

The Foundation Review

Volume 10 | Issue 2

6-2018

Partner-Centered Evaluation Capacity Building: Findings From a Corporate Social Impact Initiative

Lisa Frantzen
TCC Group

Julie Solomon
J. Solomon Consulting LLC

Laura Hollod
Johnson & Johnson Global Community Impact

Follow this and additional works at: <https://scholarworks.gvsu.edu/tfr>



Part of the [Business Law, Public Responsibility, and Ethics Commons](#), [Nonprofit Administration and Management Commons](#), [Public Administration Commons](#), [Public Affairs Commons](#), and the [Public Policy Commons](#)

Recommended Citation

Frantzen, L., Solomon, J., & Hollod, L. (2018). Partner-Centered Evaluation Capacity Building: Findings From a Corporate Social Impact Initiative. *The Foundation Review*, 10(2). <https://doi.org/10.9707/1944-5660.1412>

Copyright © 2018 Dorothy A. Johnson Center for Philanthropy at Grand Valley State University. The Foundation Review is reproduced electronically by ScholarWorks@GVSU. <https://scholarworks.gvsu.edu/tfr>

Partner-Centered Evaluation Capacity Building: Findings From a Corporate Social Impact Initiative

Lisa Frantzen, M.B.A., TCC Group; Julie Solomon, Ph.D., J. Solomon Consulting, LLC; and Laura Hollod, M.P.H., Johnson & Johnson Global Community Impact

Keywords: Evaluation capacity building, corporate citizenship, corporate social responsibility, corporate funder, partner-centered design, evaluation framework development, organizational capacity

Introduction

Demand for accountability in grantmaking has increased in recent years. Groups focused on creating social impact from within a for-profit corporation may experience this in a unique way, as business associates accustomed to seeing tangible results of their efforts (e.g., the financial bottom line) may expect the same from social-impact endeavors. Many funders are turning to evaluation capacity-building (ECB) initiatives to fill the gap between funders' expectations and nonprofits' ability to evaluate grant results. Evaluation capacity building has been defined as "an intentional process to increase individual motivation, knowledge, and skills, and to enhance a group or organization's ability to conduct or use evaluation" (Labin, Duffy, Meyers, Wandersman, & Lesesne, 2012, p. 308). Nonprofits have a variety of needs and assets related to evaluation capacity, many of which funders may not be fully aware. How, then, can funders help build meaningful, sustainable organizational capacity to do and use evaluation?

As many in the field have discussed (Taylor-Ritzler et al., 2013; Hunter Consulting LLC, 2012; Cousins, Goh, Elliott, & Bourgeois, 2014), successfully engaging in ECB requires an acute understanding of an organization's readiness to take on the many potential evaluation activities that exist. For outsiders such as funders, it may be difficult to identify the highest-priority evaluation needs of a nonprofit organization, the evaluation capacities that must be built to address those needs, and the existing aspects of

Key Points

- Funders can play a proactive role in helping to fill the gap between funders' expectations and nonprofits' ability to evaluate grant results. Using a partner-centered design, Johnson & Johnson piloted an evaluation capacity-building initiative that supported eight grantees in strengthening their ability to measure and use findings concerning health-related outcomes, by focusing on key evaluation challenges identified by the grantees.
- Grantees' approaches to capacity building naturally grouped around the areas of evaluation-framework development, data-systems strengthening, and staff training. Through individualized projects, grantees increased their ability to both do and use evaluation.
- This article describes the design, implementation, and results of a participatory, nonprofit-partner-centered evaluation capacity-building initiative, and shares learnings from the perspectives of both the corporate funder and the nonprofit participants.

organizational culture that may foster or hinder the use of newly built evaluation skills.

Utilization-focused evaluation posits that primary intended users of evaluation are engaged at the beginning of the evaluation process to ensure that their primary intended uses can be identified (Patton, 2008, pp. 52-59). What, then, can happen when primary intended users are engaged in designing their own supports

In 2011, Johnson & Johnson launched “Healthy Future 2015” (HF), a five-year, corporatewide strategic initiative addressing the company’s citizenship and sustainability priorities that included goals in both environmental and nonenvironmental areas. One of the seven HF strategic priorities focused on the company’s philanthropic endeavors: “enhancing outcome measurement in philanthropy by working with philanthropic partners to measure health outcomes and raise the standard of health outcome measurement.”

for building evaluation capacity? And what is unique about a corporate funder’s experience with this type of ECB?

Background and Need

A 2014 survey of 637 staffed U.S. foundations found that 55 percent provide some type of capacity-building support to grantees (Grantmakers for Effective Organizations, 2014). Of those, 77 percent support capacity building for using evaluation. Despite this fairly large percentage of foundation supporters of ECB, our review of the literature shows that few have

written about their experiences to share what works and what needs improvement.

Some that have done so include the Bruner Foundation, which shares how to use indicators of evaluative thinking to understand the extent to which evaluative thinking is spread throughout the organization, as opposed to being centered in a few individuals (Baker & Bruner, 2012). The McCormick Foundation, in collaboration with Loyola University, has shared findings from their Unified Outcomes Project, where, through working with a community of practice and in some cases an evaluation coach, nonprofits saw changes in their motivation to use evaluation, and in their ability to use tools to aggregate data for program evaluation and to form a community with other grantees working to build evaluation capacity (Wade, Kallemeyn, Ensminger, Baltman, & Rempert, 2016). In addition, the Edna McConnell Clark Foundation’s PropelNext program integrates coaching, peer work, and unrestricted grants to build evaluation capacity over a three-year period. An alumni evaluation has shown that two years after the program, most are strengthening the quality of their programs and expanding their services to reach more youth (Edna McConnell Clark Foundation, 2017).

Efforts such as these have shown that ECB, when thoughtfully structured, can have positive effects on the organizations that participate in it. However, each of these programs has served a relatively small number of grantees, often within a specific thematic area, and therefore the evidence base for what works in ECB still has substantial room for growth.

The perspective of corporate grantmakers, for example, has been lacking in the literature. The field has also not yet tested these questions: What happens if an ECB approach is centered in participatory design? Do ECB recipients build the capacities that they deem most valuable to their respective organizations? And are there benefits to the funder in this customized approach to ECB? In this article, we discuss the results of a participatory, nonprofit-partner-centered ECB initiative, and learnings from the

perspectives of both the corporate funder and the nonprofit participants.

The “Healthy Future” Capacity-Building Initiative

In 2011, Johnson & Johnson launched “Healthy Future 2015” (HF), a five-year, corporatewide strategic initiative addressing the company’s citizenship and sustainability priorities that included goals in both environmental and nonenvironmental areas. One of the seven HF strategic priorities focused on the company’s philanthropic endeavors: “enhancing outcome measurement in philanthropy by working with philanthropic partners to measure health outcomes and raise the standard of health outcome measurement” (Johnson & Johnson, 2011, para. 10). A subteam in the company’s Corporate Contributions department (now called Global Community Impact) that was already working to expand and refine the department’s monitoring and evaluation (M&E) infrastructure and tools was tasked with defining a goal around the HF philanthropic priority, developing and implementing activities to address it, and planning and conducting its evaluation. This subteam, called the M&E Tiger Team, included several Corporate Contributions directors and grant managers, representatives from the department’s communications and IT functions, and external evaluation consultants already working closely with the M&E Tiger Team on other projects. A Corporate Contributions M&E manager position was created after the HF initiative was launched, and the individual who filled that position also joined the M&E Tiger Team.

The work to address the HF philanthropic priority involved a series of steps, some of which were carried out in parallel:

1. Determine initiative goal and scope.
2. Identify grantee partners to be involved.
3. Conduct needs and assets assessments with these partners.
4. Coordinate with the grantee partners and Johnson & Johnson managers to design proposals for ECB projects.
5. Obtain baseline information from the grantee partners.
6. Implement ECB projects.
7. Collect follow-up data during and after project implementation and distill key learnings.

These steps were carried out from 2011 to 2017, with ECB project implementation, evaluation, and discussion of learnings (i.e., Steps 6–7) extending beyond the original HF period.

Initiative Design

After reviewing and discussing the HF philanthropic priority, the M&E Tiger Team set the goal of enhancing Johnson & Johnson and grantee capacity to measure and report program health-related outcomes. From the Tiger Team’s perspective, this goal could best be achieved by taking a broad ECB approach that did not dictate what grantees’ ECB needs were, or how or by whom they should be addressed. Building on a Johnson & Johnson corporate value of partnership, the team adopted a partner-centered design in which each participating grantee partner would identify its key ECB challenge, and Johnson & Johnson would be open to a range of potential strategies, proposed by the grantee partner or an evaluation consultant of its choosing, to address the need.

Given available resources, the M&E Tiger Team determined that up to 10 grantee partners could be involved in the HF ECB initiative. Grant managers across the Corporate Contributions department were invited to identify grantees that they felt both needed and wanted to strengthen their evaluation capacity. To be eligible for HF ECB support, grantees had to meet the following criteria:

- were receiving at least \$50,000 of Johnson & Johnson funding per year for health-related programs or services;

Projects proposed by the nonprofit partners naturally fell into three areas of ECB:

- *evaluation framework development, focused on articulating guiding priorities and structures for evaluation;*
- *data-system strengthening, focused on identifying challenge areas in data collection and management and identifying and implementing solutions to those challenges; and*
- *staff training, focused on providing guidance to staff on principles, best practices, and logistics of conducting effective evaluation and using findings.*

- were not measuring health-related programmatic outcomes, or were measuring such outcomes but the grant manager saw potential for outcome evaluation improvement;
- were not serving solely as intermediary fiscal agents—that is, grantees had to not only be receiving Johnson & Johnson funds, but also be implementing the funded programs or services; and

- were willing to invest staff time on the project, including participating in a HF ECB needs-and-assets assessment interview and completing short surveys and narrative reports.

Initially, grant managers identified 10 such grantee partners that collectively had diverse geographic focus areas (e.g., the city of Mumbai, India; East Africa; multiple continents), as well as diverse approaches to improving health outcomes, such as increasing access to safe water and sanitation, combating poverty, providing training and practical experience to emerging leaders in global health, and providing clinical services.

The next step in the initiative design process was for an external evaluation consultant member of the M&E Tiger Team to work with each identified grantee partner to conduct a brief needs-and-assets assessment that would facilitate design of an appropriate ECB intervention. The assessment process, and the evaluation of the initiative, were based loosely on the framework of Cousins et al. (2014) concerning the capacity to do and use evaluation. According to elements of this framework, knowledge, skills, and organizational support structures are among the factors that influence the capacity to do evaluation, and the capacities to do and to use evaluation influence each other. The consultant developed a semistructured needs and assets assessment interview protocol that reflected this framework, including questions addressing current capacities, key gaps, and how the grantee felt the gaps might best be addressed.

The evaluation consultant reviewed key documentation on each grantee partner's work (e.g., grant proposals and reports to Johnson & Johnson, theory of change documentation, organization's website), interviewed the Johnson & Johnson grant managers to understand why they had proposed the identified partners, and adapted the needs-and-assets assessment protocol to the particulars of each organization. The consultant then met with a point person or team from each organization via phone or online platform, for one to two hours, to pose and discuss the questions in the protocol.

TABLE 1 Healthy Future Evaluation Capacity-Building Projects

Name of Organization	Focus of Organization or Program for Which Evaluation Capacity Was to Be Built	Principal ECB Approaches		
		Evaluation Framework Development	Data-System Strengthening	Staff Training
Hand in Hand International	Fighting poverty with grassroots entrepreneurship in South Asia and sub-Saharan Africa	✓		
Water.org	Improving access to safe water and sanitation in developing countries	✓		
Women Deliver	Young Leaders Program in developing countries, with a focus on sexual and reproductive health and rights	✓		
Aga Khan University	Nurse scholarship program, East Africa	✓	✓	
Princeton in Africa	Fellowship for recent college graduates to work in Africa	✓	✓	
Americares	Medical product donation worldwide		✓	
Prerana	Countering human trafficking and HIV/AIDS in Mumbai, India		✓	✓
HAS Haiti	Improving the health and quality of life of residents of Haiti's Artibonite Valley		✓	✓

Following these discussions, eight of the organizations prepared brief proposals for HF ECB projects; two did not proceed with proposals, due to timing or logistical challenges. Each of the eight proposals discussed the specific need to be addressed, the project objectives and activities, and the timeline and budget. Instructions to each applicant emphasized the need to make the case for how the proposed project would build evaluation capacity in a sustainable way. Collectively, the budgets submitted by the applicants included requests for consultant time, equipment, travel, and training. To enhance ownership and thus contribute to sustainability of the ECB efforts, Johnson & Johnson required that applicants make an in-kind contribution to their project, such as the coverage of some staff time for the ECB activities.

The respective grant managers and the consultant who had conducted the needs-and-assets assessments reviewed and discussed each proposal and went back to the grantee organizations for further information, discussion, or revisions. The Corporate Contributions M&E manager also participated in a final discussion of each proposal and had final sign-off on each project. Following an iterative process with each applicant, Johnson & Johnson ultimately funded all eight projects. (See Table 1.)

Initiative Implementation

Projects proposed by the nonprofit partners naturally fell into three areas of ECB:

- evaluation framework development, focused on articulating guiding priorities and structures for evaluation;

TABLE 2 Approaches Employed by Evaluation Capacity-Building Projects

ECB Approach	Evaluation Framework Development	Data-System Strengthening	Staff Training
No. of HF Organizations	5	5	2
Primary Objectives	<ul style="list-style-type: none"> • Assess and articulate key outcomes and pathways of change, particularly related to health and advocacy. • Identify and prioritize core indicators to be collected. • Gain a deeper understanding of best practices related to data collection within the programmatic area. • Develop a data-collection plan for priority indicators. • Develop tools to measure key stakeholder program satisfaction and competency changes. • Ensure data-collection tools are integrated into an overall measurement and evaluation system. 	<ul style="list-style-type: none"> • Develop or update data-collection tools, test them, and integrate them into regular use. • Develop a system for collecting data to address baseline and endline outcome indicators. • Develop and test an algorithm for accurately estimating the number of patients treated with donated medications. • After engaging in evaluation framework development, define data-storage and management requirements for newly prioritized indicators. • Procure new computer equipment and enhance an existing electronic medical records (EMR) system with new data entry forms and reporting functions. 	<ul style="list-style-type: none"> • Train staff in basic computer skills and EMR system functions. • Train staff in logical frameworks and M&E tools, practices, work plans, and schedules.
Processes Used to Achieve the Objectives	<ul style="list-style-type: none"> • Interactive logic model development • Interactive development of question-and-evidence matrix • Development of data-collection tools • Development of reporting plan 	<ul style="list-style-type: none"> • Development of tools, systems, and procedures to address needs and leverage resources • Development and testing of an algorithm to estimate program reach numbers 	<ul style="list-style-type: none"> • Delivery of interactive trainings with hands-on exercises to a large number of organizational staff members

- data-system strengthening, focused on identifying challenge areas in data collection and management and identifying and implementing solutions to those challenges; and
- staff training, focused on providing guidance to staff on principles, best practices, and logistics of conducting effective evaluation and using findings. (See Table 2.)

The HF ECB projects lasted from four to 12 months, with the majority lasting approximately four months. Grants for ECB projects ranged from \$20,000 to \$50,000. The approximate total cost of the HF ECB initiative, including Johnson & Johnson staff and consultant time to plan, oversee, and evaluate the initiative, was \$250,000.

While each of the projects was proposed independently by the respective organizations, Johnson & Johnson recognized some overlap between the needs of some of the projects and saw this as an opportunity for peer learning. While limited resources and wide geographical spread limited the ability to bring all of the HF ECB organizations together, Johnson & Johnson initiated and hosted a convening for a subset of the organizations with similar missions and similar evaluation challenges to promote peer-to-peer learning.

Evaluation Framework Development

In five projects that included evaluation framework development, nonprofits worked with an evaluation consultant to build or refine several foundational evaluation tools, such as programmatic logic models, question-and-evidence matrices, data-collection tools, and reporting plans. Key objectives that nonprofits had for this work included:

- Assess and articulate key outcomes and pathways of change, particularly related to health and advocacy for health.
- Identify and prioritize core indicators to be collected.

- Gain a deeper understanding of best practices related to data collection within their programmatic area.
- Develop a data-collection plan for priority indicators.
- Develop tools to measure key stakeholder program satisfaction and competency changes.
- Ensure data-collection tools are integrated into an overall measurement and evaluation system.

The approaches used for these evaluation framework development projects were participatory, highly engaging, and focused on the unique assets that each organization brought to the table. (See Sidebar 1.) The approaches fell into a few major categories of M&E practice.

Logic Model Development

Four of the five organizations working on evaluation framework development created logic models. This work centered on mapping out the desired outcomes and their sequencing for a principal program or model of the organization. The mapping process began with the consultants doing a deep dive into the documents related to the program and building on any existing logic models that the organizations may have worked on in the past. Then, rather than developing or refining the model and bringing it back to the organization as a completed product, consultants engaged in conversations with program staff, communications staff, advocacy staff, and leadership to understand their perspectives on the overall intended social impact of the program, the target audiences, the direct outcomes from the program, and the ways data about the program can help them in decision making and communications.

Obtaining this wider range of perspectives helped to gain a more comprehensive view of the program, and led to the nonprofits engaging in strategy discussions, developing and building consensus on key aspects of the program, and obtaining clarity on the outcomes that the

organization's program or model should obtain and in what time frames. This integration of a wider set of stakeholders also aimed to create broader buy-in to the usefulness of the M&E tools that were being developed.

Question-and-Evidence Matrix

Four of the five organizations working on evaluation framework development also built question-and-evidence matrices. A

question-and-evidence matrix is built from the logic model and lays out the key evaluation questions that the organization wishes to answer as well as the indicators and data sources that will be used to answer those questions. Once the outcomes mapping (logic model) was established, the consultants worked with the nonprofit teams to review the existing indicators that were shaping data collection on their program activities and outcomes and to assess whether or not they

SIDEBAR 1 Building Princeton in Africa's Capacity to Do and Use Evaluation

Princeton in Africa (PiAf) is a New Jersey-based nonprofit founded in 1999 to offer yearlong fellowship opportunities with a variety of African-based organizations in order to develop young leaders committed to Africa's advancement (<http://www.princetoninafrica.org>). Since the fellowship's inception, 545 PiAf fellows have worked in 36 African countries.

PiAf joined Johnson & Johnson's Healthy Future (HF) evaluation capacity-building (ECB) initiative with a desire to more consistently measure programmatic outcomes for its fellows and their partner organizations. PiAf had done some initial work on drafting a logic model and had developed some data-collection tools, but it was seeking a way to more holistically develop a monitoring and evaluation framework that would help it use the data it collected and report programmatic outcomes to stakeholders in a timely manner.

PiAf participated in an evaluation framework development and data-system strengthening project with evaluation consultant TCC Group. In this project they developed an updated logic model, created a question-and-evidence matrix with core indicators, developed data-collection tools for programmatic site visits, created a reporting plan, and defined data-storage and management needs for identifying the appropriate database solution. According to PiAf, one of its challenges had been that data collection had traditionally been more ad hoc or was performed to meet specific deadlines. For PiAf, this meant that it had a difficult time seeing the bigger picture from what it gathered, analyzed, and reported. Through the HF project, PiAf developed a reporting plan that systematized its data collection and analysis throughout the year. PiAf reports that "this tool was especially helpful as it gave us a clear understanding of our evaluation practices and outlined a time frame to ensure that we were following through with these practices regularly."

PiAf's scores on the HF ECB pre- and post-project assessment of evaluation use showed that it increased its use of evaluation findings to improve services or programs, train staff, get additional funding, monitor programming on an ongoing basis, and eliminate unneeded services or programs. The most impactful part of the project, according to PiAf, was a tool developed for assessing current and prospective fellowship host organizations; PiAf had not had a strong system in place to do this. With the development of the partner assessment tool, PiAf was able to integrate both qualitative and quantitative data to understand how well organizations could facilitate the desired fellow outcomes, and how good a fit a particular fellow might be at helping create partner-specific outcomes. Additionally, because PiAf was involved in developing this tool with its evaluation consultant, the tool reflects the characteristics needed for staff to use it while conducting site visits in various parts of Africa. According to PiAf, this helps it "make more informed and impartial decisions relating to this important aspect of our work." Two years after the HF project, PiAf still regularly uses these tools and now feels that it is better able to make informed decisions about whether to continue with existing partnerships.

fit with the new logic model. Where needed, they worked together to develop new indicators and remove irrelevant ones. In order to establish their data-collection plan, the teams prioritized the indicators to be collected using the criteria of importance to the organization/program, feasibility for data collection, and potential use by the organization.

While in traditional consulting arrangements consultants may develop the indicators on their own as the “evaluation experts”, the interactive method used in the HF projects brought consultants and nonprofit teams together to ensure that the nonprofits had bought into the indicators that they themselves prioritized, that the feasibility of data collection was thoughtfully considered, and that the teams would now have the experience to replicate the process for themselves in the future.

Data-Collection Tool Development

Four organizations used HF support to develop the right tools for data collection. Three of these organizations had been through the question-and-evidence matrix development process and thus selected tools outlined in their matrix for creation or refinement. The fourth organization prioritized survey development for three of its specific stakeholder audiences. Each of these organizations worked with evaluation consultants to understand best practices in survey or tool creation, develop the appropriate ways of asking for the data, and put those into practice through tool implementation.

Tool development was iterative between consultants and the nonprofit teams in order to ensure that the tools met the needs of both the nonprofit staff and the populations they served. While consultants provided expertise on survey/data-collection design, nonprofit teams lent their expertise on culturally competent ways to engage with their program participants. The teams also helped refine the tools so that they were appropriately sized and formatted for the situations in which they would be used (e.g., site visits to rural locations, for use with illiterate populations, etc.). In some cases, consultants also included a “data-collection tool review,” where the organization’s existing tools were reviewed

[T]he interactive method used in the HF projects brought consultants and nonprofit teams together to ensure that the nonprofits had bought into the indicators that they themselves prioritized, that the feasibility of data collection was thoughtfully considered, and that the teams would now have the experience to replicate the process for themselves in the future.

to ensure that all data collected was being used and that all prioritized indicators were reflected somewhere in the data-collection tools. This would help with easing the burden of data collection and thereby increase the likelihood of the tools’ continued use.

Reporting Plan

Four organizations worked with an evaluation consultant to develop a type of reporting plan to bring their collected data together for use in communications and decision making. The plans generally touched on areas such as identifying how and when findings are distributed throughout the organization, and defining roles and responsibilities for key activities such as conducting analysis, creating reports, disseminating findings, and ensuring use of the findings.

Reporting plan development was also conducted collaboratively between consultants and nonprofit teams. Consultants helped provide the structure and key elements of a rigorous plan, and the nonprofits weighed in on the timing of key programmatic activities and grant reporting periods throughout the year. The collaborative

development of this plan helped to ensure clearly and reasonably assigned tasks among the team members and helped instill confidence in other stakeholders, such as leadership and communications staff, that data collection would align with important decision-making or communication points throughout the year.

Data-System Strengthening

Five HF ECB projects included a focus on data-system strengthening, which was designed to help the organizations address existing challenges in data collection and management. Key process objectives that nonprofits had for this work included:

- Develop or update outcome data-collection tools tied to a pre-existing evaluation framework, test the tools, and integrate them into regular use.
- Develop a system for collecting data to address baseline and endline outcome indicators.
- Develop and test an algorithm for accurately estimating the number of patients treated with donated medications.
- After engaging in evaluation framework development, define data-storage and management requirements for newly prioritized indicators.
- Procure new computer equipment and enhance an existing electronic medical records (EMR) system with new data entry forms and reporting functions.

In most cases, the approach to achieving these objectives was participatory, with consultants and nonprofit teams working together to identify the data-systems challenges and assess organizational resources and constraints in using new tools, and then working collaboratively to develop tools, systems, and procedures that would appropriately address the needs and leverage the resources of the organization. Additionally, the nonprofits engaged staff from varying roles across the organization,

considering perspectives of all users of their data systems. For example, one organization included those in programmatic roles in developing new data-collection tools to ensure that front-line staff would feasibly be able to fill out the information.

In the case of another project, the organization developed an initial algorithm for estimating the number of patients treated with donated medications based on a literature review and then tested the algorithm through a real-world evidence study that included a review of medical records from nearly 1,500 patients who had received the medications in 10 target countries around the world. Although this organization originally had plans to retain a consultant to lead this process, a new staff member with the appropriate skills and expertise ultimately spearheaded the work, contributing to the organization's sense of ownership of the project's processes and product.

Staff Training

Two nonprofits that utilized HF resources for data-strengthening support also included a major focus on evaluation-related staff training, with the primary goal of improving the staff's ability to engage in the practices needed to support high-quality collection and use of health outcome data. Key process objectives that nonprofits had for this work included training staff in basic computer skills and EMR system functions, and in logical frameworks and M&E tools, practices, work plans, and schedules.

In both instances, external consultants facilitated interactive trainings with a large number of organizational staff members, with the rationale that everyone in the organization has a role to play in evaluation efforts. The point person at each organization for the HF project, usually the person responsible for M&E, informed the selection of topic areas on which to focus staff training, based on specific organizational needs and aspirations. This broader level of participation in the training sought to build buy-in and use of the practices across the organization.

Peer Learning

During the HF ECB implementation period, Johnson & Johnson brought together two of the

organizations engaged in evaluation framework development and another Johnson & Johnson grantee that was also working on framework development outside of the HF ECB initiative. Each of these organizations worked within the youth leadership development sector, with a focus on improving health and related outcomes in developing country contexts, and thus faced similar questions in defining their outcomes and data-collection plans.

During a half-day, in-person convening, evaluation consultants facilitated a “mega logic model” activity in which each of the organizations contributed their program outcomes to a wall-size logic model and compared and contrasted how the similar programs defined their work. Consultants provided mini-workshops on how change can be assessed at the individual, organizational, and systems levels. The organizations also discussed challenges with data-collection systems and practices and how each was working to address them. Finally, the organizations reflected on ways to collectively share evaluation approaches with the broader youth leadership development sector.

Evaluation Methodology

The evaluation of the HF ECB initiative employed a practical, pre-test/post-test design that included collection of both quantitative and qualitative data from each of the eight participating grantee partners to assess changes in their capacity to do and to use evaluation.

The evaluation of the HF ECB initiative had three components:

1. Output/outcome reporting: Each grantee partner’s application for HF support included a table of project output and outcome targets related to the capacity to do and use evaluation. Three months after the official end of each project, the grantee reported actual accomplishments against the targets and explained over- or underachievement.
2. Quantitative pre-project and post-project assessment of evaluation use: At the beginning of the project and three months after its end, the ECB project lead at each agency assessed the organization’s use of evaluation results for each of eight purposes on a scale of 1 to 4 in which 1 = not at all, 2 = to some extent, 3 = to a considerable extent, and 4 = to a very great extent, using a scale adapted from the Evaluation Capacity Assessment Inventory (Taylor-Ritzler et al., 2013).
3. Qualitative post-project reflections on the ECB experience: Three months after the official end of each project, each grantee reported in narrative format on key changes in its ability to do and use evaluation, unanticipated outcomes, challenges, sustainability plans and actions, and recommendations for future ECB initiatives spearheaded by funders.

In addition, each HF ECB project that lasted more than six months (a total of three projects) submitted brief quarterly progress reports that addressed, in narrative format, three questions concerning project tasks accomplished in the past quarter, any challenges that arose and how they were addressed, and any unanticipated circumstances, learnings, or outcomes. The Johnson & Johnson Corporate Contributions M&E manager reviewed the reports and followed up with grantees, where appropriate, concerning challenges.

Findings: Output/Outcome Reporting

Outputs

The planned outputs of the ECB projects included staff members trained on evaluation, key organizational or program outcomes defined, outcome indicators prioritized, data-analysis plans developed, data-collection tools created, and staff trained on new tools. At the time of the final reports (three months after project end), three of the organizations had achieved all of their projected outputs and five organizations had achieved the majority of them, with a couple of outputs still in progress. Outputs defined as still in progress were related to data-collection tools that still needed to be refined or tested, as the implementation period

Intended ECB project outcomes centered on two main themes: the integration of new M&E tools into organizations' ongoing operations, and strengthened partnerships with key stakeholders (board members, peers, funders) that would occur through the sharing of their M&E work. At the time of the final reports (three months after project end), two of the organizations had completely achieved their desired outcomes and six organizations had achieved some outcomes and had others in progress.

for them was still in the future (e.g., program alumni surveys), and newer staff that still needed to be trained on the new M&E tools.

From the funder's perspective, the HF ECB initiative helped to achieve the following aggregate outputs:

- four partners with new or updated program logic models with clearly defined outcomes, particularly related to health outcomes.
- four partners with newly prioritized core indicators.
- six partners with new or updated data-collection tools.
- three partners with best practices for data collection and management identified.
- two partners with reports or technical documents produced to share with others.
- two partners with staff trained in M&E.
- one partner with new IT equipment for data collection.

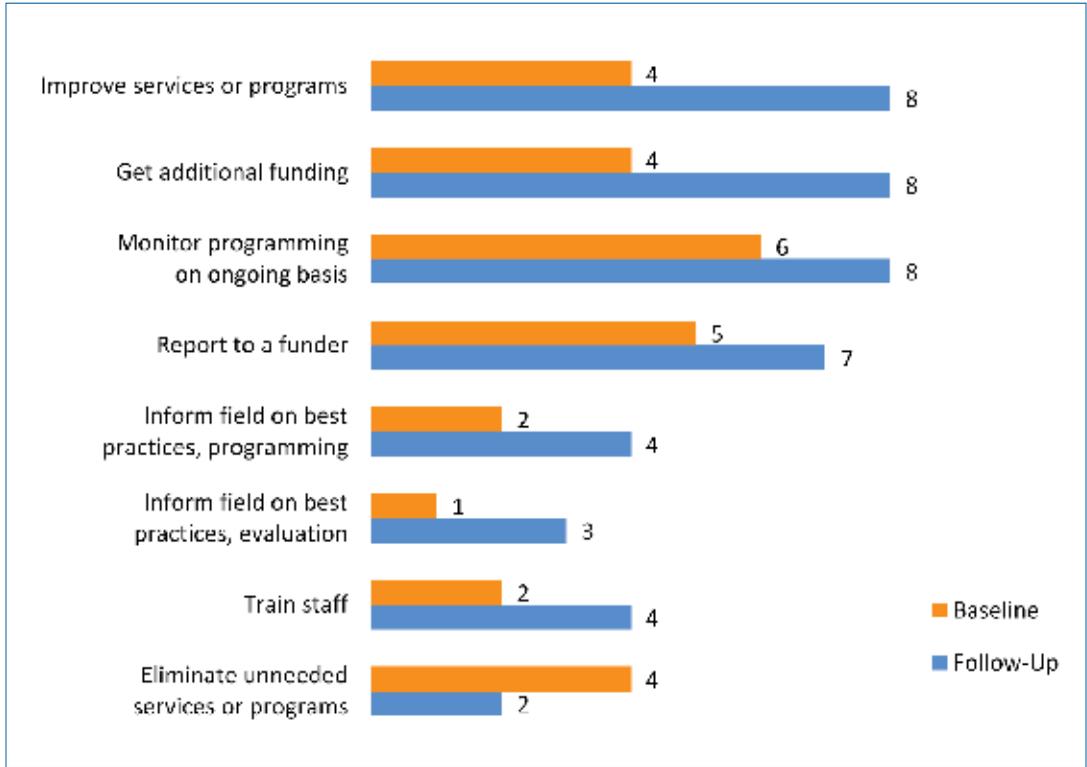
Outcomes

Intended ECB project outcomes centered on two main themes: the integration of new M&E tools into organizations' ongoing operations, and strengthened partnerships with key stakeholders (board members, peers, funders) that would occur through the sharing of their M&E work. At the time of the final reports (three months after project end), two of the organizations had completely achieved their desired outcomes and six organizations had achieved some outcomes and had others in progress. For those that still considered their outcomes as a work in progress, they saw opportunities to build stakeholder relationships that would evolve over time, and/or they saw even more opportunities to integrate their new M&E tools in other areas of the organization or with additional staff members. One organization based in a developing-world context was still dealing with technology constraints at the time of the final report that had hindered it from fully using its new M&E tools.

From the funder's perspective, the HF ECB initiative helped to achieve the following aggregate outcomes:

- six partners with new data-collection tools integrated into staff operations and utilized to inform programmatic decisions and next steps;
- three partners with increased ability to communicate the impact of their work, particularly related to health outcomes;
- two partners with logic models mainstreamed in program development, strategy, and/or planning and implementation;

FIGURE 1 Organizations Reporting Use of Evaluation Results “to a Considerable Extent” or “to a Very Great Extent” (n=8)



- two partners with strengthened data-systems capacity; and
- two partners that made contributions to thought leadership within their fields.

Findings: Quantitative Assessments of Evaluation Use

The quantitative assessment of HF ECB grantees’ use of evaluation results demonstrated that from before projects were implemented to three months after they were completed, the number of organizations that reported using evaluation results “to a considerable extent” or “to a great extent” increased for seven of eight uses. (See Figure 1.) In particular, use of evaluation results to a considerable or great extent grew from four organizations at baseline to eight at follow-up for “improving services or programs” and “getting additional funding.”

The only area in which use of evaluation results to a considerable or great extent decreased over time was “eliminating unneeded services or programs.” It is possible that the increased ability to use outcome evaluation information to improve programs or services resulted in a reduction in the outright elimination of services or programs.

Findings: Qualitative Post-Project Reflections

In their final reports, grantee partners were asked, through a series of open-ended questions, to reflect on the key benefits of their HF ECB projects and what is different about how they do and use evaluation, unanticipated outcomes, project challenges, sustainability plans and actions, and recommendations for future funder-led ECB initiatives. Several key themes emerged from their responses.

Several organizations that had taken an evaluation framework development approach to ECB reported that their project had brought a formal structure and more efficient processes to their evaluation work, such as elimination of data-collection activities that were redundant or that did not result in actionable information.

Changes in How Grantees Do and Use Evaluation

In terms of the most beneficial aspects of their HF ECB projects and what has changed about how organizations do and use evaluation, the main themes were:

1. increased structure for and efficiency of evaluation systems,
2. changes in staff and organizational mindsets and skills in relation to evaluation, and
3. improved ability to use evaluation findings internally and externally.

Several organizations that had taken an evaluation framework development approach to ECB reported that their project had brought a formal structure and more efficient processes to their evaluation work, such as elimination of data-collection activities that were redundant or that did not result in actionable information. For example, one organization reported:

As a result of these plans[,] we now have one document that provides a comprehensive overview of all the evaluation tools being used ..., including the dates of and means of data collection, the person(s)

responsible for collect[ing] the data, the methods of evaluation and reporting[,] and the needed outputs from each tool. With these plans, [the organization] is able to easily track our annual evaluation systems and identify gaps and redundancies in information collection.

The two organizations that included a staff-training approach to ECB indicated that their projects resulted in positive changes in staff skills, attitudes, and behaviors in relation to evaluation. One of these organizations, Prerana, which also took a data-strengthening approach to ECB, reported that staff came to see the organization's programming as a means to an end (i.e., positive health outcomes), instead of as an end in itself. Prerana also reported that outcome evaluation was no longer an isolated, peripheral activity, but instead had become a core function within the organization, thanks to the participatory nature of the ECB work and the comprehensive involvement of agency staff. (See Sidebar 2.)

In addition to focusing on changes in how they do evaluation, several organizations highlighted changes in how they use evaluation. For example, one organization described an improved ability to communicate with others: "We will now [be] able to communicate with our internal and external stakeholders[,] such as donors, distributors[,] and network facilities[,] to estimate [the reach of] our global medicine donation program."

Other organizations reported a new focus on use of outcome information to feed program improvement. One organization noted the institutionalization of evaluation reflection to inform program improvement: "Stakeholder meetings and management response documents are now standard for completed evaluations[,] to allow for deeper reflection on outcomes and how to improve programs."

Unintended Outcomes

When asked about unintended outcomes of their HF ECB projects, organizations' responses were very diverse, but some common themes emerged.

Two organizations reported that interest in efficient and useful M&E frameworks had expanded

SIDEBAR 2 Building Prerana's Capacity to Do and Use Evaluation

Established in 1986 and based in Mumbai, India, Prerana works to end intergenerational prostitution and to protect women and children from human trafficking by defending their rights, providing a safe environment, supporting their education and health, and leading related advocacy efforts (<http://www.preranaantitrafficking.org/>). When the Healthy Future (HF) evaluation capacity-building (ECB) initiative began, Prerana had over 40 staff members and an annual operating budget of approximately \$260,000.

The HF needs-and-assets assessment process identified several evaluation-related strengths and needs in the organization. Strengths included consistent documentation of programmatic outputs and good knowledge of Excel among project coordinators. Prerana's director also had a clear vision for the utility of outcome evaluation in documenting achievements, sharing successes, informing project improvement, and preparing more compelling funding proposals. Shortly before the outset of HF ECB grant funding, the director created and filled a new monitoring and evaluation (M&E) project manager position as part of a new commitment to improving evaluation capacity. However, Prerana's staff lacked knowledge of outcome evaluation and understanding of its importance, and the organization did not have the instruments and systems needed to conduct outcome evaluation successfully.

Prerana used HF ECB funding for a one-year project that engaged a local consultant to train over half of the organization's staff in basic principles and methods of M&E, and a second local consultant to work with Prerana to develop and pilot outcome-evaluation instruments and reporting systems for two projects, that could be adapted for other projects. HF project activities were highly participatory. For example, staff were actively engaged with the tools and systems consultant to develop practical instruments and collection and reporting systems.

After the HF ECB grant ended, Prerana reported that staff had increased knowledge of and buy-in to conducting outcome evaluation. Staff who had received initial M&E training were also training other staff in M&E, so that all staff would have the knowledge, skills, and attitudes needed to engage in it successfully. Moreover, the organization was establishing outcomes indicators and collecting baseline and follow-up data for diverse projects. Prerana's final report on its HF ECB project observed: "Today, we find every team member has moved from the activity-based mode to impact assessment. Every action and intervention are understood in the context of the impact that has to be achieved."

Prerana's scores on the HF ECB pre- and post-project assessment of evaluation use showed increased use of evaluation findings to report to a funder, improve services, obtain additional funding, monitor programming on an ongoing basis, and train staff. Prerana's final HF ECB report indicated that outcome data it had collected as a result of the project had helped inform a successful proposal to a new funder, and that another funder had invited Prerana to share its M&E system and HF ECB project learnings with the funder's grantee partners.

According to Prerana, the key factors in the success of the initiative in building its capacity to do and use evaluation were: (1) organizational readiness; (2) involvement of a local consultant who worked with the organization in a collaborative and participatory way to develop systems and tools that were tailored to the organization's needs; and (3) training of the majority of staff members in the basics of M&E, which promoted widespread buy-in to and support of new practices.

unexpectedly within the organization. In one case, although the HF ECB project was focused on health outcomes, a similar framework development process was being applied to other programming areas. In the other case, an organization reported that because of evaluation framework development for one program, other program areas “have increased their interest in developing a more formal monitoring and evaluation framework.”

Two other organizations reported unintended outcomes pertaining to new partnerships. One organization reported that its new M&E framework and practices helped attract a prestigious impact-research partner to collaborate on a four-year, randomized controlled trial of one its programs. Another organization, Prerana, reported that its new M&E system facilitated development of a proposal that resulted in a new funding partner. Prerana also reported that a funder has invited the organization to share its new systems and HF ECB project learnings with the funder’s various grantee partners.

Challenges to the ECB Work

While reporting various positive outcomes, HF ECB grantees also reported a variety of challenges to their work. Some were specific to evaluation work in settings with severely limited resources, such as limited electrical power and Internet access, lack of electronic medical and service records, and difficulty identifying appropriate local consultants to support the project. Other challenges included needing more time for the project than originally anticipated and difficulties concretizing and quantifying outcomes that initially seemed “intangible” to the organizations. Strategies that helped organizations to address these latter challenges included working with experienced consultants and scheduling regular meetings that were devoted to the ECB work.

Sustainability of the ECB Work

All eight organizations reported having taken concrete steps to promote the sustainability of their new evaluation capacities. Most of the organizations reported that new frameworks, tools, and procedures had been (or were in the process

of being) formally incorporated into organizational manuals, program processes, and/or staff responsibilities. One organization noted that the M&E framework is also now a part of training for new staff:

The first step is that we now have a formal data-collection and reporting plan in place, which covers all aspects of M&E. ... This document has been shared with all current staff and has become a part of the training for incoming staff. As the plan has very specific information about what position (not person) is responsible for each action, timelines for each action, and reporting methods for each action, it should be very transferrable during any changes in staffing.

Two organizations reported that staffing configuration changes that had resulted from the ECB project would support sustainability. In particular, one organization retained two of the project staff members who had initially been brought on only for the project: an EMR programmer, who was continuing to work to refine system forms and reports, and an EMR trainer, who was now serving in an M&E assistant role that included responsibility for data entry, patient registration, and monitoring of EMR use.

Grantee Recommendations for Funders of ECB Work

When asked what elements of the Johnson & Johnson HF ECB process could be done differently in future initiatives, the only comments offered (by one organization each) were that working with grantees to build ECB should begin earlier in the relationship, that the organization’s Statement of Work for the initiative should be clear to all parties from the start, and that participating organizations should be encouraged to recognize that capacity-building processes might take longer than they initially expected.

When asked what funders can do to encourage ECB aside from supporting projects like the HF ECB initiative, grantees provided a range of recommendations, from which two common points emerged: (1) ensure that an evaluation work plan is included in all funded projects and funding agreements; and (2) link grantees to other ECB

resources and help cover their costs, such as in-person trainings and webinars. On this second point, two grantees pointed out that small organizations cannot always afford to hire evaluation consultants, so it is imperative that staff have evaluation capacity. As one observed:

Having staff who are already knowledgeable about the work that we do also be trained to carry out long-term M&E projects would be a helpful step in sustainability. As a small nonprofit with limited funding, it is essential for all members of our team to understand and carry out monitoring and evaluation.

A grantee who had participated in Johnson & Johnson's convening of several organizations under the HF ECB initiative also noted that funders can also support grantees by creating "safe spaces" for multiple partners to share M&E challenges and strategies and in turn collaboratively build their evaluation capacity.

The findings from the evaluation of the HF ECB initiative are limited by the small sample size of organizations, which precludes generalizability beyond the sample. However, there was virtually no missing data, which supports the internal validity of the findings. Another potential limitation is the possibility that social desirability bias influenced the findings. In particular, evaluation data were submitted via email to the Corporate Contributions M&E manager, so grantees knew that Johnson & Johnson was aware of their results and feedback. However, grantees were strongly encouraged to provide honest feedback to help improve future initiatives and were told that their responses would not affect their current or future partnerships with Johnson & Johnson. The grantees did not seem reluctant to share challenges, and none consistently rated their use of M&E at ceiling, either at baseline or post-project. These factors suggest that social desirability bias was likely not a major factor in the HF ECB evaluation results.

Funder Perspective

As a supporter of nonprofit organizations seeking to improve health outcomes around the world, Johnson & Johnson also faces the growing

A grantee who had participated in Johnson & Johnson's convening of several organizations under the HF ECB initiative also noted that funders can also support grantees by creating "safe spaces" for multiple partners to share M&E challenges and strategies and in turn collaboratively build their ECB.

demand for accountability. Like all funders, corporate funders must seek to understand their partners' M&E capacities and consider what ECB approaches work best for them. The best-fit ECB approach will likely depend on several factors, including the funder's approach to partnering, as well as grantmaking and resource availability.

For Johnson & Johnson, which uses a highly participatory model for partnerships, it was important to develop and implement the HF ECB initiative in a way that allowed each partner to identify its own M&E challenges and shape its own solutions. The hope was that changes proposed, developed, and implemented by organizations themselves would be more sustainable. This tailored approach likely came with a higher cost in terms of resources such as staff and consultant time, as well as finances.

Time will reveal the extent to which partners are able to sustain changes in the long term. However, immediate findings do include promising sustainability-promoting factors, such as buy-in from staff across multiple levels of the organizations and the standardization of M&E tools and processes. In the future, it will be important to consider ways to maintain this tailored approach while balancing resource

The implementation of capacity-building support and the favorable results have informed conversations as the company has recently updated its social-impact strategy, including considering different ways it can support partners, beyond financial support for projects or programs.

utilization. For example, if there are some core M&E concepts that are important to all participating partners, regardless of their specific ECB goals, perhaps those can be shared with partners all at once, via webinar or other platforms, to streamline resources.

Given that Johnson & Johnson is a corporate funder, it is important to consider what was unique about the ECB initiative design, benefits, and lessons learned. While it is less common to see a corporate funder engaging in ECB work at all, neither the participatory nature nor the actual ECB methods used with partners were unique to a corporate funding approach. The genesis and design of the ECB initiative, however, may offer a perspective into a corporate funder's experience with ECB. As mentioned earlier, the work was tied to Healthy Future 2015, the corporatwide strategic initiative to develop citizenship and sustainability goals. Groups around the company were invited to set goals and targets, many of which, such as levels of carbon dioxide (CO₂) emissions, were readily quantifiable. This highly visible framework would serve as Johnson & Johnson's strategic "priority list" for its corporate citizenship work, both internally and externally, and groups all around the company would align programming efforts to meet these goals. While this was an opportunity to further integrate the Corporate

Contributions team's work with broader Johnson & Johnson efforts, which is highly valuable for such a group, this was not always easy — for example, it was challenging to set quantifiable targets for this work that made sense alongside targets for CO₂ emissions. In some important ways, the ECB initiative design was informed by this combination of the right timing, resource availability, an existing corporate value of partnership, and broad senior leadership buy-in. For example, to align with broader HF timing, the Corporate Contributions team decided to offer support in the form of smaller grants that were separate from the programmatic support given to each organization, rather than to fold support into existing grants. This gave grant managers, and the nonprofit partners, the space to focus specifically on M&E.

Some of the benefits and lessons learned can be viewed through a unique corporate funder lens. First, as a tangible example of how Johnson & Johnson's Corporate Contributions team valued M&E, the HF ECB initiative helped to raise the visibility of M&E of social-impact work with colleagues around the company. With initiatives like this one, M&E is viewed more as an area of strength, which is important as Johnson & Johnson continues to develop new ways to create social impact, often engaging more closely with the business. Additionally, this ECB work allowed Johnson & Johnson to test out the model of providing focused capacity-building support, which could be adapted to support other areas of capacity development (e.g., advocacy). The implementation of capacity-building support and the favorable results have informed conversations as the company has recently updated its social-impact strategy, including considering different ways it can support partners, beyond financial support for projects or programs. For example, in a recent social innovation challenge, Johnson & Johnson employees with specific expertise offered a capacity-building "boot camp" to finalists. In addition to these factors unique to the corporate funder, like all funders who adopt a participatory ECB approach, grant managers had the opportunity to develop a deeper understanding of their partners' M&E strengths, challenges, and needs, not

limited strictly to the specific grant supported by Johnson & Johnson. This is important as the company continues to strive for better awareness of partner needs and aspirations, so that together with partners it can identify the best opportunities to provide appropriate support.

Conclusion

Johnson & Johnson's Healthy Future evaluation capacity-building initiative demonstrated that, when brought into the design process of ECB support, grantees identify areas of challenge that are both common to other organizations as well as unique to their particular models. Given the opportunity to inform their capacity-building support, grantees can improve their ability to both do and use evaluation, and take concrete steps toward sustaining those improvements within their organizations.

Johnson & Johnson, as the funder, also benefited from the HF ECB initiative. In addition to fostering stronger partnerships with grantees and improving their ability to report health-related outcomes, the initiative raised the visibility and importance of monitoring and evaluating social impact within the company. Additionally, piloting a new way of working with grantees has fostered creativity within Johnson & Johnson's partnership model and is helping to inform its global philanthropic strategy.

The HF ECB initiative provides initial insight into the effects of using participatory design for funder-supported evaluation capacity building. More research should be done to determine if participatory designed approaches create more sustainable changes than do nonparticipatory designed approaches, and to understand how participatory approaches can be implemented at scale to build evaluation as well as other capacities of nonprofit organizations.

References

- BAKER, A., & BRUNER, B. (2012). *Integrating evaluative capacity into organizational practice: A guide for nonprofit and philanthropic organizations and their stakeholders*. Cambridge, MA: Bruner Foundation. Retrieved from http://www.evaluativethinking.org/docs/Integ_Eval_Capacity_Final.pdf
- COUSINS, J. B., GOH, S. C., ELLIOTT, C. J., & BOURGEOIS, I. (2014). Framing the capacity to do and use evaluation. In J. B. Cousins & I. Bourgeois (Eds.), *Organizational capacity to do and use evaluation*. *New Directions for Evaluation*, 141, 7–23.
- EDNA MCCONNELL CLARK FOUNDATION. (2017, April 1). *Sustaining change: PropelNext alumni results one year later*. Retrieved from <https://www.issuelab.org/resource/sustaining-change-propelnext-alumni-results-one-year-later.html>
- GRANTMAKERS FOR EFFECTIVE ORGANIZATIONS. (2014, November 19). *GEO field survey 2014: Major trends in grantmakers' attitudes and practices*. Retrieved from <https://www.geofunders.org/resources/geo-field-survey-2014-major-trends-in-grantmakers-attitudes-and-practices-756>
- HUNTER CONSULTING LLC (2012). Outcome Management Capacity Tool (OMET) [Online Assessment]. Retrieved from http://www.tauckfamilyfoundation.org/images/uploads/main/OMET_-_Description_1.pdf
- JOHNSON & JOHNSON. (2011, July 14). *Johnson & Johnson launches "Healthy Future 2015," its citizenship and sustainability goals*. Retrieved from <https://www.jnj.com/media-center/press-releases/johnson-johnson-launches-healthy-future-2015-its-citizenship-and-sustainability-goals>
- LABIN, S. N., DUFFY, J., MEYERS, D. C., WANDERSMAN, A., & LESESNE, C. (2012). A synthesis of the literature on evaluation capacity building. *American Journal of Evaluation*, 33(3), 307–338.
- PATTON, M. Q. (2008). *Utilization-focused evaluation* (4th ed.). Saint Paul, MN: Sage.
- TAYLOR-RITZLER T., SUAREZ-BALCAZAR Y., GARCIA-IRIARTE, E., HENRY, D. B., & BALCAZAR, F. E. (2013). Understanding and measuring evaluation capacity: A model and instrument validation study. *American Journal of Evaluation*, 34(2), 190–206.
- WADE, J., KALLEMEYN, L., ENSMINGER, D., BALTMAN, M., & REMPET, T. (2016). The Unified Outcomes Project: Evaluation capacity building, communities of practice, and evaluation coaching. *The Foundation Review*, 8(1), 24–39. <https://doi.org/10.9707/1944-5660.1278>

Lisa Frantzen, M.B.A., is a senior evaluation consultant at TCC Group. Correspondence concerning this article should be addressed to Lisa Frantzen, TCC Group, 333 Seventh Avenue, Ninth Floor, New York, NY, 10001 (email: lfrantzen@tccgrp.com).

Julie Solomon, Ph.D., is the principal of J. Solomon Consulting, LLC.

Laura Hollod, M.P.H., is senior manager for monitoring and evaluation at Johnson & Johnson Global Community Impact.