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RESEARCH NOTE

The Built Environment as Organizational Capacity: A Post-Occupancy Evaluation of a Child Advocacy Center

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ABSTRACT

This pilot study uses a Child Advocacy Center (CAC) case study to investigate the use of space and built environment in nonprofit organizations. Conceptually, we frame the built environment as a dimension of organizational capacity because design approaches may support or hinder the ability of a mission-oriented organization to implement its programs. Relying on a post-occupancy evaluation, we classify design choices into "Two-Dimensional Plan View," "Three-dimensional Room-View," and "Boundary Spanning" factors and show how they impact service delivery, both positively and negatively. We conclude with implications for future research.

1 | Introduction

The physical environment has power: the power to traumatize and restore. Spaces designed to support vulnerable populations should be designed intentionally to minimize harm and maximize positive impact (e.g., Dietkus 2022; Owen and Crane 2022). However, nonprofits have limited resources to shape the physical environment (e.g., Grønbjerg and Nagle 1994; Parnell et al. 2019). Funding sources often privilege program costs over administrative costs, including the needs of the physical environment (e.g., Hung et al. 2022). However, research on welfare waiting rooms, homeless shelters, and domestic violence shelters shows that the physical environment can impact both service-providers and their beneficiaries (Goodsell 1984; Grieder and Chanmugam 2013; Pable 2012; Petrovich et al. 2017).

This research note relies on a pilot case study to conceptualize the built environment as a component of organizational capacity. It uses the case of a child advocacy center (CAC), a type of nonprofit organization that responds to child abuse by providing trauma-informed, child-friendly settings to investigate child abuse (Jackson 2004). A CAC is a child-focused facility that offers comprehensive services (e.g., forensic interviews, medical evaluations, mental health support, therapy, victim advocacy, and courtroom preparation) to minimize the need for repeated interviews and reduce the potential for re-traumatization (Herbert et al. 2018). The child-centric nature of these facilities makes them an ideal case for this pilot study.

The research note offers two significant contributions to the field of nonprofit studies. First, conceptually, it views the built environment as a vital resource for organizations, highlighting its importance in enhancing organizational capacity and enabling effective mission implementation (Andersson et al. 2016). The study addresses the key research question: How do design choices affect an organization's ability to achieve its mission? Second, methodologically, the pilot study introduces post-occupancy evaluation (POE) to nonprofit studies. POEs are a well-established practice in interior design that assesses the actual uses of a building compared to the intended uses outlined in the original design (Lee and Kwon 2011; Shepley et al. 2009). By doing so, a POE emphasizes the perspective of the building's

occupants, evaluating how the space is used and perceived, and how well it supports the building's purposes and, we argue, the organization's mission.

2 | Literature Review

2.1 | Defining Capacity of Nonprofit Organizations

Nonprofit scholars use the concept of "capacity" to describe a set of factors and practices that improve organizational performance. The complexity of this concept arises from its various applications, which include structures and processes as well as both tangible and intangible characteristics (Cairns et al. 2005; Christensen and Gazley 2008). Additionally, scholars differentiate capacity in terms of unit of analysis, ranging from individual, organizational, and environmental capacity (Christensen and Gazley 2008; Kacou et al. 2022). Scholarship on capacity in the nonprofit sector is extensive. While frameworks overlap, there is an agreement that capacity is a multidimensional concept that needs to consider the type of organization and life stage (Andersson et al. 2016).

Organizational capacity categories incorporate internal and external dimensions, structures, and processes. Suárez and Marshall (2014) distinguish between latent capacity, comprising organizational infrastructure and human resources, and concrete actions, referring to formalized and rationalized processes. When related to human resources, capacity refers to professionalization indicating the reliance on staff and leaders with managerial expertise (Hwang and Powell 2009; Maier et al. 2016), whereas formalization and rationalization describe the use and adoption of standardized practices, procedures, and policies (Suárez and Gugerty 2016; Suárez and Marshall 2014). Professionalization and rationalization are elements of capacity that have received significant attention in the literature and are at the center of efforts to measure capacity (Shumate et al. 2017).

By contrast, organizational infrastructure is more complex because it encompasses intangible characteristics. For instance, Suárez and Marshall (2014) suggest that organizational size, age, and reputation can influence service provision. Organizational culture, communication practices, and facilities are also part of organizational infrastructure (Christensen and Gazley 2008; Doherty et al. 2014). As a dimension of capacity, organizational infrastructure then comprises a range of practices (e.g., communication systems and production systems), organizational characteristics (e.g., age and reputation), and physical assets (e.g., facilities and inventory).

One component that the literature on organizational capacity has not fully explored is the role of physical assets, and specifically of the *built environment* (or *facilities*) in facilitating, supporting, and enabling organizations to pursue programmatic goals. Few specific studies focus on the impact of space on service provision in the context of homeless shelters, affordable housing, and sport clubs. Shier et al. (2007), for instance, conclude that "Aspects of the built environment impact the system of shelter service, which in turn may have negative implications for community relationships" (p. 72). Similarly, Doherty et al. (2014) show that access and safety are crucial for evaluating the buildings of sport clubs that require specialized facilities. However, while recognizing the role of the built environment, the focus of these studies is not an analysis of how it influences service provision. To address this gap, in the next section, we draw on an interdisciplinary body of literature to conceptualize the built environment as a crucial component of organizational capacity.

2.2 | Conceptualizing the Built Environment as a Component of Organizational Capacity

The literature on interior design, which focuses on planning and creating human-made spaces to meet users' diverse needs, provides valuable insights into how architectural and design features can impact social services outcomes. The term "built environment" refers to the human-made spaces that serve as settings for learning, work, recreation, and living (Portella 2023). Research on learning environments (Brooks 2011; Tanner and Langford 2003), inpatient treatment and healthcare facilities (Ulrich 2001), and homeless shelters (Pable 2007, 2012) demonstrates how environmental design can support an organization's social mission.

We use the scholarship in interior design to create a framework that maps factors in the built environment affecting nonprofits' ability to achieve their missions. We organize these factors into three categories: "Two-Dimensional Plan View Factors," "Three-Dimensional Room-View Factors," and "Boundary Spanning Factors." Table 1 defines each core dimension, identifies key sub-categories, and provides examples in a nonprofit context.

2D plan-view factors include functionality of the spaces and spatial layout (circulation patterns and room adjacencies). Circulation refers to how users move through the building, whereas adjacency focuses on why specific spaces should (or should not) be close to each other. Studies on permanent supportive housing document the relationship between spatial layout and sociality (Rollings and Bollo 2021), as design choices are crucial for whether residents experience these areas as either "contested spaces" or "choice-centered places" (Littman et al. 2024). McLane and Pable (2020) emphasize that design factors like accessibility and spatial adjacency are essential for creating community spaces in permanent supportive housing, fostering relationships among residents, and reducing marginalization. Bollo and Donofrio (2022) further note that multiple community areas enhance residents' choices and safety. Likewise, Pable (2007) highlights how the built environment in homeless shelters can impact psychological recovery, pointing out that the entrance's proximity to sidewalks can diminish users' feelings of privacy and security.

3D room-view factors encompass the color of interior spaces, decorative choices, and furniture arrangement, which can positively or negatively impact users. Studies on healthcare environments (Ulrich 2001), prisons (Nadarevic and Macanovic 2023), and hotels (Siamionava et al. 2018) show, for instance, that colors affect the occupants of a space, and some colors (e.g., blue) have a calming effect while others (e.g., red) do the opposite. Furthermore, creating a welcoming

TABLE 1 | Core dimensions of the built environment as organizational capacity.

Core categories	Definition	Key sub-categories	Examples in nonprofit context
2D plan-view factors	The spatial layout and organization of architectural elements encompass various factors most easily understood from a top-down (plan view) perspective.	Circulation, adjacencies, proximities, access	• Client restrooms are located away from staff-only areas • Private exits for crisis-response scenarios • Group therapy rooms near administrative support zones • Animal kennels are separated from medical treatment rooms • Storage room placed behind the service counters • Intake area located near administrative support spaces
3D room-view factors	Visual interior qualities of a space influence the atmosphere, emotional tone, and usability of a room.	Color selection, furnishings, and décor	• Child-appropriate furnishings in a family waiting room • Calming colors, live plants, and comfortable furnishings in intake rooms • Home-like (non-institutional) décor to foster familiarity and ease • Color-coded bins in the donation intake area • Acoustic panels to reduce dining hall noise • Pet-friendly furnishings in the shelter waiting area
Boundary-spanning factors	Design elements that intersect both functional and experiential dimensions of a space, often enhancing feelings of psychological safety and comfort.	Visual privacy, auditory privacy, lighting, and security	• Window height prevents outside visibility inside rooms • Sound-absorbing panels in shared spaces • Layered lighting adjustable to client needs • Soft, adjustable lighting in sleeping areas • Frosted glass is used in intake cubicles • Curtains or panels separating sleeping cots

environment in counseling rooms supports a sense of safety and security (Sanders and Lehmann 2019), and decorative choices (e.g., the use of real plants) lowered stress levels in hospital waiting rooms (Beukeboom et al. 2012). These studies demonstrate that neutral tones, calming artwork, and residential-style furnishings contribute to a welcoming environment through three-dimensional design.

Boundary-spanning factors influence the space's functional and aesthetic qualities and intersect multiple dimensions. Examples

include both visual and auditory privacy, lighting, and security considerations. Research shows that visual and auditory privacy can positively impact the use of a space, creating an environment that feels more secure (Grieder and Chanmugam 2013; Ulrich 2001) while increasing functionality for users (Harris et al. 2002; Tanner and Langford 2003). Privacy concerns relate to circulation and adjacencies, as shown by research in healthcare design (Ulrich 2001) and furnishing to ensure auditory privacy (Yadav and Cabrera 2024). Likewise, how the space is organized and furnished impacts the sense of psychological security, as studies show that features of a domestic violence shelter (e.g., chain-link fences) can feel more like prisons and create a psychologically unsafe environment (Grieder and Chanmugam 2013). In contrast, a home-like environment positively affects children (Lawi 2017), adolescents (Kim 2011), and adults (Harris et al. 2002).

Our understanding of the built environment as a component of organizational capacity connects the extensive literature on nonprofit capacity with interior design. The literature reviewed in this section shows that the built environment's impact is relevant to nonprofit organizations with human-centric missions and/or programming, particularly for organizations interacting with beneficiaries in their facilities. Through a pilot case study of a CAC, we show how design choices can either facilitate or undermine an organization's effort to achieve its social mission.

3 | Methods

We employed a case study approach to explore the interplay between design choices, the built environment, and service delivery at a local Child Advocacy Center (CAC). We purposefully selected a CAC as a type of nonprofit organization for this study because of their child-centric approach and the traumatic nature of their work, which requires specialized facilities and raises concerns about privacy, confidentiality, and security. As the literature shows, these factors highlight how the built environment can support or hinder programmatic activities; as such, CACs are an extreme case. As Stinchcombe (2005) suggests, extreme cases offer advantages for theorizing—in our case, about the built environment as a dimension of organizational capacity—because they allow for the "intense observation" and rich information needed to do so (as compared to average cases) (p. 39).

Methodologically, we use a post-occupancy evaluation (POE) to assess the current and potential uses of the built environment in support of the organization's mission. A POE refers to a range of approaches that seek to understand how a building functions after completion, particularly whether it meets intended goals and how users perceive and experience the space (Sanni-Anibire et al. 2016; Vischer 2001). Various stakeholders use POE differently: design firms to measure their work's efficacy (Presier and Nasar 2008; Sanni-Anibire et al. 2016); building managers to improve the efficiency of a facility's space or energy utilization (Li et al. 2018; Loftness et al. 2009; Sanni-Anibire et al. 2016), and researchers to investigate the uses of a space and explore how occupants have modified the space to serve the organization's mission better (Aliyu et al. 2016; Roberts et al. 2019). The term "occupants" refers to leadership and staff members of the organizations and the clients served by the organizations.

There are no standardized guidelines or tools for POEs, as methods vary based on building type and evaluation goals, such as user satisfaction, environmental performance, and economic value. Preiser (1995) classifies POEs into indicative, investigative, and diagnostic types, with recent research detailing aspects like technical, functional, and behavioral performance (Sanni-Anibire et al. 2016). Common tools for POEs include observational walkthroughs, interviews, focus groups, surveys, and physical measurements like acoustics and indoor air quality (Sanni-Anibire et al. 2016). At the end, any method that seeks to assess a building's performance can be used in a POE (Vischer 2001).

This study utilized two key components: a semi-structured interview with the Program Coordinator of the CAC and walkthroughs (accompanied and unaccompanied) of the space. These two components were chosen based on the Program Coordinator's extensive tenure at the Child Advocacy Center and her experience across multiple roles, which positioned her to provide nuanced insights beyond what a survey could capture. Likewise, the observational walkthroughs were selected to collect direct observational data on the facility to verify interview data independently, considering that the interviewee had no direct interior design or architecture expertise.

We conducted a 90-min Zoom interview, focused on space utilization, staff-driven adaptations, and potential modifications to enhance service delivery. Semi-structured interview questions were organized under four domains: (1) "Building Characteristics," (2) "Relationship between the Building and the CAC Mission," (3) "Adjustments to the Building," and (4) "Challenges." The Supporting Information includes the semi-structured interview protocol we used for the study.

The POE's second component involved a virtual and an in-person (unaccompanied) walkthrough of the CAC. The virtual walkthrough, conducted via Zoom with CAC leadership, recorded visual observations to assess whether spaces are being used effectively and as intended (Sanni-Anibire et al. 2016). It also allowed for discussing space functions, changes, and needed adjustments.

The study explores how space affects service provision by a CAC, thus highlighting how space is an integral part of the program rather than overhead costs. The case study building, located in the southeast of the United States, was constructed in 1998 for the local CAC. The building was designed and constructed for the CAC, rather than being retrofitted to meet the needs of a CAC. The floor plan of the case study building is presented in Figure 1.

4 | Results

We thematically organize data from the interview and the two walkthroughs into three categories: *2D plan-view factors* (function, circulation, and circulation), *3D room-view factors* (color and other decorative choices), and *boundary-spanning factors*

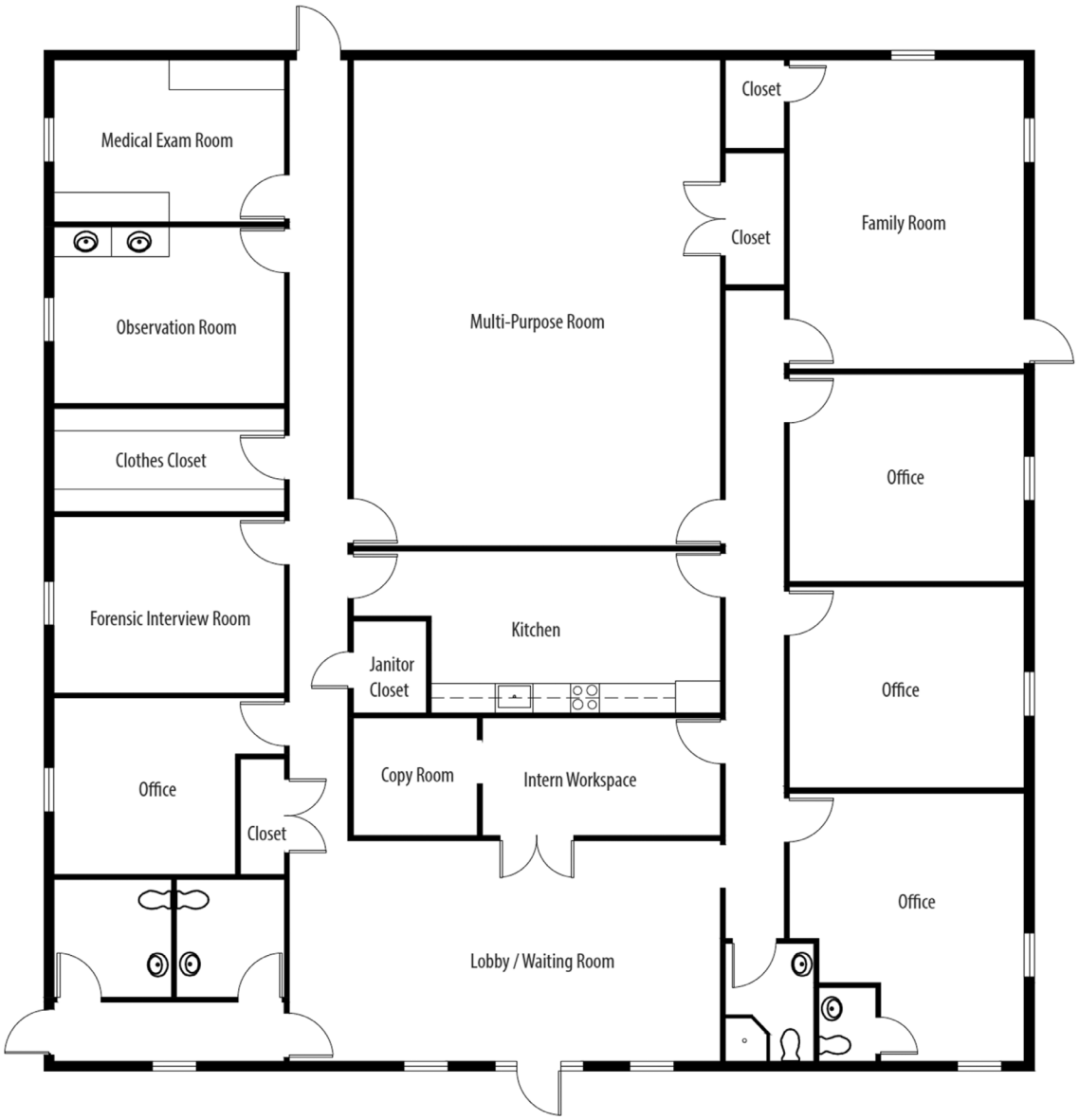

FIGURE 1 | Floorplan. *Source:* Authors' drawing (original floorplan was unavailable).

(visual and auditory privacy concerns and security). Underlying these categories are a set of challenges regarding how the building limits the ability to fulfill the mission and obstacles to modifying the building to facilitate service delivery.

Children are at the core of the CAC's mission, and the building is designed around this focus. Separation of spaces, auditory and visual privacy, and creating a serene and home-like environment are priorities for the CAC leadership. The walkthroughs also highlighted modifications to the CAC's space to facilitate service delivery.

4.1 | Two-Dimensional Plan-View Factors: Function, Circulation, and Adjacencies

Function is the first sub-category of the two-dimensional dimension and focuses on the requirements of a facility (or parts of it) in relation to its specialized purpose. Like other nonprofits, CACs require office spaces, storage, and bathrooms, but differ in their need for specialized spaces for services such as forensic interviewing and medical exams. The interview and walkthroughs revealed frequent interactions between staff and affiliated personnel, including the police, DHR, and nurses.

Circulation, the second subcategory, focuses on how users move through a space and how this affects service provision. An example the interviewee shared centers on the waiting room, part of the lobby. Even though the waiting room has doors that lead to different areas of the building (separating circulation through the building), the staff intentionally stagger appointments so that clients do not encounter each other in the waiting room/lobby. For client confidentiality, they must interact only with CAC staff and not encounter other clients. As a result, the building itself limits service provision.

Adjacency, the third subcategory, supports both the function of and the circulation through spaces. For instance, the medical

exam room should be near an exterior door to allow survivors discreet access. The forensic interview room should be close enough to the observation room for mid-interview consultations with police and DHR, yet distant enough to prevent interviewees from overhearing discussions. Likewise, the family room should not be adjacent to the forensic interview room to ensure the interviewee's confidentiality.

4.2 | Three-Dimensional Room-View Factors: Color Application and Interior Decoration

The interview with the Program Coordinator, a therapist and forensic interviewer, highlighted the impact of color and interior decoration. As this section shows, however, while it helps to analytically distinguish between the two subcategories of color and interior decoration, in practice, they substantially overlap. The interviewee noted how existing color schemes and patterns in the building were overstimulating and detracted from the center's therapeutic mission: Door frames were painted in vibrant, attention-grabbing colors (color application), and the building featured numerous murals and stencils (decorative elements) that contributed to an overwhelming sensory environment (see Figure 2).

The therapy room serves as a good example. Previously decorated with butterflies, balloons, a rainbow, and an array of bright colors (see Figure 2, left image), the current therapy room is painted in neutral colors and furnished with home-like décor. The original design choices were intended to create a welcoming atmosphere, but proved overstimulating for children. As the program director noted, when children were in the original room, "*[it] had lots of colors, rainbows and angels in balloons, and it was just a thousand colors, and everything was bright, and when kids went into space. ... They could not focus. They were overstimulated just by being in the space.*" In response, staff repainted therapy areas and hallways in neutral and child-friendly tones.

CAC staff also implemented design strategies (e.g., colors, furniture, and decor) to create a homelike rather than institutional environment, further supported by decentralizing therapy services to the therapists' offices. The program director noted, "I think everything kind of being set up like a house, ... I think it helps. ... My hope is that families feel that way when they walk into, even though they're coming to this space, for something, you know, unimaginable."

4.3 | Boundary-Spanning: Privacy and Security

Some elements can affect the spatial layout (2D) and the space's experiential quality (3D). The data revealed that auditory privacy, visual privacy, and security are subcategories that the CAC must consider.

Auditory privacy challenges CAC staff because the building lacks carpet flooring. The program director noted, "The sound travels really well in this building, unfortunately, which is why we had to pay for the sound panels to go in the forensic interview room." Ensuring auditory privacy is critical for client confidentiality and the efficacy of therapeutic and forensic processes. Children who believe that their parents or other family members can overhear their conversations during therapy or forensic interviews are often less willing to be entirely truthful and open.

Visual privacy refers to how spaces, doors without windows or sidelights, and client circulation are organized. The hallways on either side of the facility are intentionally long to reinforce the perception of auditory and visual privacy: the program director noted, "our big kiddos, they love it because it's like, okay. I'm safe. I can say what I want to say ..." Privacy assurance then includes the perception that what they discuss cannot be overheard by their accompanying adult.

Security is crucial for the CAC's operations, shaping the floorplan (2D) by determining. Secure areas, escape routes, and controlled access zones. Service-providing areas are located away from the building's front to protect client privacy. Room design (3D) balances visibility, lighting, and furnishings to meet security needs while maintaining an inviting, non-institutional feel.

FIGURE 2 | Changes to the therapy room. The two therapy rooms in this figure are not the same physical room. Staff turnover allowed for repurposing the old therapy room while using staff offices for therapy sessions. *Source:* CAC and authors.

The 2D plan-view factors, 3D room-view factors, and the boundary-spanning factors are essential to both the practical layout of the CAC and the user's sensory experience within the space, both of which contribute to the CAC's ability to fulfill its mission.

4.4 | Challenges

The challenges can be understood in two distinct but interconnected categories: obstacles posed by the existing layout to adequate service provision and limitations in securing resources for spatial modifications to improve service delivery. Each category influences the CAC's ability to provide a therapeutic and functional environment that supports its mission while meeting the specific needs of its clients.

The first set of challenges arises from the existing spatial layout and its limitations in meeting the specific requirements of CAC services. Many of these issues are rooted in 2D factors, where privacy and confidentiality are central. For instance, the fact that the waiting room is part of the lobby (see Figure 3) and is thus used by all clients presents confidentiality and privacy risks.

The second set of challenges involves barriers to securing financial and institutional support for spatial modifications. The program director noted, "They've let me get away with some things, but it's kind of if it's not broke, don't try to fix it." Funding agencies often view modifications to the built environment, while potentially impactful in enhancing service delivery, as non-essential or part of the organization's general overhead rather than mission-critical expenses. As a result, the CAC faces limitations in acquiring funding and approval for spatial changes that could enhance privacy, reduce noise, or improve functional adjacencies within the facility. In the program director's words, "*I think the next time people will be willing to hear, hear about some of the major infrastructure changes that need to happen … [we] will have to have completely outgrown this building. Unfortunately. I just don't. It can't. I can't even think about putting it on the radar.*" This perspective restricts the CAC's ability to implement design improvements, leaving staff to work in an environment that may not fully meet the center's specialized requirements.

FIGURE 3 | The main entry (door on the right) and the waiting room. *Source:* Authors' photo.

These dual challenges underscore the need for a more integrated approach to nonprofit facility planning that recognizes the built environment as a crucial component of service provision. Addressing environmental and resource-based barriers could substantially enhance the CAC's operational efficiency and therapeutic effectiveness.

5 | Discussion and Conclusions

Relying on a POE, this pilot case study investigated the relationship between the built environment and CAC's effectiveness in fulfilling its mission. We highlighted how the built environment, intended both as the space layout and the design, can support and—at times—hinder the provision of services by a mission-oriented organization. Our findings show that physical and design choices impact organizational mission in relation to service provision and clients' well-being.

Confirming research in interior design, our study finds that design choices primarily impact clients on three levels. First, *2D plan-view factors* (function, adjacency, and circulation) influence a mission-driven organization's ability to fulfill its purposes. Nonprofits requiring specialized facilities or spaces like a CAC (or, as the literature shows, sport clubs (Doherty et al. 2014)) rely on specific spaces to implement programs. Adjacency and circulation regulate staff and client movement, facilitating service provision. Particularly relevant were findings related to how the built environment directly decreased the organization's ability to provide services. For instance, the waiting room layout directly reduced service capacity by forcing alternative scheduling to preserve privacy, adding evidence to the limited literature linking the built environment to nonprofit mission fulfillment (Doherty et al. 2014; Shier et al. 2007).

Second, our study shows that *3D room-view factors* (color and decor) enable or hinder service provision. They affect the psychological well-being of staff and clients as creating a welcoming and homey environment is related to reducing feelings of anxiety, stress, and psychological safety. They also impact clients by creating a more relaxing (and less distracting and overstimulating) environment as well as giving the building a "homey" feeling (Harris et al. 2002; Lawi 2017). CAC leadership recognized these effects and made modifications to address them.

Third, we find that *boundary-spanning factors*, both in a two-dimensional and a three-dimensional reality, affect visual and auditory privacy, both real and perceived, which is crucial for client security and impacts their willingness to share traumatic experiences. This confirms research in interior design on how layout and circulation, as well as furnishing, relate to both real and perceived privacy, both auditory and visual (Ulrich 2001).

This pilot study identifies key opportunities for future research regarding the built environment as a component of organizational capacity, which influences mission fulfillment (Doherty et al. 2014; Shier et al. 2007). We propose categorizing the built environment into three groups: 2D plan-view factors, 3D view factors, and boundary-spanning factors. Further research is needed to refine this framework across different nonprofit types, as some subcategories (e.g., privacy and security) may vary in

importance and often overlap in practice (e.g., color and interior decoration). This will help integrate the built environment into a capacity framework applicable across various organizations, yielding practical implications.

Recognizing the built environment's role in an organization's ability to fulfill its mission underscores the connection between fundraising, revenue, and capacity. Our data indicates that modifications to the built environment are crucial for supporting program activities. However, organizations struggle to allocate resources for these changes, as many stakeholders view them as overhead rather than essential to programs. Scholars studying overhead ratios and charitable giving may find it valuable to explore the built environment's influence on service delivery and donor behavior. Understanding this connection is important, as research shows that clarifying the purpose of overhead can reduce donors' overhead aversion (Qu and Daniel 2021). This is especially relevant for small organizations facing undercapitalization, as overhead aversion leads to underfunding for renovations and capital projects, negatively affecting financial health (Miller 2003; Smith 2008; Woronkowicz 2016).

Lastly, framing the built environment as a component of organizational capacity highlights not only the impact of the built environment on service delivery and clients but also on the well-being of staff. High levels of staff turnover in the nonprofit sector have increased practitioners' and scholars' interest in the psychological burden on staff members in confronting daily challenging, traumatic, and complex work environments (Thomas 2024). Attention to the space environment as organizational capacity, then could—and arguably ought to—include an understanding of how design choices impact the daily work of nonprofit professionals.

This focus on staff wellbeing also highlights this study's methodological contribution. POE foregrounds the perceptions and experiences of users (both clients and staff) of a building. As a methodology, POEs are common in interior design and architecture but are not used in nonprofit studies. They offer, however, insights into how clients experience, perceive, and move through a service-providing organization. Considering the recent shift in scholarship to more fully account for the perspective of beneficiaries (Benjamin 2021), POEs offer a valuable methodological tool to connect organizational capacity and performance with the perspectives of beneficiaries. This approach aligns with the increased interest in community-informed design that seeks to more intentionally engage community members in design processes to develop more inclusive museum experiences (e.g., Schreiber et al. 2024).

Therefore, the study has practical implications for nonprofit managers to engage with internal and external audiences.

- *Funding*: Interventions and modifications to the built environment are vital for supporting organizational activities. This study shows funders that some overhead costs are necessary because they directly support the organization's mission.
- *Time*: Time is scarce in the nonprofit sector, prompting managers to make strategic choices about where to invest it. This study emphasizes that investing in building maintenance is essential for achieving the organization's mission.
- *Expertise*: evidence-based guidelines and best practices on how three-dimensional and two-dimensional factors are a promising field for scholars of organizational capacity and hold the promise to support the work of nonprofit managers.

The study then identifies a promising field of research for nonprofit scholars interested in organizational capacity, performance, and effectiveness, with direct implications for practice. The pilot study offers evidence in support of the intuitive link between organizational performance and the built environment. This study then calls for broadening this line of enquiry beyond the specific case of CACs and further determining the dimensions of the built environment as a component of organizational capacity across different types of nonprofit organizations.

Conflicts of Interest

The authors declare no conflicts of interest.

Data Availability Statement

The data that support the findings of this study are available on request from the corresponding author. The data are not publicly available due to privacy or ethical restrictions.

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Supporting Information

Additional supporting information can be found online in the Supporting Information section.