutional Research Planning & Assessment (IRPA). Early in its review, the committee met with representatives from Undergraduate Studies, the Office of the Registrar, and the Graduate School.

Through its consultations, the committee also learned that the implementation of these guidelines were successful because the University was required to act quickly and deliberately, citing the need to quickly partner with the Division of Information Technology to allow students to make changes to their grading methods as an example. However, it was also noted that having all students opt in for a regular grade in Spring 2020 was potentially a detrimental decision for students.

The APAS Committee deliberated on the information it reviewed and collected through its consultations. During extensive committee deliberations, it was noted that future emergencies might have different impacts than from the current pandemic, being of uncertain scope (different communities), scale (local, regional, national, or global), or duration. Committee members also noted that response development is dependent on the time (during the year) in which an emergency occurs. The need for a rapid response is further complicated by the intersection of issues such as grading, public health and safety, physical and virtual infrastructure, mental health, equity, legal guidance, and more.

Ultimately, committee members stated support for recommending principles that should be followed during an emergency rather than codifying the current or any specific Emergency Pass-Fail guidelines. Committee members agreed that a specific policy would be counterproductive when decision-makers had to respond quickly to a unique future crisis.

The committee also reached consensus that it was important to capture any relevant institutional knowledge associated with the current Covid19-pandemic, and formulate a set of guiding principles that could be used to develop any future academic guidelines during any type of future emergency.

The APAS Committee formed a working group with the goal of developing draft recommendations for the full committee's consideration when it reconvened in early 2022. The working group deliberated during winter, 2021 on the information that the committee had compiled thus far; notes from its consultations; and two relevant scholarly articles co-authored by one of the ex-officio members of the committee, Brooke Liu.

Liu, B. F., Shi, D., Lim, J. R., Islam, K., Edwards, A. L., Seeger, M. (2021). When Crises Hit Home: How U.S. Higher Education Leaders Navigate Values During Uncertain Times. *Journal of Business Ethics*. <https://doi.org/10.1007/s10551-021-04820-5>.

Liu, B. F., Lim, J. R., Shi, D., Edwards, A. L., , Islam, K., Sheppard, R., Seeger, M. (2021) Evolving Best Practices in Crisis Communication: Examining U.S. Higher Education's Responses



to the COVID-19 Pandemic. *Journal of International Crisis and Risk Communication Research*, volume 4(no. 3), pages 451–484. <https://doi.org/10.30658/jicrcr.4.3.1>.

The working group found these articles to be incredibly insightful and used them as a foundation for its draft recommendations. The work represented in these articles by Dr. Liu and her colleagues expressed the types of principles that the working group was hoping to formulate on behalf of the full committee. As a result, one of the major recommendations associated with best practices, is based entirely on those identified in Dr. Liu et al. article, *Evolving Best Practices in Crisis Communication: Examining U.S. Higher Education’s Responses to the COVID-19 Pandemic*. The working group also developed additional recommendations based on best practices from the University’s own trials through the three semesters during the height of the pandemic and principles associated with prioritizing health and safety, including mental health; engaging relevant units and subject matter experts; consideration of marginalized communities; engagement of shared governance; and an ongoing feedback mechanism.

The APAS committee reviewed and discussed the working group’s draft recommendations at its meeting on February 2, 2022. Following deliberation and some minor revisions, the APAS Committee unanimously approved the recommendations detailed below in the Recommendation section of this report.

## RECOMMENDATIONS

---

Following a thorough review, the APAS committee makes the following recommendations:

1. The University should remove the current Interim Emergency Pass/Fail Guidelines from use in future emergencies.
2. The APAS Committee recommends that the University should follow a broad set of principles to help guide the development of any future academic guidelines based on the type of emergency that the University is facing at the time.
  1. Review past emergency academic guidelines;
  2. Consult with Big 10, USM, and other institutions;
  3. Consult with relevant subject matter experts; and
  4. Maintain a balance between academic rigor and flexibility.
3. The APAS Committee recommends that the University should communicate with or engage all relevant areas based on the type of emergency, including student affairs, faculty affairs, academic policy, mental health, and staff experience.
4. The APAS Committee recommends that the University’s process for Crisis Management for future emergencies should include consideration of impact on academic affairs and marginalized communities through the engagement of academic leaders and shared governance organizations.
5. The APAS Committee recommends that during any major future emergency, the University should consider implementing the following best practices in Crisis Communication:
  1. Take a process approach.

2. Engage in pre-event planning.
  3. Lead with an ethic of care.
  4. Meet stakeholders' information needs.
  5. Communicate with transparency.
  6. Collaborate with credible sources.
  7. Form partnerships with stakeholders.
  8. Empower stakeholders.
  9. Listen and acknowledge stakeholders' concerns.
  10. Accept uncertainty and help stakeholders accept uncertainty.
6. As any emergency situation evolves, the University should continue to seek input from affected groups and entities and communicate changes in procedures in a clear and timely fashion.

## **APPENDICES**

---

Appendix 1 — Charge from the Senate Executive Committee

Appendix 2 — Current Interim Emergency Pass-Fail Guidelines

Appendix 3 — When Crises Hit Home: How U.S. Higher Education Leaders Navigate Values During Uncertain Times. (Liu, B. F. et al.)

Appendix 4 — Evolving Best Practices in Crisis Communication: Examining U.S. Higher Education's Responses to the COVID-19 Pandemic. (Liu, B. F. et al.)



**Review of the Interim Emergency Pass/Fail Guidelines  
(Senate Document #21-22-15)**

**Academic Procedures & Standards (APAS) Committee | Chair: John Lea-Cox**

The Senate Executive Committee (SEC) and Senate Chair Williams request that the Academic Procedures & Standards (APAS) Committee review the University of Maryland Interim Emergency Pass/Fail Guidelines.

The APAS Committee should:

1. Review the Emergency Pass/Fail Guidelines for the University of Maryland ([Senate Document #20-21-33](#))
2. Review the Amendment to the University of Maryland Grading Symbols and Notations Used on Academic Transcripts Policy ([Senate Document #20-21-32](#)).
3. Review the Review of the Interim University of Maryland Grading Symbols and Notations Used on Academic Transcripts Policy ([Senate Document #20-21-38](#)).
4. Review similar emergency pass/fail guidelines at Big Ten and other peer institutions.
5. Review data from the Office of the Registrar regarding the implementation of the interim Emergency Pass/Fail Guidelines and the number of courses that students chose to take pass/fail during the Spring 2021 semester.
6. Review any available data on the impact of pass/fail grades on student success rates in subsequent years and with subsequent courses that build on the same subject material, and the impact on the success of our graduates' competitiveness for employment opportunities and in the admissions process for graduate programs.
7. Consult with a representative of the Office of the President.
8. Consult with a representative of the Senior Vice President and Provost.
9. Consult with a representative of the Office of Undergraduate Studies.
10. Consult with a representative of the Office of the Registrar.
11. Consult with a representative of the Graduate School.
12. Consult with a representative of the Office of Institutional Research Planning & Assessment (IRPA).
13. Consider whether the Interim Emergency Pass/Fail Guidelines, including the 7-credit limit for automatic approval of pass/fail, are general enough that they can be utilized for any type of significant emergency conditions or whether specific elements of the guidelines should be able to be adapted to suit the needs of the emergency.

14. Consider whether the Interim Emergency Pass/Fail Guidelines address all of the relevant principles related to grading that the University would want to address during any potential significant emergency conditions.
15. Consider whether the use of Emergency Pass/Fail Guidelines may have a positive or detrimental impact on both the short and long-term educational goals of students.
16. Consult with a representative of the Office of General Counsel on any proposed revisions to the guidelines.
17. If appropriate, recommend whether the guidelines should be removed or if they should be revised and maintained as a potential option to be utilized in future significant emergency situations.

We ask that you submit a report to the Senate Office no later than **February 4, 2022**. If you have questions or need assistance, please contact Reka Montfort in the Senate Office, [reka@umd.edu](mailto:reka@umd.edu).



These pass/fail guidelines may be used during emergency conditions at the University of Maryland. They can only be invoked when the President and the Senior Vice President and Provost deem it appropriate. At all other times, the University's standard grading policy will be followed.

1. Students will be able to **opt in** to courses that they wish to take as pass/fail.
2. Students will receive automatic approval when they choose the pass/fail option for up to seven (7) credits/semester.
3. Students experiencing exceptional circumstances may request an exception to the seven-credit limit through their advisor and with the approval of their dean.
4. The deadline for both choosing the pass/fail grading option and dropping a course with a W in the course will be extended until 10:59 PM EST on the last day of classes.
5. Faculty will be encouraged to keep in-course grades current, so students have a good idea of the grade they have earned in the course by the last day of classes.
6. Faculty will not be aware of which students in their course are taking it pass/fail.



# When Crises Hit Home: How U.S. Higher Education Leaders Navigate Values During Uncertain Times

Brooke Fisher Liu<sup>1</sup> · Duli Shi<sup>1</sup> · JungKyu Rhys Lim<sup>1</sup> · Khairul Islam<sup>2</sup> · America L. Edwards<sup>3</sup> · Matthew Seeger<sup>2</sup>

Received: 7 November 2020 / Accepted: 7 April 2021  
© The Author(s), under exclusive licence to Springer Nature B.V. 2021

## Abstract

Against the backdrop of a global pandemic, this study investigates how U.S. higher education leaders have centered their crisis management on values and guiding ethical principles. We conducted 55 in-depth interviews with leaders from 30 U.S. higher education institutions, with most leaders participating in two interviews. We found that crisis plans created prior to the COVID-19 pandemic were inadequate due to the long duration and highly uncertain nature of the crisis. Instead, higher education leaders applied guiding principles on the fly to support their decision-making. If colleges and universities infuse shared values into their future crisis plans, they will not have to develop a moral compass on the fly for the next pandemic. This paper suggests the following somewhat universal shared values: (1) engage in accuracy, transparency, and accountability; (2) foster deliberative dialog; (3) prioritize safety; (4) support justice, fairness, and equity; and (5) engage in an ethic of care. To navigate ethics tensions, leaders need to possess crisis-relevant expertise or ensure that such expertise is present among crisis management team members. Standing up formal ethics committees composed of diverse stakeholders also is instrumental in navigating tensions inherent in crises. The next pandemic is already on the horizon according to experts. Through infusing values into future crisis plans, higher education leaders can be confident that their responses will be grounded in their communities' shared values.

**Keywords** Communication · Qualitative · Coronavirus · Disasters · Ethics · Leadership

As the coronavirus disease (COVID-19) spread around the world in spring 2020, thousands of U.S. universities were forced to migrate online, with little to no prior telework

experience (Hess, 2020). Few, if any, higher education leaders were adequately prepared to respond to the COVID-19 pandemic. As *The Chronicle of Higher Education* (2020) noted when covering the pandemic, “The biggest issue that college and university officials face in 2020 may be one that few of them ever thought about before.”

Crises, like the COVID-19 pandemic, are “high impact events that often strip an organization to its core values” (Seeger & Ulmer, 2001, p. 374). Because crises are uncertain, chaotic events, they involve discretionary decision-making by organizational leaders (Boin & Nieuwenburg, 2013). During crises, senior university administrators can serve as sources of guidance, strength, and resilience as their institutions' moral voices (Gigliotti, 2016; St. John III & Pearson, 2016).

One reason why some higher education leaders may have struggled to respond to the COVID-19 pandemic and the related ethical tensions is that there is minimal guidance on how higher education institutions should respond to crises (CDC, 2020a; Gigliotti, 2016; Moerschell & Novak, 2020). Likewise, how leaders should integrate ethical

---

✉ Brooke Fisher Liu  
bflu@umd.edu

Duli Shi  
shiduli@umd.edu

JungKyu Rhys Lim  
rhyslim@umd.edu

Khairul Islam  
kislam@wayne.edu

America L. Edwards  
americaedwards@umail.ucsb.edu

Matthew Seeger  
matthew.seeger@wayne.edu

<sup>1</sup> University of Maryland, College Park, Maryland, USA

<sup>2</sup> Wayne State University, Detroit, Michigan, USA

<sup>3</sup> University of California Santa Barbara,  
Santa Barbara, California, USA



decision-making into their crisis management is a well-recognized research gap (e.g., Coldwell et al., 2012; Sellnow & Seeger, 2020; St. John III & Pearson, 2016), especially for public health crises like pandemics (Thomas & Young, 2011; Thomas et al., 2007). To fill these knowledge gaps, we investigate how U.S. higher education leaders have centered their crisis management on values and guiding ethical principles in response to the COVID-19 pandemic. Specifically, we conducted 55 in-depth interviews with leaders from 30 U.S. higher education institutions, with most leaders participating in two interviews.

The central finding from our interviews is that to be prepared for future mega-crises like pandemics, higher education institutions need to explicitly integrate their community's shared values into future crisis plans and planning activities. Furthermore, higher education institutions need to co-construct these shared values with their key stakeholders, which include faculty, staff, students, and other community members. Standing up formal ethics committees is one way to institutionalize shared values into crisis responses. Leaders also need crisis-specific knowledge such as public health expertise. If they do not possess this knowledge, they need to ensure that crisis management team members can fill this gap.

The next section of the paper provides a synthesis of the literature that grounded our research questions. In each section, we thematically summarize the extant research, followed by our research questions. We then delve into our data collection and analysis approach, followed by the paper's results. In the final section of the paper, we cover the implications of the results for research and practice, along with the paper's limitations.

## Literature Review

### Missions, Values, and Crisis Management

The first research question examines how U.S. higher education institutions responded to the pandemic. In this literature review section, we synthesize research on how missions and values affect organizational crisis management.

Missions explain an organization's purpose, goals, behavior standards, and values (Campbell & Yeung, 1991). A clear and meaningful mission can enhance mutual understanding among an organization's leaders and stakeholders, and support successful business operations (Cochran & David, 1986). In a crisis context, missions can help organizations respond strategically, sustain employee morale, and communicate a shared sense of value among organizational leaders and stakeholders (Liu et al., 2012; Ulmer & Sellnow, 2000). In sum, prior research has established the importance of missions in organizations' crisis responses, but has not delved

deeply into how missions guide multiple organizations' responses to the same crisis, as we do in this examination of the COVID-19 pandemic. We now turn to a discussion of how organizational values connect with crisis management.

Organizational values are a significant part of organizations' missions; values are "the beliefs and moral principles that lie behind the company's culture" (Campbell & Yeung, 1991, p. 15). Through values, organizations establish norms and behavior standards (Campbell & Yeung, 1991). Organizational values are "both enduring and capable of change" (Bourne & Jenkins, 2013, p. 498). We propose that crises are moments when values may evolve. Prior research finds that strong organizational values support organizations' ethical decision-making (Pearson et al., 1997; Prewitt & Weil, 2014). Overall, there is a shared understanding of the importance of strong organizational missions and values in responding to crises, but little empirical research on this topic. Thus, the following research question is addressed.

RQ1: What are the roles of (a) missions and (b) values in U.S. higher education institutions' responses to the COVID-19 pandemic?

In addition to strong organizational missions and values, adherence to appropriate ethical frameworks, guidance, and codes can help organizations manage crises. Indeed, developing plans that address ethical challenges and conducting training are essential to help organizations navigate sticky situations inherent in crises, as we further discuss below.

### Ethics, Crisis Planning, and Crisis Responses

Crisis, as we noted, is a context fraught with ethical questions and tensions. These may involve accusations of wrongdoing, treatment of those harmed, issues of equity and fairness, questions about honesty and transparency, as well as tensions over financial costs (Sellnow & Seeger, 2020). Training can foster organizational reflection about ethical challenges and establish the crisis management team's commitment to ethical responses (Wynia, 2007). An essential part of preparation is developing a crisis management plan (Coombs, 2019). Yet, research reveals that few crisis plans adequately address how to navigate ethical dilemmas inherent in public health crises (Braun et al., 2009; Thomas & Young, 2011; Thomas et al., 2007). Furthermore, ethics are typically only considered in plans after transgressions occur, rather than being integrated proactively into routine preparation activities (Thomas & Young, 2011). Instead, plans and other preparedness activities should include clear and well-documented answers to common ethical questions and issues along with scenarios to best prepare leaders for public health emergencies (Leider et al., 2017; Phillips et al., 2009). While inadequate attention has been given to ethics and its role in crisis decision-making (Sellnow & Seeger, 2020), there is

a growing body of scholarship on principles to guide crisis decision-making. We synthesize that scholarship below.

### Guiding Principles

**Be Virtuous** A guiding ethical principle for university administrators is committing to the highest level of integrity (The American Association of University Administrators, 2017). Integrity is generally framed in terms of virtue ethics (St. John III & Pearson, 2016). Virtuous crisis responses include considering the immediacy of the response and providing support to those impacted through an ethic of care (Louden, 1992; Seeger & Ulmer, 2001; Sellnow & Seeger, 2020). Virtuous leaders exhibit a strong sense of social responsibility, accountability, and justice (Leider et al., 2017; Sellnow & Seeger, 2020). These leaders do so by consistently prioritizing stakeholder well-being over legal obligations (Phillips et al., 2009; Seeger & Ulmer, 2001; Streifel et al., 2006). Through embracing an ethic of care, virtuous leaders prioritize building and sustaining “morally sound relationships” with stakeholders (Maak & Pless, 2006, p. 5; Pullen & Vachhani, 2020). Virtuous leaders use a well-developed sense of responsibility to center on purpose, principles, people, power, and relational intelligence (Coldwell et al., 2012; Maak & Pless, 2006; Varma, 2020).

**Consider the Consequences** Organizational members should reflect on the consequences of their communicative behaviors for their stakeholders and society (Heath, 2006; Huang, 2004). This includes careful consideration of the benefits and burdens associated with response decisions and distributing these benefits and burdens fairly (Braum et al., 2009; Phillips et al., 2009). Two ethical theories guide considering the consequences: utilitarianism and justice. Utilitarianism broadly considers the greatest good for the greatest number, while justice considers fairness for all stakeholders (St. John III & Pearson, 2016). In public health emergencies, there is an inherent tension between protecting the health and safety of communities (i.e., utilitarianism) while considering the liberties and unique needs of individuals residing in those communities (i.e., justice) (Braum et al., 2009).

To navigate the impacts of crises, managers should consider fair access to information, treatment, resources, fair reimbursement procedures for patients, and reasonable liability protections for those responding to public health crises (Braum et al., 2009; Hodge et al., 2013). Consideration should assess whether or not implementing a response measure would cause greater harm, and if there are less restrictive options that could accomplish the same public health objectives (Braum et al., 2009; Hodge et al., 2013). Similarly, a guiding ethical principle for university administrators is upholding the values of fairness and equity, while serving

all members of campus communities (American Association of University Administrators, 2017).

**Be Transparent** According to the principle of significant choice, organizations should communicate as completely and as accurately as possible to help community members make important decisions (Sellnow & Seeger, 2020; Streifel et al., 2006). In doing so, leaders should be cautious of claims of urgency and, instead, should make legitimate claims that are transparent (Leider et al., 2017; Rawlins, 2009; Spector, 2019).

Determinants of transparency include timeliness, relevance, accuracy, reliability, and clarity (Rawlins, 2009). Organizational transparency is “the reputation an organization holds for transparency;” this reputation emerges from media coverage, recommendations from others, and stakeholders’ prior interactions with the organization (Auger, 2014, p. 339). A guiding ethical principle for university administrators is striving for accuracy and transparency (American Association of University Administrators, 2017).

**Engage in Deliberative Dialog** Prior research emphasized the importance of deliberative dialog with key stakeholders (Braum et al., 2009; Huang, 2004). Engaging in deliberative dialog enables leaders to understand stakeholders’ diverse and sometimes competing crisis interpretations along with the underlying issues that spark crises (Braum et al., 2009; Spector, 2019). Conducting deliberative dialog is especially important for understanding stakeholders’ “culturally influenced expectations” (St. John III & Pearson, 2016, p. 28; Littlefield et al., 2009). Deliberative dialog also has a role in crisis preparedness. Ethical deliberation through rule-based exercises may help crisis management teams prepare to make ethical decisions (Boin & Nieuwenburg, 2013), including how to seek support in making ethical decisions (American Association of University Administrators, 2017). Whether deliberative dialog occurs during the planning or response phases, the goal is to engage in discussions to improve ethical decision-making during crises rather than to obtain consensus (Boin & Nieuwenburg, 2013).

### Codes of Ethics

Codes of ethics are one way to institutionalize guiding principles so that ethics guide decision-making during crises (American Public Health Association, 2019; Erwin, 2011; Thomas & Dasgupta, 2020). Codes articulate an organization’s norms and values and can be instrumental in guiding ethical crisis responses (Stevens & Buechler, 2013). In public health emergencies, codes are important for supporting consistent decision-making given that any decision can have profound impacts on the community and individual outcomes (Hodge et al., 2013). Simply having a code, however,

does not guarantee an ethical crisis response (Stevens & Buechler, 2013). To be effective, codes should be transformational (i.e., focus on organizational change), instructional (i.e., provide actionable information), and relational (i.e., facilitate trust in an organization and its leaders) (Erwin, 2011; Stevens & Buechler, 2013).

In addition to the organizational codes of ethics, professional codes of ethics guide the goals and beliefs of a group of professionals, and frequently require “higher standards than are legally mandated” (Stevens, 1994, p. 64). Shortly before the emergence of COVID-19 in China, the American Public Health Association (2019) published a revised code of ethics. The code established the following core values: (1) professionalism and trust, (2) health and safety, (3) health justice and equity, (4) interdependence and solidarity, (5) human rights and civil liberties, and (6) inclusivity and engagement. Given the minimal prior research on how higher education institutions should prepare for and respond to crises, especially in public health contexts (Gigliotti, 2016; Moerschell & Novak, 2020), we ask:

RQ2: What guiding principles, if any, have U.S. higher education institutions employed to ethically respond to the COVID-19 pandemic?

RQ3: To what extent have codes of ethics guided U.S. higher education institutions’ responses to the COVID-19 pandemic?

RQ4: How have U.S. higher education institutions responded to ethical tensions during the COVID-19 pandemic?

## Method

To explore our research questions, we conducted in-depth interviews with 37 leaders from 30 U.S. higher education institutions between May and October 2020. In total, we conducted 55 interviews.

## Participants

We used a combination of snowball sampling and maximum variation to secure interviews with a diverse group of higher education leaders. First, a list of participants was developed through personal connections. Given that it is difficult to access leaders during crises (Ha & Riffe, 2015), the researchers used their personal experience in higher education administration to gain access to the first round of interviews.

The team then supplemented their networks by purposefully seeking leaders at institutions that were not well represented in the first round of interviews. Specifically, the research team used the Carnegie Classifications of

Institutions of Higher Education (The Carnegie Classification of Institutions of Higher Education, 2020) and emailed leaders at the institution types not well represented in the original sample to request an interview. In total, the team reached out to leaders at 137 institutions to secure 29 interview participants. The team ended recruitment when ongoing data analysis indicated theoretical saturation (Corbin & Strauss, 2015). All leaders provided written consent to participate.

To be included in our sample, participants had to be involved in their institutions’ crisis response to COVID-19. Participants served in roles such as chancellors, presidents, vice presidents, provosts, deans, and professors at a range of institution types, as classified by the Carnegie Classifications of Institutions of Higher Education (2020). We recruited a variety of participants from each category to ensure we had a representative sample, knowing there are differences in enrollment size, research funding, graduate program access, and so on.

## Interviews

Prior to conducting interviews, participants completed a brief survey, which helped structure the interview questions. The survey was conducted via qualtrics.com and included 22 questions. Most notably, 84% of participants ( $n = 21$ ) were employed at institutions that had pre-existing crisis management plans and 71% of those participants ( $n = 15$ ) answered that their plans included infectious disease outbreaks. Four participants (19%) did not know if the plans included infectious disease outbreaks, while only two participants said their plans did not mention such outbreaks.

After participants completed the survey, we conducted initial semi-structured interviews with 37 participants from 30 institutions. These initial interviews lasted from 20 to 61 min, with an average of 46 min. The same question guide was used across all interviews. We also tailored interview questions based on participants’ survey responses (e.g., asking how an institution used preparedness plans when a respondent indicated that they had such plans in the pre-interview survey). Example questions from the interview guide include: “What have been your guiding principles or values in your continued response to COVID-19?” and “Are there particular tensions or points of conflict that have emerged as your school or college has responded to COVID-19? If so, what are those”?

Each interview was conducted and recorded via Zoom and then professionally transcribed. Three to 10 weeks later, we conducted follow-up interviews with leaders from 25 of the 30 original institutions. These interviews averaged 24 min in length, with a range of 14–39 min. One participant

had retired, one participant declined to participate, and three participants declined to respond to follow-up requests.

## Analysis

The object of analysis for this research is U.S. higher education institutions' crisis responses to the COVID-19 pandemic. This approach reflects the literature on crisis management, and the view that communication processes cannot be separated from the crisis response (Coombs, 2019; Sellnow & Seeger, 2020).

With these assumptions in mind, the research team used the qualitative analysis software provided by their institutions (NVivo and Atlas.ti) to inductively and deductively code transcripts (Lindlof & Taylor, 2011). To deductively code, the team created an initial list of codes from the literature review, which included codes such as mission, vision, code of ethics, tensions, crisis plan, and guiding principles. The guiding principles code included the following subcodes: be virtuous, consider the consequences, be transparent, and engage in deliberative dialog.

Next, team members engaged in a first round of coding to apply the deductive codes from the literature review, and then met to discuss codes that emerged inductively. At that stage, we added the following codes: teaching-focused institution, research-focused institution, organization type (i.e., religiously affiliated institution, public vs. private, and research-focused institution), organizational size, shared governance, and follow a track of value. We also added subcodes to some of our initial deductive codes. For example, for the guiding values code, we added the following subcodes: prioritize safety and support justice, fairness, and equity.

After revising our codes, the team divided into small groups. Two team members coded for each research question. We employed Corbin and Strauss's (2015) grounded theory analytics strategies, which include (a) constantly questioning the data through re-analysis and developing provisional answers to the research questions; (b) making comparisons among participants' insights and the prior literature; (c) employing researchers' life experiences to understand the data; (d) looking carefully at participants' language choices; (e) looking for outliers and negative cases; (f) using participants' own words to label codes when possible; and (g) reflecting on the biases and assumptions that researchers may bring to the analysis and pushing back on those "red flags" (p. 98). The next section presents the findings that emerged from the team's analysis. In reporting the findings, we used pseudonyms to protect the interview participants' identities.

## Findings

### Missions and Values (RQ1a and RQ1b)

The first research question asks about the roles of U.S. higher education institutions' missions and values in their responses to the COVID-19 pandemic. The results showed several prominent themes, as summarized below.

### Organizational Identity

Half of the participants mentioned how their institutions' identities drive how they have responded to the pandemic. In other words, the question of "who they are," as reflected in their missions, determines their COVID-19 responses. For some participants, identity comes from their institutions' religious affiliation. For example, Drew shared:

We are a Vincentian university. So, we consider ourselves as mission-driven. We're not here to make money. We're not here to make great discoveries or do research. We're here to teach students. I think it's actually the Catholic tradition, which is centered on how do you make people's lives better? That's the entire reason that our university exists.

For others, their organizational identities come from whether their institutions are public or private. Riley commented: "We're a public institution and that means we have to serve the public good." Riley further noted that serving the public good including adapting in the face of the pandemic. Riley shared:

And we have a brand new medical school. This year we graduated our very first class of doctors who graduated two months early so that they could do their final clinical work in hospitals working on COVID-19.

As Dakota explained, this private (versus public) organizational identity could determine an institution's overall values:

I think a little bit about my experience being at private institutions versus a public institution is what you consider your values and what you consider your ethical framework in private institutions.

Institutional identity also comes from organizational size. Leaders of small institutions emphasized that their organizations prioritize making personal connections with students, which is challenging during a pandemic. As Gracen summarized:

We are a community that wants to connect people. You have a hard time connecting people from a social distance perspective...And so we're trying to figure out

how do you package this unique, personal experience within the complement of safety and health?

Another important part of organizational identity are the specific populations that institutions serve, which include populations of color, international students, veteran populations, first-generation college students, and students with special needs (e.g., students with hearing loss). As Nolan mentioned: “And so our response has to be considered within that cultural and linguistic frame [of the population that we serve].” Similarly, Blake shared: “Veterans for us is an area of specific need because their scholarships and their requirements are different from a general scholarship student.”

Leaders at institutions with strong research missions prioritized bringing research operations back for their graduate students and faculty. Owen reflected:

I hadn't thought about it until it was happening, a lot of these are grant-funded research projects and they have an end date...The worry was that if they keep paying students on these grants, the money is going to run out and the work isn't done based upon the expectations of what they were awarded.

Like many leaders, Avery noted the importance of bringing back research operations, as well as the relative ease of doing so: “Bringing back research is probably the safest and easiest thing to do. Most [faculty] are used to working in environments where it's just them and they often follow rules, and they don't want people to take them away from their research.”

### Main Missions

Participants mentioned two main missions: the academic mission that existed pre-pandemic and the health and safety mission that has dominated COVID-19 responses. Speaking to the importance of prioritizing the academic mission, Nolan commented:

A commitment to students and their education, all throughout the spring semester and in our planning in summer and our planning for fall. A commitment to providing the highest quality remote education is a key message.

Many participants discussed these twin academic and health/safety missions as intertwining. For example, Parker mentioned:

So trying to do both, provide them with the product that they're paying for at the same time as providing them with the safety that they deserve and that we're committed to doing.

Leaders further noted that the COVID-19 pandemic has challenged prioritizing their educational missions with foregrounding the health and safety of their campus communities. Hunter explained:

The mission to educate students is something that almost feels like it's not exactly on par with health and safety sometimes. For instance, if there is a snow emergency we sort of do all we can to stay open...I think that it was quickly realized that this [COVID-19] was a major health and safety issue.

### Planning, Codes of Ethics, and Guiding Principles (RQ2 & RQ3)

The second research question asks what guiding principles U.S. higher education institutions have employed to ethically respond to the COVID-19 pandemic. The third research question asks to what extent codes of ethics have guided U.S. higher education institutions' responses to the pandemic. Below we summarize the findings in response to these questions.

#### Inadequate Relevant Prior Planning

As noted in the method section, 84% of our participants are leaders at institutions that had crisis management plans. Yet, our leaders agreed that these plans were not as helpful as they could be for COVID-19. Morgan most succinctly characterized the situation as follows: “We're building the plane while it's in the air.” Only a few participants indicated that they used their crisis plans to respond to COVID-19, typically only in the early stages of their response. For example, Hayden recalled:

We would go back and use it [the plan] kind of as a checklist because things were moving really fast for a few weeks in March, but we were able to circle back to the plan and make sure that we hadn't left anything out.

Most participants, however, indicated that their plans were inadequate due to the pandemic's unique and massive impacts on operations, the long duration of the crisis, and the unpredictable nature of the pandemic. Speaking about their institution's inadequate planning, Blake explained: “We had planned for a crisis that didn't really take place with as much disruption.” Like other participants, Parker noted the unique nature of the COVID-19 pandemic. Parker shared: “We do have plans to evacuate the campus, but this wasn't an evacuation situation. So, very novel for us.” Many participants commented on the unpredictable nature of the pandemic, which made prior plans inadequate. As Jo explained:



We had crisis management plans. There was a pandemic plan. Were they adequate? No. And was it possible to address this type of thing in a totally proactive way? No, I don't think anybody would've guessed that this would go the way it went.

Furthermore, according to the participants, none of their institutions' plans included codes of ethics or other formal ethics components. Therefore, it is perhaps unsurprising that none of the participants discussed formal codes of ethics that guided their COVID-19 responses. Instead, leaders advocated for following a track of value through guiding principles, as further discussed below.

### Follow a Track of Value

Rather than following an established crisis plan, several participants advocated for developing guiding values for their COVID-19 responses. In some cases, this was because no plan existed or existing plans did not adequately address a pandemic. As Blake shared, "We followed a track of value rather than a crisis plan. We didn't have a plan." As another example, Sam observed, "We've really had to go back to the drawing board and say, 'What does the ethical framework look like for crisis management?'"

While developing a track of value ideally happens in the crisis planning phase, leaders noted that these values can also be developed during a crisis. Nolan recalled, "We set up a series of guiding principles to guide how we wanted this work to happen and while the financial aspect was obviously important, the guiding principles really reminded us what was most important." Similarly, Bailey shared that their institution's president set up two important committees to guide their response. The first committee was a group of on-campus public health and medical experts. The second was an ethics and privacy committee. Bailey elaborated by noting:

And that second committee was asked to consider some of the ethical and privacy issues associated with coping with a pandemic, planning for a fall semester and what were the features that this ethics group felt were important to keep in mind and to really make sure we were attentive to, as we were making our plans.

Although only a few participants discussed forming ethics committees or developing formal value statements to guide their institutions' COVID-19 responses, all participants shared how values guided their responses, as synthesized below.

### Guiding Values

**Engage in Accuracy, Transparency, and Accountability** Almost all of the participants prioritized the intersection of accuracy and transparency. A few participants further linked accuracy and transparency to accountability. Parker summarized this intersection as follows:

Transparency continues to be a base principle with a few caveats in that I'm making sure that what we present is accurate and easy to understand and not so easy to misinterpret. So that part's been tough...And it's not about not being willing to share it. It's not being willing to share information that we can't effectively educate them on. Positivity rate is an example of that. We can say we had 6 out of 10 cases positive, so somebody could conclude that 60% positivity rate. It's like, 'No, that was a small scale population.' Anyway, there's a lot of nuances that are complicated.

Multiple participants discussed the challenge of being accurate and transparent while dealing with a rapidly evolving situation. As Alex observed:

We're guessing just like everybody else. We're certainly using data and research and saying this is our best estimate of where we need to be. But people are looking for guarantees...I can make a best guess, but I can't guarantee.

To balance the need for accuracy, transparency, and a reasonably swift crisis response, Emerson recommended an "80% solution" rule: "Get people to accept that they can't have all the answers. So I always say when you get to an 80% solution, it's time to move. That's it. You don't have time for more." Nolan recommended delaying decisions whenever safe to do so: "If you have the capacity, if something is working at the moment, there are many times when it doesn't pay to make that instantaneous change as long as you're comfortable with where you are." Like other leaders, Gale advised not over-promising: "I tried to be very careful to not say too much or to not make promises. Don't say we're going to have access to 10,000 masks if we don't know if that is possible." Several participants noted one advantage that research universities have. As Casey explained, these institutions can "quickly pull in faculty specialists" in areas like risk communication and public health to support accurate and transparent responses.

Leaders described factors that contribute to building a campus culture of trust in leadership, including building strong pre-crisis relationships and having leaders with crisis-specific knowledge. Hunter summarized these two factors as follows:



It's built on trust, and it's trust that was developed previously and that gets reinforced through as much transparency and communication...It helps to have a provost who's a physician and an economist...And I think that that buys us a lot of credibility because he understands the science and the public health issues, but he also understands the importance of maintaining our academic enterprise.

A common thread among participants was the added credibility that campus leaders brought to the table when their expertise included public health or medicine.

**Foster Deliberative Dialog** All of the participants discussed the importance of engaging in deliberative dialog with their primary stakeholders: students, faculty, and staff. Deliberative dialog most frequently occurs through virtual town hall meetings, but also through asynchronous vehicles including stakeholder surveys, anonymous forms to report concerns, and establishing dedicated email addresses for COVID-19 concerns. Lee characterized the importance of deliberative dialog as follows, a sentiment shared by most participants:

We've done just an incredible amount of virtual town halls, where we're literally just taking questions from people, and those have been targeted to different audiences. Some have been for all on campus, some have been just for instructors, some of them for parents, some of them for students, some have been for student affairs staff.

Dakota explained why having town halls and other opportunities for feedback is critical: "Ultimately, I think what it's helped us is to realize that involving more people and being more open helps identify where there are issues that you might not have thought of yourself, as well as where miscommunication might happen."

In some cases, engaging in deliberative dialog focused on listening and expressing compassion for stakeholders. In other cases, participants explained how deliberative dialog had a direct impact on their pandemic response, including safety protocols, message strategies, and leadership presence on campus. A few leaders discussed how engaging in deliberative dialog allowed them to connect with groups that have been historically marginalized on their campuses. As Taylor commented:

Getting people to realize that of all the ways we could be spending part of our time, even in the midst of this crisis, actively engaging each other and try to move past the structures that have impeded the progress of various groups in our society is incredibly important.

While the vast majority of participants discussed planned deliberative dialog, a few participants showcased the role

of spontaneous deliberative dialog in their crisis responses. For example, Sam noted:

I try to be omnipresent...I'll stop in before a class begins and ask them how it's going, have you had any problems, can we support you in any way differently? So, just being very active and very inclusive and focused on people and human relationships, which I found in my own career really matters.

Furthermore, almost all participants emphasized the critical benefits of deliberation with their peers in leadership positions. Peer consultation includes formal groups, like peer members of associations and peer leaders at institutions within the same state or university system. For example, Bailey noted:

The other group that we did, I think have a lot more interaction with and this is largely the presidents interacting, was the Association of American Universities... It was basically an opportunity for presidents to share in a confidential setting what the concerns were, what the challenges were going to be, and what the opportunities look like for the fall.

However, some participants noted a few drawbacks to dialog with peers. Avery shared that sometimes there were too many peer-to-peer dialog requests and that it was important to focus on the "day job that's really busy." Kelly noted the role of "prestigious institutions" and observed that these institutions "led the way and I think everybody else followed." Despite all the dialog that participants engaged in, multiple participants expressed frustration that deliberative dialog does not always lead to the desired outcomes, especially student compliance with safety guidance.

**Prioritize Safety** All participants discussed the imperative of prioritizing their stakeholders' safety, especially the safety of students, faculty, and staff. As Morgan noted:

I think number one is safety. That's the thing that stands out. I told my own leadership team that this is not a time for popularity. We have to throw popularity out the window and do what's right. That's based upon data-driven decisions and people being safe.

Participants shared a variety of measures to prioritize safety. Some of these measures involve compliance initiatives such as required COVID-19 tests, safety pledges, and safety videos. Institutions also have trained students to serve as peer enforcers, launched social media compliance campaigns, and enacted consequences for those who violate established expectations. For example, discussing one popular approach to promoting on-campus safety and compliance, Owen shared:

We're doing a contest where on social media, you could give in either artwork, a poem, a video, some way that you are protecting your health and the health of others. And then every two weeks we're going to pick a winner and then they get AirPods or a lawn chair as a surprise.

Other measures include canceling spring break, suspending study abroad opportunities, moving some or all classes online, limiting dorm density, limiting dining services, lowering staff presence on campus, and moving events online. While most participants discussed social distancing measures their institutions have taken along with purchasing personal protective equipment as positive steps, a few participants emphasized the importance of making science-based decisions. For example, Drew said:

We're not going to do things just to be, as we call it, 'TSA [Transportation Security Agency] theater.' When you think about going to the airport. We're only going to do things that are backed up by science and are effective. We're not going to do it just because it looks good.

For many leaders, prioritizing safety needs to be balanced with the fiscal realities of the pandemic. A few participants further shared that their institutions' fiscal limitations directly impact their capacity to enact safety measures. As Sam explained:

I think one of the things that really separates the haves and the have nots is the decision whether they're going to test students and whether they're going to test employees and do scanning. For those institutions that have a hospital or a hospital system, it's much easier for them to do that.

Furthermore, several participants conveyed that while some federal and state guidance certainly helped them decide how to respond safely to the pandemic, they also had to make judgment calls. As Ezra noted,

Recently the governor issued another executive order allowing indoor eating to a certain capacity, but we're not allowing indoor eating in our dining facilities. We're continuing to allow only grab and go. So, that is an example of how we're working closely with our state government, but at the same time, we're making decisions that we feel will help keep our community even safer.

Making judgment calls was especially important given how rapidly some government guidance changed, as noted by our participants.

**Support Justice, Fairness, and Equity** Almost half of our participants emphasized the importance of considering justice, fairness, and equity in their COVID-19 responses. In discussing this guiding principle, participants focused on their at-risk stakeholders including community members with health conditions that put them at higher risk for contracting COVID-19, members of marginalized communities, and members of communities especially hard hit by COVID-19. As Nolan explained:

We made a number of decisions in spring that were hard for some of our community except in the name of equity. We only get pass/fail grades. We didn't allow anybody to take a letter grade for spring just for that semester and students couldn't quite understand that. And again, and again, and again, some students, we would explain the inequities that some of our students experienced that meant it wasn't reasonable to offer the grades.

In the same spirit of equal access, Quinn explained: "We developed a working group on inclusion and equity to look at how COVID-19 is disproportionately impacting some of our community members who are people of color." Many participants discussed providing loaner laptops and hot-spots for students who did not have reliable Internet access at home. To further support disadvantaged students, participants discussed allowing some students to stay in the dorms if they did not have a safe home to go to or traveling home was not an option, as was the case for many international students. One participant mentioned food insecurity and the importance of keeping campus pantries well stocked even when the majority of students are not on campus.

In discussing student populations with specific needs, participants often mentioned undocumented immigrants and international students. Participants also discussed the power hierarchies inherent in academic institutions, which means that some community members have less social capital to push back on how institutions handle the pandemic. As Shannon explained: "Faculty seem to have a little more flexibility and tenure is a wonderful thing... But a staff member can't do that... Some staff are feeling this kind of social class issue." Several participants noted that sometimes institutions have no choice but to bring back staff who are essential workers like dining services and custodial staff. Riley elaborated on this challenge as follows:

We make sure we are screening out people with pre-existing conditions, or maybe who live in multi-generational families. We make sure that we provide them with PPE [personal protective equipment] and social distancing and all of that. But you still can't get around it, that we're asking them to put their lives a little bit

more at risk than other people in our community. And I think that's a moral dilemma.

### Engage in an Ethic of Care

As previously noted, participants unanimously agreed that their highest ethical responsibility was to protect the health and safety of their community, reflecting a strong ethic of care. In addition to focusing on campus safety, participants discussed other approaches to fostering a positive climate through an ethic of care. Several participants discussed creating social media videos to connect with students not on campus. As Jamie shared: "We have a woman who works in our dining hall named Miss [name removed]. She always hugs all the students who go in to dine, and so we have a video of her saying how much she misses them."

Other participants emphasized the importance of sustaining community through creative, mostly virtual events. Examples include trivia nights, paint-by-number classes, a sign-up for a character artist, and pop-up events like socially-distanced movie night in football stadiums. Gracen summarized the motivating factor behind these events for their campus as follows: "We don't have all the answers...So what can I do to make your day better today?"

A few participants discussed an overall philosophy of care for their campus stakeholders. For example, Sidney noted: "I care deeply about staff. I care deeply about our students." Similarly, Ezra explained: "We have moved mountains. We have done every possible thing that we could to support students. For me, that's that hallmark of who we are as a small campus, it's a very personal relationship that we have with students."

A personal touch in their COVID-19 response was mentioned by several participants, especially those at small institutions and/or private institutions. This approach included handwritten cards from university leaders to students, faculty, and staff along with small appreciation gifts like free pizza or fruit baskets. Some participants mentioned new programs that institutionalized a personal touch during the pandemic. For example, Lee shared:

We have a program that's called [mascot name removed] Care. And the program is faculty and staff who volunteer to reach out to students. They text them, they email them, they call them, and they made sure that those students were doing okay.

Other participants discussed programs that expressed an ethic of care through directly meeting faculty and staff needs related to the pandemic. Examples included offering training on how to teach online, how to support community members experiencing mental distress, and how

to conduct performance evaluations during the pandemic. Additionally, Bailey mentioned a "COVID bank" in which 3,000 employees voluntarily took furloughs to help the institution reduce costs while supporting the needs of vulnerable campus community members. Some participants discussed tenure clock extensions.

### Ethical Tensions (RQ4)

The fourth research question asks how U.S. higher education institutions have responded to ethical tensions during the COVID-19 pandemic. Participants identified four tensions they have faced while responding to the pandemic, as further discussed below.

#### Mission vs. Financial Solvency

First, several participants discussed a tension between meeting their institutions' educational missions while staying financially afloat. As Hayden explained:

I never wanted to be in the position where we were making a decision because it was the best thing to do financially. I wanted to make sure that it was still a good thing to do with people's health and safety as well. So we have had to balance that being a state institution, we don't have a lot of the funding strings that some of the public schools have available to them or the increased tuition.

Several participants discussed how U.S. higher education institutions have built a business model that relies on revenue auxiliary services (e.g., dining, housing, recreational services, athletics), but during the pandemic revenue from those services has been eliminated or severely diminished. As Jordan noted: "If students are not on campus, then those services go unfunded, and yet they still have to be paid for."

#### Competing Stakeholders' Desires

Second, leaders frequently discussed the competing desires, and sometimes demands, of their stakeholders. Tensions have emerged between students' preference for in-person courses and faculty preference for virtual classes. As Finely noted:

It's been a balancing act because we have our students and parents and families, they want to be back on campus. They want to have their college experience. And our faculty, being of an older age group, wanted the option to either teach on-line or in-person and they were able, they pushed for that and they got what they wanted on that. So, I would say that finding a com-

mon ground between both of those groups is part of the game.

As previously noted, tensions also exist among staff and faculty, in part due to academic hierarchy. As Riley explained, leaders can successfully navigate those challenges by offering compromises, such as researchers cleaning their labs rather than custodial staff.

### Compliance Challenges

The third tension that participants discussed related to compliance challenges, especially when it comes to social distancing and properly wearing masks. Dakota summarized this challenge as follows:

So it's challenging because we have compliance, but we also have people who are not complying. So at what point, what do we do about that? Do we remind people? Do we discipline people? Do we implement stricter rules for the whole campus? Do we say, 'We don't have enough compliance, and so everybody has to go home and we're back to working remotely again or learning remotely?'

Multiple participants discussed an approach that begins softly and then becomes more severe if noncompliance continues. As Parker explained:

We liken it to our no smoking policies on campus when it comes to things like personal protective equipment. If we have somebody smoking on campus, we start with a soft approach that it's not accepted here and then ratchet it up to the normal progressive discipline process.

### Shared Governance vs. Timely Response

All leaders described their decision-making processes as shared governance. Internally, faculty, staff, and students voice their thoughts and opinions through working groups, committees, and open meetings, which inform leaders' decisions, as discussed in the previous section on deliberative dialog. Several leaders observed that shared governance can impede a timely crisis response. As Emerson observed:

Shared governance is an obstacle to responding to an emergency. The faculty have been given complete autonomy over the modality they teach...They're still changing their modalities. So, it's causing the ripple effect on preparing the university and the operations and the emergency operations center, it's been rough. It's a moving target.

To navigate this tension, a few participants recommended being strategic about rethinking the structure of shared governance in a crisis. For example, Hunter recommended:

We've been making it up as we go along and changing course as we needed to. But, for me, having more clarity about this is how our structure works and this is the expectation of how decisions will be made during a crisis would have been really helpful.

### Discussion and Conclusion

Crises are moments of high uncertainty and threat where stakeholders can lose trust in organizational leadership (Dirks & Ferrin, 2002). To mitigate crisis damage, leaders must listen to their stakeholders, who may have competing crisis narratives. Leaders also must consider the power and interests underpinning their crisis claims (Spector, 2019). Prior research has advocated for putting ethics at the heart of crisis management (e.g., Thomas & Young, 2011; Sellnow & Seeger, 2020; St. John III & Pearson, 2016). Yet, it is unclear how exactly leaders should integrate values into their crisis planning and responses.

Our research reveals that the COVID-19 pandemic has been a pivotal moment in which higher education leaders have turned to following a track of value rather than complicated crisis plans or detailed codes of ethics. While some leaders noted that their crisis plans were useful in the early phases of their COVID-19 responses, the long duration of the event necessitated creating responses on the fly. To navigate this highly prolonged and uncertain crisis, leaders advocated for staying true to their missions by following a track of value. We further discuss these findings below.

### Missions and Values (RQ1a and RQ1b)

Our first research question asked what are the roles of (a) missions and (b) values as reflected in U.S. higher education institutions' responses to the COVID-19 pandemic? We found that leaders aligned their decision-making with their institutions' missions and values, and closely tied their institutions' identities to their missions and values. Our findings further suggest that institutions should consider adding explicit value statements to their future crisis plans. Our findings also indicate that establishing ethics committees could be instrumental in helping institutions navigate future crises. We further discuss these findings below.

First, institutions' identities come from their status as a public or private institution, religious affiliations, student body size, the populations they serve, and/or whether they have a primary research mission. Past research theorized that higher education leaders must align their leadership

style with their institutions' cultural norms to mount a successful crisis response (Latta, 2020). Our results support this notion, demonstrating how leaders aligned their decision-making with their institutions' missions and values. For example, institutions with a religious mission heavily focused on the value of improving the lives of their community members during the pandemic. Institutions with small student bodies emphasized an ethic of care to maintain their closely knit communities. Our research further shows that when responding to the pandemic, the value of safety rose to the forefront of leaders' missions regardless of their institution type, along with the primary mission of education. Prior research theorized that organizational values are dynamic (Bourne & Jenkins, 2013), and our paper shows how leaders balanced dynamic values during an extremely prolonged crisis.

Second, our findings suggest that higher education leaders should infuse their future crisis plans with explicit value statements derived from their missions. Previous research suggested that organizational values can guide strategic crisis responses (Altiok, 2011), especially when values are co-developed with key stakeholders (Kopaneva, 2019; Latta, 2020). Considering this prior research and our paper's findings, we conclude that the COVID-19 pandemic should prompt higher education institutions to adapt their crisis plans. Specifically, they should add short statements on how their missions and values should guide future crisis responses. These statements should be co-developed with stakeholders. For example, statements could note the importance of prioritizing safety and education, protecting vulnerable community members, or safely bringing back research operations while protecting vulnerable staff members.

Third, our findings suggest that there is a benefit of forming stakeholder groups to help organizations stay true to their missions and visions when responding to crises. Only a few institutions in our sample stood up formal ethics committees, which included faculty, staff, and student representatives, to help guide their COVID-19 responses. These committees were instrumental in managing tensions such as when to return to in-person teaching, how to enforce safety guidance, and how to balance safety with financial solvency. We further propose that ethics committees could be instrumental in upholding the values of fairness and equity while serving all members of a campus community (American Association of University Administrators, 2017). In our research, institutions without missions to serve marginalized groups were less likely to focus their COVID-19 responses on serving these community members, despite the well-recognized health and social inequities of these groups (CDC, 2020b).

## Planning, Codes of Ethics, and Guiding Principles (RQ2 & RQ3)

The second and third research questions inquired about U.S. higher education institutions' guiding principles and codes of ethics for responding to the COVID-19 pandemic. Institutions in our sample were not prepared for the pandemic. Indeed, none of the leaders reported that they relied primarily on their institutions' crisis plans to respond to the pandemic, despite that the majority reported having plans that addressed infectious disease outbreaks. The pandemic eclipsed any college or university plan, requiring improvised responses. In cases such as this, values and mission statements can provide the kind of general decisional frame and direction necessary to guide responses. In this way, values both form and inform crisis responses.

Although none of the leaders reported following established codes of ethics from professional associations, many leaders advocated for following a track of value through developing and applying the following general guiding principles: (1) engage in accuracy, transparency, and accountability; (2) foster deliberative dialog; (3) prioritize safety; (4) support justice, fairness, and equity; and (5) engage in an ethic of care. Moreover, prior research has called for a "responsibility compass" to guide leaders' ethical decision-making (Coldwell et al., 2012, p. 142). In higher education, this responsibility compass centers on the values identified and articulated by leaders, as further discussed below.

### Accuracy, transparency, and accountability

Prior research on virtuous leaders emphasized the importance of committing to the highest level of integrity (Braum et al., 2009; Sellnow & Seeger, 2020). Leaders pointed out the importance of accurate and transparent responses to COVID-19, while also noting that communicating the science behind the pandemic is challenging. A few institutions established scientific advisory committees to provide crisis-specific expertise, which helped leaders interpret the complicated and changing science about disease transmission, vaccine efficacy, and appropriate safety measures. Having crisis-specific knowledge also enabled leaders to enact the principle of significant choice, which is the ability to communicate as completely and accurately as possible so that community members have the information they need to make important decisions (Sellnow & Seeger, 2020; Streifel et al., 2006). When leaders do not have crisis-specific knowledge on their own or from their crisis team members, they need to obtain that knowledge from others, which can delay responses.

Additionally, our paper adds to the literature that accuracy, transparency, and accountability are closely tied to actively educating campus communities about the science

behind crises. As leaders discussed, simply releasing COVID-19 positivity test data without educating the campus community about how to interpret the data can cause more harm than good. Prior research has extensively discussed the uncertainty inherent in crises as an ethical tension for leaders to navigate (e.g., Sellnow & Seeger, 2020; St. John III & Pearson, 2016). We connect effective science communication with the capacity to enact the ethical imperatives of accuracy, transparency, and accountability. Furthermore, our research adds that transparency is enhanced when leaders have crisis-specific expertise, which was health and medical expertise for the COVID-19 pandemic.

Accuracy, transparency, and accountability also related to leaders, at times, making “best guesses” or “best estimates.” There was a tension between some leaders advocating for a swift “80% solution,” whereas other leaders recommended waiting to make a decision until they had more information or a change was necessary. Though this paper does not resolve this tension, leaders agreed that in order to maintain their credibility during the changing information landscape, they must have the courage and humility to admit mistakes. The literature on trust (Liu & Mehta, 2020) suggests that if campus community members do not trust their leaders, they are unlikely to follow their institutions’ COVID-19 safety policies and guidance. Our research suggests that maintaining an ethic of care may begin with leaders who readily embrace admitting their crisis response mistakes and pivot their institutions’ responses to benefit their stakeholders’ needs.

### Foster Deliberative Dialog

Engaging in deliberative dialog helps leaders better understand stakeholders’ expectations and navigate ethical tensions (Braun et al., 2009; Boin & Nieuwenburg, 2013; St. John III & Pearson, 2016). When crises are approached from a contextual constructivist approach, deliberative dialog helps understand stakeholders’ multiple interpretations of crisis claims made by leaders (Spector, 2019). Our research supports the critical importance of deliberative dialog in higher education’s response to COVID-19. Participants characterized dialog as instrumental to their crisis decision-making, especially in identifying new issues and clarifying guidance. At times, dialog resulted in changes to institutions’ responses, such as how COVID-19 testing was deployed and whether faculty were required to teach in-person classes. Central to the success of dialog was building strong relationships with campus stakeholders before crises.

Across the board, leaders in our research revealed that virtual dialog is effective in meeting the same goals identified in the literature for in-person dialog. Our paper also adds to the literature that dialog does not always need to be

practiced synchronously to be successful, although “live” virtual town halls remained the preferred method of deliberative dialog for our participants. Importantly, leaders shared how asynchronous dialog platforms, such as surveys and anonymous forms, clarified stakeholders’ concerns and needs. Asynchronous platforms further allowed for community members to feel more comfortable providing feedback, especially given academic hierarchies and power dynamics. Furthermore, dialog can still be deliberative even if not fully planned. A few leaders advocated for spontaneous dialog such as by walking around campus and informally interacting with faculty, staff, and students.

### Prioritize Safety

All of the participants discussed prioritizing their stakeholders’ safety over other issues during the pandemic, as reflected in professional codes of ethics (American Public Health Association, 2019). Importantly, decisions and actions need to actually improve safety and not be just for show. In addition, response frameworks should provide guidance on how to balance safety with fiscal responsibility. Drills, exercises, and simulations should allow leaders to practice making decisions when safety guidance is conflicting or is not tailored to higher education institutions’ needs. Ethics committees can help navigate these tensions, and should be included in drills, exercises, and simulations.

### Engage in an Ethic of Care

As noted above, participants unanimously agreed that their highest ethical responsibility was to protect the health and safety of their community members, reflecting a strong ethic of care (St. John III & Pearson, 2016). Participants further followed an ethic of care by fostering a supportive climate. To help support stakeholders, leaders discussed a variety of initiatives including social media videos and interactive campaigns, creative virtual events, handwritten cards from senior leadership, and small thank-you gifts. Some leaders discussed institutionalizing an ethic of care through new initiatives. For example, one leader discussed a new program for faculty and staff to volunteer to support students’ well-being through regular text messages. Other leaders discussed creating new training programs to help faculty succeed in the virtual teaching environment. All of these initiatives were created on the fly, and can serve as fodder for modifying crisis plans.

### Support Justice, Fairness, and Equity

Almost half of our participants emphasized the importance of considering justice, fairness, and equity in their COVID-19 responses, in line with prior research on the importance



of social responsibility and justice (Braum et al., 2009; Leider et al., 2017; Sellnow & Seeger, 2020). As previously discussed, institutions with missions that focused on marginalized communities were more likely to invoke justice in their COVID-19 responses. To support justice, leaders discussed extending existing services (e.g., laptop loans, campus pantries) rather than creating new services. Only one participant discussed creating a working group on inclusion and equity to examine how COVID-19 has disproportionately impacted community members of color. Many participants, however, discussed considering how the pandemic has impacted these communities on their campuses.

Most commonly, leaders discussed actions and policy changes that reflected fairness and equity for all such as shifting to pass/fail grading systems, having campus community members sign safety pledges, requiring campus members to watch safety videos, and launching social media compliance campaigns. We conclude that when responding to future crises leaders should consider actions and policy changes that specifically help marginalized groups to balance the need for equity and fairness with help for those most affected by the pandemic (i.e., justice). Crises may open up spaces to upend norms (Spector, 2019), but only if leaders are open to questioning the status quo.

### Ethical Tensions (RQ4)

The last research question investigated how U.S. higher education institutions responded to ethical tensions during the COVID-19 pandemic. Prior research found that common ethical dilemmas during pandemics are decisions about prioritizing access to scarce supplies, considering health inequities while enacting restrictions, and fulfilling responsibilities to protect all stakeholders (Thomas & Dasgupta, 2020; Wynia, 2007). Our participants identified additional tensions not found in the literature: mission vs. financial solvency, competing stakeholders' desires, compliance challenges, and shared governance vs. a timely response.

To balance these tensions, higher education institutions engaged in deliberative dialog. At times, leaders had to make difficult decisions, and they often relied on their institutions' missions and values to do so. As we previously noted, infusing future crisis plans with explicit values statements, standing up ethics committees, developing crisis teams with crisis-specific knowledge, and focusing responses on diversity and inclusion can help leaders navigate these tensions. Furthermore, crisis exercises, drills, and simulations should model the tensions identified in this paper so that crisis teams are better able to manage these tensions and new ones that emerge during future crises.

### Limitations

The results of this research are limited by several factors. First, the findings only apply to U.S. higher education institutions, though we know COVID-19 has swept the globe. In other words, this study is just one interpretation of how higher education leaders responded to the pandemic.

Second, while we sought a diverse sample, the leaders who volunteered to participate may not be representative of the leaders who declined to participate. For example, those who declined to participate may be less focused on infusing values into their crisis responses. As Spector (2019) advocated, understanding other narratives can help "appraise claims" in a manner that is thoughtful and critical (p. 221). Accordingly, future research is needed on how other organizations responded to the pandemic. Critically, research is needed on how stakeholders assess U.S. higher education institutions' COVID-19 responses, as well as stakeholder assessments of other organizations' responses.

Third, the findings reflect how leaders navigated the early stages of the pandemic, but not the entire crisis. The benefit of conducting research during the pandemic is that we gained insights that are not hindered by retrospective bias (Fischhoff et al., 2005). While gaining these insights has been instrumental, the story of COVID-19 is still being told. As noted above, there are no doubt other narratives about the pandemic.

Lastly, our sample included a variety of higher education institution types, but more than half of our participants lead four-year public universities. This sampling limitation may make our findings less transferrable to a variety of U.S. higher education types.

### Conclusion

When we wrote this paper, 29.3 million people in the United States had contracted COVID-19 resulting in 532,355 deaths (CDC, 2021). Per capita deaths in the United States, both from COVID-19 and other causes, were 18 times higher than in other high-income countries (Bilinski & Emanuel, 2020). Against this startling backdrop, higher education leaders have navigated ethical tensions and made difficult decisions.

Our research reveals that higher education institutions' missions and values should explicitly inform their crisis planning. We offer that creating shared values, tied to missions, before crises can serve as a moral compass to help leaders navigate tensions and tough decisions during crises. This moral compass should come from shared norms while considering each institution's unique mission. This paper reveals the following somewhat universal guiding principles that can inform crisis planning in higher education settings: (1) engage in accuracy, transparency, and accountability; (2)

foster deliberative dialog; (3) prioritize safety; (4) support justice, fairness, and equity; and (5) engage in an ethic of care. However, leaders did not explicitly include these guiding principles in their crisis plans. Instead, they emerged organically in their responses. Our research calls for explicit integration of shared values into future plans and planning activities. Our research also calls for standing up ethics committees composed of diverse stakeholders to help higher education institutions navigate the tensions inherent in crises. Furthermore, when leaders do not have adequate public health or medical expertise, it is imperative that their crisis management teams include such experts. In addition to involving experts, it is critical for leaders to engage in deliberative dialog with their stakeholders with the goal of listening rather than obtaining endorsement of leaders' plans.

As we conclude this paper, the COVID-19 pandemic has lasted more than a year, and experts note that the end of the pandemic is hard to predict (McKinsey, 2021). Perhaps even more alarming is that experts are already forecasting the next pandemic (Spinney, 2021). Given the dearth of prior research on the intersection of ethics, values, principles, and crisis management, we hope that this paper serves as a call to action for additional research, especially with stakeholders. There is more unknown than known about how organizations can partner with stakeholders to protect their communities during crises. If college and universities infuse shared values into their future planning activities, they will not have to develop a moral compass on the fly for the next pandemic. Higher education leaders also will be confident that their crisis responses are grounded in their communities' shared values.

**Funding** This study was funded by the University of Maryland's coronavirus seed grant program.

## Declarations

**Ethical Approval** This study was approved by the University of Maryland Institutional Review Board (ethics approval #1583498-4) and the Wayne State University Institutional Review Board (ethics approval #1583498). The University of Central Florida Institutional Review Board also administratively approved the study, but did not provide a separate approval number. At the time this research was conducted, co-author America L. Edwards was a master's student at the University of Central Florida. All leaders provided written consent to participate in the study.

## References

Altok, P. (2011). Applicable vision, mission and the effects of strategic management on crisis resolve. *Procedia-Social and Behavioral Sciences*, 24, 61–71. <https://doi.org/10.1016/j.sbspro.2011.09.057>

- American Association of University Administrators (2017). *Ethical principles for college and university administrators*. <http://www.aaua.org/pdf/Ethical-Principles.pdf>
- Auger, G. A. (2014). Trust me, trust me not: An experimental analysis of the effect of transparency on organizations. *Journal of Public Relations Research*, 26(4), 325–343. <https://doi.org/10.1080/1062726X.2014.908722>
- Bilinski, A., Emanuel, E. J. (2020). COVID-19 and excess all-cause mortality in the US and 18 comparison countries. *Journal of the American Medical Association*. Advance online publication. <https://doi.org/https://doi.org/10.1001/jama.2020.20717>
- Boin, A., & Nieuwenburg, P. (2013). The moral costs of discretionary decision-making in crisis: Hurricane Katrina and the memorial hospital tragedy. *Public Integrity*, 15(4), 367–384. <https://doi.org/10.2753/PIN1099-9922150403>
- Bourne, H., & Jenkins, M. (2013). Organizational values: A dynamic perspective. *Organizational Studies*, 34(4), 495–514. <https://doi.org/10.1177/2F0170840612467155>
- Braum, N. M., Jacobson, P. D., & Goold, S. D. (2009). "Listen to the people": Public deliberation about social distancing measures in a pandemic. *The American Journal of Bioethics*, 9(11), 4–14. <https://doi.org/10.1080/15265160903197531>
- Campbell, A., & Yeung, S. (1991). Creating a sense of mission. *Long Range Planning*, 24(4), 10–20. [https://doi.org/10.1016/0024-6301\(91\)90002-6](https://doi.org/10.1016/0024-6301(91)90002-6)
- CDC, Centers for Disease Control and Prevention (2020a). *Interim guidance for administrators of US institutions of higher education*. <https://www.cdc.gov/coronavirus/2019-ncov/community/guidance-ihe-response.html>
- CDC, Centers for Disease Control and Prevention (2020b). *Health equity considerations and racial and ethnic minority groups*. <https://www.cdc.gov/coronavirus/2019-ncov/community/health-equity/race-ethnicity.html>
- CDC, Centers for Disease Control and Prevention (2021). *COVID data tracker*. <https://covid.cdc.gov/covid-data-tracker/#datatracker-home>
- Cochran, D. S., & David, F. R. (1986). Communication effectiveness of organizational mission statements. *Journal of Applied Communication Research*, 14(2), 108–118. <https://doi.org/10.1080/0090988609360308>
- Coldwell, D. A. L., Joosub, T., & PaPargiou, E. (2012). Responsible leadership in organizational crises: An analysis of the effects of public perceptions of selected SA business organization' reputation. *Journal of Business Ethics*, 109(2), 133–144. <https://doi.org/10.1007/s10551-011-1110-8>
- Coombs, W. T. (2019). *Ongoing crisis communication: Planning, managing, and responding*. (5th ed.). Sage.
- Corbin, J., & Strauss, A. (2015). *Basics of qualitative research: Techniques to developing grounded theory*. (4th ed.). Sage.
- Dirks, K. T., & Ferrin, D. I. (2002). Trust in leadership: Meta-analytic findings and implications for organizational research. *Journal of Applied Psychology*, 87(4), 611–628. <https://doi.org/10.1037/0021-9010.87.4.611>
- Erwin, P. (2011). The effects of code content and quality on ethical performance. *Journal of Business Ethics*, 99(4), 545–548.
- Fischhoff, B., Gonzalez, R. M., Lerner, J. S., & Small, D. A. (2005). Evolving judgements of terror risks: Foresight, hindsight, and emotion. *Journal of Experimental Psychology Applied*, 11(2), 124–139. <https://doi.org/10.1037/1076-898x.11.2.124>
- Gigliotti, R. A. (2016). Leader as performer; leader as human: A discursive and retrospective construction of crisis leadership. *Atlantic Journal of Communication*, 24(4), 185–200. <https://doi.org/10.1080/15456870.2016.1208660>
- Ha, J. H., & Riffe, D. (2015). Crisis-related research in communication and business journals: An interdisciplinary review from 1992–2011. *Public Relations Review*, 41(4), 569–578. <https://doi.org/10.1016/j.pubrev.2015.06.019>

- Heath, R. L. (2006). Onward into more fog: Thoughts on public relations' research directions. *Journal of Public Relations Research*, 18(2), 93–114. [https://doi.org/10.1207/s1532754xjpr1802\\_2](https://doi.org/10.1207/s1532754xjpr1802_2)
- Hess, A. (2020). How coronavirus dramatically changed college for over 14 million students. *CNBC*. <https://www.cnbc.com/2020/03/26/how-coronavirus-changed-College-for-over-14-million-students.html>
- Hodge, J. G., Hanfling, D., & Powell, T. P. (2013). Practical, ethical, and legal challenges underlying crisis standards of care. *Journal of Law, Medicine, and Ethics*, 42(Suppl 1), 50–55. <https://doi.org/10.1111/jlme.12039>
- Huang, Y.-H. (2004). Is symmetrical communication ethical and effective? *Journal of Business Ethics*, 53(4), 333–352. <https://doi.org/10.1023/B:BUSI.0000043494.17425.c6>
- Kopaneva, I. M. (2019). Left in the dust: Employee constructions of mission and vision ownership. *International Journal of Business Communication*, 56(1), 122–145. <https://doi.org/10.1177/2F2329488415604457>
- Latta, G. F. (2020). Modelling the interaction of leadership, culture and power in higher education. *Journal of Further and Higher Education*, 44(9), 1188–1206. <https://doi.org/10.1080/0309877X.2019.1669770>
- Leider, J. P., DeBruin, D., Reynolds, N., Koch, A., & Seaberg, J. (2017). Ethical guidance for disaster response, specifically around crisis standards of care: A systematic review. *American Journal of Public Health*, 107(9), e1–29. <https://doi.org/10.2105/AJPH.2017.303882>
- Lindlof, T. R., & Taylor, B. C. (2011). *Qualitative communication research methods*. (3rd ed.). Sage.
- Littlefield, R. S., Reiersen, J., Cowden, K., Stowman, S., & Feather, C. L. (2009). A case study of the Red Lake, Minnesota, school shooting: Intercultural learning in the renewal process. *Communication, Culture & Critique*, 2(3), 361–383. <https://doi.org/10.1111/j.1753-9137.2009.01043.x>
- Liu, B. F., Jin, Y., Briones, R., & Kuch, B. (2012). Managing turbulence in the blogosphere: Evaluating the blog-mediated crisis communication model with the American Red Cross. *Journal of Public Relations Research*, 24(4), 353–370. <https://doi.org/10.1080/1062726X.2012.689901>
- Liu, B. F., & Mehta, A. (2020). From the periphery and towards a centralized model for trust in government risk and disaster communication. *Journal of Risk Research*. Advance online publication. <https://doi.org/https://doi.org/10.1080/13669877.2020.1773516>
- Louden, R. B. (1992). *Morality and moral theory*. Oxford University Press.
- Maak, T., & Pless, N. (2006). *Responsible leadership*. Routledge.
- McKinsey. (2021). *When will the COVID-19 pandemic end?* <https://www.mckinsey.com/industries/healthcare-systems-and-services/our-insights/when-will-the-covid-19-pandemic-end#>
- Moerschell, L., & Novak, S. S. (2020). Managing crisis in a university setting: The challenge of alignment. *Journal of Contingencies and Crisis Management*, 28(1), 30–40. <https://doi.org/10.1111/1468-5973.12266>
- Pearson, C. M., Clair, J. A., Misra, S. K., & Mitroff, I. I. (1997). Managing the unthinkable. *Organizational Dynamics*, 26(2), 51–64. [https://doi.org/10.1016/S0090-2616\(97\)90005-X](https://doi.org/10.1016/S0090-2616(97)90005-X)
- Phillips S., Knebel A., & Johnson K. (2009). Mass medical care with scarce resources: The essentials. *Agency for Healthcare Research and Quality*. <https://www.hsdl.org/?view&did=28175>
- Pullen, A., & Vachhani, S. J. (2020). Feminist ethics and women leaders: From difference to intercorporeality. Advance online publication. *Journal of Business Ethics*. <https://doi.org/https://doi.org/10.1007/s10551-020-04526-0>
- Prewitt, J. E., & Weil, R. (2014). Organizational opportunities endemic in crisis leadership. *Journal of Management Policy and Practice*, 15(2), 72. [http://m.www.na-businesspress.com/JMPP/PrewittJE\\_Web15\\_2\\_.pdf](http://m.www.na-businesspress.com/JMPP/PrewittJE_Web15_2_.pdf)
- Rawlins, B. (2009). Give the emperor a mirror: Toward developing a stakeholder measurement of organizational transparency. *Journal of Public Relations Research*, 21(1), 71–99. <https://doi.org/10.1080/10627260802153421>
- Sellnow, T., & Seeger, M. (2020). *Theorizing crisis communication* (2nd Ed.). Wiley.
- Seeger, M. W., & Ulmer, R. R. (2001). Virtuous responses to organizational crisis: Aaron Feuerstein and Milt Cole. *Journal of Business Ethics*, 31(4), 369–376. <https://www.jstor.org/stable/25074543>
- Spector, B. (2019). *Constructing crisis: Leaders, crises, and claims of urgency*. Cambridge University Press.
- Spinney, L. (2021). The next pandemic? It may already be upon us? *The Guardian*. <https://www.theguardian.com/commentisfree/2021/feb/15/creating-conditions-next-pandemic-antibiotics>
- Stevens, B. (1994). An analysis of corporate ethical code studies: Where do we go from here? *Journal of Business Ethics*, 13(1), 63–69. <https://doi.org/10.1007/BF00877156>
- Stevens, B., & Buechler, S. (2013). An analysis of Lehman Brothers code of ethics and the role it played in the firm. *Journal of Leadership, Accountability, and Ethics*, 10(1), 43–57
- Streifel, R. A., Beebe, B. K., Veil, S., & Sellnow, T. L. (2006). Significant choice and crisis decision making: MeritCare's public communication in the fen-phen case. *Journal of Business Ethics*, 69(4), 389–397. <https://doi.org/10.1007/s10551-006-9097-2>
- St. John, B., III., & Pearson, Y. E. (2016). Crisis management ethics: Moving beyond the public-relations-person-as-corporate-conscience construct. *Journal of Media Ethics*, 31(1), 18–34. <https://doi.org/10.1080/23736992.2015.1116392>
- The American Public Health Association (2019). *Public health code of ethics*. [https://www.apha.org/-/media/files/pdf/membergroups/ethics/code\\_of\\_ethics.ashx](https://www.apha.org/-/media/files/pdf/membergroups/ethics/code_of_ethics.ashx)
- The Carnegie Classification of Institutions of Higher Education. (2020). *About Carnegie Classification*. <http://carnegieclassifications.iu.edu/>
- The Chronicle of Higher Education. (2020). *Coronavirus hits campus: Special edition*. <https://www.chronicle.com/specialreport/Coronavirus-Hits-Campus/275>
- Thomas, J. C., & Dasgupta, N. (2020). Ethical pandemic control through the public health code of ethics. *American Journal of Public Health*, 110(8), 1171–1172. <https://doi.org/10.2105/AJPH.2020.305785>
- Thomas, J. C., Dasgupta, N., & Martinot, A. (2007). Ethics in a pandemic: A survey of the state pandemic influenza plans. *American Journal of Public Health*, 97(suppl 1), S26–S31. <https://doi.org/10.2105/AJPH.2006.093443>
- Thomas, J. C., & Young, S. (2011). Wake me up when there's a crisis: Progress on state pandemic influenza ethics preparedness. *American Journal of Public Health*, 101(11), 2080–2082. <https://doi.org/10.2105/AJPH.2011.300293>
- Ulmer, R. R., & Sellnow, T. L. (2000). Consistent questions of ambiguity in organizational crisis communication: Jack in the Box as a case study. *Journal of Business Ethics*, 25(2), 143–155. <https://doi.org/10.1023/A:1006183805499>
- Varma, T. M. (2020). Responsible leadership and reputation management during crisis: The cases of Delta and United Airlines. *Journal of Business Ethics*. Advance online publication. <https://doi.org/https://doi.org/10.1007/s10551-020-04554-w>
- Wynia, M. K. (2007). Ethics and public health emergencies: Encouraging responsibility. *The American Journal of Bioethics*, 7(4), 1–4. <https://doi.org/10.1080/15265160701307613>

**Publisher's Note** Springer Nature remains neutral with regard to jurisdictional claims in published maps and institutional affiliations.



## Evolving Best Practices in Crisis Communication: Examining U.S. Higher Education's Responses to the COVID-19 Pandemic

Brooke Fisher Liu<sup>1</sup> , JungKyu Rhys Lim<sup>1</sup> , Duli Shi<sup>1</sup> ,  
America L. Edwards<sup>2</sup> , Khairul Islam<sup>3</sup> , Ronisha Sheppard<sup>3</sup> ,  
and Matthew Seeger<sup>3</sup> 

1. University of Maryland, College Park, MD, USA

2. University of California Santa Barbara, Santa Barbara, CA, USA

3. Wayne State University, Detroit, MI, USA


### ABSTRACT

The COVID-19 pandemic started in December 2019 and has rapidly spread around the globe. Among the institutions at the forefront of responding to COVID-19 are U.S. colleges and universities. These institutions frequently face crises, but they have not always managed these episodes successfully. Given the gravity of the pandemic, best practices research can help higher education institutions combat public health crises and other threats. This study examines and assesses the crisis communication of U.S. colleges and universities in response to the COVID-19 pandemic using the best practices framework. Findings indicate that higher education institutions have employed communication consistent with best practices, with some important modifications. Findings also answer calls to contextualize crisis communication best practices within specific organizational contexts and as a values-based framework.

**KEYWORDS:** public health, disaster, leadership, risk

The COVID-19 pandemic emerged in Wuhan, China, in December 2019 and rapidly spread around the globe (World Health Organization, 2020). A year later, there were more than 20 million

**FUNDING** This study was funded by the University of Maryland's coronavirus seed grant program.

**CONTACT** Brooke Fisher Liu  • E-mail: [bfliu@umd.edu](mailto:bfliu@umd.edu) • Professor and Associate Dean • University of Maryland • 2110 Skinner Building • College Park, MD 20742, USA



Copyright 2021 Authors. Published under a Creative Commons Attribution 4.0 International (CC BY-NC-ND 4.0) license.



COVID-19 cases in the United States, which accounted for nearly 25% of all confirmed cases globally (Ponciano, 2021). While the pandemic has touched all aspects of society, among the institutions at the forefront of responding are U.S. colleges and universities (Carlson & Gardner, 2020). Colleges and universities have frequently faced crises, such as active shooters, weather-related events, and issues of misconduct, but they have not always managed these episodes successfully (Moerschell & Novak, 2020; Wang & Hutchins, 2010). Less is known about how colleges and universities have handled public health crises compared to other crisis types, despite the prevalence of such threats on college campuses (Jin et al., 2021). Given the gravity of the COVID-19 pandemic, best practices research is needed to help higher education institutions combat the ongoing crisis (Mackert et al., 2020) as well as future public health threats. Furthermore, crisis communicators have asked for “tailor-made guidelines” (Claeys & Opgenhaffen, 2016, p. 243) so that theory is applicable to practice, and we answer that call in this study.

This study assesses the crisis communication activities of U.S. colleges and universities in response to the COVID-19 pandemic through the lens of the best practices framework (e.g., Covello, 2003; Seeger, 2006; Seeger & Sellnow, 2019; Veil & Husted, 2012). We argue that the best practices framework can serve as value dimensions to assess how well organizations manage their crisis communication. We conducted 55 in-depth interviews with 37 leaders from 30 U.S. higher education institutions from May to October 2020. Findings answer calls to contextualize crisis communication best practices within specific organizational contexts (Janoske et al., 2013) and adds to our limited body of knowledge on higher education crisis management (Moerschell & Novak, 2020). Findings also modify the existing best practices, including adding an ethic of care to reflect that compassion must be infused throughout crisis management. Other revisions include advocating that messages of empowerment must be matched with empowering actions and noting the role of organizations’ own media in meeting publics’ crisis information needs.

## Literature Review

In this section, we briefly contextualize the impact of the COVID-19 pandemic on U.S. higher education institutions, followed by a review of best practices literature.

### Higher Education and the COVID-19 Pandemic

The National Center for Education Statistics reports 4,298 degree-granting postsecondary institutions in the United States. This includes 2-year and 4-year private and public degree-granting institutions (National Center for Education Statistics, n.d.). The pandemic emerged quickly, disrupted enrollment and extracurricular activities, limited many research activities, created new expenses, and interrupted income. Some colleges may not survive these disruptions (Carlson & Gardner, 2020; Whitford, 2020). Enrollment for all higher education institutions nationally dropped 2.5% on average, while community college enrollment saw a 10% decline (Amour, 2020). Higher education institutions moved quickly to online education formats. Many institutions reduced staff and some cut programs and majors. Occupancy of dorms was significantly reduced and large events including athletics, theatrical and music performances, and even graduations were cut or, when possible, moved online (Marinoni et al., 2020; Polikoff, 2020). A best practices approach can assist in understanding university communication and responses to this historical crisis.

### Overview of Best Practices

Best practices are part of a larger system of quality improvement, standardization, and benchmarking widely used for a variety of organizations (Anand & Kodali, 2008; Seeger, 2006). They are defined as “a general set of standards, guidelines, norms, reference points, or benchmarks that inform practice and are designed to improve performance” (Seeger, 2006, p. 233). Organizations often seek to identify standardized methods and procedures for their operations. Seeger argued that benchmarking is a grounded theoretical approach that generalizes from patterns and categories evident in data to practice.



## Best Practices for Crisis Communication

Best practices have been widely used to guide organizations' crisis communication (Covello, 2003; Jarreau et al., 2017; Lin et al., 2016; Seeger, 2006; Seeger & Sellnow, 2019). These industry-driven standards focus on the experiences of leaders and experts and help organizations benchmark their crisis responses. To identify best practices, scholars have used systematic reviews and assessment of organizational processes (Seeger, 2006; Veil & Husted, 2012). A majority of best practices are developed to assist organizations in effectively addressing questions, such as what, when, and how information should be conveyed during crises (Seeger, 2006; Veil & Husted, 2012). Seeger (2006) and Seeger and Sellnow (2019) synthesized 10 best practices for crisis communication, initially from an expert panel process. These 10 practices are described below.

### Take a Process Approach to Crises

Risk and crisis communication is most effective when it is used early in the decision-making process (Seeger, 2006). Crisis communication should not be reserved for communication after key decisions are made. Instead, crisis communication should be an integral part of the strategic decision-making process. This approach helps prevent the view of crisis communication as spin and enables higher quality decision-making (Seeger, 2006). Crises, such as pandemics, can be long-lasting. By taking a process approach, leaders can effectively respond at all stages of a crisis without neglecting one or two stages (Seeger & Sellnow, 2019).

### Engage in Pre-Event Planning

Crisis responses should begin with pre-event planning, identifying potential risks and how we can mitigate those risks (Seeger, 2006). It is important to note that pre-event planning does not necessarily provide a tangible outcome, but rather is an ongoing process (Seeger, 2006). Part of this planning involves the process of identifying answers to what if questions (Reynolds, 2006). Questions higher education administrators might ask themselves before a pandemic include: "What if we lose students or instructors to a

virus?,” “What if we have to close campus housing?,” and “How can we prepare ourselves for the potential threat?” In addition to developing answers to key questions, leaders should plan for prompt responses (Veil & Husted, 2012). Planning for the logistics of events is as important as responding to events.

### **Form Partnerships with Publics**

The third best practice is to recognize the importance of publics and build strong relationships with them. Publics may include community members, industry partners, government officials (Sellnow et al., 2009), and, in the case of higher education, students, faculty, staff, alumni, and donors, among others. Crisis communication should take a dialogic approach with these publics to keep them informed and offer them the opportunity to serve as resources (Seeger, 2006; Seeger & Sellnow, 2019). The opposite is also true: If partnerships are not strong, complications can occur (Janoske et al., 2013). Some researchers have suggested crisis communication needs to be an active part of the pre-event process so that publics can conduct their own planning (e.g., Sandman, 2006), which can help strengthen partnerships before the onset of a crisis. For example, citizen-led groups have self-organized before events to provide swift water rescues after hurricanes (Smith et al., 2018). Other researchers have developed communication guidance to help publics realize their personal risks before crises occur and how to mitigate those risks (Howe et al., 2017; Joffe et al., 2016).

### **Listen and Acknowledge Concerns of Publics**

Part of managing partnerships with publics is listening, acknowledging, and responding to their concerns. Whether or not concerns are valid, “the public’s perception is its reality” (Seeger, 2006, p. 239). These concerns can spiral out of control, perpetuating falsehoods and rumors if they are unaddressed (Reynolds, 2006). Therefore, responding to concerns is important to establish organizational credibility and can strengthen organization-public relationships (Coombs, 2019; Ulmer, 2001). When an organization can build credibility with its publics, trust in its crisis response increases (Liu & Mehta, 2020; Seeger, 2006).

### **Communicate with Honesty, Candor, and Openness**

Seeger (2006) noted that maintaining honesty, candor, and openness is the fundamental exigency in crisis communication. During a pandemic, timely and transparent dissemination of credible scientific information can cultivate public trust and confidence in crisis managers (Reynolds & Quinn, 2008; Seeger et al., 2018). Crisis managers should avoid over assurance, and instead acknowledge the strengths and limitations of existing data (Reynolds & Quinn, 2008; Seeger, 2006). Seeger and Sellnow (2019) noted that there is a tendency among some crisis managers to withhold information. Many believe that by doing so they are operating in the best interest of the public by avoiding needless panic. However, this tendency of some crisis managers can reduce public trust. Moreover, being less than honest in public communication may backfire as media organizations seek additional information (Veil & Husted, 2012).

### **Collaborate and Coordinate with Credible Sources**

Establishing strong relationships and coordination with credible interorganizational and intraorganizational sources is essential for successful crisis responses (Covello, 2003; Reynolds & Quinn, 2008; Veil et al., 2011). A strong relationship with credible sources enhances consistency of crisis messages and allows organizations to benchmark the effectiveness of their responses. Seeger et al. (2018) suggested that typically credibility is established through credentials, expertise, and the nature of the information. During public health crises, managers need to continuously evaluate credible sources, select subject area experts, and develop relationships with publics at all levels (Reynolds & Quinn, 2008; Seeger, 2006). Moreover, a communication breakdown can create further uncertainty and confusion. The best practices suggest that crisis managers develop a pre-crisis network with credible sources, including subject matter experts and the media (Seeger, 2006; Veil et al., 2011). Researchers also have recommended collaborating with members of the public given the possibility of two-way dialogue offered by social media platforms (Lin et al., 2016).

## **Meet the Needs of the Media and Remain Accessible**

During public health emergencies, demand for information rapidly escalates. Publics typically learn about the risks associated with crises through mass media (Seeger, 2006; Veil & Husted, 2012). While crisis managers depend on journalists to communicate risks, media also serve as a significant tool for collecting crisis information (Veil et al., 2008). As such, media should be viewed as an important tool for both conveying information and environmental scanning. Unfortunately, some managers view communicating with journalists as a liability rather than as a resource for crisis management (Seeger, 2006; Seeger & Sellnow, 2019). Further, some managers wrongly perceive the media as part of their imminent problem such that the managers become extremely defensive when they communicate about crises with journalists (Seeger, 2006). The best practices suggest that crisis managers need to proactively communicate with journalists, including working to understand journalists' needs and providing them with tailored information (Janoske et al., 2013; Seeger, 2006; Seeger et al., 2018).

## **Communicate with Compassion**

Compassion is an essential element of effective crisis communication (Seeger, 2006) and should be infused throughout the crisis management process (Heath, 2006; Mackert et al., 2020). Communicating with compassion includes recognizing and respecting diverse audiences' unique needs (Covello, 2003) and being willing to see the crisis through their eyes (Seeger & Sellnow, 2019). A compassionate crisis response also involves prioritizing publics' needs over organizational concerns like reputation repair (Lu & Schuldt, 2016; Seeger & Sellnow, 2019). For managing public health crises, a driving principle should always be caring for people first (Liu et al., 2018). Doing so enables organizations to build trust with their publics, which can facilitate timely crisis responses and recovery (Veil & Husted, 2012).

## **Accept Uncertainty and Ambiguity**

All crises are uncertain and ambiguous events because it is difficult to accurately predict what will happen (Seeger & Sellnow,

2019). Uncertainty can also emerge about what caused the crisis and what actions publics can take to protect themselves (Noar & Austin, 2020; Seeger & Sellnow, 2019). Acknowledging this uncertainty is an important best practice (Seeger, 2006). Instead of being overly certain or reassuring, organizations should acknowledge the fluidity of crises (Seeger & Sellnow, 2019). If protective guidance changes during a crisis, communicators need to clearly and consistently explain why (Noar & Austin, 2020).

### **Communicate Messages of Empowerment**

Messages of empowerment provide publics with specific and clear information about what they can do to reduce their harm (Seeger, 2006). To be effective, messages should be tailored so that publics receive and internalize the most appropriate protective action recommendations given their specific risk factors (Liu et al., 2018; Seeger & Sellnow, 2019). During public health crises, publics need to know the likelihood of infection and mortality along with how predictable and controllable the threat is (Jin et al., 2020; Roche & Muskavich, 2003). Publics also need to know what they can do to mitigate threats (Roche & Muskavich, 2003), why they should take recommended actions (Noar & Austin, 2020), and what authorities are doing to mitigate risks (Jin et al., 2020). Furthermore, communicators need to clearly share a wide variety of steps publics can take to protect themselves and explain how these steps may evolve as the crisis evolves (Avery & Kim, 2009). Communicators also must be clear on what behaviors they want to change (Noar & Austin, 2020).

### **Research Questions**

Given the literature review, we ask the following research questions:

**RQ1:** To what extent have U.S. higher education institutions employed the best practices in crisis communication in their responses to the COVID-19 pandemic?

**RQ2:** To what extent have new best practices emerged in the context of U.S. higher education institutions' responses to the COVID-19 pandemic?

The answers to these questions uncover how higher education institutions have responded to this prolonged and historical crisis and offer opportunities to potentially update the best practices in light of the COVID-19 pandemic.

## Method

To answer the research questions, we conducted 55 in-depth interviews with 37 leaders from 30 U.S. higher education institutions from May to October 2020. This time frame reflects institutions' early responses to the pandemic as leaders responded to major disruptions during the spring 2020 semester and planned for the fall 2020 semester.

### Participants

Using snowball sampling and maximum variation, we recruited a diverse group of interview participants. First, we developed a list of potential participants through our personal contacts knowing that it would be difficult to access leaders during an ongoing crisis (Ha & Riffe, 2015). When our personal networks had been exhausted, we sought leaders at institutions not well represented yet in our sample, applying Suri's (2011) principle of maximum variation by using the Carnegie Classifications of Institutions of Higher Education ("The Carnegie Classification of Institutions of Higher Education," 2020). By the end of our recruitment, we had reached out to leaders at 137 institutions, securing written consent for 37 leaders to participate in our interviews. Recruitment ended when ongoing data analysis indicated theoretical saturation (Corbin & Strauss, 2015).

To be included in our sample, participants had to serve as U.S. higher education leaders (chancellors, presidents, vice presidents, provosts, deans, and professors) and serve on their institution's COVID-19 crisis management team. Nineteen 4-year public universities, two 2-year public institutions, one public baccalaureate/



associate's college, and eight private institutions were represented in this study (i.e., 37 leaders across 30 U.S. higher education institutions). In reporting the findings, we use pseudonyms to protect the participants' identities, as approved by the Institutional Review Boards that cleared this study.

### **Data Collection and Analysis**

We conducted two rounds of interviews to assess to what extent leaders applied the best practices in the early stages of their COVID-19 responses (i.e., May–October 2020). The first round of interviews lasted from 20 to 61 minutes, with an average of 46 minutes. The same interview guide questions were used across all interviews. Rather than ask about each best practice, we employed open-ended questions to capture institutions' responses. This approach allowed us to probe for best practices as needed, but did not constrain the data collected to only the best practices identified in the literature. In doing so, we were able to uncover how participants applied the existing best practices in their COVID-19 responses (RQ1) along with important modifications to the best practices (RQ2).

The initial interview guide consisted of 19 open-ended questions examining how institutions planned for and responded to the pandemic. Topics included use of crisis plans and other resources, learning from other institutions' responses, emerging tensions, developing and implementing communication strategies and messages, implementing lessons learned, and reflecting on opportunities for improvement. Example questions included: "When communicating with your key stakeholders, what have been your primary message strategies and why?," "What, if anything, have you learned from other higher education institutions that are responding to COVID-19?," and "Are there particular tensions or points of conflict that have emerged as your school or college has responded to COVID-19? If so, what are those?" The follow-up interview guide consisted of seven questions examining how institutions' responses to the pandemic had evolved over time. Example questions included: "Briefly, describe your one biggest 'aha' moment over the past month or so in terms of a part

of your COVID-19 response?” “In what ways have you received feedback from internal and external stakeholders?” “How, if at all, has that feedback influenced your response to COVID-19?”

Each initial and follow-up interview was conducted and recorded via Zoom and then professionally transcribed. We selected a research firm that protects the identity of participants by requiring all transcribers to sign nondisclosure agreements. Three to 10 weeks after the initial interview, we conducted follow-up interviews with leaders from 25 of the 30 original institutions. These follow-up interviews averaged 24 minutes in length, with a range of 14 to 39 minutes. One participant had retired and four participants declined to participate in the second interview.

To analyze the data, we took a deductive and inductive approach (Lindlof & Taylor, 2011). Deductively, we divided into teams with two researchers coding each of the 10 best practices identified in the literature. We then met as a whole team to discuss our initial findings. Inductively, the team employed Corbin and Strauss's (2015) grounded theory analytic strategies to consider to what extent the best practices “fit” the data. These analytic strategies include looking for negative cases, using participants' own words to label codes, making comparisons among participants' insights and the prior literature, constantly questioning the data through re-analysis, and reflecting on the biases and assumptions that the researchers may bring to the analysis and pushing back on those “red flags” (Corbin & Strauss, 2015, p. 98).

The next section presents the findings, organized by each best practice. We employed pseudonyms to protect the identity of the participants. In the final section, we discuss how the findings support some of the prior literature (RQ1) as well as offer revised best practices (RQ2).

## Findings

### Take a Process Approach to Crises

A process approach was prevalent in all institutions' responses to COVID-19, with some important variability as further discussed below.

## **Impact of Past Crises on COVID-19 Readiness**

Participants discussed a variety of past crises that, in theory, should have prepared them for COVID-19. In practice, most participants agreed that experience with past crises was inadequate to prepare for the pandemic. As Blake recounted: “Those plans, they had overplanned. In other words, they had planned for a crisis that didn’t really take place with as much disruption, like it has now.”

Only a few participants identified specific past efforts that positively influenced their institutions’ COVID-19 responses, including after-action reports and experiences with recent public health and financial crises. More broadly, several participants emphasized the importance of past training exercises and plans in helping them understand response protocols for the early days of the COVID-19 pandemic. As Emerson explained: “The key is to be prepared. There’s a great quote from President Dwight Eisenhower, who, of course, planned the D-Day invasion. He says, ‘In an emergency, plans are useless, but planning is essential.’”

## **Constant Vigilance and Adaptation**

All leaders discussed how the long duration of the pandemic coupled with high uncertainty necessitated constant vigilance and adaptation. To address this challenge, participants had to constantly re-evaluate their decisions. For example, Avery explained: “The ah-ha was that this virus is so insidious and it affects us in our communities and in congregate housing in ways that we can’t predict. That we’re constantly going to have to be vigilant about being responsive.” Participants explained how adaptation is sometimes reactive, but ideally should be strategic. Further, leaders need to have the ability to change paths as the crisis evolves. As Charlie summarized:

I wish everybody would understand that it’s difficult to be in a leadership position making decisions, but you have to have the courage and the humility to say that a decision was good for yesterday, but it’s not good for today.

Furthermore, taking a process approach includes vigilance to cascading or compound crises, including the racial justice reckoning embedded within the COVID-19 pandemic. A few participants discussed committees being formed to discuss systematic racism on campus along with launching speaker series and appointing new diversity and inclusion officers.

Three challenges emerged to a process approach. First, several participants noted that higher education institutions have a culture of slow change, which is not compatible with the need to quickly pivot during crises. Second, higher education institutions have planned for short-duration crises, such as severe weather or active shooters, but not long-duration crises. Third, due to the long duration of the COVID-19 pandemic, only a few leaders in our study have been able to track data for after-action (i.e., post-crisis) evaluations. Blake explained: “We haven’t even gotten there. So, our after-action analysis hasn’t yet taken place because we’re still in the action stage.”

### **Engage in Pre-Event Planning**

As noted in the prior section, participants unanimously agreed that their crisis plans were inadequate to address the high uncertainty of COVID-19 and the long duration of the pandemic. As Nolan summarized: “This is a very unique crisis, and so we had to create it [the plan] on the run.” Pre-event plans served as a starting point to manage the pandemic for several participants. Bailey noted: “You have something to start building from and then as you gain more information about the situation, you evolve your program.” Pre-event plans also helped build relationships with on-campus experts, as we further discuss later in the results section (see findings for collaborating and coordinating with credible sources).

### **Form Partnerships with Publics**

Forming strong partnerships has been essential to U.S. higher education institutions’ responses to the COVID-19 pandemic, as further discussed below.

## Public Health Authorities and Local Leaders

Higher education leaders frequently partnered with public health authorities, especially at the local level. These authorities helped universities structure their plans and responses in line with federal, state, and local requirements. As Parker explained:

There were innumerable external groups offering guidance. . . . And in essence, they were all very similar in what you needed to think about. So, for us, having the general framework from [city name removed] said, okay, this is the one we have to do, we'll use this one. That was helpful.

A few higher education leaders discussed a symbiotic relationship with public health authorities. In these cases, campus personnel actively participated in state emergency operations centers or partnered with governments to develop statewide policies and protocols. For example, Hunter shared: "Our School of Public Health has been tapped as the state's support for public health issues, policies, guidelines, trends, any number of issues that have supported the state's decision-making hierarchy." In addition to public health authorities, local elected leaders emerged as important partners for higher education institutions. Like with public health authorities, relationships with local elected leaders were sometimes symbiotic.

While most higher education leaders discussed positive relationships with public health authorities and local elected leaders, not all agreed. Several participants criticized the federal government and the World Health Organization for insufficient and sometimes contradictory guidance. For example, Taylor raised concerns about "opening ourselves to endless litigation if something does happen" without protection from the state.

## On-Campus Experts

In line with the preference to partner with external public health authorities, higher education leaders shared the importance of on-campus public health experts when available.

*Public Health Experts.* On-campus public health experts included campus health and counseling centers as well as faculty members. These experts helped with a range of issues, including

modifying heating and cooling systems, developing campus testing and contact tracing protocols, vetting social distancing guidance, developing treatments and tests, and providing content expertise for decisions. As Parker emphasized:

We have a new public health program on campus within the last couple of years. The director of that program and our faculty have proven to be incredibly important internal resources and expertise for us. I think we all feel like if we had had this happen more than a couple of years ago, we wouldn't have had that content expertise on campus.

A couple of participants further noted that sometimes these partnerships were serendipitous rather than planned. For instance, a vice president at one institution read about a campus public health historian in a newspaper article and then invited that professor to help train their emergency response team.

While most institutions emphasized partnerships with public health in-house experts, a few leaders discussed the benefits of involving faculty with other expertise. For example, one institution created an ethics and privacy committee and another institution established a risk communication advisory group. A few participants also emphasized the central role that information technology and instructional design experts played in the transition to online learning. Information technology also supported a variety of other functions. For instance, Hayden mentioned:

We want to be able to leverage technologies during a crisis. . . . Some of it is in some workflows with some processes that need to take place with regard to approval for people to come back on campus. So, they're [IT] helping with those workflow processes. They're also helping with our contact tracing technologies and our self-assessment health screening technology.

## **Peer Networks**

All leaders emphasized the critical importance of peer networks in helping them respond to COVID-19. As Riley shared: "All of us are connected to our counterparts throughout the state because we're all facing the same crisis. . . . Everybody steals shamelessly. It's not even that. It's like everybody offers to help everybody else." In addition to helping each other shape decisions and actions,



peer networks helped institutions present a unified face for tricky decisions, such as when to cancel or suspend athletics. While recognizing the critical role of peer collaboration in navigating the novel virus, several leaders revealed that the competitive nature of higher education hampered some collaborations. For instance, Nolan observed: “Independent of a pandemic, there’s just a culture of competition in terms of Big 10 universities, research universities, then, of course, public and private.”

### **Listen and Acknowledge Concerns of Publics**

Leaders noted that listening and acknowledging community members’ concerns has been at the forefront of their COVID-19 responses. This has occurred through formal venues, such as virtual town halls, emails, surveys, and newsletters. For example, Avery shared:

I kept thinking about the ways I connect with students. I’ve been sending an e-newsletter out to students every Wednesday. I’m in my apartment doing a selfie. It’s acknowledging, this is big, and it’s hard, and it’s complicated, and of course, you’re struggling. They’re like, “Oh my gosh, thank you for understanding.” I’m like, I can’t even believe that somebody wouldn’t understand that.

To a lesser extent, listening occurred organically, such as through social media monitoring.

Leaders identified several benefits of listening and acknowledging concerns. First, doing so can help institutions recognize imperfect solutions. As Jordan said:

Listening to their concerns from people who are saying, “I don’t know what’s going on,” and let them feel heard, and work with them. . . . But, then reminding everyone that we’re doing what we can to continue to have a safe and open campus.

Second, listening and acknowledging concerns allows leaders to recognize the problems their publics face while providing reassurances. For instance, Hayden shared:

If somebody suggests something that we can do, and we think it's a valid suggestion, then we will absolutely try to do it. We have some recent faculty feedback where they were not happy with one of the testing strategies we implemented. So, we did adapt.

Third, listening and acknowledging helps leaders address the mental health concerns that have been prevalent throughout this pandemic. Morgan shared: "All of that uncertainty bakes in anxiety into our staff and community. The only thing you can do to confront that is to validate, and then, communicate, communicate, communicate."

### **Collaborate and Coordinate with Credible Sources**

As previously noted, partnerships with on-campus and off-campus experts were essential to institutions' COVID-19 responses. In collaborating and coordinating with credible sources, leaders discussed the importance of relationship building and maintenance. Some participants further discussed the challenges associated with forced partnerships. We further discuss these findings below.

### **Relationship Building and Maintenance**

Multiple participants noted that the relationships they built with colleagues on- and off-campus have been essential for effectively collaborating and coordinating during the pandemic. As Dakota shared: "When a crisis hits, it's difficult to spend the time to try and develop those relationships. . . . A lot of crisis response is dependent on existing relationships and other people who might be facing similar questions or issues."

Others observed that the pandemic revealed a need for them to focus more on strategic relationship building and maintenance in the future. For example, Jordan noted:

One of the things that the pandemic showed us was how siloed we were, even across sectors in the university that really needed to be working together. So, I think that's one of the biggest things. It has shown us how much we need to make a concerted intentional effort to maintain these relationships in the long-term.

## **Forced Partnerships**

A few participants in large state systems noted that, at times, coordination was mandated from the head of the system to maintain consistency across institutions. As an example, Hayden discussed a statewide collaboration, noting: “We are very much in lockstep with the state. Our governor’s office has put together a council of higher education and college presidents, so that we’re getting very specific information directly from the governor’s office.” Sometimes mandated consistency posed collaboration challenges, such as when institutions had to change their COVID-19 testing protocols to align with other institutions in the same system. At other times, forced collaboration resulted in delayed responses.

## **Communicate with Honesty, Frankness, and Openness**

Leaders equated communicating with honesty, frankness, and openness with communicating with transparency. They discussed the importance of considering scientific data with what is the “right thing to do” (Riley). The goal was to strategically share meaningful information with their publics. Ultimately, balancing scientific accuracy with transparency has been a tremendous challenge. As Sidney shared, “Having information that is clear and concise is like trying to nail Jell-O to a wall.” Furthermore, there is a tricky balance between sufficient transparency and inundating publics with too much information. For instance, Charlie noted, “We have to be careful not to overwhelm things.”

## **Meet the Needs of the Media and Remain Accessible**

All of the participants stated that social media and conventional media played an important role in information gathering and information dissemination, as further discussed below.

## **Information Gathering**

Social and conventional media have helped leaders gather information to guide their COVID-19 response strategies. In particular, media have helped leaders learn how colleagues at similar institutions are responding to the pandemic. For instance, Emerson shared:

Every time somebody published something, somebody would talk about it in the media or one of the cabinet-level people would get a hold of it and it would get shared around. And now it's like, "Are we doing all this too?"

In addition, social media have been instrumental in gathering publics' concerns. Many leaders described media monitoring to detect concerns posted on social media channels. A few participants described monitoring channels dedicated for specific publics to understand different groups' concerns. For example, Sam recounted, "We have a parent Facebook page. I've seen what some parents have written and they're concerned, as any parent would be of a new student."

Some participants employed social media to track and manage COVID-19 misinformation. In doing so, they tapped internal experts. As Gracen recalled:

There were notes that an incoming freshman had been posting racist comments and offensive material [related to COVID-19]. A couple of our faculty members, who are experts in disinformation online, did a deep dive into that content and discovered that it was a troll account. It was not a real person, it was not a real student.

## **Information Dissemination**

Leaders mostly used media for information gathering. In addition, some leaders proactively used media to promote their institutions' success stories and to provide community resources. For example, Jamie shared, "We're proactively promoting news about the institution, which involves media outreach as well as website content, supporting assets, video, photo, and then a strong social media presence." Speaking about sharing community resources, several participants mentioned that they created dedicated COVID-19 webpages, rather than going through mass media. For example, Dakota observed:

We've put [COVID-19] information on our website, we've done live-stream video broadcasts from leadership at the college. We've made videos that are both informative and also some entertaining things. We tried a variety of communications to send to people, and then we have to reiterate and follow up.

## **Communicate with Compassion and Empathy**

Throughout the pandemic, leaders emphasized communicating with compassion and empathy to reach diverse publics. Leaders also emphasized compassion in actions, as further discussed below.

### **Compassion at the Core of Higher Education**

Participants discussed the critical importance of communicating with compassion. As Sam shared: “I think that we’re a people business and we’re centered on people. We’re centered on our students and what our students need and around what our employees need.” In the pandemic, compassion needs to be extended to all community members, and sometimes publics need reminders to do so. For example, Avery mentioned:

I’ve got lots of students saying, “My faculty member doesn’t know how to teach [online],” I’m like, “I know that, and you know what? Your faculty member probably knows that too. . . . You need to offer some grace.”

Leaders also emphasized that communicating with compassion includes targeting specific messages to different publics. As Charlie commented: “Everybody needs the big broad messages, but there are many that need specific and individual messaging just for them because their circumstance is that different.”

### **Compassion in Actions**

While leaders agreed that communicating with compassion is essential, they also emphasized the importance of taking actions that reflect compassion. Leaders frequently discussed mental health concerns and provided additional support for community members. Hunter shared: “The emphasis has been making sure that our students feel supported, safe. We’ve increased counseling services to make sure that there’s an availability, so they can deal with the stress.” Other actions included changing grading policies, allowing some employees to work from home, and providing increased IT support, mental health counseling, and other services. Offering options for publics is another way that institutions

have put compassion into action, such as options to take classes online or in-person and options for some faculty and staff to work from home.

### **Accept Uncertainty and Ambiguity**

Participants were keenly aware of the uncertainty and ambiguity inherent in COVID-19 and the related communication challenges. As Bailey summarized: “People are looking for absolutes.” Furthermore, institutions frequently have to pivot as crises evolve, but participants explained that these pivots can become “pain points.” Phoenix further explained:

I want to be able to send a clear message, but that is the real pain point. There is so much change so frequently that it's almost like, well, the next day we have to send out something that's saying, “Oh well, we told you this, but now it's this.”

To mitigate these pain points, participants suggested integrating uncertainty into crisis messages.

### **Communicating Messages of Empowerment**

Leaders found it critical to empower publics to take protective behaviors to limit the potential spread of coronavirus on campus. As Owen said: “Responsibility is on 18-to-22-year-olds. They need to follow the protocols and we'll make it to the end of the semester. We're putting a lot of faith in them.” Leaders further noted that they were attempting a culture shift. For instance, Hayden shared: “We're working on shifting the culture, so that people understand that physical distancing and wearing masks are part of our new normal.”

Several participants discussed peer-to-peer training as an effective tactic to support the campus community commitment message. Quinn explained: “Our team created a COVID education video that we've shared with peer advisors that have been trained, kind of a train-the-trainer. So, it's peer-driven, which I think is so much more effective [than top-down messages].” Other institutions encouraged their community members to create online



content to support messages of community safety, often with a dedicated hashtag. In some cases, institutions awarded prizes to randomly selected community members who participated in these online campaigns.

### **Complimenting Empowerment with Resources, Consequences, and Options**

To complement messages of empowerment, institutions offered resources in the form of personal protective equipment and access to COVID-19 tests. For example, Gracen said: “We’ve had a mask station all week for people that forgot their mask. We’ve given every student, faculty, and staff member [a mask]. We have these masks where you could see mouths.”

When messages of empowerment failed, some institutions employed disciplinary measures. Often, these measures involved student suspensions. Some institutions employed conversations before immediately going to disciplinary measures. For example, Quinn observed:

We had suspended three students in the residence halls, one for not following the guest policy and two for having too many people in their room in a party situation. We highlighted that so people were aware that we have a zero-tolerance policy and that there are going to be consequences.

More often than enacting consequences leaders recommended offering options. As Lennon said: “We’re navigating by offering many different options. Students can either take their classes online, in-person, or a hybrid.”

## **Discussion**

Using the best practices framework, this study assesses the crisis communication activities of U.S. colleges and universities in response to one of the most impactful crises of our time. Findings broadly indicate that higher education institutions have employed communication activities that are consistent with the best practices, with some important modifications.

## **Best Practices and the COVID-19 Pandemic (RQ1)**

### **Process Approach and Pre-Event Planning**

Consistent with the best practices (Seeger, 2006; Seeger & Sellnow, 2019), U.S. higher education institutions adopted a process approach driven by the pandemic's extended duration, high uncertainty, and unprecedented disruption. Feedback and ongoing assessment allowed for adaptation of responses. While the participating colleges and universities generally reported having crisis plans, the plans only provided a starting point for COVID-19 responses. Although the specifics of the plans may have been of limited relevance, the structures of response and management were helpful for some institutions. While developing contingencies for a wider range of events would increase the utility of plans, bolstering structures and guidelines included in plans might also improve response capacity.

### **Form Strategic Partnerships with Publics and Listen to Concerns of Publics**

The unprecedented nature of the pandemic encouraged U.S. colleges and universities to form strategic partnerships with their publics. External partnerships with other higher education institutions and governments were especially important as sources of information. In some cases, internal publics also provided important subject matter expertise. The best practice of listening to the concerns of publics (Reynolds, 2006; Seeger, 2006) was used extensively for adjusting to the evolving pandemic conditions. This also helped institutions foreground the needs of key publics, including students, and manifest responses in line with an ethic of care (Liu et al., 2021; St. John III & Pearson, 2016). Listening, therefore, allowed U.S. higher education institutions to refine responses and maintain an ethical stance.

### **Coordinate and Collaborate with Credible Sources**

In line with the best practices (Seeger, 2006; Veil et al., 2011), coordinating and cooperating with credible sources was used to collect and share information with peer institutions. Those who were identified as preferred partners were credible sources with the most

relevant subject matter expertise. Coordination and cooperation were characterized as a primary feature of the pandemic response; few leaders advocated for taking an independent approach.

### **Remaining Transparent and Accessible to the Media**

The best practice of frankness and honesty (Reynolds & Quinn, 2008; Seeger, 2006) was operationalized in interesting ways. Administrators made strategic choices about what to communicate under conditions of high uncertainty, while seeking to be responsive to their publics' needs. The high uncertainty, driven in part by the duration of the pandemic, challenged the goal of transparency. In this pandemic, leaders operationalized frankness and honesty as transparency.

The best practice of remaining open and accessible to the media (Seeger, 2006; Veil & Husted, 2012) created challenges. Media, social and conventional, were used extensively for information collection and dissemination. The volume of information and the need to respond quickly overwhelmed some institutions' capacities to respond. Other institutions strategically employed media to learn about diverse publics' needs and to communicate resources and requirements.

### **Compassion as an Ethic of Care and Manage Uncertainty**

According to leaders in our study, compassionate responses to the pandemic have been paramount given the high level of disruption and the associated mental health challenges. Compassionate responses reflect a larger ethic of care (Liu et al., 2021; St. John III & Pearson, 2016). The needs of students were foregrounded in efforts to reflect compassionate responses, but leaders also shared the importance of adopting an ethic of care for faculty and staff. An ethic of care helped leaders adapt to the very high levels of uncertainty. Administrators sought to reflect the uncertainty they faced, yet were confronted by ongoing requests for more certainty. Balancing the demand of publics and the inherent uncertainty was a major theme in institutions' responses.

## **Communicating Messages of Empowerment**

Communicating messages of empowerment (Seeger, 2006) created challenges for leaders seeking to encourage compliance with public health recommendations. These recommendations were critical to managing the impact of COVID-19 on campus, yet some publics resisted. Ultimately, some leaders advocated for pairing messages of empowerment with resources, options, and, when necessary, enforcement with disciplinary measures.

### **Modified Best Practices (RQ2)**

U.S. college and university leaders engaged in COVID-19 communication that was broadly consistent with the best practices framework proposed by Seeger (2006). Some best practices appeared more central to COVID-19 responses than others, based at least in part on the circumstances of the pandemic. Partnerships, for example, were developed among similarly situated institutions. The specific form the best practices take, therefore, is contingent upon the context. While best practices could easily be critiqued as cookie-cutter approaches (Liu et al., 2018), every industry and disaster are different. A contingency approach acknowledges the important variability in context.

The data suggest some modifications to the initial formulation of the best practices (Seeger, 2006). First, the best practice of communicating with compassion should be revised to lead with an ethic of care. This revision reflects that compassion must be infused throughout the crisis management process, and not just in messaging. Similarly, messages of empowerment should be reformulated to reflect empowering publics. Messages of empowerment must be matched with empowering actions and providing resources and options. In some cases, enforcement measures must be enacted.

The best practice of meeting the needs of the media and remaining accessible should reflect that most organizations have their own digital and social media channels through which publics can directly interact with organizations. These publics include primary stakeholders, such as students, faculty, staff, government

agencies, as well as secondary stakeholders, such as journalists and other higher education institutions. Accordingly, a revised best practice should reflect meeting a variety of publics' information needs. Accepting uncertainty should also include helping publics accept uncertainty. Finally, communicating with honesty, candor, and openness can be truncated to communicate with transparency. In sum, Table 1 presents the revised best practices.

**TABLE 1 Revised Best Practices**

<b>Best Practices in Risk and Crisis Communication</b>	
1	Take a process approach to crises.
2	Engage in pre-event planning.
3	Lead with an ethic of care.
4	Meet publics' information needs.
5	Communicate with transparency.
6	Collaborate with credible sources.
7	Form partnerships with publics.
8	Empower publics.
9	Listen and acknowledge publics' concerns.
10	Accept uncertainty and help publics accept uncertainty.

As was seen in this study, each crisis manifests challenges in enacting certain best practices. Adapting response strategies requires ongoing feedback and assessment. In the case of the COVID-19 pandemic, some of the best practices played a stronger role in informing institutions' responses than others. For instance, the need to accept the high level of uncertainty and leading with an ethic of care were especially prevalent in institutions' responses to the pandemic. Other best practices, such as pre-event planning, were seen as less salient due to the long duration and highly disruptive nature of the pandemic. This finding suggests that best practices may function in a hierarchical manner with some best practices rising to the forefront for informing crisis management.

In other words, best practices might be characterized as an integrated framework for crisis communication rather than a discrete set of independent strategies.

### **Limitations**

This study was conducted while the pandemic was ongoing and the final impacts on U.S. colleges and universities are not yet fully known. Moreover, we do not know if the modified best practices transfer to contexts outside of the U.S. and to other crisis types. In addition, COVID-19 has been an especially broad, disruptive, and long duration crisis, and these results may not transfer to other more limited events.

## **Conclusion**

Facing the pandemic's widespread disruption, high uncertainty, and long duration, U.S. colleges and universities enacted crisis communication responses that were broadly consistent with the best practices framework with some important modifications. General frameworks that provide direction and guidance, while allowing for contingent responses, may be especially important in managing new threats with high impacts. Best practices can help translate research findings to inform and improve crisis management and provide value dimensions to guide ethical responses. As the COVID-19 pandemic continues and other pandemics are on the horizon (Spinney, 2021), findings from this study can help leaders protect their communities.

### **ORCID**

Brooke Fisher Liu  <https://orcid.org/0000-0003-1985-8050>

JungKyu Rhys Lim  <https://orcid.org/0000-0002-5006-2491>

Duli Shi  <https://orcid.org/0000-0002-9058-952X>

America L. Edwards  <https://orcid.org/0000-0001-7835-3808>

Khairul Islam  <https://orcid.org/0000-0001-7624-0041>

Ronisha Sheppard  <https://orcid.org/0000-0002-3577-3703>

Matthew Seeger  <https://orcid.org/0000-0002-5585-3081>

## References

- Amour, M. (2020, December 17). Few positives in final fall enrollment numbers. *Inside Higher Ed*. <https://web.archive.org/web/20201230200132/https://www.insidehighered.com/news/2020/12/17/final-fall-enrollment-numbers-show-pandemics-full-impact>
- Anand, G., & Kodali, R. (2008). Benchmarking the benchmarking models. *Benchmarking: An International Journal*, 15(3), 257–291. <https://doi.org/10.1108/14635770810876593>
- Avery, E. J., & Kim, S. (2009). Anticipating or precipitating crisis? Health agencies may not be heeding best practices advice in avian flu press releases. *Journal of Public Relations Research*, 21(2), 189–197. <https://doi.org/10.1080/10627260802557449>
- Carlson, S., & Gardner, L. (2020, December 19). The year that pushed higher ed to the edge: The pandemic exacerbated long-simmering problems confronting colleges. *Chronicle of Higher Education*. <https://web.archive.org/web/20201219200524/https://www.chronicle.com/article/the-year-that-pushed-higher-ed-to-the-edge>
- Claeys, A-S., & Opgenhaffen, M. (2016). Why practitioners do (not) apply crisis communication theory in practice. *Journal of Public Relations Research*, 28(5–6), 232–247. <https://doi.org/10.1080/1062726X.2016.1261703>
- Coombs, W. T. (2019). *Ongoing crisis communication: Planning, managing, and responding*. Sage.
- Corbin, J., & Strauss, A. (2015). *Basics of qualitative research: Techniques to developing grounded theory* (4th ed.). Sage.
- Covello, V. T. (2003). Best practices in public health risk and crisis communication. *Journal of Health Communication*, 8(S1), 5–8. <https://doi.org/10.1080/713851971>
- Ha, J. H., & Riffe, D. (2015). Crisis-related research in communication and business journals: An interdisciplinary review from 1992 to 2011. *Public Relations Review*, 41(4), 569–578. <https://doi.org/10.1016/j.pubrev.2015.06.019>



- Heath, R. L. (2006). Best practices in crisis communication: Evolution of practice through research. *Journal of Applied Communication Research*, 34(3), 245–248. <https://doi.org/10.1080/00909880600771577>
- Howe, P. D. L., Boldero, J., McNeil, I. M., Vargas-Saenz, A., & Handmer, J. (2017). Increasing preparedness for wildfires by informing residents of their community's social norms. *Natural Hazards Review*, 19(2), 1–9. [https://doi.org/10.1061/\(ASCE\)NH.1527-6996.0000279](https://doi.org/10.1061/(ASCE)NH.1527-6996.0000279)
- Janoske, M. L., Liu, B. F., & Madden, S. (2013). Congress report: Experts' recommendations on enacting best practices in risk and crisis communication. *Journal of Contingencies and Crisis Management*, 21(4), 231–235. <https://doi.org/10.1111/1468-5973.12031>
- Jarreau, P. B., Altinay, Z., & Reynolds, A. (2017). Best practices in environmental communication: A case study of Louisiana's coastal crisis. *Environmental Communication*, 11(2), 143–165. <https://doi.org/10.1080/17524032.2015.1094103>
- Jin, Y., Iles, I., Austin, L., Liu, B. F., & Hancock, G. (2020). The infectious disease threat (IDT) appraisal model: How perceptions of IDT predictability and controllability predict individual's responses to risks. *International Journal of Strategic Communication*. Advance online publication. <https://doi.org/10.1080/1553118X.2020.1801691>
- Jin, Y., Lee, Y.-I., Liu, B. F., Austin, L., & Kim, S. (2021). How college students assess the threat of infectious diseases: Implications for university leaders and health communicators. *Journal of International Crisis and Risk Communication Research*, 4(1), 129–164. <https://doi.org/10.30658/jicrcr.4.1.5>
- Joffe, H., Perez-Fuentes, G., Potts, H. W., & Rossetto, T. (2016). How to increase earthquake and home fire preparedness: The fix-it intervention. *Natural Hazards*, 84(3), 1943–1965. <https://doi.org/10.1007/s11069-016-2528-1>
- Lin, X., Spence, P. R., Sellnow, T. L., & Lachlan, K. A. (2016). Crisis communication, learning and responding: Best practices in social media. *Computers in Human Behavior*, 65, 601–605. <https://doi.org/10.1016/j.chb.2016.05.080>

- Lindlof, T. R., & Taylor, B. C. (2011). *Qualitative communication research methods* (3rd ed.). Sage.
- Liu, B. F., Fowler, B. M., Roberts, H. A., & Herovic, E. (2018). Keeping hospitals opening during disasters through crisis communication preparedness. *Public Relations Review*, 44(4), 585–597. <https://doi.org/10.1016/j.pubrev.2018.06.002>
- Liu, B. F., & Mehta, A. (2020). From the periphery and toward a centralized model for trust in government risk and disaster communication. *Journal of Risk Research*. Advance online publication. <https://doi.org/10.1080/13669877.2020.1773516>
- Liu, B. F., Shi, D., Lim, J. R., Islam, K., Edwards, A. L., & Seeger, M. (2021). When crises hit home: How US higher education leaders navigate values during uncertain times. *Journal of Business Ethics*, 1–16. Advance online publication. <https://doi.org/10.1007/s10551-021-04820-5>
- Lu, H., & Schuldt, J. P. (2016). Compassion for climate change victims and support for mitigation policy. *Journal of Environmental Psychology*, 45, 192–200. <https://doi.org/10.1016/j.jenvp.2016.01.007>
- Mackert, M., Table, B., Yang, J., Bouchacourt, L., Woods, J. M., Bernhardt, M., & Wagner, J. H. (2020). Applying best practices from health communication to support a university's response to COVID-19. *Health Communication*, 35(14), 1750–1753. <https://doi.org/10.1080/10410236.2020.1839204>
- Marinoni, G., Van't Land, H., & Jensen, T. (2020). The impact of Covid-19 on higher education around the world. *IAU Global Survey Report*. [https://web.archive.org/web/20200724110628/https://www.iau-aiu.net/IMG/pdf/iau\\_covid19\\_and\\_he\\_survey\\_report\\_final\\_may\\_2020.pdf](https://web.archive.org/web/20200724110628/https://www.iau-aiu.net/IMG/pdf/iau_covid19_and_he_survey_report_final_may_2020.pdf)
- Moerschell, L., & Novak, S. S. (2020). Managing crisis in a university setting: The challenge of alignment. *Journal of Contingencies and Crisis Management*, 28(1), 30–40. <https://doi.org/10.1111/1468-5973.12266>
- National Center for Education Statistics. (n.d.). *Educational institutions*. Fast Facts. <https://www.scribbr.com/apa-examples/website/>

- Noar, S., & Austin, L. (2020). (Mis)communicating about COVID-19: Insights from health and crisis communication. *Health Communication, 35*(14), 1735–1739. <https://doi.org/10.1080/10410236.2020.1838093>
- Polikoff, M. (2020, August 4). What's the likely impact of COVID-19 on higher ed? *Inside Higher Ed*. <https://web.archive.org/web/20200806094147/https://www.insidehighered.com/views/2020/08/04/analysis-data-national-survey-impact-pandemic-higher-ed-opinion>
- Ponciano, J. (2021, January). United States passes 20 million COVID-19 cases as deaths remain near record high. *Forbes*. <https://www.forbes.com/sites/jonathanponciano/2021/01/01/united-states-passes-20-million-covid-19-cases-as-deaths-remain-near-record-high/>
- Reynolds, B. (2006). Response to best practices. *Journal of Applied Communication Research, 34*(3), 249–252. <https://doi.org/10.1080/00909880600771593>
- Reynolds, B., & Quinn, S. C. (2008). Effective communication during an influenza pandemic: The value of using a crisis and emergency risk communication framework. *Health Promotion Practice, 9*(4\_suppl), 13S–17S. <https://doi.org/10.1177/1524839908325267>
- Roche, J. P., & Muskavitch, M. A. (2003). Limited precision in print media communication of West Nile Virus risks. *Science Communication, 24*(3), 353–365. <https://doi.org/10.1177/1075547002250300>
- Sandman, P. M. (2006). Crisis communication best practices: Some quibbles and additions. *Journal of Applied Communication Research, 34*(3), 257–262. <https://doi.org/10.1080/00909880600771619>
- Seeger, M. W. (2006). Best practices in crisis communication: An expert panel process. *Journal of Applied Communication Research, 34*(3), 232–244. <https://doi.org/10.1080/00909880600769944>
- Seeger, M. W., Pechta, L. E., Price, S. M., Lubell, K. M., Rose, D. A., Sapru, S., Chansky, M. C., & Smith, B. J. (2018). A conceptual model for evaluating emergency risk communication in public health. *Health Security, 16*(3), 193–203. <https://doi.org/10.1089/hs.2018.0020>

- Seeger, M. W., & Sellow, T. L. (2019). *Communication in times of trouble*. Wiley Blackwell.
- Sellnow, T. L., Ulmer, R. R., Seeger, M. W., & Littlefield, R. S. (2009). *Effective risk communication: A message-centered approach*. Springer. <http://dx.doi.org/10.1007/978-0-387-79727-4>
- Smith, W. R., Stephens, K. K., Robertson, B. R., Li, J., & Murthy, D. (2018). Social media in citizen-led disaster response: Rescuer roles, coordination challenges, and untapped potential. *Proceedings of the 15th International Conference on Information Systems for Crisis Response and Management (ISCRAM)*, Rochester, NY. <https://par.nsf.gov/biblio/10076203>
- Spinney, L. (2021). The next pandemic? It may already be upon us? *The Guardian*. <https://web.archive.org/web/20210216000726/https://www.theguardian.com/commentisfree/2021/feb/15/creating-conditions-next-pandemic-antibiotics>
- St. John III, B., & Pearson, Y. E. (2016). Crisis management ethics: Moving beyond the public-relations-person-as-corporate-conscience construct. *Journal of Media Ethics*, 31(1), 18–34. <https://doi.org/10.1080/23736992.2015.1116392>
- Suri, H. (2011). Purposeful sampling in qualitative research synthesis. *Qualitative Research Journal*, 11(2), 63–75. <https://doi.org/10.3316/QRJ1102063>
- The Carnegie Classification of Institutions of Higher Education. (2020). About Carnegie Classification. <http://carnegieclassifications.iu.edu/>
- Ulmer, R. R. (2001). Effective crisis management through established stakeholder relationships: Malden Mills as a case study. *Management Communication Quarterly*, 14(4), 590–615. <https://doi.org/10.1177/08933189011144003>
- Veil, S. R., Buehner, T., & Palenchar, M. J. (2011). A work-in-process literature review: Incorporating social media in risk and crisis communication. *Journal of Contingencies and Crisis Management*, 19(2), 110–122. <https://doi.org/10.1111/j.1468-5973.2011.00639.x>
- Veil, S. R., & Husted, R. A. (2012). Best practices as an assessment for crisis communication. *Journal of Communication Management*, 16(2), 131–145. <https://doi.org/10.1108/13632541211217560>

- Veil, S. R., Reynolds, B., Sellnow, T. L., & Seeger, M. W. (2008). CERC as a theoretical framework for research and practice. *Health Promotion Practice*, 9(4), 26S–34S. <https://doi.org/10.1177/1524839908322113>
- Wang, J., & Hutchins, H. M. (2010). Crisis management in higher education: What have we learned from Virginia Tech? *Advances in Developing Human Resources*, 12(5), 552–572. <https://doi.org/10.1177/1523422310394433>
- Whitford, E. (April 2, 2020). How much did coronavirus disruptions affect 2 closing colleges? *Inside HigherEd*. <https://web.archive.org/web/20200516052959/https://www.insidehighered.com/news/2020/04/02/Two-small-colleges-winding-down-operations-coronavirus-impact-looms-over-higher-ed>
- World Health Organization. (2020). *Coronavirus disease (COVID-19) pandemic*. <https://web.archive.org/web/20210101003151/https://www.who.int/emergencies/diseases/novel-coronavirus-2019>

