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Our mission: To share evaluation results, tools, and knowledge about the philanthropic sector in order to improve the practice of grantmaking, yielding greater impact and innovation.

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editorial

Dear Readers,

It is often the case that our unthemed issues have a theme that emerges *post hoc* from the submissions. That is true with this issue, as all of the articles address some aspect of foundation learning.

As we begin the debate about the future of the Affordable Care Act, **Hoag, Lipson, and Peebles** evaluation of the KidsWell campaign demonstrates the important role of state policy in achieving better health care coverage for children. Although a primary focus of KidsWell was on maximizing the opportunities presented by the ACA, the lessons about policy and advocacy may be even more important in the new political climate.

Foster, Harrington, Hoag, and Lipson share their lessons about how to evaluate policy and advocacy work. They note that some ambiguity is inevitable; policy change is often a complex process with many contributing factors. However, with comprehensive data and integrated analysis, it is possible to evaluate and learn about effective practices.

While learning from other foundations' work is important, for most foundations, learning from their own work is still a struggle. **Leahy, Wegmann, and Nolen** explore the structures and tools that can support organizational learning.

One of the emerging practices in philanthropy that requires learning by many stakeholders is the practice of impact investing. **Gripne, Kelley, and Merchant** describe their approach to providing education, training and coaching to various audiences. CO Impact Days and Initiative demonstrated how to educate and connect foundations, individual investors, social entrepreneurs, nonprofits and other stakeholders.

Foundations who want to support their grantees' learning often provide technical assistance in some form. **Lyons, Hoag, Orfield, and Streeter** provide considerations for funders in developing strong TA programs, based on their evaluations of two state-based TA programs.

Teri Behrens

We wrap up this issue with Franklin's review of *American Generosity: Who Gives and Why* by Patricia Snell Herzog & Heather E. Price. This book is one product of the University of Notre Dame's Science of Generosity initiative.

Finally, as we close out Volume 8, we want to thank our reviewers for this year. It is impossible to overstate the importance of committed, knowledgeable reviewers in the peer-review process. We are fortunate to have a tremendous pool of reviewers who give their time and talent. Our authors often tell us how much their feedback has helped them to sharpen their thinking and improve their writing. We welcome new reviewers — please contact me at behrenst@foundationreview.org if you are interested in serving.

Teresa R. Behrens, Ph.D.
Editor in Chief
The Foundation Review

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The Foundation Review is published quarterly by the Dorothy A. Johnson Center for Philanthropy at Grand Valley State University in Grand Rapids, Michigan.

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Aiming High: Foundation Support for State Advocates Brings Universal Children's Health Coverage Within Reach

*Sheila Dunleavy Hoag, M.A., Debra J. Lipson, M.H.S.A.,
and Victoria Peebles, M.S.W., Mathematica Policy Research Inc.*

Keywords: Advocacy evaluation; children's health insurance coverage; advocacy effectiveness

Introduction

Children's health insurance coverage has numerous benefits. For children, coverage leads to improved access to care, better health outcomes, and stronger educational achievement (Chester & Alker, 2015; Harrington, 2015). Their parents miss fewer days of work and have less trouble paying their medical bills (Robinson & Coomer, 2013; Harrington, 2015).

Despite evidence about its value, children's health insurance coverage in the United States is not a guaranteed right akin to basic education. Consequently, millions of children remain uninsured even though most are eligible for public coverage. In 2011, approximately 5.5 million children were uninsured; two-thirds of these were eligible but not enrolled in free or low-cost coverage through Medicaid or the Children's Health Insurance Program (CHIP) (Kenney, Anderson, & Lynch, 2013). Families with eligible but unenrolled children may be unaware that these coverage options exist, or fail to enroll or maintain coverage for their children due to the complexities of enrollment and renewal processes, among other reasons (Stevens, Hoag, & Wooldridge, 2010).

To help close the children's health insurance coverage gap, in 2011 the Atlantic Philanthropies created the KidsWell Campaign. KidsWell's theory of change posits that if advocates could leverage new funding and coverage opportunities created by the Patient Protection and Affordable Care Act (ACA), they could expand the number of children with coverage. Although most of those expected to gain insurance coverage for

Key Points

- To help close the children's health insurance coverage gap in the United States, in 2011 the Atlantic Philanthropies created the KidsWell Campaign. KidsWell's theory of change posits that if advocates could leverage new funding and coverage opportunities created by the Patient Protection and Affordable Care Act, they could expand the number of children with health insurance coverage.
- This article presents the major results of the KidsWell evaluation, which found substantial progress in achieving KidsWell interim policy changes and coverage outcomes. But advocates still have a full agenda, which means grantees and funders need to redouble efforts to educate the larger field about the type of advocacy that can legally be supported by funders, the gains in children's coverage achieved in part with such support, and what remains at stake for children's coverage.
- While other funders may not be able to make investments comparable to Atlantic's, advocacy networks and capacities have already been built and valuable knowledge has been gained through the KidsWell effort. Funders could target future investment to states and activities needing a short-term boost to exploit windows of political opportunity or to fight threats to children's coverage. Such support is still needed to continue momentum toward universal health insurance coverage for all children.

Enacted in 2010, the ACA held great promise for expanding insurance coverage to millions of uninsured Americans.

While it provided new coverage opportunities for low-income adults who previously had no access to coverage through employers or public options, ACA provisions also benefited children.

the first time through the ACA were adults, children stood to gain as well, largely because children are more likely to have health care coverage when their parents do (DeVoe, et al., 2015).

This article presents the major results of the KidsWell evaluation, including assessments of whether and how Atlantic's investment and engagement with grantees strengthened KidsWell groups. In addition, it explores the contribution of grantees to state policy actions on children's coverage and discusses the potential for sustaining the advocacy work begun under the KidsWell campaign.

Background: The KidsWell Campaign

Enacted in 2010, the ACA held great promise for expanding insurance coverage to millions of uninsured Americans. While it provided new coverage opportunities for low-income adults who previously had no access to coverage through employers or public options, ACA provisions also benefited children. For example, public coverage for children with family incomes less than 138 percent of the federal poverty level would shift from separate CHIP programs to Medicaid (which provides slightly enhanced benefits compared to CHIP); some families with incomes up to 400 percent of the federal poverty

level would benefit from tax credits in the newly created marketplaces; and new coverage options for parents would likely increase children's coverage rates through the "welcome mat" effect, whereby parents newly enrolling themselves in coverage would simultaneously enroll their eligible children (Kenney, Haley, Pan, Lynch, & Buettgens, 2016; Hoag, Lipson, & Peebles, 2015).

However, the ACA's rapid implementation timeline, its reliance on state governments to operate major components, and political opposition to expansion of Medicaid coverage in some states gave rise to concerns that the law might not be fully or equally well implemented in all states. Although the federal government allocated some funding to develop the federal marketplace and support new information technology systems in the states, some foundations began examining further opportunities to support ACA implementation.¹

At the Atlantic Philanthropies, staff were especially keen to find ways to leverage ACA rules and funding to ensure that all children had health insurance. Due to the ACA's complexity, Atlantic expected that implementation of its numerous provisions would require careful coordination between new coverage options and existing public insurance programs for children. Atlantic also realized that operationalizing health reform would require action by both states and the federal government, since they jointly finance and administer Medicaid and CHIP. Both also had important roles in operating health insurance exchange shopping portals, conducting outreach to low-income families, and helping families apply for insurance, among other tasks. In addition, after the U.S. Supreme Court decision in *National Federation of Independent Business v. Sebelius* in 2012, states were given a more prominent role in reform,

¹For example, shortly after the ACA passed in 2010, a group of eight national foundations (including Atlantic) created the ACA Implementation Fund, which provided strategic support to state-based health advocates to ensure effective and consumer-focused implementation of the ACA. Likewise, the Robert Wood Johnson Foundation invested in several programs to support states and consumer advocates working to implement the ACA and support enrollment into new coverage options.

FIGURE 1 KidsWell's Theory of Change

deciding whether or not to expand Medicaid eligibility to their residents.

Atlantic's efforts culminated in the creation of the KidsWell Campaign, a nearly \$29 million, six-year initiative to promote universal children's coverage through coordinated state and federal advocacy efforts. Because ACA reforms would take many years to implement, KidsWell grants began in 2011 and finished in 2016; the evaluation of KidsWell began in 2013 and also finished in 2016.

Theory of Change

KidsWell's theory of change posits that, in the short term, the ACA policy opportunity and resources available to support ACA implementation — including the financial and technical assistance resources supported through KidsWell, as well as resources from other foundations and federal and state governments — will

lead to a series of intermediate and longer-term outcomes. (See Figure 1.) Intermediate outcomes, which were expected to occur within the life of the KidsWell grants, include:

- development of children's advocacy networks in the seven KidsWell states,
- KidsWell grantees' leveraging of the expertise of network members for advocacy activities and campaigns to expand coverage for children and their families, and
- adoption of policies and procedures that promote and expand coverage, resulting in enrollment increases for children — and likely, enrollment for their newly eligible parents.

If the KidsWell grantees achieved these results, they would yield longer-term dividends,

TABLE 1 Definition of Core Advocacy Capacities

Capacity	Definition
Administrative advocacy	Working with state program administrators to influence procedures, rules, or regulations for how policies are carried out
Allowable lobbying	Conducting lobbying of elected officials, as permitted by Internal Revenue Service rules governing nonprofit organizations
Coalition building	Building and sustaining strong, broad-based coalitions and maintaining strategic alliances with other stakeholders
Communications/media	Designing and implementing media and other communications strategies to build timely public education and awareness on the issue, while building public and political support for policies or weakening opposition arguments
Fundraising	Generating resources from diverse sources for infrastructure and core operating functions; supporting campaigns
Grassroots organizing and mobilizing	Building a strong grassroots base of support
Policy or legal analysis	Analyzing complex legal and policy issues in order to develop winnable policy alternatives that will attract broad support

Sources: BolderAdvocacy, n.d.; Center for Effective Government, 2002; Community Catalyst, 2006.

including eventual universal health insurance coverage for children. In turn, providing all children with insurance coverage will improve the overall population health and well-being of children and families through better access to care, better health outcomes, lower health care costs, and improved health equity, leading to fewer missed days of school and work for children and their parents, respectively.

State and Grantee Selection

In choosing where to invest, Atlantic targeted states with large numbers of uninsured children. In addition, Atlantic wanted to support states where organizations with strong capacities to undertake advocacy activities were already in place, so that grantees could start on the work immediately, rather than having a ramp-up period to develop grantee capacities.² Because the full complement of essential core — advocacy capacities — which are the skills,

knowledge, and resources needed to conduct advocacy campaigns — do not typically exist within a single organization or even a single type of organization, Atlantic planned to support multiple groups in each selected state. (See Table 1.) To support the selection process, Atlantic also analyzed state political landscapes, state advocacy capacities, and investments by other foundations in similar work.

Based on these analyses, Atlantic chose to invest in children's advocacy organizations in seven states: California, Florida, Maryland, Mississippi, New Mexico, New York, and Texas. Together, those states accounted for 45 percent of all uninsured children in the nation in 2011. They varied in political leadership and, except in Maryland, more than 20 percent of children in each of those states lived under the poverty level that year. In each state, Atlantic selected a lead grantee, with fiscal responsibility for the grant, and at least one other funded partner, although typically more than one partner was included. (See Table 2.)

²Atlantic's grants supported specific activities the grantees proposed; they were not unrestricted, general operating-support grants.

TABLE 2 State and National KidsWell Grantees

State	KidsWell State Grantees ^a
California	ChildrenNow, PICO California, Children's Defense Fund-California, the Children's Partnership
Florida	Florida CHAIN, Children's Movement of Florida, Florida Center for Fiscal and Economic Policy, Florida Children's Health Care Coalition, Children's Trust of Miami-Dade County
Maryland	Advocates for Children and Youth, Maryland Citizens' Health Initiative Education Fund (aka Maryland Health Care for All)
Mississippi	Mississippi Center for Justice, Children's Defense Fund-Southern Regional Office, Mississippi Human Services Coalition
New Mexico	New Mexico Center on Law and Poverty, Comunidades en Acción y de Fé (CAFé)
New York	Community Service Society of New York, Schuyler Center for Analysis and Advocacy, Children's Defense Fund-New York, Make the Road New York, Raising Women's Voices
Texas	Engage Texas, Center for Public Policy Priorities, Children's Defense Fund-Texas, Texans Care for Children
National Grantee Organization	National Groups' Mission and Expertise
Children's Defense Fund	Advocates for policies and programs that promote the health and well-being of children
First Focus	Bipartisan advocacy organization that works to make children and families a priority in federal policy and budget decisions
Georgetown Center for Children and Families	Nonpartisan policy and research center that works to expand and improve health coverage for children and families by conducting policy analysis and research
MomsRising	Advocates on issues facing women, mothers, and families through social media and grassroots organizing
National Academy for State Health Policy	Nonpartisan network of state health-policy leaders sharing information on state health-policy solutions and best practices
National Council of La Raza	Largest national Hispanic civil rights and advocacy organization in the U.S.; works to improve opportunities, including health care coverage, for Hispanic Americans through affiliated community-based organizations
National Health Law Program	Protects and advances the health rights of low-income and underserved individuals and families through litigation and policy analysis
New America Media	National network of ethnic news organizations that develops multimedia content to inform communities and influence social policy, including health care coverage
PICO National Network	National network of faith-based community organizations working to create innovative solutions to problems facing urban, suburban, and rural communities
Young Invincibles	Nonpartisan organization that mobilizes young adults, ages 18 to 34, to expand youth access to health insurance and care through outreach and advocacy campaigns at the national and state levels

Source: Mathematica analysis of grant documents supplied by Atlantic Philanthropies.

^aThe lead grantee in each state is listed first.

National Grantees

As part of KidsWell, Atlantic also invested in multiyear grants to 10 national advocacy organizations to support two sets of activities: (1) to provide expert advice to the state grantees on federal law, health-policy analysis, media and communications, outreach, litigation, and grass-roots organizing; and (2) to influence national health reform and to advocate for federal health policies that ensure access to insurance for children. (See Table 2.) For example, while state KidsWell groups focused on pressing policy issues in their states, the national groups focused on issues that might affect children in all states, such as advocating for states to cover all immigrant children regardless of immigration status, or publishing research showing continued coverage disparities for Hispanic children in the U.S.

Evaluation Goals, Data Sources, and Methods

The KidsWell evaluation focused on understanding whether the intermediate outcomes from the theory of change have been achieved. To that end, we developed a set of research questions about the activities and achievements of the state KidsWell grantees:

1. How did Atlantic's investment and engagement with the KidsWell grantees contribute to strengthening advocacy capacities and networks?
2. Which advocacy activities used by KidsWell grantees appear to be most effective in securing policy advances or preventing policy setbacks to expand or maintain access to children's health care coverage?
3. To what extent did policymakers and leaders in the KidsWell states perceive grantees to have shaped or influenced policies that advanced children's coverage?
4. How and to what extent did children's health insurance coverage rates change in the seven KidsWell states?

5. Will children's health care coverage advocacy capacities, activities, strategies, and productive networks built with KidsWell support be sustained?

The data sources used in the evaluation include an all-grantee survey, program documents, key informant interviews, and focus groups. (See Table 3.) We used analytic software to code interview notes and identify common themes, produced descriptive statistics from survey and interview results to highlight patterns, analyzed within-state consistency in reporting among grantees, and compared grantees' responses to those of state policy leaders.

To examine the relationship between KidsWell grantees' activities and the policy advances they targeted, we conducted a temporal analysis to compare the proximity in time of the advocacy campaigns against policy wins reported by grantees and independent sources by tracking grantee activities by state, month, type of activity, and policy topic (e.g., Medicaid, ACA outreach issues, state budget issues).³ Proximity of a policy advance to advocacy-campaign activities alone does not mean that advocates had a significant influence on the policy outcomes; for example, advocates in one state told us that most policies there take two years to adopt, using the first year to introduce the policy and build support and the second year to gain passage. However, temporal patterns that do emerge help to build a case, along with other supporting evidence, for the effectiveness of advocacy campaigns. This temporal analysis was also informed by the interviews with policy leaders in each state, who were asked for their views about KidsWell grantees' campaigns and the degree to which those campaigns, as well as other factors, influenced policy outcomes.

³Policy wins or advances are broadly defined by this evaluation as legislation or an administrative rule, budget decision, court case, or other state policy action that will increase or accelerate gains in children's health care coverage. Policy losses are defined as legislation or an administrative rule, budget decision, court case, or other state policy action that reverses, prevents, or hinders gains in children's health care coverage.

TABLE 3 Evaluation Data Sources

Data Sources	Description
KidsWell program documents, 2011–2015	Written materials from the grantees included grant applications and progress reports throughout the grant period, activity reports produced monthly through 2014, and background materials produced during grantee selection.
Site visit data, 2014	Site visits to grantees in New Mexico and New York in 2014 developed in-depth case studies; on-site interviews were conducted with grantees and other key stakeholders, including policymakers, in each state.
In-person focus groups, 2014	Separate focus groups were conducted with representatives from state and national grantees in June 2014 addressing KidsWell partnerships, ACA issues related to children's coverage, resources, and upcoming opportunities and challenges for children's coverage policies. Representatives from eight national grantees, and at least one representative from each state, participated.
All-grantee survey, 2014	An electronic, editable PDF survey was emailed to representatives from all KidsWell grantees in July and August 2014 addressing organization and partner strengths and weaknesses in terms of capacity; children's health-policy campaign targets, policy wins and losses, and activities used to influence wins and prevent losses; use and value of KidsWell grants and resources; and state-national grantee interaction. At each organization, the staff person with the most knowledge of the grant project was asked to complete the survey. 29 respondents from the state grantee groups and 10 respondents from the national grantee groups responded to the survey.
Telephone interviews with policy leaders in the seven KidsWell states, 2015–2016	Interviews were conducted between November 2015 and April 2016 with children's health-policy leaders (state legislators, Medicaid or insurance agency heads, advisors to governors) in seven states to inquire about their familiarity with the KidsWell grantees, their assessment of the contributions of KidsWell grantees to particular state policies and how effective the grantees were at various advocacy activities, and their views on future health coverage issues and issues that might affect coverage (such as the state budget or political landscape). They targeted six respondents per state and interviewed six respondents from California, Maryland, Mississippi, New Mexico, and New York, but only five respondents from Florida and Texas, due to refusals to participate (40 respondents in total from the seven states).
Telephone interviews with grantees, 2016	Interviews were conducted between February and April 2016 with 22 state grantees to inquire about their main policy focus since the evaluation's 2014 survey; any policy changes in the state; sustainability of grantee networks and whether they had sought and/or identified replacement funding to sustain this work; lessons learned from participating in KidsWell; and their views on future health coverage issues and issues that might affect coverage, such as the state budget or political landscape. Five national grantees were asked about issues they expected to focus on in the near term and any upcoming challenges or opportunities related to coverage policies, whether policies promoted by the grantees influenced changes in non-KidsWell states or at the federal level, sustainability of grantee networks and whether they had sought and/or identified replacement funding to sustain this work, and lessons learned from participating in KidsWell.
Independent data sources on state policy developments and insurance coverage statistics, 2009–2014	Publicly available sources on state and federal policy changes related to children's health care coverage or ACA issues, including health policy blogs produced by the Georgetown Center for Children and Families and the National Academy for State Health Policy, daily health reports from American Health Line and similar sources; analyses of annual American Community Survey data, and data on Medicaid/CHIP participation over time to examine coverage and uninsurance rates among children.

[A]ll but one of the 29 state grantee respondents reported that KidsWell resources enhanced their organizations' advocacy capacities. Skills that were most enhanced included communications and media, policy and/or legal analysis, grassroots organizing and mobilization, and coalition building. Technical assistance from national groups was an important mechanism for expanding these capacities.

Although the evaluation examines changes in children's coverage rates during the grant period, it does not assess the direct effect of KidsWell on coverage rates. Given the many federal and state policy, budgetary, and political factors influencing ACA implementation, which in turn affect enrollment into coverage, it is not possible to draw a causal relationship between KidsWell advocacy activities and coverage gains in the states in which KidsWell advocates were active.

Findings

1. How did Atlantic's investment and engagement with the KidsWell grantees contribute to strengthening advocacy capacities and networks?

Atlantic sought to maximize its investment by intentionally funding capable children's-advocacy organizations, with different strengths, that could partner to advance ACA implementation within the target states. In a few states, the desire to fund organizations that in combination had all advocacy skills led to "arranged marriages" of partners that had not worked together previously,

creating challenges for groups with different approaches to advocacy. Tensions were apparent in a few states at the outset, but these strains seemed to abate quickly, as groups learned to collaborate, share accountability, and leverage each other's strengths, sometimes with the help of technical assistance provided by KidsWell.

Grantees' and policy leaders' views suggest that Atlantic's approach to grantee selection was effective. In the mid-2014 grantee survey, grantees in all states reported consistent policy goals, strategies, wins, losses, and assessment of partner strengths within state coalitions, indicating strong alignment. According to grantee representatives, at least one organization in each state except New Mexico reported having strength in each of the core advocacy capacities; in New Mexico, neither grantee had a strong relationship with the state Medicaid agency. Policy leaders validated these self-perceptions: when asked to rate the grantees' effectiveness at undertaking six different advocacy activities, at least one grantee within each state except New Mexico was ranked as moderately or very effective in each category across states.⁴ Grantees also reported that KidsWell funding and resources strengthened partnerships within states, with KidsWell-funded partners and with other interest groups, which in turn allowed them to develop effective advocacy campaigns.

As noted, KidsWell was not intended primarily as a capacity-building grant — grantees were selected to advance policy changes because of their existing capabilities. Indeed, the state grantees had varying levels of skills and knowledge in each of the core advocacy capacities, and KidsWell was expected to strengthen their advocacy capacity by leveraging the strengths of each organization and through support and advice from national grantees. Still, in the 2014 grantee survey, all but one of the 29 state grantee respondents reported that KidsWell resources enhanced their organizations' advocacy capacities. Skills that were most enhanced included communications and media, policy and/or legal

⁴In New Mexico, respondents did not identify grantees as weak at grassroots organizing; rather, all respondents said they did not know if either grantee was effective at grassroots organizing activities.

analysis, grassroots organizing and mobilization, and coalition building. Technical assistance from national groups was an important mechanism for expanding these capacities, with nearly all state grantees — 28 of 29 responding — reporting that the technical assistance provided through KidsWell helped them to spread their reach in advocacy efforts and be more effective. National grantees benefited as well: six of 10 national survey respondents noted that their interactions with the state grantees helped them identify where assistance was needed most and kept them abreast of state policy developments that enhanced their national advocacy work.

Grantees attributed their successes in KidsWell to two key features of Atlantic's grantmaking approach. First, grantees said that multiyear funding provided more security compared to a single year of funding, giving them the ability to hire new staff and alleviating the burden of annual grant writing. As one state grantee commented, "multiyear funding is a gift. It means we can spend time on real policy work." Several also mentioned that policy progress requires a sustained focus and "doesn't just happen in a year or 18 months," another reason grantees appreciated multiyear support.

Second, a majority of grantees cited Atlantic's flexible approach, in which grantees could decide which policies to target and campaign strategies to use, as long as they aligned with KidsWell's overall goal of improving children's coverage. That meant that grantees in each state had leeway to identify the policy priorities that they believed would improve children's coverage and could be achieved in their state. Common priorities across the seven states included defending Medicaid and CHIP from state budget cuts, Medicaid and CHIP enrollment and renewal policies, and, after the ACA Supreme Court decision in 2012, advocating for the adoption of the ACA-authorized expansion of Medicaid eligibility to low-income adults. In California, Maryland, and New York, advocates also supported development of state exchanges, based on the expectation that state exchanges would give advocates a stronger voice in influencing exchange policies and benefits affecting children's health care

coverage. One national grantee noted how this flexibility benefited them:

Atlantic let us pivot when we needed to, giving us the freedom to address not just the primary issues but also to focus on [ancillary] issues that will also improve children's coverage.

Finally, we also wanted to understand whether the strategy of selecting both state and national groups enhanced advocacy capacities or strengthened advocacy networks. In our 2014 grantee survey, both state and national groups separately reported that they commonly collaborated. They also agreed that this collaboration benefited them: State grantees said the support they received from national groups enhanced their own advocacy capacity by increasing their knowledge of policy issues and skill in planning campaign strategies, while the national groups used information gained from the KidsWell state advocates about policy implementation to inform national campaign strategies with states outside the KidsWell group. Despite the availability of all national grantee organizations' resources to state grantees, the strongest state-national collaborations were between those grantees that had worked together before KidsWell. However, state grantees' exposure to national organizations during the KidsWell grant period sets the stage for future collaboration.

2. Which advocacy activities used by KidsWell grantees appear to be most effective in securing policy advances or preventing policy setbacks to expand or maintain access to children's health care coverage?

Since KidsWell began in 2011, there have been important policy wins for children's coverage in all of the KidsWell states except Mississippi. (See Table 4.) More than 70 percent of state grantees believed that coalition building, relationships with elected officials, lobbying, and policy analysis were most effective in securing policy advances to date. Policy leaders corroborated grantees' reports, and across states cited coalition building and policy analysis as KidsWell grantees' most effective activities, followed by relationships and contact with elected officials.

TABLE 4 Policy Wins Reported by Grantees and Assessment by Policy Leaders of Grantees' Contribution to the Policy Win

State (Number of policy leaders responding)	Policy Win ^a	Policy Leader Perceptions of Grantee Influence on Policy Win	Policy Leader Perceptions of Main Factor(s) Influencing Win												
California (6)	Medicaid expansion, protection of Medicaid and CHIP budgets, state exchange design	<table><tr><th>Influence</th><th>Count</th></tr><tr><td>Big</td><td>0</td></tr><tr><td>Mod</td><td>2</td></tr><tr><td>Small</td><td>0</td></tr><tr><td>None</td><td>2</td></tr><tr><td>Unkn</td><td>2</td></tr></table>	Influence	Count	Big	0	Mod	2	Small	0	None	2	Unkn	2	Policy leaders agreed that the primary motivation for adopting Medicaid expansion was the state budget, and that this likely would have happened without the grantees’ work.
Influence	Count														
Big	0														
Mod	2														
Small	0														
None	2														
Unkn	2														
Florida (5)	Elimination of 5-year waiting period for Medicaid/CHIP for lawfully residing immigrant children	<table><tr><th>Influence</th><th>Count</th></tr><tr><td>Big</td><td>3</td></tr><tr><td>Mod</td><td>1</td></tr><tr><td>Small</td><td>0</td></tr><tr><td>None</td><td>0</td></tr><tr><td>Unkn</td><td>1</td></tr></table>	Influence	Count	Big	3	Mod	1	Small	0	None	0	Unkn	1	Policy leaders said important factors included support among Hispanic and Latino voters for Florida’s Medicaid/CHIP program (this policy was passed in an election year) and research done by the state, with the grantees’ help, that helped to calculate the cost to the state of this policy.
Influence	Count														
Big	3														
Mod	1														
Small	0														
None	0														
Unkn	1														
Maryland (6)	Exchange benefit design, avoiding coverage gap for youth aging out of foster care	<table><tr><th>Influence</th><th>Count</th></tr><tr><td>Big</td><td>0</td></tr><tr><td>Mod</td><td>5</td></tr><tr><td>Small</td><td>0</td></tr><tr><td>None</td><td>0</td></tr><tr><td>Unkn</td><td>1</td></tr></table>	Influence	Count	Big	0	Mod	5	Small	0	None	0	Unkn	1	Policy leaders were unsure what the main factors were affecting exchange design — while the grantees had an important voice, the administration also strongly supported a state-based exchange.
Influence	Count														
Big	0														
Mod	5														
Small	0														
None	0														
Unkn	1														
Mississippi (6)	None ^b	<table><tr><th>Influence</th><th>Count</th></tr><tr><td>Big</td><td>0</td></tr><tr><td>Mod</td><td>1</td></tr><tr><td>Small</td><td>2</td></tr><tr><td>None</td><td>3</td></tr><tr><td>Unkn</td><td>0</td></tr></table>	Influence	Count	Big	0	Mod	1	Small	2	None	3	Unkn	0	Policy leaders agreed that political issues prevented any serious consideration of issues related to ACA implementation.
Influence	Count														
Big	0														
Mod	1														
Small	2														
None	3														
Unkn	0														
New Mexico (6)	Medicaid expansion	<table><tr><th>Influence</th><th>Count</th></tr><tr><td>Big</td><td>1</td></tr><tr><td>Mod</td><td>1</td></tr><tr><td>Small</td><td>0</td></tr><tr><td>None</td><td>2</td></tr><tr><td>Unkn</td><td>2</td></tr></table>	Influence	Count	Big	1	Mod	1	Small	0	None	2	Unkn	2	Policy leaders agreed the main factor influencing Medicaid expansion was the governor, as well as the state economy.
Influence	Count														
Big	1														
Mod	1														
Small	0														
None	2														
Unkn	2														
New York (6)	Basic Health Plan (BHP), a consumer-friendly state-based exchange	<table><tr><th>Influence</th><th>Count</th></tr><tr><td>Big</td><td>4</td></tr><tr><td>Mod</td><td>1</td></tr><tr><td>Small</td><td>0</td></tr><tr><td>None</td><td>0</td></tr><tr><td>Unkn</td><td>1</td></tr></table>	Influence	Count	Big	4	Mod	1	Small	0	None	0	Unkn	1	Policy leaders agreed the grantees’ economic analysis showing that BHP would financially benefit the state was critical, as was the fact that the grantees brought in other powerful interest groups that supported BHP; the political will to pass BHP was also strong in the state.
Influence	Count														
Big	4														
Mod	1														
Small	0														
None	0														
Unkn	1														
Texas (5)	Averting cuts to the Medicaid program, including defeat of proposed 10% cut to Medicaid provider fees	<table><tr><th>Influence</th><th>Count</th></tr><tr><td>Big</td><td>3</td></tr><tr><td>Mod</td><td>1</td></tr><tr><td>Small</td><td>0</td></tr><tr><td>None</td><td>0</td></tr><tr><td>Unkn</td><td>1</td></tr></table>	Influence	Count	Big	3	Mod	1	Small	0	None	0	Unkn	1	Policy leaders agreed the final decision was attributable to political decisions and budget factors; the business community’s support also was influential.
Influence	Count														
Big	3														
Mod	1														
Small	0														
None	0														
Unkn	1														

Source: KidsWell grantee reports of policy wins in 2014 surveys and 2016 grantee interviews; interviews with 40 policy leaders in the seven KidsWell states (six per state in California, Maryland, Mississippi, New Mexico, and New York, and five per state in Florida and Texas), November 2015–April 2016.

^a The primary policy win we asked policy leaders about is in bold text.

^b Although no policy wins occurred in Mississippi, we asked policy leaders if the grantees had any influence on state policy debates on Medicaid expansion (for example, changed the minds of any policy leaders or the public on the issue).

Big = policy leaders said KidsWell grantees had a big influence on the policy win; Mod = policy leaders said KidsWell grantees had a moderate influence on the policy win; Small = policy leaders said KidsWell grantees had a small influence on the policy win; None = policy leaders said KidsWell grantees had no influence on the policy win; Unknown = policy leaders said they did not know how much influence KidsWell grantees had on the policy win.

Which advocacy activities work best in any given situation appears to depend on state context and the specific policy goal. For example, where key policymakers were seriously considering Medicaid eligibility expansion and state-exchange sponsorship, as in California, Maryland, New Mexico, and New York, policy analysis was more likely to be cited as an important input to the debate. In Florida, Mississippi, and Texas, where state policymakers were opposed to these policies for primarily political reasons, advocates focused on trying to make it easier for eligible children to enroll in and renew coverage under existing Medicaid and CHIP programs. Along with coalition building and contact with elected officials, grantees in these states viewed administrative advocacy (in Florida and Mississippi), grassroots organizing (Mississippi), and public media campaigns (Texas) as the most effective activities they used to pursue these policy objectives.

3. To what extent did policymakers and leaders in the KidsWell states perceive grantees to have shaped or influenced policies that advanced children's coverage?

Across states, most state policy leaders agreed that the KidsWell grantees are credible and were influential in shaping or advancing policy issues related to health coverage of children and families. However, only in Florida, New York, and Texas did half or more of the policy leaders interviewed note that these advocates had a “big influence” on the policy we inquired about. (See Table 4.) More commonly, policy leaders said grantees had a moderate influence but noted that other factors, such as legislative backing and state budget pressures, played a part in policy decisions. Some policy leaders in California, Maryland, New Mexico, and New York noted that even though many of the reforms passed during the KidsWell era would likely have happened in the absence of the advocates, the KidsWell grantees accelerated or improved the end result.

More broadly, policy leaders in all seven KidsWell states agreed that these advocacy organizations played an important role in mitigating political and budgetary challenges to children's

More broadly, policy leaders in all seven KidsWell states agreed that these advocacy organizations played an important role in mitigating political and budgetary challenges to children's health care coverage. They consistently cited the role of advocates in providing credible information to highlight children's health issues, advocating on behalf of underserved residents, and working collaboratively to achieve a common goal of making gains for children's coverage.

health care coverage. They consistently cited the role of advocates in providing credible information to highlight children's health issues, advocating on behalf of underserved residents, and working collaboratively to achieve a common goal of making gains for children's coverage. For example, policy leaders in all seven states noted the importance of advocacy organizations in preparing analyses about potential impacts of policies on children, noting their presence and information helps keep children's health care issues “front and center,” as one respondent reported. They credited advocates with bringing more equity and fairness to the decision-making system by demonstrating the impact of decisions on health quality and access for children and families. As one California policymaker stated,

FIGURE 2 Children's Uninsured Rates in the United States and the KidsWell States, 2009–2014

Source: Mathematica analysis of American Community Survey data, 2009–2014, August 1, 2016.

The kids' groups bring a different perspective that is good for government to have. You can't just make decisions in a vacuum and expect them to be perfect. We get course corrections from those groups all the time, and it's both appropriate and welcomed.

New Mexico policy leaders noted that advocacy organizations provide empirical information to inform decisions and creative approaches to problem solving. In Florida, policy leaders interviewed emphasized the continued value the KidsWell advocates have in consensus building and leveraging the expertise of members within their coalitions to promote children's health issues.

In addition to providing information to the legislature and other state decision-makers, policy leaders reported that KidsWell grantees in Mississippi and Texas also focused on educating consumers about health benefits. This was especially important because eligibility workers there had limited training and high turnover, and consumers had difficulty navigating the online eligibility and enrollment portals. In Mississippi, the grantees also conducted outreach to consumers

about enrolling into available coverage, since the state was not doing so.

4. How and to what extent did children's health insurance coverage rates change in the seven KidsWell states?

Although the number and rate of uninsured children have declined each year since 2009, the decline from 2013 to 2014 was greater than in any previous year (Alker & Chester, 2015). Children's coverage rates reached an all-time high in 2014 — the year in which the key coverage expansions authorized by the ACA provisions took effect — with 94 percent of children having some form of health insurance. (See Figure 2.) This suggests that the ACA is serving as an important mechanism for improving children's coverage (Alker & Chester, 2015).

States that expanded Medicaid coverage to low-income adults showed greater gains in children's coverage compared to states that did not expand Medicaid coverage, but even nonexpansion states made important strides in improving

FIGURE 3 Children's Uninsurance Rates in Medicaid Expansion and Non-Expansion States, 2009–2014

Source: Mathematica analysis of American Community Survey data, 2009–2014, August 1, 2016.

children's coverage. (See Figure 3.) Among the KidsWell states, those that expanded Medicaid — California, Maryland, New Mexico, and New York — had a 40 percent decrease in children's uninsurance rates (7.8 percent in 2009 to 4.7 percent in 2014), while those not adopting the expansion — Florida, Mississippi, and Texas — experienced a 34 percent decrease in children's uninsurance rates (15.4 percent in 2009 to 10.1 percent in 2014). Medicaid and CHIP participation among eligible children rose in this same period — nationwide, 90 percent of eligible children now participate in these programs — and rose more in states that expanded Medicaid (Kenney, et al., 2016).

5. Will children's health care coverage advocacy capacities, activities, strategies, and productive networks built with KidsWell support be sustained?

An important legacy of the project is that the networks built through KidsWell will be sustained after the Atlantic grants end. In the 2014 survey, the state grantees cited the most important contribution of KidsWell support as giving them the

resources to build strategic partnerships and alliances with KidsWell partners and others within their states. In the 2016 interviews, all grantees in the seven states said they expect their within-state KidsWell partnerships to continue. One of the grantees credited the sustainability of the coalition to its growing influence:

[We] started to become known to certain legislators and people within state government ... as solid, larger than the sum of its individual parts.

Due to funding constraints, however, the coalitions will not necessarily operate at the same intensity or level of interaction. When we conducted interviews in spring 2016, only one national grantee and five state grantees (two in California, one in New Mexico, and two in Texas) had secured any additional funding for their children's coverage advocacy work (none of which was at a level that would fully replace KidsWell funds). All grantees were actively seeking funding, and some had submitted proposals for which they were still awaiting funding decisions at the time of our interviews. But prospects

Our evaluation found substantial progress in achieving KidsWell interim policy changes and coverage outcomes. Additionally, networks and capacities were strengthened, and grantees were highly collaborative, leveraging partners' strengths in order to mount advocacy campaigns during the period when critical state decisions about ACA implementation were being made.

are poor; grantees report that few funders they have approached are willing to support advocacy, and foundation officials wrongly perceive the children's-coverage problem to be solved. This is in marked contrast with the situation in 2014, when nine of 10 national grantees and 10 of 20 state grantees said they leveraged Atlantic funding to secure additional support for children's-coverage advocacy between 2011 and 2014.

Consequently, grantee partners in Florida, Maryland, and Mississippi said they would continue advocacy for children's coverage but at a lower level of activity. In New Mexico, the grantees expect to collaborate but shift their focus to labor issues. The groups in California, New York, and Texas report their coalitions will be sustained, at least in the short term. While state and national groups expect to work together in the future, they also believe that without the same level of funding, they will have less capacity to collaborate and organize coordinated advocacy campaigns. According to both grantees and policymakers, the need for this type of advocacy

persists and may be heightened as upcoming policy decisions will be made on whether CHIP will continue after its current funding authorization ends in September 2017.

Discussion and Lessons

By many metrics, Atlantic Philanthropies' investment in this advocacy effort over an extended period has been successful. Our evaluation found substantial progress in achieving KidsWell interim policy changes and coverage outcomes. Additionally, networks and capacities were strengthened, and grantees were highly collaborative, leveraging partners' strengths in order to mount advocacy campaigns during the period when critical state decisions about ACA implementation were being made. In six of seven KidsWell states, pro-child and family coverage policies and procedures have been adopted and implemented with help from the grantees. Finally, due in no small part to advocacy for children at the state and federal level, nearly 600,000 more children gained coverage in the seven KidsWell states since the program began in 2011.

While more than half of policy leaders interviewed credit KidsWell grantees with influencing policy wins to either a moderate or large degree, they were quick to note that other factors, such as legislative backing and state budget pressures, played a part in policy decisions. For example, in Florida, policy leaders cited grantees' work building and maintaining momentum with legislators and public-messaging campaigns as important to the policy decision to eliminate the five-year waiting period for Medicaid and CHIP coverage among legally residing immigrant children. At the same time, they cited other factors, especially election-year politics, as having played a role. As one policy leader said, the KidsWell grantees' "level of influence is not as great as it could be. That's not a reflection on how good they are. It's a reflection on the priorities of the legislature." In New York, policy leaders all mentioned the grantee's study on the economic effects of adopting a Basic Health Plan (BHP) as very important to its eventual passage. Yet, they also said that political support for BHP already existed, and that other studies confirmed that BHP would be a "financial windfall"

to the state. Texas grantees presented convincing data analyses that objectively demonstrated to legislators the negative financial impacts of proposed budget cuts to the Medicaid program; they also persuaded some legislators to champion the issue. While their advocacy was cited as effective, progress in the hostile Texas political environment was limited until an unexpected state budget surplus made cuts harder for legislators to support. Nevertheless, the robust assessment of grantees' influence on policy debates in Florida and Texas — which, along with Mississippi, are the most conservative of these seven states — demonstrates how critical the advocacy voice is to policy change.

While progress over the past five years on coverage policies has been impressive, children's health-coverage advocates still have a full agenda. In 2014, more than 8 percent of all children still lacked coverage in eight states — Alaska, Arizona, Florida, Montana, Nevada, Oklahoma, Texas, and Utah — and of the 4.5 million children without coverage in 2014, 62 percent were eligible for Medicaid or CHIP but not enrolled (Kenney, et al., 2016). Tightening state budgets in combination with the upcoming decrease in the enhanced federal match rates for CHIP programs will pose challenges to maintaining current coverage levels in many states. At the national level, the most pressing issue for children's coverage is whether CHIP will be funded past 2017; if Congress does not reauthorize funding for CHIP, millions could lose coverage, jeopardizing hard-won gains.

Like many capacity-building grants, Atlantic staff expected KidsWell grantees to sustain their work by attracting other funders to support advocacy activities after the Atlantic grant period ended. Atlantic went further than most other funders by organizing “funder roundtables” in each of the seven states during the grant period to engage local funders directly. These one- to two-day in-person meetings reviewed children's coverage trends, focusing on changes in the rate of uninsured children since implementation of the ACA; the benefits of coverage to children, parents, and communities; the accomplishments of

the KidsWell grantees; and the key policy issues in each state. While the KidsWell state grantees all reported that these meetings provided helpful introductions to local funders, to date only the Texas grantees said these meetings helped them secure new funds.

Thus, despite a full agenda, the KidsWell groups are concerned about their ability to support this work in the future, given that so few had secured additional funds as of early 2016. Grantees as well as funders' groups (such as the Council on Foundations; Bolder Advocacy, an initiative of the Alliance for Justice; and other funders committed to supporting children, youth, and families) need to redouble efforts to educate the larger foundation field about the type of advocacy that can legally be supported by funders, the gains in children's coverage achieved in part with such support, and what remains at stake for children's coverage.

While other funders may not be able to make investments as big or as long as Atlantic's was in KidsWell, the amount required may be lower. Children's-advocacy networks and capacities have already been built, and valuable knowledge and experience have been gained. Funders could target future investment to states and activities needing a short-term boost to exploit windows of political opportunity or to fight threats to children's coverage. Alternatively, funders could target support toward emerging issues that have become more pressing as coverage rates have increased under the ACA, such as health insurance literacy and increasing access to high-quality care once children secure health insurance coverage. Such support is still needed to continue momentum toward universal health coverage for all children.

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Through the Looking Glass: Foundation Evaluation and Learning and the Quest for Strategic Learning

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Keywords: Organizational learning, foundation learning, strategic learning, foundation evaluation

Introduction

For over a decade, foundation evaluation and learning has been enjoying a renaissance of sorts. Among larger foundations, evaluation and learning are more regularly applied, and internal evaluation and learning staff are becoming more common to foundations (Coffman & Buteau, 2016; Coffman, Beer, Patrizi, & Heid Thompson, 2013). In addition, strategic learning, an approach that aims at “helping organizations or groups learn in real time and adapt their strategies to the changing circumstances around them” (Coffman, Reed, Morariu, Ostenso, & Stamp, 2010, p. 4), continues to garner attention in the field. More and more, philanthropy appears persuaded that investments in foundation evaluation and learning are fundamental to good strategy and delivering impact (Hamilton, et al., 2005; Patrizi, Heid Thomson, Coffman, & Beer, 2013).

In 2015, the Episcopal Health Foundation launched a project to distill lessons about how foundations configure evaluation and learning and allocate related responsibilities in support of strategic learning. As a newly established public charity, the foundation initiated planning for these functions by reaching out to peers as well as recognized pacesetters in foundation evaluation and learning. Strategic learning was of particular interest to the foundation because it presented a framework for translating evaluation and other sources of information into strategic decision-making (Coffman & Beer, 2011). Simply put, since we had the privilege of setting up shop early in the foundation’s organizational development, we wanted to know what could we put in place that would help accelerate organizational results.

Key Points

- Strategic learning, a critical if relatively new lens for philanthropy, is neither simple nor efficient to institutionalize or practice yet — foundations are still figuring out how to do it well. In 2015, the Episcopal Health Foundation launched a project to distill lessons about how leading foundations configure evaluation and learning, and how they allocate related responsibilities in support of strategic learning.
- This article addresses different models that foundations use to establish and staff evaluation and learning functions, what other organizational considerations they should take into account in order to prioritize strategic-learning work, and what tools and approaches can be used to initiate strategic learning.
- Interviews with officers from more than a dozen foundations revealed that strategic learning does not require wholesale structural and cultural change; an incremental approach, instead, can phase in greater complexity as foundations expand staff capacity. The interviews also uncovered several areas where further exploration of system building and practice at foundations has potential for advancing the field.

Overall, the organization of foundation evaluation and learning typically reflected a unique intersection of organizational history and changing views within philanthropy regarding evaluation and learning.

Philanthropic gray literature¹ indicates that a number of major foundations are experimenting with organizational structures, cultural mechanisms, and the adoption of new practices to bridge evaluation and strategy through learning.² Yet little has been written about “what it takes to truly implement strategic learning” (J. Coffman, personal communication, June 18, 2015). Our project sought to address how to optimally establish and staff evaluation and learning functions, what other organizational considerations to take into account in order to prioritize strategic learning work, and what concrete tools and approaches could be used to initiate strategic learning processes, sooner rather than later.

We initiated the project with a philanthropy-related literature search of peer-reviewed and gray-information sources in order to identify foundations gaining recognition in the field for evaluation and learning. Then, we developed a purposive sampling strategy designed to yield maximum variety among selected interview participants (i.e., Patton, 1990), including foundation size, based on staff and assets; the location of evaluation and learning functions within the foundation; the foundation’s regional location;

and evaluation- and learning-related job titles. Thirteen semistructured phone interviews, lasting 45 minutes to an hour, were conducted, and interview notes were validated by participants, a number of whom also provided feedback on drafts of this article. (See Appendix.)

Structural Configurations of Evaluation and Learning Functions

Foundations locate evaluation and learning functions within different organizational areas, including programmatic areas, operations, and separate, dedicated units. Through interviews with sampled participants, we explored how foundations approached staffing for evaluation and learning, how they determined the placement of these staff, and how they used organizational structure (i.e., what is reflected in an organizational chart) to support the uptake of evaluation and learning work by the foundation as a whole.

Several models for structuring foundation evaluation and learning functions emerged from our interviews:

1. those that located evaluation under the auspices of an organizational-learning function;
2. those that aimed to integrate learning into the titles, responsibilities, and roles of evaluation staff;
3. those that centralized a range of evaluation- and learning-related functions and staff within newly created departments;
4. those that established separate organizational units to support the distinct functions of learning and evaluation; and
5. those that aimed to diffuse evaluation and learning functions across staff and programs.

Each of these models tended to vary in terms of three continuums: a value placed on the ascendancy or equivalency of evaluation and learning functions, the relative centralization or diffusion of related responsibilities, and level of integration

¹Gray literature can be defined as source material that is not peer-reviewed (Breitenbach, 2009). It can take various forms, including the online publications of a professional association.

²FSG seeded this analytic framework, with an emphasis on the alignment of strategy, learning, and evaluation functions, structurally, culturally, and in practice (Preskill & Mack, 2013).

FIGURE 1 Structural Characteristics of Foundation Evaluation and Learning Functions

or autonomy in the operations of these functions. (See Figure 1.)

Overall, the organization of foundation evaluation and learning typically reflected a unique intersection of organizational history and changing views within philanthropy regarding evaluation and learning.

Locating Evaluation Under the Auspices of Organizational Learning

The California Endowment offers perhaps the clearest example of a foundation fitting this model. At the time of our interview, the position of chief learning officer had recently been established to oversee evaluation activities and to ensure that evaluation conducted by or for the foundation was aligned with strategy and learning. The position oversaw the establishment of evaluation mechanisms to yield timely and actionable information, as well as learning processes that supported the foundation in grounding strategy and evaluation in community experience.

In many ways, the Kresge Foundation also fits this model. In 2015, it conducted a search for a director of its new department of strategic learning, research, and evaluation. David Fukuzawa, the managing director of Kresge's health program, told us that a central responsibility of the position was to establish a learning culture within the foundation. He said that although the foundation had a long history of evaluating its work, it had struggled to synthesize learnings to inform ongoing work. Therefore, he explained, organizational changes at Kresge were not aimed at building deeper levels of staff evaluation capacity: "Learning to learn is more important for us." (See Figure 2.)

Superimposing learning on top of evaluation functions, this model represented an exciting and bold step for both Kresge and The California Endowment. It introduced new structural configurations — a chief learning officer position at the endowment and a department at Kresge with the superseding purpose of strategic learning. Further, the learning orientation of the model

FIGURE 2 Learning-Driven Foundation Model **FIGURE 3** Evaluation-Driven Foundation Model

promised to help synthesize a common set of learnings across disparate programmatic interests and activities, to be used by the collective to advance the work of the foundation as a whole. It also held the potential for reducing power differentials between foundations and grantees by positioning both as learners. Yet despite these many strengths, external audiences may question the model's susceptibility to groupthink or the relevance of the knowledge enterprise beyond that of the particular foundation and its grantees.

Incorporating Learning Into Evaluation Staff Responsibilities

A number of foundations had well-established research and evaluation departments that had evolved to integrate learning functions either formally (i.e., in departmental name) or, more informally, through the adoption of new practices.³ In 2008, for example, The Colorado Trust reconceived its research and evaluation unit, renaming it “research, evaluation, and strategic learning.” According to its director, this change helped rationalize new points of engagement with evaluation, most notably in the team’s inclusion early in The Trust’s strategy processes.

³The Center for Evaluation Innovation has made similar observations, noting changes in the names of evaluation units and in the responsibilities of evaluation staff (Coffman, et al., 2013; Heid Thompson & Patrizi, 2011).

At the Wallace Foundation, the research and evaluation unit evolved more organically. The unit’s director said grantees helped illuminate the knowledge needs of policymakers and other decision-makers in the field, and the role the foundation could play by aligning its research, funding, evaluation, and communications to support field advancements in these areas. The unit has increased its involvement in developing Wallace’s strategic responses, disseminating findings, and engaging the field of practice. (See Figure 3.)

One of the real strengths of this model is its potential for elevating the role of the evaluation function within the organization and its regular engagement of nonevaluation staff with evaluative thinking. This model positions evaluation staff within the strategy-design process, creating and utilizing feedback loops that strengthen each function. However, it also requires evaluators to expand their roles and range of responsibilities significantly — and in areas where they likely have not had formal training.

Centralizing Evaluation and Learning Staff in New Departments

This model represented a common way that foundations within our sample had configured evaluation and learning functions. The research, evaluation, and learning unit at the Annie E. Casey Foundation, for example, brought

FIGURE 4 Equivalency Model

geographically dispersed evaluation staff into a single unit and integrated other staff to focus on performance and knowledge management. Another variation of this model was seen at the William and Flora Hewlett Foundation, where an effective philanthropy group was formed by centralizing staff and functions related to organizational effectiveness and by hiring an evaluator to supplement the team. (See Figure 4.)

This model underscores the importance of evaluation and learning to any effective organization. It raises the visibility of these functions by highlighting their role in foundation effectiveness and linking them to strategy — something that at many foundations is engaged in only by boards or executive-level staff. One caution about this model, however, is that other staff in the organization may perceive less responsibility for evaluation and learning once a department has been dedicated to those functions. It also may be appropriate to monitor whether such a unit has sufficient staffing; when so many areas of expertise are combined, it may be more difficult to ensure that any one of the functions is effectively implemented within the organization.

Establishing Separate Units for Learning and for Evaluation

The Lumina Foundation offered an alternative model for addressing evaluation and learning functions: it has one unit dedicated to

FIGURE 5 Autonomy Model

organizational performance and evaluation and another to address organizational learning and alignment. The performance and evaluation unit manages a multitiered evaluation system linking organizational performance goals to field impact; the other facilitates organizational learning and alignment within the foundation. (See Figure 5.)

Like the previous model, this configuration elevates the functions of evaluation and learning by introducing a new unit. But in contrast to the prior model, each function is staffed by a team that supports autonomous work. The strength this model gains from the organizational structure, and its team resourcing, may nonetheless create some organizational barriers. One could imagine challenges that might emerge to the alignment of these functions spread across two different teams, as well as the potential for missed opportunities for leveraging functions in the advancement of strategic learning.

Diffusing Evaluation and Learning Across Staff and Programs

While it generally is the aim to embed evaluation and learning activities throughout an organizational structure, most sampled foundations had dedicated staff to manage those functions. The McKnight Foundation stood alone in investing in evaluation- and learning-related functions over a significant period of time without designating specialized staffing to either function.

⁴McKnight did, however, utilize external evaluation contracts, which were managed by the vice president of programs.

for Effective Organizations, 2009). Data-based decision-making, a related shift, emphasizes the use of data in quality improvements as well as other types of organizational decision-making, including strategy. Another key shift within the field has been alternatively called “outcomes-oriented philanthropy” (Brest, 2012) or “strategic philanthropy” (Kania, Kramer, & Russell, 2014). Strategic philanthropy rallies foundations to invest in results — specific, desired outcomes that can be operationalized and monitored to inform a foundation’s investment-related activities.

Our project found that these new orientations did help bring about in the foundation workplace many cultural changes — and not simply the window dressing as which structural change might be perceived. Yet we also found that cultural change remained an important area of unfinished business. Organizational-learning literature, in particular, was helpful in revealing the incomplete culture project within foundations. Two components of foundation learning were specifically helpful in illuminating the cultural changes needed to more fully support and institutionalize strategic learning: a clear and concrete value proposition, and leadership for learning (Hamilton, et al., 2005).

The Value Proposition

Becoming a learning organization requires foundations to codify through a value proposition what they mean by learning, the goals for foundation learning, and the implication of a learning approach for how a foundation operates (Hamilton, et al., 2005). For philanthropic leaders committed to building learning organizations, the value proposition is indeed one of community change and social impact. In terms of how to get from here to there, interview participants identified two aspects of the learning approach that have provided the most leverage for organizations: the role of inquiry and the acceptance of mistakes as a part of the learning process.

Foundation participants commonly observed that building a culture of inquiry was central to building an environment conducive to both evaluation and organizational learning. As described by participants, a culture of inquiry promotes a

Importantly, a culture of inquiry also recognizes the power of a good question, often defined as a learning or evaluative question, designed to develop breakthroughs in approaches to persistent problems.

collective orientation within a foundation toward curiosity and discovery. They also described such a culture as engaging staff centrally in the mission work of the foundation and collective enterprise of achieving impact.⁵ Importantly, a culture of inquiry also recognizes the power of a good question, often defined as a learning or evaluative question, designed to develop breakthroughs in approaches to persistent problems. The McKnight Foundation, for example, invested in staff capacity to ask good questions, engaging consultants to do so and deploying staff work groups to solve organizational concerns regarding knowledge management. When organizations focus their learning around questions, it can shift the mentality from “Did we make the mark?” to “How can we deepen our understanding in order to adapt, so that we can make the difference that is truly needed?”

Interview participants, however, indicated that foundations needed to do more to normalize “failure” in order to advance inquiry, evaluation, and the application of insights.

The Hewlett Foundation has been identified as one of the leading foundation voices addressing the need to learn from failure.⁶ Creating safe spaces for staff to talk about what hasn’t worked remains an ongoing focus of the foundation.

⁵In turn, staff engagement has been linked to increased workplace efficacy and satisfaction (Gallup Inc., 2013).

⁶Hewlett’s dissemination of evaluations of less-than-successful initiatives and willingness to serve as a learning case for other foundations have been widely acknowledged (e.g., the 2016 meeting of the Evaluation Roundtable).

Edward Pauly, director of research and evaluation at the Wallace Foundation, observed that its leadership had adopted a mantra, “facts are friendly,” to emphasize that data create opportunities for improvement while de-emphasizing the fear and sense of disempowerment that people can feel when faced with disconfirming information.

June Wang, Hewlett’s organizational learning officer, observed that without the space to talk about mistakes, “staff do not feel empowered to openly and rigorously analyze what went wrong and make a change in the right direction.” Moreover, staff are not empowered to view a mistake as valuable organizational knowledge that should be shared with others within the foundation, let alone the foundation’s external partners.

Leadership for Learning

Interview participants also underscored the importance of what Hamilton, et al., (2005) defined as leadership for learning: leadership at executive, board, and staff levels that values questions, encourages smart risk-taking and collective reflection, and demonstrates tolerance for uncertainty and failure as part of the learning process. Through the example leadership sets, leaders can help remove or minimize many barriers to learning, such as vulnerability. As Hamilton and colleagues observed over a decade ago: “Leaders shape a foundation’s culture and enable or compromise its capacity to learn” (p. 26).

A number of foundations in our sample highlighted the role of leadership. Nancy Csuti, director of research, evaluation, and strategic learning at The Colorado Trust, shared leadership’s

efforts to shift the foundation’s mindset by charging staff to “make new mistakes.” Edward Pauly, director of research and evaluation at the Wallace Foundation, observed that its leadership had adopted a mantra, “facts are friendly,” to emphasize that data create opportunities for improvement while de-emphasizing the fear and sense of disempowerment that people can feel when faced with disconfirming information.

Even with the many accomplishments and signals of positive culture change in foundations, interview participants indicated that culture change was hard work, and it was incremental. Yet participants also understood that culture work was a necessary part of the effort to improve foundation effectiveness. As Peter Drucker has popularly remarked, “culture eats strategy for breakfast” (as cited in David and Enright, 2015, p. 4): that is, despite good intentions, awareness, and knowledge, work that is not actually supported by the organizational culture is unlikely to manifest.

Building Learning Muscle

One approach to strengthening a culture of learning is to build a learning practice. Interviews suggested that a number of leading foundations are implementing learning practices — that is, engaging staff in a learning process that is embedded in day-to-day work. An organizational learning practice trains staff how to think together and, when done effectively, can establish learning feedback loops that engage staff with real-time information. Thus, a learning practice builds staff’s capacity to learn and the practice becomes a mainstreamed, habitual part of thinking, rather than a special exercise (J. Coffman, personal communication, June 18, 2015).

Among the learning practices we identified from participating foundations:

- The David and Lucile Packard Foundation and The California Endowment use learning agendas to support within-program and cross-organization learning and alignment. A learning agenda contains the burning questions a group seeks to address, opportunities for discovery, and responsible parties.

- The Packard and Annie E. Casey foundations have designed learning practices that engage teams in evidence-based decision-making utilizing data dashboards.
- The Colorado Health and Vitalyst Health foundations have employed emergent learning⁷ to build a systematic practice that utilizes data, generates insights, and articulates hypotheses and work opportunities to test them.
- The St. David's Foundation has deployed a "data review," bringing together an evaluation staff member, the assigned program officer, and the individual grantee to explore how program data — distinguished from data reported to the foundation or other funders — can be used by the grantee to inform its own organizational learning.

As this list suggests, the practices foundations are employing vary in approach and resource requirements. They each, however, normalize learning as a part of the workflow and bring greater discipline to its practice.

Emerging Lessons About Foundation Learning Practices

Collectively, several lessons emerged from interviews about how to support the development of a learning practice. First, participants suggested that a degree of experimentation is needed to learn what works for a particular organizational context, given its history and culture. In other words, the development of a learning practice involves a measure of trial-and-error, such as being willing to test a learning practice in different group settings to learn more about how and when it catches hold. For example, Hewlett's June Wang said she found it a helpful principle to "pressure test" new learning activities with small groups prior to rollout for wider staff engagement.

Interviews also suggested that learning practices must engage staff in capacity building in the

[T]he practices foundations are employing vary in approach and resource requirements. They each, however, normalize learning as a part of the workflow and bring greater discipline to its practice.

art and science of posing a good question if the organization is to go beyond the "did we hit the mark" mentality. As Julia Coffman observed, "an effective learning practice hinges on staff capacity to facilitate and participate in learning conversations" (personal communication, June 18, 2015). Some foundations, such as McKnight, Colorado Health, The California Endowment, and Kresge, utilized external consultants to build staff capacity and support the ability to identify questions that would make a difference in foundation decisions.

Finally, foundations also were learning about where to best situate a learning practice to inform strategic decisions made by the organization. For example, foundations stressed the importance of aligning the learning practice to decision-making timelines, such as strategic planning and strategy "refresh" cycles. Foundations also were seeking learning practices with the flexibility to be applied to different levels of learning about specific initiatives, program areas, and overarching foundation strategies.

Areas of Traction in Advancing a Learning Practice

Through interviews, we were able to identify a number of tools and methodologies that seemed of particular value to strategic learning and the alignment of evaluation, learning, and strategy.

Learning Agendas

A learning agenda reflects agreement, at an organizational or team level, about what must be

⁷See http://www.signetconsulting.com/concepts/emergent_learning.php

A learning agenda reflects agreement, at an organizational or team level, about what must be learned to generate better results. While it contains an organization's improvement priorities, it poses these as questions for relevant teams.

learned to generate better results. While it contains an organization's improvement priorities, it poses these as questions for relevant teams. The learning agenda also specifies the upcoming opportunities that will allow groups to deliberately investigate and learn about improvement needs. Moreover, the agenda itself provides a structure for harvesting learning from groups in service of the larger organizational priority.

Cross-Functional Teams

Also known as multidisciplinary teams, cross-functional teams are rapidly becoming a professional standard in many organizations, such as education and health care, marked by complex service structures. Interviews indicated that several foundations have implemented cross-functional teams to promote cross-fertilization and learning across departments and to ensure that all major functional roles are engaged in the design and implementation of programs and initiatives. Interview participants indicated that these organizational changes were not easily implemented, but were very worthwhile.

McKnight's vice president of operations described utilizing a cross-functional team to engage staff in organizational problem-solving and observed that it helped create new lines of communication and information-sharing among staff. At the Robert Wood Johnson Foundation, cross-functional teams were being deployed

more broadly: cross-team, ad hoc learning groups to explore timely and cross-cutting programmatic issues and cross-functional teams to staff portfolios and initiatives. The Wallace Foundation also utilized cross-functional teams to staff all programmatic areas of work; each team is composed of program officers, research and evaluation officers, and communications staff. Wallace, in particular, heralded the cross-functional-team model in supporting program officers in understanding evaluation results and how to use them, as well as ensuring that relevant areas of expertise within the foundation were brought to bear during all stages of strategy development, implementation, and adaptation.

Emergent Learning

The practice of emergent learning facilitates disciplined attention to insights that emerge from work, followed by application of these insights to improve results (Darling, 2012). Its hallmark is the practice of making thinking, intentions, and results visible through the use of group-learning tools such as before- and after-action reviews, emergent-learning tables, framing questions, and learning logs. Several foundations identified benefits of emergent learning: it entails use of a suite of simple, well-tested tools supportive of an improvement process; it embeds learning "in the flow" of the work, thereby keeping work at the center; and, through its simplicity, lends itself to a wide range of workplace applications as well as habituation.

The Colorado Health Foundation is a leading foundation in the deployment of emergent learning. It has been successful in implementing emergent-learning tools, and has found that those tools have supported both program and evaluation staff in clarifying the intent of the foundation's work and in refining the theories of change underlying various portfolios. Specifically, tools helped staff bring together multiple sources of evidence, walk through a sense-making process of the data, and then plan next steps that reflected their new insights. Kelci Price, the foundation's director of research and evaluation, explained:

This was critical. We didn't just want nice conversations — we were looking for a clear link for how to take action differently.

Other foundations interviewed also found emergent learning relevant. For example, The Colorado Trust's introduction to emergent learning contributed to the reconceptualization of the evaluation unit's role within the foundation, Csuti said:

Emergent learning helped promote learning about what was happening at the current time and to align evaluation and strategy.

Vitalyst found emergent learning helpful in establishing authentic learning partnerships with grantees by supporting the discovery of collective interests, increasing the visibility and weight of grantee interests, and framing shared as well as separate, related lines of inquiry as mutually beneficial.

Building a Strategic Learning and Evaluation System

A strategic learning and evaluation system (SLES), a design and implementation approach developed by FSG, involves a toolkit that helps organizations think through five components: a vision, a strategic focus, monitoring and evaluation activities, a supportive learning environment, and a cross-cutting learning culture and embedded practices. "When fully implemented, these elements work together to ensure that learning and evaluation activities reflect and feed into the organization's latest thinking. ... [and] can help answer the most pressing questions of leadership and staff" (Preskill & Mack, 2013, p. 6).

A growing number of foundations are participating in FSG's portfolio of SLES work, including The California Endowment and Kresge. Both foundations were in various stages of implementing strategic learning and evaluation systems at the time of the interviews, but indicated that the process was helpful in internally aligning the organization on the questions that mattered. Kresge reported that it also found the process helpful in ensuring a systematic

Foundations reported growing awareness and understanding of the capacity-building needs of grantees in performing highly complex social-change work. This, in turn, deepened their understanding of the internal capacities and new ways of working necessary for foundations to improve partnership with grantees.

approach to budgeting resources for evaluation and learning functions.

Engaging Grantees to Inform Strategy

One emerging trend, if not a specific practice, among the foundations interviewed was the incorporation of grantee perspectives into strategy development. The Center for Effective Philanthropy's Grantee Perception Report represented a common point of entry into further inquiry about and experimentation with how to collect strategy-informing data and feedback from grantees. Interviews further indicated that grantee engagements focusing on capacity building might serve as a next step for foundations to learn more about how strategies may need to be adapted to work more effectively with grantees.

For foundations such as The California Endowment and Vitalyst, for example, capacity building was a joint and mutually beneficial endeavor initiated in partnership with grantees to support systems-level change. Foundations reported growing awareness and understanding of the capacity-building needs of grantees in performing highly complex social-change work. This, in turn, deepened their understanding of the internal capacities and new ways of working necessary for foundations to improve partnership with grantees.

Strategic learning requires that staff understand how to plan, hold, and act upon conversations that move collective thinking forward constructively. This requires both a workplace culture supportive of learning and protected spaces to practice new skill sets.

Discussion

Strategic learning offers foundations working toward greater accountability and social impact a new approach to promoting organizational change: It links foundation actions to strategies and rationalizes change based on insight and evaluation. Strategic learning also provides a framework for making evaluation less of a one-off and informative to foundation decision-making. Ultimately, strategic learning provides us with feedback about the relative effectiveness of the strategies we deploy, how they can be refined, and whether they deserve further pursuit.

Our interviews suggested that a number of foundations are grappling with how to set up organizational structures to support, integrate, and elevate strategic learning as a new function. Further, we found a range of ways that evaluation, learning, and, to a lesser extent, strategy functions are configured, bundled, and bolstered within the foundation context. Philanthropy has not yet developed consensus on how best to structure these functions to support their alignment and optimal functioning.⁸

⁸A notable exception was that a number of foundations underscored the importance of evaluation being positioned independently of programs and having a direct line of communication to foundation executive leadership.

Our findings, however, also suggest that a consensus on structure may not be necessary or even desirable. We found that foundation staff were challenged at times by structural limitations, regardless of the particular configuration. Foundation leaders were seeking an adaptive culture that allowed organizational staff to move beyond structure, whatever form it assumed, to develop strategy that fully leveraged the collective knowledge of the foundation.

Structural approaches may have a tendency to underestimate the need for staff to adapt to changes, to develop new workflows, and to make sense of changes in roles. Strategic learning requires that staff understand how to plan, hold, and act upon conversations that move collective thinking forward constructively. This requires both a workplace culture supportive of learning and protected spaces to practice new skill sets. As Nancy Csuti of The Colorado Trust cautioned, strategic learning requires a significant culture shift for foundations.

The introduction of a learning practice can incrementally shape organizational culture while allowing strategic learning to gain a foothold. A learning practice creates space to experiment with substantive work as well as new team processes for generating insight. As the Colorado Health Foundation's Kelci Price has shared, a learning practice can be scaled as foundations grow in their readiness for adoption, and it can be targeted where there is the greatest urgency or momentum within an organization. In short, learning practices instill the knowledge of how to learn within a foundation and thereby influence the larger culture of problem solving, planning, and strategy development.

Conclusion

Strategic learning is a critical if relatively new lens for philanthropy. It reveals artificial organizational boundaries, such as that between evaluation and strategy, that inhibit the effectiveness of foundations. Moreover, strategic learning has reawakened philanthropy's interest in foundation learning and harnessed it with greater intentionality than it has historically enjoyed. In the

context of strategic learning, the learning enterprise assumes greater urgency and focus.

There has been concern that foundations are faltering in response to the challenges they face in becoming more strategically driven organizations, downplaying the complexity of their work and ignoring the uncertainties inherent in the strategic enterprises they pursue (Patrizi, et al., 2013). Yet strategic learning is neither simple nor efficient to institutionalize or practice. Foundations are still figuring out how to do it well.

This should not be too surprising, as learning is among the most difficult kind of work organizations do. It depends on willingness to change, to admit mistakes, and to take action and responsibility as a group. Collective learning is never a technical task with one right answer; it must be negotiated, refined, and tested. It requires tremendous energy and disciplined experimentation to increase foundation capacity to engage at the strategy level and to deliver on more effective, better designed and executed initiatives and programs. As a field, perhaps philanthropy is simply regaining its footing — what naturally follows any significant shift in how we think about our work.

Our quest for strategic learning through the looking glass of leading foundations advanced our foundation's thinking significantly. For example, we were heartened to learn that strategic learning does not require wholesale structural and cultural change. We are pursuing a strategic learning and evaluation system through an incremental approach, phasing in greater complexity as staff capacity expands. We also are building a learning practice. Although this is no small feat, we now recognize that learning can be much more opportunistic and more naturally embraced where it is genuinely helpful. We also look forward to learning more from foundation colleagues about system building and practice — particularly in the next three areas, which we believe have potential for advancing the field.

First, how can a learning practice support the development of deeper partnerships and salient

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strategies with grantees, other funders, and the community? If our work is truly about impacting systems, we need to engage a broad field of actors and more fully understand how to create conditions with partners in which to learn and improve results. We are well aware that philanthropy as a whole has been slow to advance its learning partnerships in the field and with communities (Hamilton, et al., 2005; McCray, 2014; Patrizi, et al., 2013). Yet our interviews suggest that new case examples and research about the development of learning practices with community partners is just on the horizon.

Second, as learning and evaluation professionals working in a foundation context, we are interested in how a focus on strategic learning can support strategic decision-making about the scope and content of our work in light of staffing and other resource requirements. Staff and dollars are often spread across too large a scope of work (Coffman, et al., 2013). How might a focus on strategic learning and its deployment through an organizational-learning practice support more targeted efforts and greater leveraging of investments?

Finally, we acknowledge significant progress in philanthropy's quest for strategic learning. But what is gained, beyond philanthropy? The utility of strategic learning will ultimately be measured

in terms of philanthropy's results — foundation-level contributions to community outcomes. The most pressing question to us, then, is to what extent foundations, alone and together, can produce better results, at a quicker pace, because of deliberate engagement in strategic learning — perhaps with the support of a learning practice.

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Lessons About Evaluating Health-Coverage Advocacy Across Multiple Campaigns and Foundations

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Keywords: Advocacy evaluation, foundation-supported advocacy campaigns, challenges inherent to advocacy evaluation

Key Points

- This article draws on a dozen years' experience in evaluating major consumer-health advocacy initiatives to build the knowledge base about advocacy evaluation. The authors explain how their evaluations were strengthened by articulating a detailed theory of change and emphasizing assessment of interim outcomes from many perspectives and methods.
- Even with comprehensive data and integrated analysis, however, some ambiguity in the results is inevitable; there is no completely objective way to determine the effectiveness of an advocacy initiative. Moreover, sometimes solid or even exceptional advocacy efforts do not lead to desired policy outcomes. Advocacy initiatives that fail initially may be groundwork for future opportunities.
- Evaluators must tell a compelling story about what advocates hope to achieve, how they tried to achieve it, and the extent to which external factors helped or hindered progress. The narrative about why advocates did what they did must describe context and its influence on all aspects of advocacy campaigns, from goal setting to strategy development to implementation.

Introduction

Social-policy problems often require advocacy work to build alliances with diverse stakeholders, mobilize and engage consumers, identify achievable policy options and their potential impacts, and monitor implementation of solutions, among other tasks. Strategic philanthropists seeking to support social change have found it useful to invest in advocacy work that aligns with their programmatic goals, particularly if it appears that their investment can help advocates capitalize on a particular policy opportunity. The Atlantic Philanthropies, the Robert Wood Johnson Foundation (RWJF), and the David and Lucile Packard Foundation each have invested substantial resources into advocacy initiatives over the past two decades as a central part of their efforts to expand access to health insurance coverage for children and families. This support came at an opportune juncture for health-coverage advocates. Following the passage of the Children's Health Insurance Program (CHIP) in 1997, states became more involved than they had been in improving outreach and enrollment strategies to promote coverage (Lewit, 2014). While the advocates believed that state-level advocacy was critical to make progress on coverage, the foundations were focused on an additional question: How would they know if funding advocacy contributes to coverage gains?

All three foundations contracted with Mathematica Policy Research to help answer this question and evaluate aspects of these advocacy initiatives. Evaluating advocacy

efforts is challenging, primarily because the effects of advocacy, and thus the effects of the foundation's investment, are difficult to measure (Coffman, 2013; Guthrie, Louie, David, & Foster, 2005; GrantCraft, 2005). We have found that the challenges to evaluating advocacy are surmountable: effectiveness (or ineffectiveness) of advocacy efforts can be demonstrated, but not through methods used in more traditional impact evaluations.

Background

Consumer health advocates aim to change health care and health-coverage policies and practices to meet the needs of consumers more effectively. Typically, they use a set of targeted actions — known collectively as an advocacy campaign — to pursue changes in public policy. The skills, knowledge, and resources needed to conduct advocacy campaigns typically do not exist within a single organization or type of organization (Community Catalyst, 2006). As a result, advocacy groups typically form alliances to bring more resources, skills, and voices to the table. Advocacy is not the same as lobbying, although lobbying can be a component of an advocacy campaign. Whereas advocacy aims to influence public and decision-makers' views in favor of policies and public-spending choices, lobbying tries to influence specific legislation; it can be directed to a specific legislator or the general public, and it expresses specific views on the legislation in question (Mehta, 2009).¹

Community Catalyst, a nonprofit organization that provides technical assistance (TA) to state-based consumer health-advocacy groups, describes six “core” advocacy skills or capacities that are used in conjunction to promote or defend a particular policy issue. (See Table 1.)

¹IRS rules permit nonprofits organized as 501(c)(3) charitable organizations to conduct cause-related lobbying as long as it does not constitute a “substantial” part of their activities (although “substantial” is not defined, the IRS provides guidelines about how to count lobbying activities); alternatively, nonprofits can elect to organize as 501(c)(4) groups (defined as social welfare or action groups), which have no limits on lobbying (Center for Effective Government, 2002).

Evaluating advocacy efforts is challenging, primarily because the effects of advocacy, and thus the effects of the foundation's investment, are difficult to measure. We have found that the challenges to evaluating advocacy are surmountable: effectiveness (or ineffectiveness) of advocacy efforts can be demonstrated, but not through methods used in more traditional impact evaluations.

Four Consumer Health-Advocacy Initiatives

Since 2002, Mathematica has evaluated four health insurance coverage advocacy programs sponsored by three foundations: RWJF's Covering Kids and Families (CKF) and Consumer Voices for Coverage (CVC), Packard's Insuring America's Children (IAC), and Atlantic's KidsWell initiative. (See Table 2.) While distinct, the four initiatives had some similar characteristics:

- All four focused on health care coverage policy, and all were multiyear initiatives, largely because foundations recognized that the types of changes these groups sought could not be achieved in a single year.
- The groups funded to participate in these projects were typically established, nonprofit advocacy groups — the exception was CKF, where many of the grantees were new to advocacy work. Given the emphasis on children in CKF, IAC, and KidsWell, the funded advocates often were groups that focused on children or children's health issues.

TABLE 1 Core Advocacy Capacities Identified by Community Catalyst

Core capacity	Definition	Examples of individual elements of the core capacity
Coalition building	Building and sustaining strong, broad-based coalitions and maintaining strategic alliances with other stakeholders	Achieving alignment and buy-in from partners around policy priorities; sharing decision-making
Grassroots support	Building a strong, grassroots base of support	Recruiting and training consumer advocates; engaging constituents that represent ethnic, demographic, and geographic diversity of the state; gaining visibility and credibility in communities
Policy and/or legal analysis	Analyzing complex legal and policy issues to develop winnable policy alternatives that will attract broad support	Monitoring emerging legislative, administrative, or legal actions related to health care coverage and quickly analyzing emerging issues to assess potential impacts
Campaign implementation	Developing and implementing health policy campaigns	Developing vision and goals; planning and implementing a campaign to achieve those goals; responding to opportunities or threats to achieving goals
Media and communications	Designing and implementing media and other communications strategies to build timely public education and awareness on the issue, while building public and political support for policies or weakening opposition arguments	Developing talking points and messages for target audiences; training messengers and media spokespeople; effectively using appropriate media (internet, print, broadcast, etc.); monitoring media to identify opportunities or threats to achieving goals
Fundraising	Generating resources from diverse sources for infrastructure and core operating functions; supporting campaigns	Raising funds from different sources; gaining visibility and credibility with potential funders; marketing successes to potential funders

Sources: Community Catalyst (2006); Gerteis, Coffman, Kim, & Marton (2008).

- Each initiative involved TA to strengthen skills and capacities. The two IAC projects used TA to emphasize specific advocacy skills — communications and policy expertise — to achieve change. The other initiatives emphasized all advocacy skills, in particular working in coalition. Technical assistance was added to CKF in 2002 to help grantees respond to economic challenges in the states (Hoag & Wooldridge, 2007a).

Evaluating the Initiatives

The evaluations of these four initiatives drew on similar methods and shared common features. Each used logic models and related conceptual frameworks to clarify how the initiatives were structured, the contextual environment, and the outcomes expected. Each evaluation team also used several data sources to document the structure, nature, and results of the work, including grantee applications and related program materials, regular progress reports submitted by

TABLE 2 Background on Four Health Advocacy Initiatives

	Covering Kids and Families (CKF)	Consumer Voices for Coverage (CVC)	Insuring America's Children (IAC)	KidsWell
Funder	Robert Wood Johnson Foundation	Robert Wood Johnson Foundation	David and Lucile Packard Foundation ^b	Atlantic Philanthropies
Time period	1999–2007	2008–2015	2006–2017	2011–2016
Total investment^a	\$150 million	\$44 million	\$85 million ^c	\$29 million
Geographic reach	Grantees in all 50 states and District of Columbia	Grantees in 26 states were funded for one or more years during the seven-year initiative; nine states had a grantee in each year of the initiative.	Grantees in 19 states: 16 participated in the first project, known as the Narrative Communications Project; 14 participated in the second, known as the Finish Line Project; grantees in 11 states were involved in both projects	Grantees in seven states and 10 national grantees
Program goals	Increase enrollment and retention of eligible children and adults in Medicaid and CHIP	Initially, promote state-based coverage expansions. Post-ACA, make ACA implementation and related coverage policies responsive to consumer needs	Advancing health care coverage for all children	Advancing health care coverage for all children
Primary activities to achieve goals	Develop state and local coalitions to work with state agency staff to simplify and coordinate Medicaid and CHIP policies and procedures; local coalitions piloted outreach and enrollment efforts to identify what might work best	Develop and strengthen state-based consumer advocacy networks, elevate the consumer voice in debates over health care reform, and advance consumer-friendly policies through advocacy campaigns	Narrative grantees: strengthen communications capacities to help build consensus more effectively and promote children's coverage through effective messaging; Finish Line grantees: develop advocacy campaigns seeking to advance children's coverage	After organizing strong state coalitions, grantees leverage strengths of coalition members to develop campaigns to promote the policies and procedures that would increase children's coverage

Sources: Wooldridge, Trenholm, & Gerolamo (2009); Hoag, Peebles, Trenholm, & Lewit (2012); Foster (2014); Robert Wood Johnson Foundation (2007); Hoag, Lipson, & Peebles (2016); Harrington & Hoag (2015); Strong, Lipson, Honeycutt, & Kim (2011).

Note: ACA = Affordable Care Act; CHIP = Children's Health Insurance Program.

^aDollars are rounded for simplification purposes.

^bFirst Focus sponsored two of the Narrative Communications Project grantees; Packard sponsored the other 14.

^cThe amount invested from 2007 to 2015.

The evaluations of these four initiatives drew on similar methods and shared common features. [T]he foundation sponsors in all four evaluations emphasized continuous learning and supported adapting the evaluation approach as needed to reflect early findings and changes in program direction.

grantees, secondary data on contextual features and enrollment trends, and tools for tracking details about activities and events in a uniform way. Further information and insights about implementation experiences and factors influencing how the work played out were gleaned from key informant interviews and/or focus groups with grantees and coalition partners, state program and policy officials, and other stakeholders. Interviews with policymakers illuminated changes in policymakers' perceptions of the advocates and their efforts and influence. Finally, the foundation sponsors in all four evaluations emphasized continuous learning and supported adapting the evaluation approach as needed to reflect early findings and changes in program direction.

We used additional methods for specific purposes. For example, the CVC evaluation surveyed coalition members and used social-network analysis to assess coalition capacity (Honeycutt & Strong, 2012). KidsWell and IAC conducted case studies to gain a deeper understanding of implementation and contextual forces. Covering Kids and Families used reverse site visits to evaluate a process-improvement collaborative.²

²Unlike individual site visits to gather input at each participant's location, a reverse site visit brings numerous participants to a single location.

Challenges and Approaches to Assessing Advocacy's Effects

While evaluating the four advocacy initiatives described above, we faced challenges and overcame them using methods that are commonly described in advocacy-evaluation guides (Guthrie, et al., 2005; Coffman, 2009; Alliance for Justice, 2005). As these guides and related literature attest, advocacy campaigns are complex and distantly related to ultimate outcomes; policy change is slow and subject to many factors in addition to advocacy. Foundations that are accustomed to evaluating direct-service programs may need to adjust their expectations about the evidence that evaluators collect and analyze to assess the effects of advocacy, but they can be confident in the learning potential of advocacy evaluation.

This article adds more than a dozen years' experience in evaluating major consumer health advocacy initiatives to existing knowledge about advocacy evaluation. In this section, we describe four features of advocacy initiatives that can present challenges to evaluators, providing examples from our projects. We then describe specific design components or evaluation methods that helped us address the challenges and determine whether and how advocacy initiatives contributed to policy change. Further details about the methods used in these evaluations can be found in publications referenced throughout the discussion.

Feature 1: Advocacy Is an Upstream Influence on Ultimate Goals

Compared to direct-service interventions and their intended outcomes (for example, medical treatments and better health or teaching practices and higher student-test scores), the path from advocacy to its ultimate goals is longer and less direct. KidsWell and IAC, for example, support advocacy to promote access to health insurance for children in low-income families. The Atlantic and Packard foundations created these initiatives because they believe that (1) advocacy can favorably affect public policy related to health insurance coverage and (2) well-designed public policy can favorably affect families' access

to insurance. By logical extension, better access to insurance leads to higher insured rates, which leads to better access to health care services, lower out-of-pocket costs for routine services, and protection from catastrophic costs. In other words, when advocacy succeeds, it contributes eventually and indirectly to higher rates of insured children, healthier children, and families that are more financially stable.

Logic models explicitly show that interim outcomes contribute to policy change. Essential to our understanding of whether and how advocacy contributes to policy change, logic models represent the internal and external factors at work in and around advocacy campaigns (or other interventions). Among other important purposes, we use logic models to (1) specify a comprehensive set of interim outcomes expected to stem from advocacy activities, (2) illustrate the relationships between interim and ultimate outcomes, and (3) determine which interim outcomes the evaluation would focus on. Sometimes logic models or related frameworks are also used by funders to characterize the initial design of an advocacy program or by a specific coalition in developing their approach, possibly involving a participatory process that engages multiple stakeholders. We build on any existing frameworks and then use application materials, work plans, progress reports, and related documents to capture program strategies and outcomes consistently, using similar categories and terminology across multiple projects. We vet and finalize logic models with leadership teams of coalitions or advocacy organizations participating in an evaluation to ensure we are thinking about activities, interim outcomes, and ultimate goals along similar lines.

The detailed logic model we developed for the evaluation of CVC (Strong, Honeycutt, & Wooldridge 2011) links the six advocacy capacities to three network activities. (See Figure 1.) Each set of activities, in turn, is connected to interim outcomes, followed by intended policy outcomes. The third row of the model, for example, directly connects three grassroots mobilization activities to two sequential interim outcomes: (1) having grassroots groups at the table when policy options are debated and

The sheer quantity of policy priorities and related activities that comprise an advocacy campaign can challenge evaluators to grasp the intervention they are studying and understand how various components work together. Such complexity is multiplied when evaluations involve many sites and intend to draw cross-site conclusions.

decisions are made, followed by (2) consumer voices being reflected in proposed policies. This level of detail shows that advocates' activities could plausibly contribute to the outcomes of interest. As importantly, it obligated the evaluation team to collect evidence about whether the activities and outcomes did or did not occur.

Feature 2: Advocacy Campaigns Are Multifaceted

The sheer quantity of policy priorities and related activities that comprise an advocacy campaign can challenge evaluators to grasp the intervention they are studying and understand how various components work together. Such complexity is multiplied when evaluations involve many sites and intend to draw cross-site conclusions. The seven lead KidsWell grantees, for example, have each pursued a handful of state-specific policy priorities. Common priorities included defending Medicaid and CHIP from state budget cuts, simplifying enrollment and renewal processes, and advocating for Medicaid eligibility expansion. By our count, grantees performed a total of 822 discrete activities (117 per state, on average) to address their priorities in a three-year period. Activities

FIGURE 1 Consumer Voices for Coverage Logic Model Showing Year-One Evaluation Priorities

Source: Strong, Honeycutt, & Wooldridge (2011).

included coalition building, policy analysis, grassroots organizing, public education, social media, and so forth.

Clearly, evaluators cannot argue that advocacy campaigns contribute to policy change by performing activities in great quantity. Rather, the evaluator must determine whether campaigns pursued appropriate activities for their goals, whether they pursued them well, and how they made a difference collectively. We answer questions about the what, why, how, and how well of advocacy through implementation analyses that weave data sources into a comprehensive narrative.

Advocate-reported data will answer some implementation questions. Advocacy evaluations typically draw on grantee planning documents and progress reports, grantee surveys, and in-depth interviews with implementation staff to understand what grantees do during a campaign and why. Surveys with closed-ended questions are useful for capturing uniform, quantifiable information about the types of activities grantees conduct. Open-ended survey questions or in-depth interviews enrich the quantitative data. Evaluators use these data to track and understand key activities and assess their fit with the logic model.

Information and opinions reported by advocates are also useful for assessing how well the campaign activities serve their objectives, but advocate perspectives should not be the only data about quality and effectiveness. We use temporal analysis and policymaker interviews to lend objectivity and multiple perspectives to implementation analyses.

Temporal analysis explores alignment between advocacy activities and interim outcomes. The technique involves making visible the temporal connections between advocacy campaigns and related strategies and the policy advances they target. The KidsWell evaluation team identified and tracked the timing of campaign activities in a structured way on a monthly basis and aligned the data with information about the timing of relevant policy outcomes. A temporal connection between advocacy efforts and

Temporal analysis requires detailed and accurate information about the timing of advocacy activities and targeted policy outcomes. It is also important to focus on activities that would be expected to be closely connected to policy outcomes. Instead of examining the timing of coalition meetings, the analysis would focus on key meetings with policymakers or significant media or educational events.

policy wins is not conclusive evidence of causal influence. However, combined with a theory of change and supportive evidence from key informant interviews and formal assessments of advocacy capacity and functioning, temporal patterns can provide compelling support for the effectiveness of advocacy efforts by helping to simplify complex relationships and synergies among different strategies and outcomes. Temporal analysis requires detailed and accurate information about the timing of advocacy activities and targeted policy outcomes. It is also important to focus on activities that would be expected to be closely connected to policy outcomes. Instead of examining the timing of coalition meetings, the analysis would focus on key meetings with policymakers or significant media or educational events.

Policymaker perceptions balance advocate-reported data about advocacy's effectiveness. One of the best ways to understand the influence of advocacy work is to talk with policymakers and other

agenda setters about the factors that influence their perspectives, preferably more than once. For this approach to work well, the interviewers must be viewed as objective and independent so that respondents are comfortable asserting their views and being candid. Respondents are likely to require that their input be kept confidential.

We interviewed policymakers in our evaluations of all four initiatives. Questions addressed the involvement and influence of advocacy groups in shaping relevant policies, how specific policy debates were affected, and how advocates could be more effective. Open-ended questions prompted perspectives about advocacy efforts overall (“Which consumer advocacy groups have been most involved in ...?”). Closed-ended questions helped us assess the level of involvement or influence of particular groups or organizations (for example, “How involved was [CVC grantee] in shaping or influencing recent coverage expansion policies or proposals — very, somewhat, a little, or not at all?”). Respondents included a governor’s office staff, state legislators, agency leaders, and policy experts from relevant associations, foundations, and other agenda-setting organizations. The mix of respondents represented perspectives on both sides of a given policy issue.

Policymaker views can also inform future strategies by making clear the kind of information they trust and find most useful in making decisions. For example, in the CVC evaluation, policymakers said they valued hearing directly from consumers and believed that personal stories had a powerful effect on policy debates (Lipson & Asheer, 2009). A majority of policymakers interviewed for CVC also said they would appreciate greater efforts to educate the public about the value of expanding coverage (Lipson, Zukiewicz, & Hoag, 2011).

Feature 3: Capacity Building and Campaigning May Be Simultaneous

Whether foundations invest in building capacity or fine-tuning the skills of established advocacy organizations, evaluators cannot assume they are studying an intervention that will remain stable.

Advocacy-capacity assessments help link organizational development to policy influence. In the case of CVC, previous work by Community Catalyst had identified and defined six core capacities linked with successful strategies. (See Table 1.) The evaluation team designed an instrument to measure these core advocacy capacities after determining that existing tools would not cover adequately all the areas of key interest for coalition-based advocacy efforts (Strong, Honeycutt, et al., 2011).

The capacity-assessment instrument developed for the CVC evaluation included specific elements within each of the six core capacity areas. Individual elements are structured as statements about a particular ability relevant to that core capacity (for instance, the ability to share decision-making and reach working consensus is an element in the building-coalitions area, and the ability to develop relationships with key media personnel is in the communications area). Three groups of respondents for each coalition (the grantee, Mathematica, and the national program office) independently rated each element using a scale ranging from one (little or no capacity) to five (very strong capacity). We used the multi-rater approach to obtain a balanced perspective of grantee capacity. When we analyzed ratings from each source, we found that the national program office and Mathematica tended to score grantees somewhat less favorably than grantees scored themselves (Kim, Strong, Wooldridge, & Gerteis, 2009). Moreover, some grantees indicated that they strayed slightly from the scoring instructions (for example, by rating capacities in relative, rather than absolute, terms). For these reasons, final scores were averaged across respondents and also normalized to account for how far along each grantee was in its capabilities at the start of the initiative.³

Mathematica administered the capacity-assessment survey twice, during the initial year of the grant and two years later to assess changes in each of the core capacities. Doing this also helped support ongoing learning objectives because findings from the initial assessment were used to pinpoint

³Strong and Kim (2012) and Kim, et al. (2009) provide more detail on the instrument and scoring approach.

areas to focus capacity-building efforts. Focus groups and interviews with policymakers and grantee informants contributed insights to help interpret the capacity-assessment outcomes and determine coalition and contextual factors influencing observed changes. Ultimately the team concluded that capacity assessment is a valuable component to include in evaluations of advocacy work, especially when the dimensions of capacity that matter are well understood in advance.

Social-network analysis links coalition building to policy change. The CKF grantees prioritized building diverse coalitions, and diversity gave coalitions advantages in pursuing CKF goals (Hoag & Wooldridge, 2007b). When the advocacy work involves forming and deploying coalitions or related networks of organizations, as it did in CKF and other initiatives we evaluated, social-network analysis can be a powerful evaluation tool.

We used social-network methods to categorize and map the relationships among leadership team organizations on the CVC evaluation (Honeycutt & Strong, 2012). Questions to support this analysis were included in the baseline and follow-up surveys of coalition members designed to support the overall evaluation. The surveys were customized for each coalition and gathered information about each organization, such as its constituency and size, and about its relationships and activities with all other organizations in the coalition. The resulting data captured the perceptions of each member organization for every member pairing. We analyzed, for example, the proportion of organizations that communicated with each other at least monthly, displaying frequent communicators in figures called sociograms. We summarized survey findings for each coalition at baseline and again at follow-up and discussed the findings with the project director and other grantee staff. This process provided grantees a new perspective on how their coalition operated and also gave the evaluation team feedback on how the results reflected leadership team operations, along with insights about some of the relationships that emerged.

Social-network analysis methods can be used to assess the nature and strength of any network, whether a leadership team, members of a formal coalition, or individuals involved in a specific project. Guided by a theory of change, evaluators need to consider which network features are critical, as well as how members should be included in the evaluation effort and the implication of those choices for the results.

Social-network analysis methods can be used to assess the nature and strength of any network, whether a leadership team, members of a formal coalition, or individuals involved in a specific project.⁴ Guided by a theory of change, evaluators need to consider which network features are critical, as well as how members should be included in the evaluation effort and the implication of those choices for the results. For instance, the sample selected for the survey is important because some projects and teams have complex or nonstandard structures, with members who participate infrequently by design or fluid membership.

Confidentiality is a critical issue for social-network survey items because they ask members of

⁴Using social-network data and measures requires expertise in their collection and analysis, including specialized software. The following references provide additional resources for those interested in learning more about social-network analysis methods: Durland and Fredericks (2005), Hanneman and Riddle (2005), Luke and Harris (2007), and Provan, Veazie, Staten, and Teufel-Shone (2005).

The evaluator's implementation narrative must reflect context. Evaluators must tell a compelling story that relates priorities (what advocates hope to achieve) to activities (how they tried achieve it) to context (the extent to which external factors helped or hindered progress). The rich implementation narrative (why advocates did what they did) that characterizes advocacy evaluation must fully describe context and its influence on all aspects of advocacy campaigns, from goal setting to strategy development to implementation.

a group about their relationships with each and every member. For example, one of the questions included in the CVC baseline survey asked about the extent to which respondents have productive relationships with other coalition members. In order to collect this type of information, survey respondents must know their responses will be kept strictly confidential — or they need to all agree ahead of time to share this information openly with one another, which could require modifying the survey items. For this reason, evaluators should consider having a person or organization outside the coalition conduct the survey and analyze the data while keeping the data secure. We used this practice in the CVC evaluation.

Feature 4: Context Is a Powerful Influence on Advocacy Campaigns

More than two-thirds of CKF grantees surveyed said that political and economic context posed the greatest barriers to their advocacy work (Hoag & Paxton, 2007). Campaigns adapt their strategies, reprioritize goals, or shift direction in response to changes in the political and economic environment, whether such changes create new challenges or new opportunities. Evaluators are challenged to track the advocate's path and to understand deviations from plans.

A few examples illustrate these dynamics. The enactment of the Affordable Care Act (ACA) in 2010 and the U.S. Supreme Court ruling in 2012 that Medicaid expansion was a state option greatly affected the advocacy campaigns we were evaluating at the time. Most IAC grantees had been participating in that initiative for many years when the ACA was enacted. Although advocates unequivocally welcomed the law, some also worried that its focus on expanding coverage for low-income adults could detract from longstanding efforts to cover children. In a show of adaptability, advocates developed the unifying (and evidence-based) message that children are more likely to have health insurance if their parents have insurance, and they dovetailed their advocacy for children's coverage with advocacy to promote full ACA implementation.

Although IAC and KidsWell were launched before and after the ACA, respectively, both initiatives were affected when the Supreme Court ruled that the law's adult-focused Medicaid expansion was optional for states. Some states quickly and firmly decided to expand Medicaid or not; other states had protracted debates. Grantees had to adjust their policy priorities accordingly. In states that did not decide quickly, some advocates made Medicaid expansion their top priority, temporarily setting aside children-specific policy goals for the sake of that larger, long-term goal.

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it) to context (the extent to which external factors helped or hindered progress). The rich implementation narrative (why advocates did what they did) that characterizes advocacy evaluation must fully describe context and its influence on all aspects of advocacy campaigns, from goal setting to strategy development to implementation. To begin, evaluators should develop questions about context at baseline and throughout an advocacy initiative. The detailed CVC logic model depicts the influence of fiscal and political factors, implementation barriers and facilitators, and policy windows. (See Figure 1.) Including these factors in the logic model reminded us to address them in data-collection instruments and analysis and primed our foundation partners for a discussion of context in our findings.

Thoroughly understanding and conveying context helps evaluators avoid flawed inferences. Political, economic, and fiscal factors matter a great deal to policy change; even the strongest policy-advocacy campaigns may seem ineffective if contextual factors create stiff headwinds. Because it may be a mistake to infer a poor effort from a disappointing result, the evaluator is obligated to thoroughly understand the effort and key contextual factors. For example, when we asked policymakers to rate the influence of consumer advocates on coverage-policy debates, respondents in some states indicated that despite strong efforts, consumer voices were drowned out by those of more powerful interest groups, notably hospitals and insurers. Understanding the political context in which consumer advocates work allows for a more nuanced interpretation of their impact.

Similarly, consumer groups in Texas that participated in KidsWell and IAC and that advocated for Medicaid expansion arguably did many things “right” in the course of their campaign. They garnered huge support for Medicaid expansion from a vast range of stakeholders, from faith-based organizations to chambers of commerce. They also based their messages in favor of Medicaid expansion on the state’s economic interests, avoiding moral appeals that may not persuade some stakeholders. Amassing support and framing issues in economic terms seemed

to contribute to decisions to expand Medicaid in other states, but not Texas. We avoided faulty conclusions about how well Texas advocates fought for Medicaid expansion by collecting sufficient data about the quality of their strategies and activities. As a result, we were able to confidently conclude that advocates’ lack of success said less about their performance and more about the state-level elected officials being unreceptive to economic arguments about a policy decision they viewed only politically.

Discussion: What Are the Implications for Foundations?

Just as a good advocacy campaign adapts to progress, challenges, and shifting conditions, the evaluation field evolves. It may have once sufficed to conduct “analysis and reporting” tasks and, later, “dissemination.” But as foundations and their grantees work to resolve increasingly complex social problems, they and their grantee partners should derive more value from their evaluations. This may mean earlier consideration of evaluation goals if they hope the evaluation will help inform the implementation and help decide whether to continue, reshape, or end a program, or other roles. Greater expectations also obligate evaluators to follow promising practices from adult learning and emergent learning and not merely present findings (Darling, Guber, Smith, & Stiles, 2016). Evaluators must engage evaluation participants to consider the nature, robustness, and context of evaluation findings, providing evidence that will help foundations make decisions and take next steps. Although ours were not participatory evaluations, our early and ongoing engagement with grantees may have made them more receptive to our findings. In addition, we gave grantees notice before reporting sensitive findings broadly. Some grantees have commented that our objectivity as external evaluators was an asset in considering whether and how to act on findings.

We have found it essential to begin advocacy evaluations by articulating a theory of change that positions everyone — evaluators, foundation staff, and advocates — on the same page regarding expected interim and ultimate

[S]ometimes solid or even exceptional advocacy efforts do not lead to desired policy outcomes. However, skilled evaluators should be able to identify whether advocacy efforts that fail at first may have laid groundwork for future opportunities by gaining a seat at the policymaking table, being viewed by policymakers on both sides of the aisle as credible sources of information, and developing new partnerships with a wide range of organizations. These types of outcomes, among others, show that advocates will be ready when the conditions are ripe for advancing their policy goals.

outcomes, as well as how the advocacy initiative is expected to arrive at those outcomes. Our focus on assessing interim outcomes — whether policy-related, capacity-related, or both — from a variety of perspectives and using multiple methods has enriched our abilities to understand the short-term effects of initiatives while providing a rich contextual narrative about implementation. In some cases, we have been engaged early enough to incorporate formative evaluation approaches that foster ongoing learning and can improve implementation.

Adaptation is an essential element of successful advocacy campaigns, and foundations and their evaluation partners should be prepared to monitor and interpret that evolution, adapting their strategies as appropriate. As evaluators monitor early progress and assess the factors influencing implementation, they should consider the role of obstacles and contextual forces that may necessitate changes in the original course of action. Some obstacles and unforeseen opportunities are to be expected and will not merit a change in course, but more persistent challenges may signal the need for a shift in strategy. A carefully designed theory of change provides a tool for thinking about different options for adapting the approach and for deciphering the likely impact of these changes on desired outcomes.

Foundations should be prepared to expect some disconnects or ambiguous evidence, even with comprehensive data and integrated analysis. Some subjectivity in the results is inevitable; there is no completely objective way to determine that an advocacy evaluation captured the totality of effects. Foundations can minimize bias by selecting evaluation partners who will use multiple data sources and perspectives, examine a range of short-term and intermediate outcomes, and adapt their focus as the program evolves. This requires evaluators with a deep understanding of both the public-policy issues at stake and which decision-makers can affect them. It also requires the ability to separate the wheat from the chaff, by integrating and analyzing a large amount of diverse, mainly qualitative, and sometimes incomplete sources of information to make credible, informed judgments. As illustrated earlier, sometimes solid or even exceptional advocacy efforts do not lead to desired policy outcomes. However, skilled evaluators should be able to identify whether advocacy efforts that fail at first may have laid groundwork for future opportunities by gaining a seat at the policymaking table, being viewed by policymakers on both sides of the aisle as credible sources of information, and developing new partnerships with a wide range of organizations. These types of outcomes, among others, show that advocates will be ready when the conditions are ripe for advancing their policy goals.

As CHIP reaches its sunset date in 2017, advocates at the federal and state levels must have the capacity and resources, and deploy the most effective strategies, to preserve the gains in children's health coverage made over the last 15 years. The lessons from these foundation initiatives and the evaluations they sponsored provide a road map for the next round in the campaign to achieve universal children's health coverage. And while advocacy remains essential to sustaining the progress and addressing remaining gaps in access to coverage, foundations and other funders are also focusing greater attention on "next generation" access issues involving delivery-system and payment reforms, provider networks, health-literacy issues and the like. Advocacy work that engages and elevates the voice of consumers will be critical in making progress in these areas as well. Our experiences demonstrate the feasibility and importance of evaluating these efforts to provide evidence crucial to guiding and sustaining this work.

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Laying the Groundwork for a National Impact Investing Marketplace

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Introduction

Impact investing is an umbrella concept encompassing several investment tools, including mission related investments (MRIs), program related investments (PRIs), and screening mechanisms for environmental, social, and governance (ESG) priorities. The practice of impact investing is rapidly gaining momentum, but the level of activity among individual and institutional investors, including philanthropists and foundations, has barely penetrated projections of market potential.

Foundations are among the most reluctant investors and represent the smallest share of current activity. Barriers to entry are both real and perceived; opinions vary on what those barriers are and how to address them: “It is as if impact investors are lined up around the proverbial water pump waiting for the flood of deals, while no one is actually priming the pump!” (Bannick & Goldman, 2012). “Though most emerging social entrepreneurs have tried or are trying to get impact investment, they need basic education on impact investing and what it means for their organization” (Pease, 2015).

The academic, nonprofit, Denver-based Impact Finance Center¹ (IFC) has established a proof point for creating impact investing “marketplaces” at a statewide scale across all sectors, asset classes, and stages of growth. This approach

Key Points

- The practice of impact investing is rapidly gaining momentum, but the level of activity among individual and institutional investors, including philanthropists and foundations, has barely penetrated projections of market potential.
- The marketplace that should connect impact investors with investees or social ventures does not function effectively.
- Developing cost-effective ways to engage new investors and break down barriers to investment is an essential part of growing the industry.
- Developing cost-effective ways to “prime the pump” for social ventures to become investor-ready — through a capacity-building process that includes outreach, education, and technical assistance — is an essential part of growing the industry.
- The Impact Finance Center partnered with foundations and other investors in Colorado to create “CO Impact Days and Initiative” to demonstrate how to address this need for a more efficient and effective marketplace.
- CO Impact Days and Initiative was designed to expand regionally and be replicated.

¹The IFC is part of the Sustainable Endowments Institute, a special project of Rockefeller Philanthropy Advisors and the SEE Conference, and represents more than 250 academic faculty focused on sustainability, ethics, and entrepreneurship. www.impactfinancecenter.org

is intended to become the most efficient and effective way to confirm the available supply of impact-investment capital, gauge demand for capital by social ventures, and unleash investment capital to benefit communities, the economy, and the environment.

Definition of Impact Investing

Impact investing is an intentional strategy seeking risk-adjusted financial returns as well as social, economic, and/or environmental outcomes. The term is often used interchangeably

with PRIs and MRIs, two specific tools used by foundations to support their charitable purposes and activities. An MRI refers to any investment activity seeking to produce a positive social, economic, or environmental impact that is aligned with the mission of a foundation in addition to providing a (typically) market-rate financial return. A PRI is an investment made by a foundation, usually project-based, to support a charitable purpose and impact goals that include the potential return of capital — and possibly greater — within an established time frame.² For the social venture seeking investment, the primary benefit of an impact investment is access to capital not typically available to the project, organization, or fund, also typically at lower rates and with potentially longer time horizons for investment returns.

Impact-Investing Market Trends

The field of impact investing has grown dramatically in recent years in both the U.S. and Europe, and expansion is expected to continue. Assets in socially screened ESG portfolios rose from \$2.71 trillion in 2007 to \$3.4 trillion in 2012, and again to \$6.57 trillion in 2014 — a 76 percent increase in the most recent period. Approximately one of every six dollars under professional management in the U.S. is classified as an impact investment (Social Investment Forum, 2007; US SIF Foundation, 2014; Porter & Kramer, 2011).

However, while PRIs have been utilized by some foundations since the late 1960s, the total number of foundations that use this tool remains relatively low. During the decade 2000-2010, only 427 foundations in the U.S. reported using PRIs. This represents less than 1 percent of the universe of approximately 66,000 U.S. foundations,

Global Impact Investing Network Trends

Since 2010, the Global Impact Investing Network (2016) has tracked and published impact-investment trends. Its most recent survey of 157 global-impact investors, including 21 foundations, documented \$15.2 billion invested in 7,551 deals during 2015. In 2014, about the same number of respondents reported \$10.2 billion in such investments, with projections for \$12.2 billion in 2015. Clearly, the actual rate of growth resoundingly surpassed expectations. The growth projection for 2016 is an increase of 16 percent in capital and 55 percent in the number of deals.

Respondents collectively reported US\$ 116.2 billion in capital committed for impact investments since inception, at an average of US\$ 735 million and median of USD 87 million. Notably, US\$ 43.8 billion (38 percent of total capital committed since inception) has been committed by just three respondents (Global Impact Investing Network, 2016, p. 5).

Survey respondents also gauge challenges facing the industry. The top two: total capital appropriate to a deal across the risk spectrum, and the number of high-quality investment opportunities with a track record.

On the role of intermediaries: "Fund managers [and intermediaries and academic centers such as the Impact Finance Center] play an important role in connecting impact investing capital with investment opportunities" (Global Impact Investing Network, 2016, p. xiv).

²Program related investment is a technical term relevant only to private foundations. Other types of public charities, including community foundations, are not subject to the same rules and thus have adopted the more general nomenclature of impact investing. For private foundations, the principal benefit of a PRI is that repayment (return of capital) qualifies to meet the current IRS 5 percent distribution requirement and can be recycled for another charitable purpose. Program related investments are flexible instruments that can be used as loans, loan guarantees, linked deposits, equity investments, and more by charitable organizations or in commercial ventures for charitable purposes (Falkenstein & Jacobs, 2010).

FIGURE 1 Impact Investing Problems and Solutions

Impact Investing	
Problems	Solutions
Leaving money, impact, and risk on table	Save institutional capital and increase impact
Investors need impact investments	Identify, develop, and inventory impact investors
Social ventures need impact investment capital	Identify, develop, and inventory social ventures
	Scale regionally and replicate across regions

which collectively have \$511 billion in assets and distribute \$31.8 billion a year in grants. During this period, there were only 3,757 foundation PRI transactions, totaling \$3.4 billion (Lilly Family School of Philanthropy, 2013).

Since 2010, the pace of impact investing by private foundations has stepped up. A 2015 study by the Commonfund Institute, conducted in partnership with the Council on Foundations, found that 19 percent of private foundations use various types of impact-investing strategies, including negative screening and direct-impact investing. This represents a significant increase from the 9 percent rate quantified in a Commonfund Institute study from four years earlier.³

Market Failures and Barriers to Entry

Foundation Leadership Mindset

Ask almost any foundation about its financial return on grants: the reply is usually "zero;

nothing; you do not get your money back." In the lexicon developed by IFC, however, the answer of "zero" is incorrect. A zero percent financial return means that a foundation gets all of its money back. So, what is the correct answer? A grant delivers a minus 100 percent financial return.

Two of IFC's core tenets are that (1) all philanthropy is an investment with a minus 100% financial return attempting high positive impact and that (2) all investments have impact — both positive and negative. Instead of using the traditional language of grants, donations, and investments, IFC encourages philanthropists and investors to more holistically manage all their resources, taking into consideration financial return, impact, risk, and liquidity. IFC believes that impact investing provides a framework for this type of portfolio management.

Fiduciary Rules and Regulations

Welcome news for foundations interested in impact investing was announced in September 2015, when the U.S. Treasury Department clarified that private foundations may invest their

³Council on Foundations-Commonfund Study of Investment of Endowments for Private and Community Foundations. Released August 23, 2016.

Welcome news for foundations interested in impact investing was announced in September 2015, when the U.S. Treasury Department clarified that private foundations may invest their endowments according to their own charitable purposes, even if doing so might reduce potential financial returns to at or below market expectations.

endowments according to their own charitable purposes, even if doing so might reduce potential financial returns to at or below market expectations (U.S. Internal Revenue Service, 2015). The guidelines for exercising prudence were expanded to include consideration of all relevant facts and circumstances, including an investment's relationship to social mission and charitable purpose. This means that managers are not required to select investments solely for highest return, lowest risk, or greatest liquidity. Although this guidance does not pertain specifically to community foundations or other types of endowments, efforts are underway to align policies and regulations.⁴

Access to Capital

Access to capital by social ventures is not widely understood, and further inquiry is necessary. Despite the widely accepted belief that small businesses drive economic activity, the entrepreneurship literature provides substantial evidence that such firms are capital constrained (Colombo & Grilli, 2010). Unfortunately, capital market imperfections often result in external investing that is too costly for small businesses.

⁴Additional resource from the U.S. Department of Labor on updated regulations: (see <http://www.pionline.com/article/20151022/ONLINE/151029940/departments-of-labor-opens-the-door-for-esg-considerations>).

If conventional firms encounter this barrier, it is logical to expect that the additional complexity of “impact,” complex structures, unconventional exits, lack of a critical mass of comparables, and gender bias might mean even greater difficulties for social ventures to access capital. In some cases, however, foundations have capital available to social ventures precisely because of these additional barriers.

Capacity to Absorb Capital

The Living Cities collaborative partnered with the Initiative for Responsible Investment to capture lessons learned from its experience with the Integration Initiative, a community development effort launched in 2010. Among those lessons, Living Cities posed a framework for community development investment using a definition that aligns with impact investing: it is a “vehicle for enhancing human capabilities, social equity, and environmental sustainability” (Wood & Hacke, 2012, p. 5). The framework places a pipeline of deals that contribute to defined community goals at its center. Surrounding individual deals is the financial ecosystem, including vision and legitimacy, enabling environment, innovation, and management and monitoring. Each component is viewed as a core function required to absorb capital effectively.

Strategy and Solution: ‘Prime the Pump’

The IFC believes that a successful impact-investing marketplace engages a minimum of five market segments: philanthropists, investors, non-profit social ventures, for-profit social ventures, and intermediaries and providers of professional services (e.g., community development financial institutions, attorneys, accountants, investment advisors, and consultants) — all of whom require unique education and mentoring before embracing impact investing for their diverse needs.

Developing cost-effective ways to “prime the pump” for social ventures to become investor-ready — through a capacity-building process that includes outreach, education, and technical assistance — is an essential part of growing the industry. The IFC believes that priming the impact investor pump for the flow of capital is

just as, if not more, important to catalyzing the market than priming the social-venture pump for the flow of deals. Preliminary analysis by the IFC of the PRI dataset from 2000-2010 shows a high statistical correlation of $R^2 = 0.73$ between asset size and completing a first transaction, which supports the idea that if a foundation completes one PRI, it will complete another one regardless of the outcome.

This theory of change is why the IFC focuses on identifying early-adopter impact investors and helping them complete their first impact-investment transaction. Accordingly, the IFC allocates 85 percent of its “priming the pump” activities (i.e., research, education, and technical assistance) toward future impact investors (philanthropists and investors) and 15 percent toward social ventures (projects, nonprofits, for-profits, and funds), intermediaries, and providers of professional services.

The IFC’s strategy is counter to the prevailing wisdom on market-resource allocation. Instead of focusing on social ventures that require investment, the IFC focuses on the generative pursuit to unleash impact-investment capital. In Colorado, for example, there are more than 50 accelerators and incubators producing social ventures, but few equivalent incubators focused on producing new impact investors. The IFC, while an academic center, essentially serves as an accelerator for philanthropists and investors who are willing to commit to becoming impact investors. It provides philanthropists and investors with capacity-building tools: awareness through presentations, education through workshops, and technical assistance, including analyzing existing transactions, hosting giving circles and impact-investing summits, and providing introductions to investment opportunities. Identifying early adopters is a critical component of this process.

A Case Study: Blending Value Through a 'Sources and Uses' Analysis

Like many foundations holding endowed assets for scholarship funds, Foundation X had a history of funding “gap” scholarships rather than making low-interest student loans. Why would a foundation give a \$5,000 scholarship grant (a guaranteed minus 100 percent return) to a student who has a \$40,000 student loan at 8 percent interest? It turns out that both the foundation and the student would be better off if Foundation X provided the student with a \$48,000 student loan at 1 percent interest.

Here’s how it works. The student would save money on interest payments and the foundation would increase its financial return 90 percent to 105 percent. By restructuring this type of transaction, a foundation could bolster the value of its endowment and save the student significant resources. A similar arrangement could benefit nonprofit organizations in situations where they have existing debt, assets that need improvements, or social-enterprise opportunities.

Example: In 2012, the IFC worked with a nonprofit and The Denver Foundation to conceptualize and facilitate a \$7.5 million, 1 percent loan and a \$2 million, zero percent loan from a donor-advised fund to a nonprofit for its building renovation. The loans would ultimately save the nonprofit \$4.5 million in interest and pave the way for a \$1.5 million federal historic tax credit (Foucher, 2014).

Example: As a result of the IFC’s work, an impact investment was made in Silvernest, a for-profit technology startup company that provides housemate matchmaking services for aging homeowners who need additional income, companionship, and help with household chores. If it were a nonprofit organization, Silvernest would likely have garnered a significant grant (a minus 100 percent financial return investment) to support outcomes in the areas of aging, economic development, affordable housing, and women-led social ventures. Securing an impact investment, while more difficult, offered the impact investor the chance to see a financial return, and the potential to scale the business more quickly to achieve greater impact. (See Figure 2.)

FIGURE 2 National Impact-Investing Marketplace: A Colorado Prototype

National Impact Investing Marketplace

SECTOR

- **Region I New England**
Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont
- **Region II Atlantic**
New York, New Jersey, Puerto Rico, and the U.S. Virgin Islands
- **Region III Mid-Atlantic**
Delaware, Maryland, Pennsylvania, Virginia, Washington, D.C., and West Virginia
- **Region IV Southeast**
Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, and Tennessee
- **Region V Great Lakes**
Illinois, Indiana, Michigan, Minnesota, Ohio, and Wisconsin
- **Region VI South Central**
Arkansas, Louisiana, New Mexico, Oklahoma, and Texas
- **Region VII Great Plains**
Iowa, Kansas, Missouri, and Nebraska
- **Region VIII Rocky Mountains**
Colorado, Montana, North Dakota, South Dakota, Utah, and Wyoming
- **Region IX Pacific**
Arizona, California, Guam, Hawaii, and Nevada
- **Region X Pacific Northwest**
Alaska, Idaho, Oregon, and Washington

CO Impact Days and Initiative

CO Impact Days and Initiative is a three-year strategy to elevate and accelerate impact investing in Colorado, catalyzing a flow of \$100 million in investment capital into social ventures in the state that deliver impact to communities, the economy, and the environment.

The IFC developed a series of workshops aimed at impact investing competency: Investor Readiness Workshop for philanthropists and investors, Nonprofit and Impact Investing Workshop, For Profits and Impact Investing Workshop, Deal Doctor Workshop, and Corporate Innovation and Impact Investing Workshop. During 2015–16, the IFC gave more than 50 outreach and educational presentations and workshops to introduce impact investing and the CO Impact Days concept, invite

participation, and provide technical-assistance opportunities. It also sponsored The Leeds Net Impact Case Competition, which featured 43 MBA programs from around the world to focus on Corporate Innovation and Impact Investing.

The IFC believes that another key strategy to increase the flow of philanthropic capital into impact investing is to lower the barriers to entry by creating safe “stepping stones” that allow a conventional philanthropist or investor to experience initial low-cost, low-risk impact investing. The IFC created Impact Commitments — 10 first steps into impact investing, such as “screening my investment portfolio for impact” or “evaluating my first transaction” or “implementing decision-based attribution or investment beliefs.” The IFC is also developing a series of experiential-learning opportunities to assist in those efforts, such as:

- providing business-case competitions that simulate a real-life experience;
- arranging experiential-learning or “shadowing” opportunities for organizations; and
- developing giving circles, donor-advised funds, and community-of-interest funds for impact investing to bring like-minded investors together around communities of interest such as gender lens, health and wellness, and place-based efforts.

CO Impact Days

Colorado is home to dozens of national impact investor leaders from foundations, investment advisory firms and practitioners, and academia that are providing hundreds of impact-investing education opportunities. Why create a statewide marketplace in Colorado when other segments of the industry have been priming the impact-investor pump for many years? Because a series of independent, one-off deals were not sufficient to create the critical mass needed to drive investments at scale.

The pace of interest and potential investment began to shift in Colorado with the launch of The Denver Transit-Oriented Development Fund (Grippe & Beyer, 2014) and when several foundations, including The Denver Foundation and the Colorado Health Foundation, stepped up to leadership roles. The game changed dramatically in 2011-12, when regional businessman and philanthropic leader Sam Gary of the Piton Foundation decided to sell his refinery and invest several hundred million dollars in Colorado over the next 20 years, creating Gary Community Investments to lead the way. A strategy to accelerate the supply of impact-investing resources in Colorado was built on Piton’s long experience with making PRIs.

With a new level of interest in impact investing, the IFC engaged dozens of foundations and philanthropists representing over \$1 billion of capital seeking Colorado impact-investment opportunities. However, questions were raised by investors about the demand side of the equation: Did Colorado have enough social-venture

opportunities to match investors’ requirements for financial return, impact, risk, and liquidity? Connecting supply and demand to reduce fragmentation in the impact-investing community was the main impetus for the IFC’s decision to create a statewide marketplace — social ventures and impact investors don’t know how to find each other.

In the fall of 2014, the IFC invited community leaders to form a steering committee that would create a discovery marketplace to test the strategy and surface answers to these questions:

1. How much impact-investment capital is seeking Colorado social-venture investments?
2. Are there social ventures seeking impact-investment opportunities that match what impact investors are seeking? How do you incentivize social ventures to participate?
3. Are there enough philanthropists who are willing to invest in impact-investing “infrastructure”? What is the cost of production, and who pays? What is the most efficient way to minimize due diligence costs?
4. How do you communicate the value of an impact-investing marketplace? Would CO Impact Days and Initiative garner the kind of qualitative feedback that might build on current momentum?

CO Impact Days, held March 2-4, 2016, thus became a key component of the overall CO Impact Initiative. The IFC launched Colorado’s first statewide marketplace for impact investing by identifying, connecting, and celebrating the state’s top social ventures and impact investors, from the Western Slope to the Front Range. Produced by the IFC in collaboration with dozens of partner organizations, CO Impact Days was designed to give philanthropists (e.g., individual donors and holders of donor-advised and other funds) and investors (e.g., foundations, family offices, angels, venture capitalists, and private-equity funds) the confidence, tools, and

Although there are many options for organizing a call for deals, the CO Impact Days process was designed to embrace all sectors and stages throughout Colorado. Because foundations and sponsors had interest in different communities of interest, communities of identity, and/or communities of place, IFC created six tracks and multiple awards intended to include every possible social venture connected to funder interests.

connections to take action in new, powerful ways (Boulton, 2016; Thorpe, 2016).

The three main elements of the CO Impact Days process included a call for deals (also known as impact scans), executive-level education curriculum, and the marketplace.⁵

Impact Scans or Calls for Deals

Sourcing high-quality social ventures is a critical component of the marketplace strategy. The CO Impact Days call for deals was intended to reduce the cost of engagement and early-stage due diligence. Although there are many options for organizing a call for deals, the CO Impact Days process was designed to embrace all sectors and stages throughout Colorado. Because

foundations and sponsors had interest in different communities of interest, communities of identity, and/or communities of place, IFC created six tracks and multiple awards intended to include every possible social venture connected to funder interests:

- health, wellness, and food;
- energy;
- environment, water, transportation, and agriculture;
- economic development and social justice;
- arts, culture, and creative enterprise; and
- education and early childhood.

Awards also included initiatives that benefited women, veterans, and the LGBT community, for example.

Curriculum

The IFC developed 2.5 days of executive-level curriculum designed specifically for philanthropists and investors, customized to address sector needs while ensuring that all participants left with the same knowledge and using the same terminology about impact investing. This approach to curriculum will, the IFC hopes, generate a higher level of cross-sector collaboration in solving social and environmental challenges. The CO Impact Days curriculum featured:

- a tax, legal, and accounting workshop, including PRIs, exits, term sheets, and maximizing endowments and investment portfolios;
- Investor-Readiness training, including best practices in governance, decision-based attribution evaluation, investment beliefs, investment policy statements and ESG evaluation;
- due diligence workshops to guide the process of evaluating an impact investment for both impact and financial return;

⁵Impact Finance Center. (2016). CO Impact Days 2016 Program. Retrieved from http://static1.squarespace.com/static/55f25657e4b01ed5bc414ea4/t/56d0949159827e095d018aa4/1456510101619/Colorado+Impact++Days_Program_Final_LOSPR.pdf

- sector-specific group discussions facilitated by foundation and investment leaders with experience managing the complexities of impact-investment partnerships; and
- keynote and workshop presentations by thought leaders in philanthropy and impact investing.

Marketplace

The centerpiece of CO Impact Days was an impact-investing marketplace where potential investors could network and explore investment opportunities with some of the state's most high-impact nonprofits and social ventures. The Social Venture Showcase highlighted for investors 60 social ventures selected from more than 280 applicants to the marketplace. Investors were encouraged to connect directly with the social ventures, and the IFC provided a way to connect anonymously with other investors who indicated an interest in the same social venture. Each booth provided a sign-up sheet for investors interested in learning more about the venture, its business plan, and the impact it hopes to achieve.

CO Impact Days Results

Gov. John Hickenlooper proclaimed March 4, 2016, the last day of the conference, as Colorado Impact Investment Day. It was attended by more than 700 people, including 200 impact investors (philanthropists, foundations, and investors); representatives from 60 of Colorado's top social ventures; and more than 470 members of the community.

"The sheer variety of perspective and people was one of the big wins," said Tony Macklin, IFC senior advisor who helped facilitate sessions and served as a coach for participants. "Mixing sectors, neighborhoods, cities — nobody seemed uncomfortable with it," he said. Awards were given by sector for the best potential investment opportunities, and Blue Star Recyclers, from Colorado Springs, received a People's Choice Award.

As of April 2016, 73 impact investors had made 309 CO Impact Commitments, and 56 social ventures had received 273 expressions of interest to

participate in a due diligence process by impact investors. Nearly two dozen active sets of due diligence are in progress.

Lessons Learned: Implications for Foundations

Whether CO Impact Days and Initiative achieves success in Colorado and is replicable in other states depends to a large degree on the role foundations can play in supporting the development of a marketplace strategy that connects investors with social ventures. The following section summarizes the data currently available to answer the questions CO Impact Days and Initiative set out to answer, and suggests ways in which foundations can leverage their influence as place-based investors to amplify traditional grantmaking activities with impact investments.

Supply of Impact-Investment Capital

Quantifying exactly how much impact-investment capital is available to invest in Colorado can be answered only in hindsight. However, early indicators suggest there is more than \$1 billion of such capital available not only from foundations, but also from individual donors and private investors. Six months after CO Impact Days 2016, and as a direct result of the awareness, education, technical assistance, and marketplace

Sector-Specific Group Discussions

Gary Community Investments, in partnership with the Michael & Susan Dell Foundation, focused on impact investing as a tool in education and early childhood. While concerns about a foundation's capacity to manage impact investments was discussed frankly, there was consensus among foundation attendees that the model adds diversification to their philanthropic strategies. This case study demonstrated that successful impact investments can be made by working with the right nonprofit and social-venture partners. It also helped to demonstrate that the right nonprofits and social ventures do exist — a question many participants brought to CO Impact Days.

innovation work of the IFC, 13 investors are pursuing 21 impact investments in various stages of development. Those furthest along have identified \$11.7 million in investment opportunities. These impact investors are a diverse array of 10 foundations, community, private, and health conversion foundations and donor-advised funds, as well as multiple individuals. Fourteen of the investments resulted from connecting potential investors with social enterprises during CO Impact Days, and the IFC is working with several foundations to apply Investor Readiness tools to their portfolio.

With the benefit of two key drivers — education on how to prepare for making an impact investment (investor readiness) and access to investment-ready social ventures (the marketplace) — foundations were able to either enter the impact-investing arena for the first time or significantly increase and diversify their impact-investing opportunities.

Investable Deals

Initially, the IFC had considered using a prize competition as a pilot to recruit social ventures. After researching several options, the IFC's steering committee decided to move directly to pilot the marketplace, skipping the competition. "There was clearly a critical mass to take this on with the leadership of the Impact Finance Center and with the help of a host of other partners," said Doug Johnson, IFC Senior Advisor and Colorado chair of TIGER 21 — The Investment Group for Enhanced Results in the 21st Century.

Identifying investable deals is one of the main hurdles faced by potential impact investors, including foundations that have regular exposure to grantees within their areas of interest. The statewide competitive process used in Colorado was challenging, but had far greater leverage to surface quality investment-ready social ventures than individual foundations could generate. The applications were vetted by 130 volunteer judges who completed more than 820 evaluations using a tool called "valid evaluation." The most challenging aspect of the evaluation process was developing an impact rubric applicable consistently across sectors and

reviews and to different types of social ventures. The IFC asked a smaller group of 28 foundations, philanthropists, and investors to review the final list of 60 prospects to ensure that the marketplace would offer a high-quality, diverse set of social ventures.

One final challenge is that the definition of "investor readiness" may differ for potential investors and for social ventures seeking capital. Better alignment and articulation of mutual time horizons during the review process will help foundations and other investors narrow the realistic prospects for making and receiving investments.

Production Costs

The IFC's approach to fast-tracking a pilot CO Impact Days was much like building a plane while flying it. The center went out on a limb, raising money to support the event and borrowing money to cover production costs — which came in at \$490,000 for CO Impact Days and \$120,000 for the more than 50 CO Impact Initiative activities that led up to the event. The total \$610,000 translated to about \$3,000 for each of the 200 investors who attended CO Impact Days.

The attendance fee for an impact investor was set at \$595 to encourage participation across all sectors. Despite the potential leveraged value of participating in the event, the IFC overestimated investor willingness to pay \$595 and created a "scholarship" plan for half of the attendees. CO Impact Days was a first-of-its-kind event, without a communications budget or team, and registration did not open until February 2016, a month before the event. As a result, it is unclear if the fee of \$595 is a price that future participants will be willing to pay. The true cost of attendance was revealed at the conference, and an additional \$40,000 in donations arrived following CO Impact Days.

Based on attendee feedback, our own market analysis, and data for consulting projects the IFC has completed, it is clear that participants received information, services, and networking opportunities that — if priced separately — totaled more than \$30,000 per investor. (See

Table 1.) This calculation should greatly improve our ability to market the event in subsequent years and tease out more of the true interest in impact investing.

The total cost of the inaugural CO Impact Days was covered by \$415,000 in gifts, grants, sponsorships, registration fees, and a short-term, \$40,000 impact investment at 4 percent to cover cash flow leading up to the event. This cost does not include thousands of hours of volunteer time provided by the steering committee or partner organizations. At one point in the planning it seemed ideal to recruit a major sponsor and offer naming rights, but the steering committee decided that this was not a desirable approach in the context of the CO Impact Days and Initiative brand. This meant that the IFC needed to rely on small gifts and focus valuable content and recruitment resources on fund-raising; the scholarship plan created a significant deficit. The steering committee has since conceptualized a three-year “Founder Circle” strategy whereby a philanthropist can make a minimum \$5,000 annual commitment for three years. Through this process, CO Impact Days has already prefunded \$300,000 toward events and programming in 2017 and 2018. Ideally, as the event matures, all expenses will be covered through a combination of donations, fees, and impact investments.

The IFC is also working to raise funds for a CO Impact Days and Initiative scholarship fund, which would allow more organizations access to IFC educational workshops and networking opportunities. Several impact investors have expressed interest in putting together a CO Impact Days angel investing fund to support more organizations and diversify risk; that idea is being explored.

Given these resource constraints, CO Impact Days and Initiative was not fully prepared to manage the due diligence process without additional philanthropic support. A collaborative effort among foundations to create a statewide impact-investing marketplace could add efficiencies and resources to the effort that could streamline the process, draw more

TABLE 1 Estimated Value per Impact Investor for CO Impact Days 2016

Description	USD
Executive education 2.5-day course	\$3,000
Custom call for deals ^a	\$25,000
Investor-readiness tools	\$2,000
Other impact investors – shared interest	\$500
Saved due diligence costs per venture	\$2,500–10,000
Total value	\$33,000

^aA custom call for deals is a term the IFC uses to describe when an impact investor creates a request for investment opportunities for a specific region or sector.

participants, and help to underwrite the entry of new impact investors.

Communicating Value

Communicating the value of a first-of-its-kind initiative to five diverse market segments is, at best, daunting. CO Impact Days and Initiative had minimal resources to spend on communications, which created limitations on introducing a concept that is inherently difficult to understand. For example, the IFC was able to connect with only one of Colorado’s 24 mental health organizations, and that organization submitted multiple applications to the marketplace competition. There is reason to believe that the other 23 organizations would also have submitted investable deals if they’d known about the competition. The IFC believes further that there is high demand for alternative financing among large institutions such as schools, health care entities, and public-sector organizations seeking to combine financing options to reduce cost, inefficiency, and risk.

With testimonials in hand and a better understanding of the need to budget sufficiently for

SECTOR

marketing resources, each successive statewide Impact Days will become easier to promote in a diversified manner to each sector.

Opportunities for Foundations

While a handful of foundations have been practicing impact investing for decades, they were the exception instead of the rule. Describing an important Keynesian concept about resistance to change, scholar Keith Ambachtsheer observes: "In any great organization it is far, far safer to be wrong with the majority than to be right alone" (Galbraith, 1989).

Testimonials

Just a quick note to congratulate you on CO Impact Days. You have started a movement here and I was absolutely blown away by the quality of social ventures that I saw. You certainly know what the impact-investing scene needs, and I hope that what you've started in Colorado can replicate quickly in other states and beyond!

— **Neeraj Agrawal, mission-investing program officer, Dell Foundation**

Events like this are critical to creating vitality in a community. Bravo, CO Impact Days.

— **Dr. Kimberly Gandy, founder, Play-It Health**

Being a Latina from Puerto Rico and discovering the connecting vessels with someone like you north of the border just makes me so excited about what it all means when we all come together. It's just one big family gone a little astray and in need of family reunions! Si, se puede!

— **Irene Vilar, Americas for Conservation and the Arts, Vilar Creative Agency**

The Impact Finance Center's work extends far beyond Colorado. It's part of the infrastructure of the impact space, and few states have anything like it.

— **Holmes Hummel, founder, Clean Energy Works**

Those foundations who attended the Mission Investors Exchange 2016 National Conference can attest that impact investing is on the rise; there was a sense that the field is on the precipice of change. During a plenary session, the Kresge Foundation's Rip Rapson, Julia Stasch of the John D. and Catherine T. MacArthur Foundation, the Case Foundation's Jean Case, and Darren Walker of the Ford Foundation each discussed their institution's impact-investing commitments (Mission Investors Exchange, 2016). Walker also argued that maximizing financial return without regard to impact as a foundation policy is no longer defensible:

We must interrogate our own behaviors, our own practices and internal policies. I have a deep and unwavering belief that philanthropy has the potential to play a transformational role in our society, and I also have a belief that it doesn't do it. It doesn't play the role fully. We do not bring all of the arrows in the quiver and, Julia [Stasch], to your point, we are not "all in" yet. My hope is that over the next five years that we in philanthropy — particularly the large institutions, the legacy institutions — can begin to experience the transformation that is essential if we are to remain relevant, impactful, and bring true meaning to our mission.

Whether or not we are truly at an inflection point, it is clear that foundations making impact investments no longer feel alone or isolated. A crowd is forming, and the conversation has shifted from "Are you doing impact investing?" to "What are you doing in the area of impact investing?" For those foundations that are new to impact investing, the overwhelming questions are where to begin and whom to trust.

There is also a growing set of resources available to help foundations understand the landscape of available impact-investing options and how to begin. Building on the previous work of Living Cities, for example, the Kresge and MacArthur foundations are sponsoring a project to aid communities in capital absorption. Hacke, Wood, and Urquilla (2016) suggest 10 roles foundations can assume to facilitate community capital absorption: convener, capacity builder, match-maker, data provider, investor, deal-maker, communicator, policy advocate, mission steward, and

ecosystems engineer. Some of these roles — convenor, capacity builder, data provider, communicator — are a good fit for foundations seeking low-risk ways to explore becoming impact investors. Moving into the roles of matchmaker, investor, or deal-maker requires a degree of education and experience. And for the seasoned impact investor, using investments as leverage to advocate for policy and build the financial ecosystem are needed to fuel the expanded use of impact investing. *Community Foundation Field Guide to Impact Investing* (Mission Investors Exchange, 2013) can offer guidance to staff and trustees, and has sections that might be useful to small and midsize private foundations as well. The guide's suggestions on engaging donors through donor-advised and community-of-interest funds, tools the IFC is currently developing with foundations, might be of particular interest. (See also Cheney, Killins & Merchant, 2012.)

From a tactical, practical level, there is no “right” first step for a foundation preparing to engage in impact investing. That step is often dictated by the interests of the trustees and/or staff, or the needs of a grantee. In some cases, the focus is on aligning an endowment with its mission; in others, on direct investing. Some foundations are exploring impact investing with existing grantees, seeking opportunities to restructure long-term support more effectively while deploying foundation resources more efficiently. For foundations and investors unsure of where to begin, the IFC offers some practical first steps:

- *Awareness:* Host an impact investing presentation for your community; create an impact-investing book group within your organization or across organizations; establish a learning circle (e.g., the Colorado Association of Funders Impact Investing Peer Group).
- *Education:* Attend an impact-investing workshop or conference; join an association or affinity group (e.g., Mission Investors Exchange, Confluence Philanthropy, Investors' Circle).

From a tactical, practical level, there is no “right” first step for a foundation preparing to engage in impact investing. That step is often dictated by the interests of the trustees and/or staff, or the needs of a grantee. In some cases, the focus is on aligning an endowment with its mission; in others, on direct investing. Some foundations are exploring impact investing with existing grantees, seeking opportunities to restructure long-term support more effectively while deploying foundation resources more efficiently.

- *Action:* Develop your investment beliefs; philanthropically support impact-investing infrastructure; evaluate your philanthropic portfolio for opportunities to restructure grants as more-efficient impact investments; screen your foundation endowment for environmental, social, and governance factors; evaluate your endowment using a decision-based attribution for feeds and decisions, based on strategic allocation, tactical tilts, and manager selection; evaluate a first direct investment with another organization; create a community-of-interest fund to make direct investments, or invest in a Main Street “character” loan pool (one is offered by Colorado Lending Source); invest in a first pilot direct investment.

FIGURE 3 National Impact-Investing Marketplace: A Regional Scale

National Impact Investing Marketplace

A Vision to Scale Regional Marketplaces

The CO Impact Initiative is a three-year strategy to elevate and accelerate impact in just one state, catalyzing a flow of \$100 million in investment capital into social ventures that deliver impact to Colorado's communities, economy, and natural environment. What if this could happen in all 50 states? A new target might be to unleash \$5 billion within the five to 10 years it could reasonably take to replicate Colorado's initiative across the country.

Ambitious? Yes. Important? Absolutely. Realistic? The IFC believes that Colorado's marketplace — the model, tools, and lessons learned — are expandable to a multistate, regional scale and replicable across the United States. Colorado is a testing ground, the nation's first attempt to

create a state-scale impact-investing marketplace for direct deals across all sectors and stages of growth. The IFC plans to assemble a national team to determine the best structure and business model (e.g., a cooperative, a public benefit corporation, a public charity, investment banking) for expansion and replication.

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Designing Technical-Assistance Programs: Considerations for Funders and Lessons Learned

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Keywords: Technical-assistance program design and implementation, evaluation, technical-assistance best practices, foundation technical assistance, technical-assistance development, technical-assistance delivery mechanisms

Key Points

- As foundations continue to provide grantees with technical assistance in addition to financial support, it is important to understand what works well, for whom, and in what circumstances. This reflective practice article aims to help funders who have identified a problem amenable to technical assistance to develop a strong program by providing support to a group of organizations addressing similar problems or by providing customized individual support.
- Drawing on insights from evaluations of two technical-assistance programs, this article recommends five key issues for funders to consider when offering such a program: whose priorities will shape the agenda, how group composition might affect technical assistance, what qualities are most important for providers, what types of technical-assistance formats providers should offer, and how funders will know whether technical assistance is working.
- The article concludes by highlighting three lessons: (1) incorporating flexibility into programs, enabling technical assistance to be more responsive to participants' needs and resources; (2) setting and measuring technical-assistance goals, which can help funders assess the fit of participants for programs and support ongoing learning; and (3) monitoring and collecting feedback, which helps promote quality and can offer insights as to how programs might be changed to best meet participants' needs.

Introduction

Technical assistance (TA) is nonfinancial assistance meant to impart information, skills, and expertise from one person or entity to others. Typically, TA is delivered to individuals, organizations, or systems to assess gaps, barriers, and/or needs and identify solutions; develop a strategic plan for long-term change; or create innovative approaches to emerging, complex issues (Blase, 2009; Keener, 2007; National Technical Assistance Center, 2000; Soler, Coccozza, & Henry, 2013; Wesley & Buysse, 1996).

Although these objectives apply generally to TA programs, specific characteristics vary considerably. Technical-assistance topics and content can address a wide range of issues, which can be driven by a funder's priorities, the participants' needs, or both. A funder may opt to provide individualized TA that addresses a specific problem at a single organization, or to provide TA to a group of grantees or stakeholders engaged in similar work. Group TA may also include structured opportunities for peer-to-peer sharing to connect entities engaged in similar efforts, so that each can learn from a set of experts and one another's experiences (Soler, et al., 2013). Conference calls, written reports and resources, on-site meetings, and webinars are common mechanisms for providing TA (Fixsen, Blase, Horner, & Sugai, 2009; Le, Anthony, Bronheim, Holland, & Perry, 2014).

Drawing on examples from evaluations of two TA programs funded by the Robert Wood Johnson Foundation (RWJF), this article

discusses key design considerations for funders planning a TA program. Our aim is to help funders who have identified a problem amenable to TA to develop a strong TA program, whether by providing support to a group of organizations addressing similar problems or by providing customized and individualized support. First, we provide an overview of these two TA programs, their context, and our evaluations of these programs. Then, we discuss some decisions funders face when they develop and implement TA programs. Finally, we highlight lessons about flexibility, setting and measuring goals, and ensuring TA quality.

Overview of Two TA Programs

The two TA programs described in this article arose from the RWJF's desire to support implementation of the Patient Protection and Affordable Care Act (ACA), passed in 2010. The foundation's mission is to improve the health and health care of all Americans. The foundation's leaders recognized that if the law was implemented well, it had enormous potential to help achieve that mission by increasing access to health care coverage for all Americans. In response, in May 2011 the foundation announced an ambitious, multifaceted plan to provide states and other groups with resources to support ACA implementation.¹

States were a logical focus for the foundation's support, for several reasons:

- States would need specialized expertise because of the complexity and novelty of ACA implementation.
- Internal expertise was unlikely to be available.

- External expertise was subject to budget constraints and lengthy procurement processes — a particular concern given the rapid ACA implementation timeline.
- Some states might be reluctant to contract directly for assistance because the ACA was highly politicized and they might be concerned about the perception of such contracts.
- States were well positioned to pursue reforms that could improve health care quality and value, given their role as purchasers of health care for large, varied populations, including state employees and retirees, Medicaid and Children's Health Insurance Program enrollees, and enrollees in new state health insurance marketplaces, if applicable.

Given these circumstances, the foundation believed it could most effectively support states through TA. In 2011, it launched the State Network TA program to provide a diverse set of states easy access to TA expertise on a wide variety of subjects with the goal of improving ACA implementation and, in turn, increasing coverage. The foundation had a long history of providing states and other organizations with TA resources to help them solve problems or expand their skills, and RWJF leaders were confident that the ACA implementation problems states faced were amenable to TA support. Moreover, RWJF staff saw value in providing both individualized support, to help a single state tackle a particular challenge identified by the state, and group TA activities, to capitalize on what states could learn from experts and one another.

In 2013, the RWJF launched the State Health and Value Strategies (SHVS) program to help selected states improve health care quality and value, such as through provider-payment reforms. Like the State Network program, SHVS focused primarily on individualized TA to help states tackle challenging projects of their choice, but also offered group TA, including large annual convenings open to all states and smaller opportunities for a subset of states.

¹Recognizing that one program alone could not achieve this ambitious goal, RWJF supported several other initiatives, including financial support for Enroll America to encourage enrollment in new coverage opportunities, support of consumer engagement in the policy-development process through its Consumer Voices for Coverage program, and funding for the National Academy for State Health Policy to initiate State Reform, an online forum to disseminate information among state health officials (RWJF, 2011).

Once funders have decided that the problem they are trying to tackle is amenable to TA and have clarified their goals for the TA initiative, they must address a number of basic design questions, some of which are not addressed in existing literature. To date, most TA literature describes specific approaches to delivering TA, the needs and preferences of TA participants, and the experience of individuals providing TA.

In April 2015, the RWJF contracted with Mathematica Policy Research to retrospectively evaluate the State Network and SHVS TA programs. For our evaluations, we reviewed background documents to understand the purpose, structure, and organization of each program. We also interviewed 90 people, including 48 associated with State Network and 42 associated with SHVS, to obtain comprehensive insights into both programs from startup through August 2015. Respondents fit into five categories: RWJF staff, TA program administrators, TA providers, state officials who participated in TA activities—including 28 in State Network and 18 in SHVS, and other partners, such as federal agency staff or staff from national advocacy organizations.

Considerations for Funders Designing and Implementing TA Programs

Once funders have decided that the problem they are trying to tackle is amenable to TA and have clarified their goals for the TA initiative, they

must address a number of basic design questions, some of which are not addressed in existing literature. To date, most TA literature describes specific approaches to delivering TA, the needs and preferences of TA participants, and the experience of individuals providing TA (Escoffery, et al., 2015; Chaple, Sacks, Randell, & Kang, 2016; Boas, Bishop, Ryan, Shih, & Casalino, 2014; Fischer, Ellingson, McCormick, & Sinkowitz-Cochran, 2014). Few articles evaluate TA quality or effectiveness, or compare the effectiveness of different TA models (Katz & Wandersman, 2016; Le, et al., 2014). Le and colleagues (2014) noted that although TA programs should be conceptualized as a continuum of activities that include design, implementation, and evaluation, evaluation of TA is perceived as “difficult” and is often omitted. Few articles offer practical lessons learned to inform funders’ development, implementation, and evaluation of TA programs. From our evaluations, we gained insight into some factors funders should consider as they strive to deliver effective TA programs, including:

1. Whose priorities will shape the TA agenda?
2. How might group composition affect TA?
3. What are the most important qualities for TA providers?
4. What types of TA formats should providers offer?
5. How will funders know whether TA is working?

In this section, we review these questions, using examples from our evaluations of the two RWJF TA programs.

Whose Priorities Will Shape the TA Agenda?

Funders identifying TA topics may use an assessment of emerging needs, as well as the foundation’s objectives, to shape the TA agenda. This strategy lets the funder decide which TA topics and methods of delivery are most important and ensures that TA aligns with the foundation’s goals and investment priorities. Instead of a funder-driven TA approach, State Network and

SHVS primarily used a participant-driven structure for individualized TA by encouraging staff from participating states to develop TA topics that fit within the broader goals of the TA programs. Examples of participant-driven, individualized TA include a SHVS-supported project to analyze data to inform state staff about health care overuse or misuse, and a State Network-supported project to develop state regulations to harmonize state and federal health insurance coverage laws. For TA delivered to groups of states, such as an in-person meeting with facilitated discussions, the programs looked to program administrators to identify anticipated challenges and prepared TA content to address those challenges.

State Network and SHVS built on the participant-driven TA to develop content for broad dissemination by adapting individual TA projects for wider audiences. For example, State Network offered states several targeted webinars, such as helping state marketplace staff prepare, disseminate, and communicate with consumers about marketplace tax statements and helping state officials with planning for future state health reforms. Participants in both programs found participant-driven, individualized TA more valuable than funder-driven, group TA. This is not surprising, given that the participant-driven TA was highly customized and addressed states' most pressing challenges and priorities.

Funders may want to consider varying the priorities that shape the TA agenda over time, based on the needs of the participants and the experience of the TA providers and TA program administrators. For example, although State Network maintained a focus on participant-driven TA throughout the program, in later years program administrators and TA providers increased their efforts to proactively identify and prepare for challenges that states were expected to encounter.

Another important consideration for shaping the TA agenda is identifying other available TA resources. The foundation and program administrators wanted to avoid duplicating the TA offered by the federal government on ACA

Funders may want to consider varying the priorities that shape the TA agenda over time, based on the needs of the participants and the experience of the TA providers and TA program administrators. For example, although State Network maintained a focus on participant-driven TA throughout the program, in later years program administrators and TA providers increased their efforts to proactively identify and prepare for challenges that states were expected to encounter.

Considerations for Selecting TA Priorities

- Focusing on topics identified by the TA participants can lead to customized products that address participants' most pressing challenges.
- Programs can build on participant-driven, individualized TA to develop content for a wider audience.
- The balance between participant- and funder-driven TA may change as participants' needs evolve and TA providers gain experience.
- Staying aware of other initiatives with similar objectives can help TA providers add value and avoid duplication.

implementation and value-based purchasing initiatives. Program administrators responded in a couple of ways. For example, most of the federal resources available focused on information-technology support, and so State Network decided not to offer TA in this area. The SHVS program administrators considered no topics off limits, but excluded states participating in a federal value-based purchasing program to try to direct SHVS resources to states that did not have access to those federal resources.

How Might Group Composition Affect TA?

Because group TA often includes peer-to-peer sharing, programs should develop a vision for their group dynamics and composition early on. The TA group's composition will depend on the characteristics of targeted participants and the approach used to identify and select participants.

Funders might first consider the participant characteristics that are most relevant to the objectives of the TA initiative. For example, achieving the TA objectives may be more likely if the participants are homogenous or diverse along certain dimensions (such as organization

size, geography, political ideology, or available outside resources). If the funder's goal is to inspire widespread adoption of a program or policy, focusing on participants that have been early, successful adopters of innovations might provide exemplars for others to follow. Both State Network and SHVS specified some common characteristics required for participating states: a strong interest in the program and its objectives, a self-reported ability to obtain buy-in from critical stakeholders within their state, and a demonstrated need for such support. SHVS also sought participants that lacked other resources to support their goals. Because the SHVS TA projects supported states addressing a particular health care delivery problem, the administrators mostly selected participants who were starting to think about the issue, and included a few participants who had already grappled with the problem to share their experiences and stimulate discussion.

In addition to the preferred TA group characteristics, the funder's existing network and experience in the field can influence the selection of program participants. For example, funders may opt for a first-come/first-served approach, in which interested organizations automatically enter the program if they meet certain criteria. Alternatively, the funder and/or program administrator could use a competitive application process to recruit a diverse set of participants. State Network administrators opted for a less formal application approach by initially conducting outreach to all 50 states and following up on expressions of interest with telephone interviews to determine how the states fit the program criteria.

A third option is a closed-network approach, in which the funder invites selected organizations to participate. Selection by invitation may be most appropriate for funders with strong networks who know potential participants or for those seeking a relatively homogeneous group. Although this approach is efficient and relatively easy to administer, it may exclude less familiar — but equally well-suited — program participants. For example, SHVS program administrators transitioned from network-based recruitment to

Considerations for Selecting Group TA Participants

- Funders should consider whether homogeneity or diversity along certain dimensions, such as organization size, geography, political climate, access to outside resources, or progress toward a particular goal, will enhance the TA experience of a group and its members.
- Expediency, fairness, and the availability of recruitment resources may affect a funder's decision to select program participants on a first-come/first-served basis, by competitive application, or by invitation.
- Organizational leaders, middle managers, and frontline staff could all be appropriate audiences for TA, depending on whether the TA is intended to help organizations formulate high-level strategy or perform specific activities.

a broader outreach strategy when they realized that many states outside the RWJF's networks met the SHVS inclusion criteria, such as having limited access to other TA resources.

Finally, funders need to consider the appropriate audience for the TA, such as whether to invite organizational leaders, middle managers, or front-line staff to participate in the TA program. Again, TA objectives should guide this choice. Projects tackling big-picture strategy or requiring high-level buy-in will be more successful engaging organizational leaders, even though these individuals often have many demands on their time. Smaller projects and those based on the sharing of best practices may benefit from engaging front-line workers — who may have more time to invest but less decision-making authority. Both State Network and SHVS programs hoped to initiate programmatic reforms, so they targeted senior staff, such as the head of a state agency or department, rather than junior or front-line staff.

What Are the Most Important Qualities for TA Providers?

Funders must identify organizations or individuals that can effectively deliver the right TA content to program participants. Depending on the program's content and structure, funders may seek TA providers with strong consulting experience, an academic or research focus, or experience working in the field of interest. The type of TA being delivered will also affect the qualities funders should look for in TA providers — for example, programs that deliver TA to groups may need to prioritize facilitation and listening skills. The RWJF prioritized TA providers who had content-area expertise, proven facilitation skills, and experience working directly in state or federal government.

The process that funders and program administrators use to select TA providers may depend on their own content experience and existing networks. Those who have worked within the content area may be able to select TA providers informally, such as through networking with foundation or program administrator contacts.

Finally, funders need to consider the appropriate audience for the TA, such as whether to invite organizational leaders, middle managers, or front-line staff to participate in the TA program. Again, TA objectives should guide this choice. Projects tackling big-picture strategy or requiring high-level buy-in will be more successful engaging organizational leaders, even though these individuals often have many demands on their time. Smaller projects and those based on the sharing of best practices may benefit from engaging front-line workers — who may have more time to invest but less decision-making authority.

Funders who are new to the subject matter or looking for a more formal structure may issue a request for proposals and identify criteria to assess TA providers' competencies and capacity to meet participants' needs. Because the RWJF had strong connections in the field, both State Network and SHVS relied on experienced TA providers from previous foundation initiatives.

After funders and program administrators have identified TA providers, they can use various

approaches to match the TA providers with participants. Programs seeking to address TA requests across a range of content areas and TA modes may benefit from State Network's approach, which allowed participants to seek ad-hoc assistance on issues as they arose. Early on, State Network administrators identified a core group of seven organizations that demonstrated expertise in various subject areas, and participants could request TA in any of these subject areas. Administrators hired additional TA providers when the core set could not address a specific state's needs. In contrast, SHVS program administrators selected TA providers based on individual participants' specific projects and goals. Though SHVS used a core set of TA providers to meet states' TA requests, states could opt to request a particular TA provider for their projects. If the program administrators had not worked with that TA provider previously, they conducted a vetting process to ensure the provider had the requisite expertise. If the state did not request a TA provider, administrators followed a process similar to State Network, drawing on their core TA providers and adding outside experts as needed.

Considerations for Selecting TA Providers

- Strong consulting experience, an academic or research focus, experience working in the field of interest, and group facilitation skills may be required or preferred qualifications in TA providers.
- Funders may select TA providers from their professional networks or by a competitive process, depending on internal requirements and familiarity with experts in the relevant fields.
- Matching TA providers to participants' needs depends on the size, specificity, and variety of the TA requests. For example, funders and program administrators may select a TA provider from a core set or encourage participants to suggest a provider familiar with their local context.

What Types of TA Formats Should Providers Offer?

Technical assistance can be delivered effectively in many forms, including written products such as issue briefs, reports, and toolkits, as well as phone calls, emails, webinars, in-person meetings, and peer-to-peer learning meetings. In State Network and SHVS, TA providers used all these modes to match the TA approach to the problem at hand based on the nature of the participant's request as well as the project's goals and audience. For example, in some SHVS projects, TA providers conducted project-specific webinars with the stakeholder community, such as insurers and providers, to try to gain collective buy-in on a particular initiative. State Network held annual, cross-site, in-person meetings to connect and engage with participants from other states.

Some TA modes lend themselves to particular projects. For example, in-person meetings and customized written products may be the best way to meet very specific needs, whereas issue briefs, webinars, and peer-to-peer learning opportunities may have wider applicability. Even highly customized TA projects can be leveraged or repurposed for a broader audience. For example, TA providers can develop individual TA products with broad appeal (for example, by using examples from a particular organization that resonate globally), or they can adapt individual TA products to make them generalizable (for example, turning a toolkit developed for a specific organization into a generic toolkit). Technical-assistance providers in State Network and SHVS used both of these approaches.

Participants in these programs did not express strong preferences about the TA modes used for individual TA, but they did have opinions about the best types of peer-to-peer learning opportunities. For individual TA projects, participants in both State Network and SHVS most valued TA providers' flexibility and use of multiple TA modes to address their needs and preferences. For peer-to-peer learning, respondents from both programs felt these opportunities were most valuable when they focused on targeted topics, involved a limited set of attendees invited for their relevant experience with the subject,

and allowed participants to engage in discussion rather than simply receive information. For example, participants preferred the SHVS small-group meetings on behavioral health integration issues and long-term services and supports to the program's broader 50-state convening.

How Will Funders Know Whether TA Is Working?

Evaluation is a critical but seldom used tool for helping TA participants, TA providers, and funders understand the quality and utility of TA. Depending on the foundation's goals and resources and where the TA program is in its life cycle, funders can consider using different types of evaluation, either independently or in combination:

- *Formative evaluations* are used when a program is being developed and launched, but can also continue throughout the life of the program as a method of quality improvement. They provide feedback about early implementation experiences and identify strategies that might improve program implementation.
- *Process evaluations* review how a program was implemented; whether it was adapted and, if so, why; and whether expected outcomes were reached and why or why not. They are useful for identifying and/or troubleshooting operational or process problems, especially (but not exclusively) before replicating the program.
- *Summative evaluations* are typically completed retrospectively to assess program effectiveness. Funders often use them to decide whether to continue to fund or end a program.
- *Outcome or impact evaluations* assess short- or long-term changes that result from TA, to help measure program effects (intended or not). Impact evaluations examine whether changes are attributable to the TA program.

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Considerations for Selecting TA Formats

- Providers can deliver TA effectively in many formats, including written products such as issue briefs, reports, and toolkits, as well as phone calls, emails, webinars, in-person meetings, and peer-to-peer learning meetings.
- Providers should consider project type, topic, and participants' preferences when determining which TA formats to offer.
- TA participants appreciate flexible approaches to individual TA but may prefer targeted, small-group settings for peer-to-peer learning.

The RWJF commonly funds TA to build capacity and commissioned the evaluations of State Network and SHVS to identify the most and least valuable aspects of these TA programs and the preferred TA modes. To the extent possible, the RWJF also wanted to assess outcomes, to provide insights as to what the foundations' investment did (or did not) accomplish. As a result, we developed an interview protocol to assess these items and, where possible, to quantify outcomes from the programs and address other research questions of interest.

Funders should consider both the goals of evaluation efforts and the resources required, from funders and participants, when deciding on the types of evaluation activities to pursue and the

Considerations for Evaluating TA Programs

- Consider both funder and participant resources when deciding which types of evaluation and data-collection activities are appropriate for a TA program.
- Funders can use both formal and informal evaluation mechanisms to gather data to improve a TA program and inform future TA program development.

types of data to collect. In State Network and SHVS, TA program administrators tried to minimize the paperwork demands on potential participants for two reasons: to facilitate initiating TA quickly and because underresourced groups might perceive such requirements as a barrier. Investing in an up-front data-collection process, such as an application, enables funders to collect consistent information from all potential participants and may help them later identify patterns in characteristics of successful (or less successful) TA participants. Because State Network and SHVS decided not to require a substantial application, they had uneven baseline program data, which limited the scope of what could be learned from a retrospective assessment. For example, State Network program administrators did not require the participants to set goals, noting uncertainty on how ACA policy would play out politically in the participating states. However, even if the path is uncertain, it is possible to establish measurable and achievable TA goals. For example, among the 19 SHVS projects we examined, most participants in SHVS set modest goals focused on learning and capacity building, rather than on passage or implementation of a particular policy.

Building feedback mechanisms into a TA program is also useful for evaluative learning. For both State Network and SHVS, TA program administrators closely monitored the TA projects through monthly, individual check-in calls with participants and TA providers, and more informally by email. These communications helped identify problems with quality or other

aspects of TA, and if needed, enabled program administrators, TA providers, and participants to take steps to resolve them. Both TA providers and participants we interviewed noted that they appreciated this feedback style and found it worked efficiently. For example, SHVS administrators requested feedback from TA providers and participants about their experiences in the first phase of the project and used that experience to inform the second phase. Changes included giving precedence to states that typically have been less engaged with RWJF projects and prioritizing projects that were likely to yield more broadly applicable lessons.

Lessons Learned

Below we describe broader lessons from our evaluations of State Network and SHVS that funders might consider when designing and implementing TA programs.

Incorporate Flexibility Into TA Programs

Funders and TA providers may outline plans for TA based on early information and preferences, but they should be prepared to reevaluate and adapt these plans as needs change. We found that being flexible and responding to participants' evolving needs can enhance the experience for participants in both individual and group TA programs. It can also give participants a greater voice in determining their goals and identifying the resources they need to work toward those goals at their own pace, in a manner appropriate for their environment.

Our evaluations found that participant-driven TA programs designed to meet participants' needs, capacities, time frames, and environmental constraints can be highly effective and fulfilling for participants. Funders can consider offering flexibility by letting participants' priorities at least partially shape the TA topic agenda and allowing TA delivery modes to vary based on the subject matter and participants' preferences. This type of flexibility is an asset for program participants, as is the ability to adapt the TA extemporaneously based on changes in participants' circumstances.

Set Measurable Goals and Assess Progress Accordingly

Whether or not funders plan to evaluate TA programs, collecting some initial basic data from participants on their TA goals, motivations, capacity to engage in TA, and plans to measure or assess success can help funders assess participants' fit for TA programs and support learning. Such "before" data are easy to collect through program applications or screening interviews and may motivate participants to seriously weigh their own investment: do they have the time, interest, and support from colleagues and decision-makers at their organizations to engage in TA? Later, the funder can compare before and after data to assess program success and detect patterns about the types of participants who benefited from the TA.

Collect Feedback and Monitor TA to Ensure Quality

To the extent possible, high-quality TA is evidence-based; it also should be accessible, relevant, and timely from the participants' perspective. Funders and TA program administrators can use a variety of methods to monitor or improve TA quality:

- Conduct structured observations of TA webinars, conference calls, or in-person sessions, which can offer insight on TA providers' abilities to engage and facilitate the group.
- Provide rating score sheets or online surveys for observers and participants to complete.
- Maintain attendance records for TA sessions aimed at larger groups.

Integrating ongoing quality improvement into TA programs can provide valuable insights about what is working, and can offer ideas for changes to best meet participants' needs.

Final Thoughts

Funders will likely continue to use TA to expand organizations' capacity, identify solutions to problems, and develop strategies for long-term change. As the demand for TA grows, so does the

Building feedback mechanisms into a TA program is also useful for evaluative learning. For both State Network and SHVS, TA program administrators closely monitored the TA projects through monthly, individual check-in calls with participants and TA providers, and more informally by email. These communications helped identify problems with quality or other aspects of TA, and if needed, enabled program administrators, TA providers, and participants to take steps to resolve them.

importance of understanding what works well, for whom, and in what circumstances. In this article, we documented some considerations funders can keep in mind to develop strong TA programs, as well as some lessons based on our evaluations of two state-based TA programs. As the TA field grows, thoughtful program development, implementation, and evaluation will be essential to better understand how to deliver successful TA that is a worthwhile investment for funders. The recommendations offered in this article aim to promote conversation among funders about effective ways to invest their resources in TA programming.

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book review

American Generosity: Who Gives and Why

By Patricia Snell Herzog & Heather E. Price

There was considerable buzz in the field of philanthropic research in 2009, when the Science of Generosity (SciGen) Initiative was launched at the University of Notre Dame with a \$5 million grant from the John Templeton Foundation to “mobilize top-quality research across various disciplines on the origins, expressions and effects of generosity.” Now, seven years later, *American Generosity: Who Gives and Why*, by Patricia Herzog & Heather Price, has been published as the “flagship volume of the Science of Generosity Initiative,” according to SciGen Director Christian Smith, and the “most comprehensive and in-depth book about American generosity written to date.”

Theoretically, the authors begin with a critical clarification that they situate their research on generosity between the two rigid theoretical poles of rational choice and pure altruism, of pure self-interest or pure other-oriented giving. Instead, they are exploring the messy and confusing and complex reality of generous behavior that lives between these two pure states — like the person who volunteers at a soup kitchen out of concern for the rising homeless population and then ends up getting a job because they make a contact while volunteering. This commitment to exploring the complexities of generous behavior and how the manifest in real lives across America is evident throughout the book and in particular, the stories of 12 individual givers shared over the

course of the book help ground this evidence rich analysis in lived experiences.

Ultimately, *American Generosity* explores two core behaviors — whether people give and how much they give — and then tries to understand how and why these two core behaviors vary across a wide range of factors. Throughout their research, Herzog & Price look at nine different forms of generosity (p. 6) in an attempt to provide a comprehensive, or at least more inclusive, understanding this impulse to do good in all its forms. They focus on the “big three” as the most prominent forms of generosity:

- Giving money (donating to charitable causes),
- Giving time (volunteering for charitable causes), and
- Giving action (taking political action for charitable causes).

Herzog, P. and Price, H.
(2016). *American Generosity: Who Gives and Why*. New York: Oxford University Press.
ISBN: 0190456493

Additionally, they also include some investigation of six other forms: giving blood, giving organs, giving property, lending possessions, giving sustainability (efforts to care for the environment like recycling), and giving attention. I found this inclusion of a wide-ranging set of forms that generosity can take to be both a central strength and weakness of the work. On one hand, this framing brings in a range of experiences and provides the more comprehensive take on “doing good for others” that the SciGen Initiative aims for,

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but at the same time, as a result, it doesn't go as deep into the variations and details of different types of generous behaviors as one might wish. Perhaps future volumes will delve into more depth to build on this initial work.

One of the things that makes *American Generosity* stand out as a new cornerstone book in the field of generosity research is the quality of the data upon which its analysis is built. The core of this work is the analysis of SciGen's nationally representative, cross-sectional survey — one of the largest and most rigorous surveys on the topic of generosity ever conducted. This online survey was conducted in 2010 with a final sample size of 1,997 American adults (aged 23 years and older) with a 65 percent response rate. By geocoding respondent addresses, the research team were also able to explore generosity in relationship to place, pulling in tract-level data from the U.S. Census. To complement the survey findings, the research team also developed a stratified-quota sample of 40 people (plus 22 spouses or partners for a total of 62 interviewees) from among the almost 2,000 survey respondents for in-person interviews along with ethnographic observations and extensive photographing during each interview visit. However, despite the rigor of this data collection, an important caveat to all of the findings Herzog & Price present is that they are relying on cross-sectional rather than longitudinal survey data. While their interviewees share their memories of how things have changed, the lack of independent time series data means that questions about whether these findings are constant or shifting remains an open question for future researchers to test.

After explaining their data and methodology, and introducing the reader to the twelve interviewees who help illustrate their findings, you dive into the five core chapters of *American Generosity*. First is a review of the "picture of American generosity" — the high level data summary of American participation in the nine forms of generosity Herzog & Price outline in their

introduction. Looking back at literature from de Tocqueville onwards, they find somewhat lower levels of volunteering today and argue that if you look at any one form of generosity in isolation you get a "fairly dim picture" of American generosity overall. Moving to the next chapter, they present the "landscape of American generosity" and a much brighter picture of American generosity emerges, with over 90 percent of American's reporting at least one recent generous act. They also explore how overall patterns of generosity vary by both traditional demographics and fascinating regional differences that draws on studies of U.S. regional cultures. Both chapters one and two will appeal to nonprofit, academic, and public leaders looking for an understanding of giving, volunteering, and other generous activities among Americans that goes a step deeper than "x percent of people give."

Chapter three provides a framework of donor types that echoes many fundraising guides about the different types of givers. But rather than building just from personal observation, Herzog & Price derive from survey data four "giver types" — Planned, Habitual, Selective, and Impulsive — and the frequency of each type of giver. While fundraisers might hope to engage planned and habitual givers (those who give in a structured or routine way) they unfortunately only represent 16 percent and 6 percent of all givers, respectively. Indeed, spontaneous givers represent the majority of those who give (impulsive givers at 42 percent and selective givers at 17 percent). The final 19 percent of givers were labeled as Atypical and represented either those who did not answer sufficient questions, whose survey answers were inconsistent (said they didn't give and later in the survey said they did) or whose patterns didn't fit with one of the overarching patterns. One can imagine fundraisers attempting to classify their major donors between these categories to better understand the make up of their donor base or of future researchers focusing in on similarities and differences of donors of one

type to help us all better understand the nuances of generous behavior.

Chapters four and five pivot from explaining the who, what, when, where, and how people are generous to exploring the most challenging question of why people are generous. Of interest both to researchers and fundraisers, this pair of chapters presents refined frameworks for thinking about generosity that have the potential to shape future conversations about motivations for giving, volunteering and more. Using a social psychological approach to analyzing the results of over 100 questions asked of survey respondents, Herzog and Price identified seven core factors that influence people's tendency towards generosity:

1. **Social Solidarity:** "We're all in this together."
2. **Life Purpose:** "I am here for a reason."
3. **Collective Conscious:** "We are here to help each other."
4. **Social Trust:** "People are trustworthy and not out to get me."
5. **Prosperity Outlook:** "The world is abundant, and there is plenty to go around."
6. **Acquisition Seeking:** "Life is for the taking."
7. **Social Responsibility:** "We are all our brother's (or sister's) keeper."

Unfortunately, the battery of questions and complex and often confidential nature of people's self-identification will make bringing these insights on motivation hard to bear in practical application. But as a window into understanding the complexity of what drives us to give and a structure to think about how we can spur greater giving by speaking to people's core motivations, these insights present powerful possibilities.

In their final core chapter, Herzog & Price apply theories of relationship webs to understand influences on giving behavior (the socio-relational context of giving). While few of their findings strike one as revolutionary, their detailed and thorough analysis and rigorous testing of hypothesis and patterns offers the grounding to support many oft-repeated truisms about generosity and help us better frame our understanding of this phenomenon. They ultimately find that people whose spouses are generous, whose parents provided a strong positive example of giving, and those who have regular exposure to religious calls to give end up giving more (p. 272). While these findings are not shocking, the detailed attention to the modeling of six different primary affiliations and careful testing with both traditional regression methods and fuzzy set qualitative comparative analysis lends these findings greater confidence than much past research in the field.

Taken altogether, *American Generosity* offers a deep and incisive examination of the patterns and causes of generosity in the United States and a thoughtful development and testing of new and refined frameworks to understand the phenomenon of generosity in general. While geared primarily to scholars exploring these issues, it will also definitely prove of interest for fundraisers and other nonprofit leaders looking to strengthen and deepen their resource development strategies. But for its core academic audience, *American Generosity* capably achieves what it set out to do — to provide a rigorous, data-driven grounding for future research into the science of generosity.

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RESULTS

7

Aiming High: Foundation Support for State Advocates Brings Universal Children's Health Coverage Within Reach

Sheila Dunleavy Hoag, M.A., Debra J. Lipson, M.H.S.A., and Victoria Peebles, M.S.W., Mathematica Policy Research Inc.

To help close the children's health insurance coverage gap in the United States, the Atlantic Philanthropies created the KidsWell Campaign, a nearly \$29 million, six-year initiative to promote universal children's coverage through coordinated state and federal advocacy efforts. This article presents the major results of the KidsWell evaluation, which found substantial progress in achieving interim policy changes and coverage outcomes. While other funders may not be able to make investments as big or as long as Atlantic's was in KidsWell, the amount required may be lower. Children's-advocacy networks and capacities have already been built, and valuable knowledge and experience have been gained.

DOI:

SECTOR

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Through the Looking Glass: Foundation Evaluation and Learning and the Quest for Strategic Learning

Suzanne Kennedy Leahy, Ph.D.; Sandra Wegmann, M.P.A., and Lexi Nolen, M.P.H., Ph.D., Episcopal Health Foundation

Learning is among the most difficult kind of work organizations do. Strategic learning is neither simple nor efficient to institutionalize or practice, and foundations are still figuring out how to do it well. This article addresses different models that foundations use to establish and staff evaluation and learning functions, what other organizational considerations they should take into account in order to prioritize strategic-learning work, and what tools and approaches can be used to initiate it. Interviews with officers from more than a dozen foundations revealed that strategic learning does not require wholesale structural and cultural change — an incremental approach, instead, can phase in greater complexity as foundations expand staff capacity.

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Lessons About Evaluating Health-Coverage Advocacy Across Multiple Campaigns and Foundations

Leslie Foster, M.P.A.; Mary Harrington, M.P.P.; Sheila Hoag, M.A.; and Debra Lipson, M.H.S.A., Mathematica Policy Research

This article adds more than a dozen years' experience in evaluating major consumer health advocacy initiatives to existing knowledge about advocacy evaluation. Since 2002, Mathematica has evaluated four health insurance coverage advocacy programs sponsored by three foundations. The authors explain how their evaluations were strengthened by articulating a detailed theory of change and emphasizing assessment of interim outcomes from many perspectives and methods. Even with comprehensive data and integrated analysis, however, some ambiguity in the results is inevitable — there is no completely objective way to determine the effectiveness of an advocacy initiative. Moreover, sometimes solid or even exceptional advocacy efforts do not lead to desired policy outcomes. Advocacy initiatives that fail initially may be groundwork for future opportunities.

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53

Laying the Groundwork for a National Impact Investing Marketplace

Stephanie L. Grippe, Ph.D., Impact Finance Center; Joanne Kelley, M.S., Colorado Association of Funders; and Kathy Merchant, M.S.W., Impact Finance Center

The practice of impact investing is rapidly gaining momentum, but foundations are among the most reluctant investors and represent the smallest share of current activity. Developing cost-effective ways to “prime the pump” for social ventures to become investor-ready — through a capacity-building process that includes outreach, education, and technical assistance — is an essential part of growing the industry. The Impact Finance Center partnered with foundations and other investors in Colorado to create CO Impact Days and Initiative to demonstrate how to address this need for a more efficient and effective marketplace.

DOI:

REFLECTIVE PRACTICE

68

Designing Technical-Assistance Programs: Considerations for Funders and Lessons Learned

Jennifer Lyons, M.A., Sheila Dunleavy Hoag, M.A., Cara Orfield, M.P.P., and Sonya Streeter, M.P.H.,
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Funders will likely continue to use technical assistance (TA) to expand organizations' capacity, identify solutions to problems, and develop strategies for long-term change. As the demand for TA grows, so does the importance of understanding what works well, for whom, and in what circumstances. In this article, the authors documented some considerations funders can keep in mind to develop strong TA programs, as well as some lessons based on their evaluations of two state-based TA programs. Thoughtful program development, implementation, and evaluation will be essential to better understand how to deliver successful TA that is a worthwhile investment for funders. The recommendations offered in this article aim to promote conversation among funders about effective ways to invest their resources in TA programming.

DOI:

BOOK REVIEW

79

American Generosity: Who Gives and Why, Patricia Snell Herzog & Heather E. Price

Reviewed by Jason Franklin, Ph.D., Grand Valley State University

American Generosity explores two core behaviors — whether people give and how much they give — and then tries to understand how and why these behaviors vary across a wide range of factors. At the center of this work is the analysis of SciGen's nationally representative, cross-sectional survey — one of the largest and most rigorous surveys on the topic of generosity ever conducted. Herzog and Price examine the patterns and causes of generosity in the United States and offer a thoughtful development and testing of new and refined frameworks to understand the phenomenon of generosity in general. While geared primarily to scholars exploring these issues, *American Generosity* will also prove of interest for fundraisers and other nonprofit leaders looking to strengthen and deepen their resource development strategies. But for its primary academic audience, it capably achieves what it set out to do — to provide a rigorous, data-driven grounding for future research into the science of generosity.

DOI:

call for papers

FOR VOLUME 9, ISSUE 4

Abstracts of up to 250 words are being solicited for Volume 9, Issue 4 of *The Foundation Review*. This issue will be an open (unthemed) issue. Papers on any topic relevant to organized philanthropy are invited.

Submit abstracts to submissions@foundationreview.org by March 15, 2017. If a full paper is invited, it will be due June 30, 2017 for consideration for publication in December 2017.

Abstracts are solicited in four categories:

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- **Tools.** Papers in this category should describe tools useful for foundation staff or boards. By “tool” we mean a systematic, replicable method intended for a specific purpose. For example, a protocol to assess community readiness for a giving circle would be considered a tool. The actual tool should be included in the article where practical. The paper should describe the rationale for the tool, how it was developed, and available evidence of its usefulness.
- **Sector.** Papers in this category address issues that confront the philanthropic sector as whole, such as diversity, accountability, etc. These are typically empirically based; literature reviews are also considered.
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Questions? Contact Teri Behrens, editor of *The Foundation Review*, at behrenst@foundationreview.org or call 734-646-2874.

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