# Below the Waterline: Developing a Transformational Learning Collaborative for Foundation Program Officers

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## Introduction

Continuous learning and development are essential for success in today's ever-changing world. This may be particularly true for grantmakers. Foundation staff are often required to be thought leaders in the communities they serve, possessing the knowledge and expertise to help grantees achieve greater impact. Foundation staff may also have the time and resources to investigate emerging practices, test innovative solutions, gather data and information, and reflect on what they are learning. In many communities, foundation staff serve as conveners, bringing people together to network, share challenges and successes, and explore promising approaches. And, finally, foundations are uniquely positioned to generate new knowledge and disseminate it to peers and grantees. Given the complex and dynamic environments in which our communities are situated, creating a culture of continuous learning is imperative.

In this spirit, four health legacy foundations partnered to create the Health Legacy Collaborative Learning Circle. With partial funding from the Robert Wood Johnson Foundation (RWJF) and additional investment from each participating foundation, the collaborative created an opportunity to learn across similar organizations around the country.

The learning circle was comprised of the PATH Foundation, in Warrenton, Virginia; the Danville Regional Foundation, in Danville, Virginia; Interact for Health, in Cincinnati,

### Key Points

- Learning from fellow grantmakers is imperative in today's ever-changing world. In late 2016, four health legacy foundations partnered to launch the Health Legacy Collaborative Learning Circle, creating an opportunity to understand not just the participating foundations' visible investments and programs, but also the underlying behaviors, structures, and mindsets that ultimately explain why certain results were or were not achieved.

- This article describes the yearlong process of creating the collaborative, and presents a new learning framework — based on the iceberg metaphor — that can be used to create learning environments that test and expand assumptions about promising approaches to common population health challenges, explore organizational best practices related to programming and operations, and understand the roles and impacts peer health legacy foundations have in their communities.

- For the learning circle participants, the process provided a new and valuable problem-solving tool that allows their organizations to have a more profound impact on the communities they serve. This article concludes with recommendations for how other foundations can create similar transformational learning journeys with their fellow grantmakers.

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Ohio; and the Paso del Norte Health Foundation, in El Paso, Texas. These foundations were recruited based on their similar constitutions and sizes, desires to learn from each other, and orientations toward community action and multisector collaboration. Spending a year together in this learning process, which was facilitated by Healthy Places by Design, the learning circle designed a collaborative experience to test and expand assumptions about promising approaches to common population health challenges, explore organizational best practices related to programming and operations, and understand the roles and impacts peer health legacy foundations have in their communities.

Upon reflection, the partners realized that that this intentional process generated a deeper level of learning — one that surpassed the original goals and assumptions. In this article, the authors, who participated in the learning circle, will briefly explore practices in collaborative learning, describe the process of developing the learning circle, introduce their learning framework, and provide recommendations for foundations that are interested in creating productive and insightful learning opportunities.

## Review of the Literature

The learning circle process was built upon lessons learned from organizational learning, learning-network research, and the participants' own experiences and observations. Scholars in the past several decades have developed a variety of models for effective organizational learning, all aimed at the development and management of new knowledge in order to improve performance. According to Basten and Haamann (2018), organizational learning includes the strategic creation, capture, internalization, and management of knowledge with the goal of improving performance.

In 1990, Peter Senge published *The Fifth Discipline*. Radical at the time, the book described how a business could boost productivity and success by becoming a learning organization (1990). He outlined five disciplines: personal mastery, mental models, shared vision, team learning, and systems thinking. According to Senge, systems thinking integrates the disciplines into a coherent body of theory and practice. Systems thinking is the "framework for seeing interrelationships rather than things, for seeing patterns of change rather than a static snapshot" (p. 68). Since then, many theories of organizational learning have been developed, including single-loop and double-loop learning, organizational knowledge creation theory, and the five building blocks (Basten and Haamann, 2018).

While Senge's primary focus was on business success, the field of philanthropy indirectly benefited from his arguments. In 2005, researchers at the Chapin Hall Center for Children at the University of Chicago looked specifically at how foundations use knowledge, in addition to money, to create community change. They identified seven core components of foundations that learn, including an internal structure aligned to learn and leadership committed to learning (Hamilton et al., 2005).

Milway & Saxton (2011) then identified three major challenges of organizational learning: a lack of clear and measurable goals about using knowledge to improve performance, insufficient incentives for individuals or teams to participate, and uncertainty about the most effective processes for capturing and sharing learning. A few years later, in a *Nonprofit Quarterly* article, Milway (2013) described four strategies that a nonprofit can use to overcome these barriers: build a culture of ideas and learning, share good practices, collaborate and learn alongside others, and advance the field through shared knowledge.

The California Health Care Foundation had similar findings after an intensive effort to institutionalize organizational learning (Tran & Shah, 2013). The foundation developed a grantmaking toolbox that documented innovative approaches to grantmaking with the potential to increase impact. It also implemented new reporting and closeout procedures, hosted learning sessions, and developed a Grantmaking 101 series. Through this process, the foundation found that (1) effective learning is a collaborative, not individual process; (2) a willingness to experiment is an important aspect of creating a learning culture; and (3) both experienced and new staff members have significant roles in organizational learning efforts.

Recent work has started to more deeply explore learning with external partners. Ehrlichman and Sawyer (2018) define learning networks as "a form of collaboration that enables groups of stakeholders to cultivate connections across communities and organizations, and to strengthen a whole system simply by focusing on the potential for participants to share information and learn from one another" (para. 1). They explain that effective learning networks share four important factors: they have dedicated network coordination, actively gather information from the field, help disseminate information out to the field, and enable information to flow across the field.

A recent release from Grantmakers for Effective Organizations (2019), *Learning in Philanthropy: A Guidebook,* compiled much of this research into a toolkit for foundations that want to create an internal culture of learning as well as create collaborative learning opportunities with nonprofits, other grantmakers, and communities. Learning networks learn in action, learn together, and learn on an ongoing basis and over time.

## Method and Process

Through the RWJF, the learning circle partners had the challenge of designing a learning process that utilized best practices, mostly from research focused on single-organization learning, and apply it to a learning cohort comprised of four foundations in distinct parts of the country. Each foundation assigned a lead staff member to

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work as part of the cohort, designing the learning circle process together with support from Healthy Places by Design. The authors of this article served as the lead staff members for the foundations.

An early turning point was the decision to seek and retain a consulting partner to act as a recorder, thought partner, facilitator, and co-author of site-visit case studies and other dissemination products. The learning partners knew early on that the process would be time-consuming and that outside assistance was necessary to ease the burden on each organization. After reviewing multiple proposals, the partners chose Healthy Places by Design (previously known as Active Living by Design), a nonprofit organization highly experienced in population health, philanthropy, and community engagement.

The core element of the collaborative learning process was a series of site visits to each of the partner's communities and monthly conference calls in between. The site visits featured past and current grantee and foundation work that was relevant to the challenges that communities faced. In meeting with community partners learning circle members discussed a range of interventions, from policy advocacy to services for individuals. In a more private setting with

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learning circle members only, conversations about internal approaches and effective practices were held.

Programmatic interests targeted for in-depth learning included healthy eating and active living, school-based health, access to care, the use of community health workers, economic development, community safety, and mental health. In addition, site visits and conference calls gave participants an opportunity to explore each partner foundation's practices related to equity, evaluation, and use of backbone organizations.

The learning circle was intentionally designed to be structured enough to proactively identify and address specific topics of interest, yet flexible enough to absorb new ideas that emerged during the collaboration. As core representatives reported that relationships and trust grew, other complex and sensitive topics were added to the list of learning interests, such as community engagement and capacity building, program and portfolio exit strategies, grantee and board relations, program staff roles, succession planning, and change management.

Each visit spanned two days and followed a common format, beginning with an overview of the host foundation's history, structure, mission, programs, and personnel; an introduction to the community to orient visiting partners to its demographics, culture, challenges, history, and assets; and community visits to meet with

partners, programs, grantees, and signature initiatives supported by the host foundation and related to partners' shared interests. In between, participants had scheduled and unscheduled time for reflection, conversation, and deepening relationships as a cohort. Scheduled reflection occurred near the end of each site visit and was led by the host core representative for about two hours. Unscheduled reflection, as the term indicates, occurred in an emergent manner, usually in the evening or while transiting among scheduled events. Each visit concluded with a debrief session among the partners in order to identify and explore emergent lessons and themes and to discuss agenda ideas for the next site visit. Each of the participants left with ideas that had already been tested by another foundation and further explored through inquiry, analysis, and discussion among the partners.

Each partner organization designated one or two core representatives to participate in all of the site visits and conference calls, providing continued support throughout the process. These representatives were selected by their respective foundation based upon criteria that included program officer interest, availably, role in health programs, and ability to effect change. Up to three additional representatives from each foundation participated in the site visits, ensuring that each core member was joined by colleagues to share in the learning. The additional representatives included a cross-section of foundation staff, including communication directors and evaluation, operations, and program officers. This helped maintain momentum for reflection and action when representatives returned home and shared their experiences with colleagues, foundation leadership, board members, and community partners.

Before any site visits, core representatives attempted to prioritize and identify discrete and potentially quantifiable learning outcomes. However, the emergent and unexpected learning from the first site resulted in a more goal-free approach to experiencing a foundation's work, thus being open to unanticipated learnings and construction of knowledge. As visitors, they had the unusual experience of "seeing inside" the

work of a peer institution and gaining insights into challenges and successes. At the same time, the process of hosting was equally valuable and allowed each foundation's staff to reflect on their own initiatives and see them through the eyes of their peers.

By the end of the year, the partners had experienced a much deeper level of learning compared to traditional professional development experiences. The unique combination of activities created an environment that allowed learning circle core members to swim below the surface and uncover the deeper reasoning behind the programs, practices, and procedures of each foundation.

## The Collaborative Learning Iceberg

Throughout history, the iceberg metaphor has been used to describe the complexities that lie under the surface of any given group, challenge, or pursuit. Part of an iceberg can be viewed above water, whereas much is below the surface. Early in the 20th century, Sigmund Freud used the metaphor to describe what he defined as the three levels of the mind: the conscious, preconscious, and unconscious (Freud, Stratchey, Freud, Stratchey, & Tyson, 1961). Ernest Hemingway (1932) developed an iceberg theory for a style of writing where the written words are only a small percentage of the underlying themes. Edward Hall (1976) formulated an iceberg analogy of culture, proposing that while behaviors exist above the surface, there are hidden beliefs, values, and thought patterns underneath those behaviors.

The iceberg metaphor can also be applied to learning — specifically, collaborative learning. Simply put, a learning circle can develop questions about and see grantee programs and initiatives in action, but the real transformative learning comes from going much deeper. Our framework describes four distinct levels of learning: visible programs, behavior patterns, structures, and mindsets; and then explains how the Health Legacy Collaborative Learning Circle process allowed participants to move below the waterline.

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### Visible Programs

At the top of the iceberg, above water, lie the components of the work that we can see. (See Figure 1.) This includes programs and strategies, requests for proposals, contracts, and external marketing and communications. It is common to set learning questions in this space. Often, when we return from a training, we are asked, "What did you see that we could bring here?" Traditional learning opportunities, like conferences, summarize programs and other visible components of grantmaking. Though this level of learning has many benefits, it does not explain the less visible behaviors, structures, and mindsets that lie beneath the surface.

The participants launched the learning circle by focusing above the surface, largely discussing population health strategies. They then planned site visits that focused on the history of their organizations, community demographics, and introductions to the programs, initiatives, and grantees supported by their foundations. They did not anticipate how the learning circle process would allow them to go beyond the questions of who and what, to understand the how and why.

### Behavior Patterns

Just below the surface, the partners began to discuss the behavioral patterns, or the recurrent way of acting within each foundation, that led

**FIGURE 1** The Collaborative Learning Iceberg



**VISIBLE PROGRAMS**
OR POLICY EFFORTS FUNDED
BY THE FOUNDATION

**BEHAVIOR PATTERNS**
AMONG FOUNDATION STAFF AND BOARD

**STRUCTURES**
OF THE FOUNDATION, INCLUDING PROPOSAL
PROCESSES, RULES, AND CULTURE

**MINDSETS**
OF STAFF AND BOARD, INCLUDING
HOW THEY THINK ABOUT
PROBLEMS AND SOLUTIONS

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to the development of specific grants or programs. They found that as trust built, they felt more comfortable exploring topics and asking questions that might have felt inappropriate in another learning environment.

It was established early on that the Health Legacy Collaborative Learning Circle would be a safe space for each participant to share both successes and challenges within their foundations and philanthropy as a whole. Trust increased

throughout the process as partners continued to share more private information about the inner workings of their organizations, seeking guidance and innovative ideas from the other participants. Extremely comprehensive notes were captured during each discussion to help with reflection and analysis of the process.

The partners discussed the potential consequences of limiting funding to small organizations, not requiring community input, avoiding risky grantmaking, funding only large transformational projects, or refusing to fund overhead expenses. They asked and explored what behavior patterns fuel these decisions. They were able to observe how staff speak to each other, with respect to both tone and approach. They asked questions about how and when feedback is provided to grantees. The partners discussed how much time program officers spend in the community initiating change versus sitting behind their desk. They asked, where do these behaviors come from?

### Structures

The participants began to see that behaviors among staff are influenced by the underlying structures within each foundation, which may include hierarchy, roles and responsibilities, rules, dress codes, titles, policies, and how information flows between levels of the organization and to the community. These structures affect organizational culture, including office environments and even board dynamics. Structures affect the way staff interacts with grantees or how board members interact with staff. Structures may come in the form of formal policies, informal practices and processes, and even paperwork, such as forms.

As the learning circle progressed, the partners began to dig deeper into their own foundation's internal structures. They shared internal documents, policies and practices, grant requirements, evaluation forms and results, and anecdotal information about how their offices function and how they structure relationships with partners, staff, board members, and other grantmakers.

The partners began asking questions about how structures affect grantmaking and improve or disrupt community impact. Does a foundation have strict submission schedules or require an online application? Are there specific formats or templates required in a proposal, such as a logic model? Is there flexibility in evaluation methods, or rigid reporting requirements? Are there mechanisms available to support capacity building and community engagement? To answer these questions, they had to go deeper still. Structures are put in place due to mindsets.

### Mindsets

At the deepest level of the iceberg is mindset, or the set of assumptions, thoughts, and beliefs that affect how we view the world. In this case, mindset is how we fundamentally think about philanthropy and, therefore, how we define solutions. Do we trust and rely on empirical science and evidence, value the wisdom of community members and listen closely to them, see return on investment and metrics as critical, or aim to simply make stakeholders happy?

The learning circle partners began to see the philanthropic mindset as a set of continuums, with each of organization at different points on each. A mindset of equity and inclusion is one example. Does a foundation truly believe in the value of providing equitable opportunities for all community members? Another example is an evidence-based or science mindset. Does a foundation believe in making investments only in projects that apply the best science, and therefore avoid more risky or innovative grantmaking?

The partners found that when they could answer questions about mindset, they began to truly understand how decisions were made, behaviors developed, and, ultimately, how and why a program, grant, or initiative achieved certain results. A well-established mindset creates a powerful incentive within a group to continue the status quo. In contrast, deliberate efforts to shift the mindset within an organization could be the key to changing the structures in place and the behaviors of staff, ultimately leading to more successful investments.

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## Diving Below the Waterline: Recommendations

In order to successfully function at all levels of the iceberg, the learning circle partners developed recommendations, aligned with research and best practices, as well as lessons learned from the yearlong process, to help other foundations create engaging, productive, and transformational learning opportunities.

1. *Recruit partner organizations that possess a range of expertise and have enough similarities so that lessons learned are relevant and translatable.* Learning circle partners were recruited based on comparable asset size, desire to learn from and with each other, and orientation toward community action and multisector collaboration. In addition to these similarities, the foundations also had important and beneficial differences. Partner organizations represented various ages and stages of institutional evolution, ranging from three to more than 20 years. In addition, each partner knew at least one of the other members, but no one knew everyone. Finally, the participants had similar roles within their organizations, but

varying levels of experience. The combination of known and unknown was a key to success in building trust and generating new perspectives.

2. *Recruit partner organizations that are dedicated, have leadership support, and commit specific individuals to the entire process.* At the beginning, leadership from each foundation committed to participation in the entire process. Though a verbal commitment was accepted, the partners recommend developing a memorandum of agreement, signed by foundation CEOs and learning circle participants, that clearly outlines expectations, including the commitment of time and resources, engagement of other staff, and how information and learning will be disseminated within and outside of the participating organizations. Early on, each partner organization also designated core representatives to participate in all site visits and conference calls. Having the same individuals involved throughout the process was key to developing meaningful relationships. Additional representatives helped expand the impact, but the core representatives were instrumental in and benefited from the deeper level of learning.

3. *Design a planning period that purposefully builds relationships and trust, creates a shared vision and outcome, and identifies a set of flexible learning questions that can be revisited and adjusted as the process evolves.* The learning circle team began working together nearly six months before the first site visit. This planning period gave them time and space to develop a proposal, choose focus areas, interview and select a consultant, develop learning questions, and plan the format of the site visits. They had time to develop relationships, establish a democratic decision-making process, and assure that the learning circle would meet individual and organizational goals.

4. *Consider hiring an external consultant and designating one of the foundations as the backbone organization.* Our consultant partner,

Healthy Places by Design, was able to stand inside the learning circle while maintaining an objective perspective, keeping the conversation and process moving forward. She helped us develop learning questions, scheduled and facilitated calls, assisted with site-visit logistics, synthesized lessons, facilitated reflection sessions, and served as co-author. In addition to hiring Healthy Places by Design, the PATH Foundation served as backbone organization for the learning circle. It was the fiscal agent for the funding from RWJF, helped guide the vision and focus, served as the main contact for our consultant, and assisted with dissemination products. Designating a lead organization in advance helped the partners better understand roles and expectations, and provided critical focus, direction, and administrative support throughout the process. Having both a consultant and backbone organization allowed the partners to be fully immersed in the learning environment without logistical distractions.

5. *Carefully design site visits.* Each site visit built upon the one before. The partners learned from experience and made changes as they moved forward. After completing all four site visits, they found that a deliberate mix of activities and experiences facilitated the deepest levels of learning. Include the following in site-visit agendas:

   a. time with foundation leadership and staff to discuss history, community context, and practices;

   b. meetings with grantees and community partners to see the foundation's investments in action and learn about successes and challenges;

   c. informal networking and social opportunities to continue building relationships;

   d. documentation of what you saw, heard, and felt, as well as sharing of insights and follow-up questions; and

   e. time for reflection and debriefing at the end of the visit.

6. *Allocate ample time for reflection and discussion throughout the process.* In the early stages of the learning circle, the partners focused on the originally developed list of learning questions. As they built trust, they began to veer away from those questions. The partners realized that it was important to pause, reflect, and provide the time and space for lessons learned to emerge. The process was iterative, and they had to adapt and be flexible in order to move below the waterline, reaching a depth of conversation that we all found most meaningful and beneficial.

7. *Consider how you will disseminate lessons learned with your organization, across the community, and with other interested stakeholders.* From the beginning, learning circle partners agreed that a final report should be written and disseminated to colleagues, community partners, and key stakeholders. However, they did not plan how to effectively share learnings with other staff members. Upon completion of the process, they realized that there were two groups who benefitted from the learning circle. The first was the tightly networked group of individuals who participated in the calls and site visits — those who were, together, getting to the bottom of the iceberg. The second consisted of staff members who may have attended one or two site visits, and those who heard about the learning circle only peripherally. To better support organizational learning, we recommend deliberately sharing lessons learned throughout the process with all members of your organization. For example, have scheduled times at each program staff meeting, grants committee meeting, or another committee to explore learnings.

## Conclusion

The Health Legacy Collaborative Learning Circle allowed partners to explore at all levels of the iceberg, whereas other forms of learning

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may only be helpful above the water line. The process allowed members to more deeply understand the context behind decisions. The learning circle also reciprocally influenced culture, helping partners develop deeper social networks and form a deeper understanding of and appreciation for the need to dive below the waterline. The process also gave partners a model for how to successfully create learning circles within their own communities. Partners are exploring how to replicate the experience with local nonprofit partners and community members to encourage learning, build trust, and develop mutual understanding of one another's mindsets.

The sustainable impact of the learning circle is the individual relationships formed among the participants, and the support and partnership that brings to the future work of each organization. Since the cycle has ended, the group has continued to convene around topics of interest and need, and the support has strengthened each person's network. There are now thought partners across the country that can provide insights and possible solutions for the initiatives each is working on.

These relationships have resulted in internal changes and new initiatives for the participating foundations. For example, during the site visit to Interact for Health, the learning circle members visited a school-based health clinic, one of 32 in the region. Interact for Health has been investing in school-based health clinics for nearly 20 years. Inspired by this work, Danville Regional Foundation staff took a group of community partners to Cincinnati, Ohio, to visit both urban and rural school-based health clinics supported by Interact for Health, as well as explore the Community Learning Center model through Cincinnati Public Schools. There are now school-based health clinics under development in each school district within the Danville Regional Foundation's service area. The learning circle process allowed members to not only learn about the school-based health clinic model and the outcomes achieved, but understand specifically how program staff worked with partners to create an environment that allowed and incentivized school administration staff, health providers, parents, the community, and other funders to come together, align resources, and bring a more holistic version of the project to fruition.

During the learning circle process, Interact for Health was in the midst of a strategic planning process. After learning about the Paso del Norte Health Foundation's evaluation methods and design, the Interact for Health was able to incorporate new evaluation measures within its updated focus areas. It also reframed how it captures information about equity from grantees, including what it wanted to learn and measure, based on the Health Equity report shared by the Danville Regional Foundation, a map-based report exploring health, social, and economic indicators by census tract or zip code.

These are just a few of the many examples that illustrate how learning circles can reflect upon the iceberg and use the metaphor as a way to explore philanthropy. Participants can observe the behaviors of other members of the circle and ask about their mindset. Since going deeply into mindset requires trust and time, a learning circle can support an exploration of the reasons why certain results were or were not achieved. For

the partners, the Health Legacy Collaborative Learning Circle provided a new and valuable problem-solving tool that continues to allow for deeper examination of our own mindsets, structures, and behaviors in order to have a more profound impact on the communities we serve.

## References

Basten, D., & Haamann, T. (2018, July-September). Approaches for organizational learning: A literature review. *SAGE Open,* 1–20. Retrieved from https://doi.org/10.1177/2158244018794224

Ehrlichman, D., & Sawyer, D. (2018, July 27). Learn before you leap: The catalytic power of a learning network. *Stanford Social Innovation Review.* Available online at https://ssir.org/articles/entry/learn_before_you_leap_the_catalytic_power_of_a_learning_network

Freud, S., Strachey, J., Freud, A., Strachey, A., & Tyson, A. (1961). *The standard edition of the complete psychological works of Sigmund Freud. Vol. 19, 1923–1925: The ego and id and other works.* London, UK: Hogarth Press.

Grantmakers for Effective Philanthropy. (2019). *Learning in philanthropy: A guidebook.* Retrieved from https://www.geofunders.org/resources/learning-in-philanthropy-a-guidebook-1265

Hall, E. T. (1976). *Beyond culture.* Garden City, NY: Anchor Press.

Hamilton, R., Brown, P., Chaskin, R., Fiester, L., Richman, H., Sojourner, A., & Weber, J. (2005). *Learning for community change: Core components of foundations that learn.* Chicago, IL: University of Chicago Chapin Hall Center for Children.

Hemingway, E. (1932). *Death in the afternoon.* New York, NY: Scribner.

Milway, K. S., & Saxton, M. (2011, Summer). The challenge of organizational learning. *Stanford Social Innovation Review, 9*(3), 44–49.

Milway, K. (2013, February). Making organizational learning stick: How to set your knowledge goals and blend technology and people processes to reach them. *Nonprofit Quarterly.* Retrieved from https://nonprofitquarterly.org/2013/02/22/making-organizational-learning-stick-how-to-set-your-knowledge-goals-and-blend-technology-and-people-processes-to-reach-them/

Senge, P. M. (1990). *The fifth discipline: The art & practice of the learning organization.* New York, NY: Doubleday.

Tran, R., & Shah, S. (2013). Designing for learning: One foundation's efforts to institutionalize organizational learning. *The Foundation Review, 5*(3), 27–34. https://doi.org/10.9707/1944-5660.1168

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Tools