

Evaluating the Funder's Contribution in Place-Based Initiatives

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Overview

- Intro to Place-Based Philanthropy
- Evaluating Place-Based Initiatives
- Contribution Analysis
- Taxonomy of Foundation Roles
- Example of Evaluating the Foundation's Contribution
 - The Clinton Foundation's Community Health Transformation Initiative

Impactful Philanthropy

- What is the business of foundations?
 - Making grants, or
 - Generating/stimulating/catalyzing impact
- *We have for many years taken a very broad view and tried to do a little bit everywhere, with success, but we still don't see any significant improvement in the health status of the population we're interested in.*
 - Karen McNeil-Miller, President, Kate B. Reynolds Charitable Trust, February 2011
- To achieve impact, a foundation needs to concentrate its investments in a limited number of “places”
 - Issue areas
 - Programmatic approaches
 - Target populations
 - Geographic communities

Achieving Impact in Specific Places: *Place-based philanthropy*

- Shift in orientation
 - from supporting *individual* organizations, programs, and outcomes
 - to fostering **community-wide changes** in services, systems, capacity, culture, etc. that lead to community-level improvements in a variety of aspects of health and quality of life
- Large, long-term investments in particular communities
 - Communities where the funder has a direct connection or interest
 - Open applications (e.g., RFP)
- Funder supports a complement of mutually reinforcing strategies and programs.

Approaches to Place-Based Philanthropy

- Comprehensive Community Initiatives (Brown & Garg, 1999)
 - Centralized coordinating bodies (with representation from multiple orgs)
 - Collective planning and strategy development according to a comprehensive frame.
 - The process is often prescribed by funder.
 - Foundation provides resources to plan and implement strategy.
- Cultivation Approach (Easterling & Gesell, 2019)
 - Decentralized – foundation identifies and supports promising efforts throughout the community (including non-obvious actors)
 - In addition to providing funding, the foundation adds value through activation, capacity-building, brokering connections, asking critical questions, and pushing local actors to be more strategic.
 - Requires deep, consistent engagement by foundation staff

Evaluating Place-Based Initiatives

- Large investment warrants evaluation
- Formative and Summative evaluation are both important
 - Formative
 - What is and isn't happening according to design?
 - What complexities did we fail to take into account?
 - What adjustments are needed – by the foundation, local actors, consultants, etc.?
 - Summative
 - What changed within the community?
 - ***What did the foundation make happen – or help make happen?***
 - What is the Return on Investment (ROI)?
 - What contextual factors influence ROI? (Which communities are best suited for this approach?)

Challenges to Summative Evaluation

- Place-based initiatives typically focus on big, entrenched issues →
 - Many years before tangible outcomes appear.
- Complex, crowded environment with many actors, concurrent initiatives, and exogenous factors →
 - Difficult to isolate the foundation's effect, let alone assess the effect quantitatively.
- Assessing ROI is challenging, especially in the short run.

Contribution Analysis

- Foundations are increasingly accepting that they need to be content with assessing **contribution** rather than establishing **attribution**.
- The methodology of **Contribution Analysis** (Mayne, 1999, 2001, 2008, 2009, 2011) offers the potential of assessing the funder's contribution.
- Answers the question, "Is there evidence that the funder's resources and actions contributed to a set of observed outcomes?"
- Plausibility of the intervention's contribution is assessed using systematic inquiry.
 - Is the program's Theory of Change plausible?
 - Are the elements and assumptions within the ToC confirmed by evidence?
 - Was the program implemented according to design?
 - Are there factors outside the program that could account for the observed outcomes?
 - Have the most relevant alternative explanations been disproved?
- This form of CA is applicable in cases where measurable outcomes have actually been observed.

Contribution Analysis for Place-Based Initiatives

- **Place-based initiatives have extremely long time horizons for impact.**
 - How to evaluate the foundation's contribution in the shorter run -- when community stakeholders are in the process of formulating and implementing their projects and programs?
- The Wake Forest Strategic Philanthropy Research Group developed a form of **Contribution Analysis that assesses how a place-based foundation is contributing when outcomes are still taking shape.**
 - Assesses the foundation's contributions to *evolving lines of work* (i.e., "*projects*").
 - Focuses just as much on the question, "*How has the foundation contributed?*" as the question, "*Has the foundation contributed?*"

Taxonomy of Foundation Roles in Place-Based Initiatives

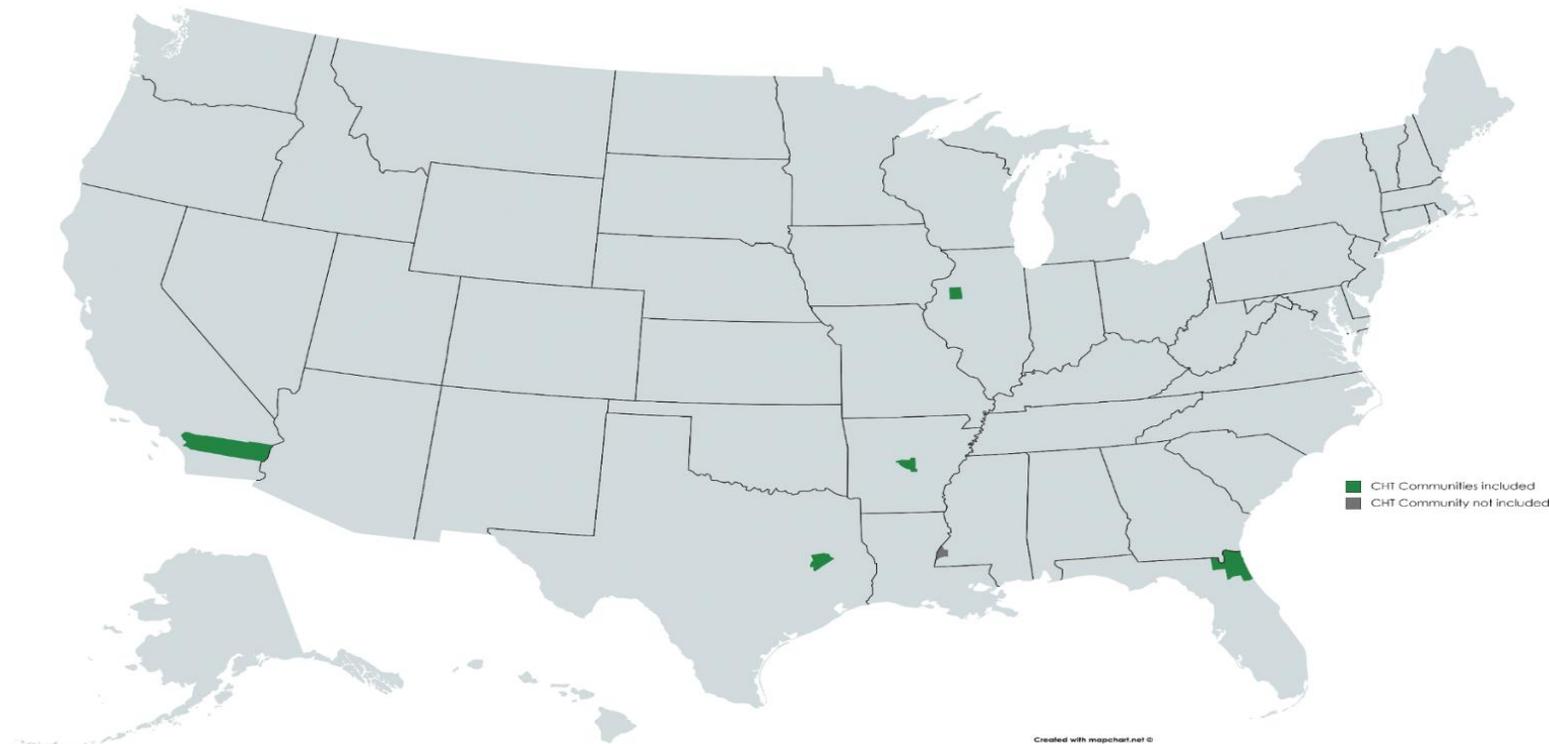
- **Driver:** foundation takes the lead in choosing, designing and developing local projects. Also provides resources that are essential to implement those projects.
- **Facilitator:** foundation creates the conditions to allow local stakeholders to plan, develop and implement projects in line with their interests.
- **Activator:** foundation sparks action that moves forward a new or dormant line of work.
- **Enhancer:** foundation plays a key role in expanding the scale or reach of community-developed projects.
- **Supporter:** foundation brings resources that assist local stakeholders in developing and/or implementing local projects, but doesn't materially influence the design of the project.

Uses of the Taxonomy

1. Clarify the foundation's place-based strategy and theory of change.
2. Clarify the foundation's more general Theory of Philanthropy.
3. Evaluate the role(s) that the foundation actually played in its place-based initiative.

Evaluation Example: Clinton Foundation's Community Health Transformation (CHT) Initiative

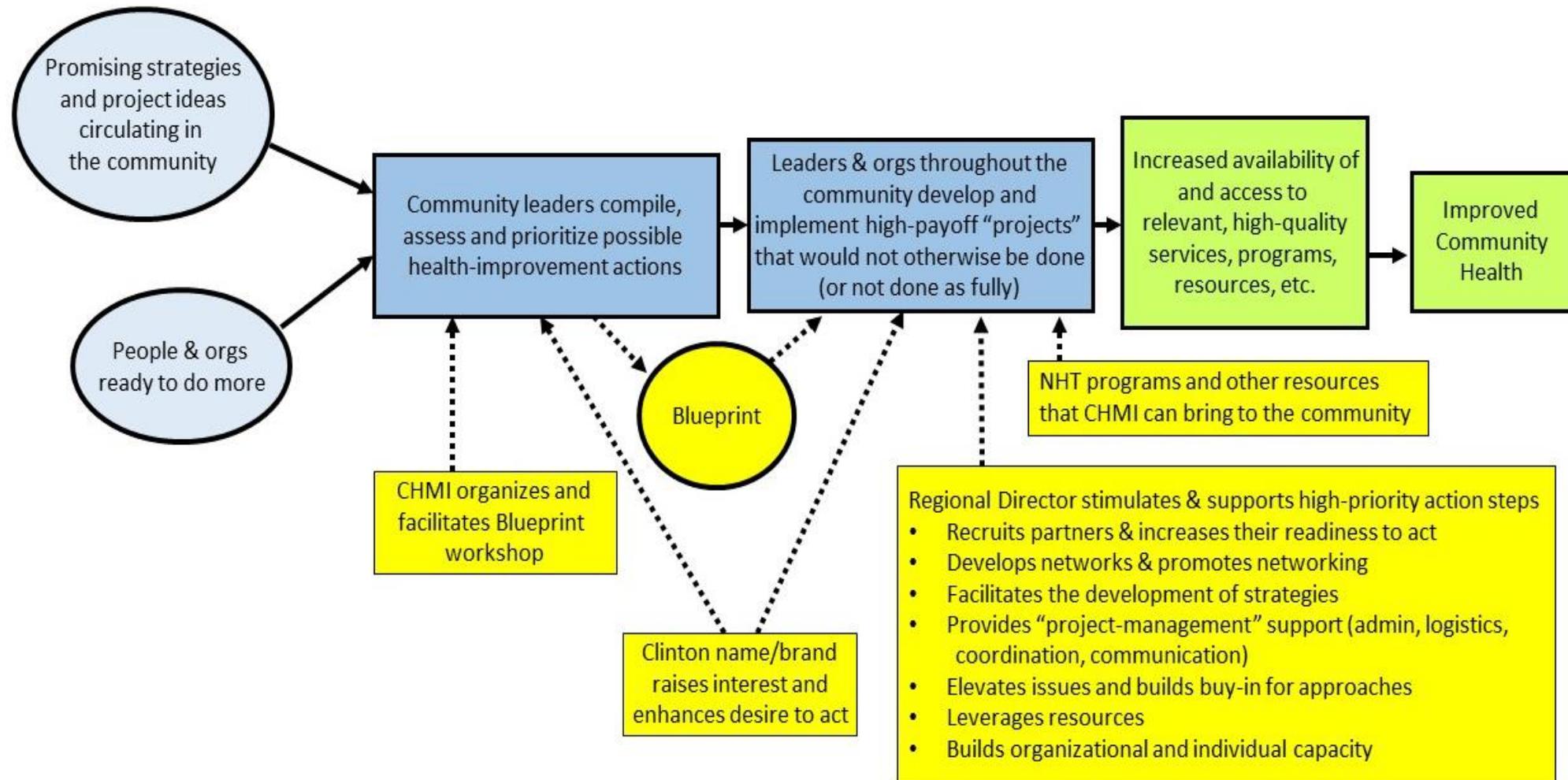
- A program of Clinton Health Matters Initiative (CHMI), the Foundation's arm to improve population health in U.S. communities.
- Cultivation approach to place-based philanthropy.
- Operated in 6 communities between 2012-2019



Elements of the CHT Model

- A full-time Regional Director
 - Recruited from the community.
 - Employed by the Clinton Foundation for three to five years (depending on the terms of the sponsorship).
 - Responsible for cultivating and advancing lines of work led by community stakeholders.
 - Roles: project manager, research analyst, advisor, coach, broker of relationships, convener, meeting facilitator, and advocate.
- Projects were selected from the CHMI Blueprint
 - Community-specific agenda with up to 45 Bold Action Steps
 - Developed from a one-day planning meeting of community leaders.
 - Planning process organized around the County Health Rankings & Roadmaps model
- Clinton Foundation's name reputation and influence
 - Drew community stakeholders into the CHT process, and built interest in specific projects
 - President Clinton made personal appearances in 3 communities (CHMI Summits).
- Leveraging the Clinton Foundation's other initiatives and partnerships to bring in new resources

CHT Program Model



Evaluating the Outcomes of the CHT Process

- *Initial thinking*: Track indicators of population health (e.g., CHRR).
- *Revised thinking*: Focus on the work that CHMI helped move forward.
 - How many projects?
 - What is the significance of these projects?
 - *How much* did CHMI move these projects forward?
 - *How* did CHMI move these projects forward?

Methods

- Interview each Regional Director to identify “projects” (or lines of work) in their community which they believed had been positively influenced by the CHT process.
- Interview Local Stakeholders directly involved in these projects to gain a deeper understanding of the projects and to obtain an independent assessment of CHMI’s role.
- Review project-specific materials
- Use these data to:
 - Characterize those projects:
 - Stage of development
 - Reach & Dose (*for projects that are delivering benefits*)
 - Specific programs/services vs. Larger forms of Systems Change
 - Verify that the project took shape or changed shape because of CHMI
 - Determine the Role that CHMI played in moving the project forward

Top-Level Results

- This method was carried out in 5 of the 6 communities
 - Turnover in Regional Director in 6th community
- Each Regional Director identified 4 or 5 projects that they believed CHMI had moved forward (total of 24 across 5 sites)
 - Local stakeholders verified that CHMI had played an instrumental role in each project
- Sample projects
 - Enhancements to food distribution systems
 - Physical activity campaigns
 - Expanded substance-misuse services
 - Integrated system to screen for HIV and refer to services
 - Telehealth system to triage 911 calls
 - Volunteer connections
 - Mapping of food deserts
 - Engineering analysis of dangerous intersections
 - Collaboration among foundations to coordinate strategies

Project Characteristics (n=24)

- Stage of Development
 - 16 projects had reached the point of delivering benefits to local residents
 - 8 involved planning, analysis, mapping, etc.
- Reach and Dose (among 16 projects delivering benefits)
 - 5 were rated as both high reach & high dose
 - 5 more were at least moderate reach & moderate dose
- Systems Change, Collaboration and Networking
 - 6 involved systems change (multiple agencies changed approach, developed new structures, changed policy, etc.)
 - Food systems
 - Substance misuse treatment
 - Behavioral health system of care
 - HIV screening, testing, follow-up and referral
 - 4 additional projects created formal networks or coalitions among agencies

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Roles Played by the Clinton Foundation in CHT

- **Driver:** CF played a primary role in developing the project and provided resources that were essential to implement the project (**3 projects**)
- **Activator/Facilitator:** CF sparked action that advanced a new or dormant project, or facilitated the planning process that generated the project (**8 projects**)
 - **Activator/Facilitator with Ongoing Contribution** (**4 projects**)
- **Enhancer:** CF played a key role in expanding the scale or reach of the project (**10 projects**)
- **Supporter:** CF contributed indirectly to the development of the project (**3 projects**)

More Specific Forms of Contribution that Moved Projects Forward *(tailored to the CHT Program Model)*

- **Increasing readiness for action:** People and organizations are activated to do new work or additional work.
- **Network development:** Networks of people and/or organizations with shared interests become stronger and better able to develop and implement projects, services, programs, etc.
- **Strategy development:** Organizations, workgroups, coalitions and/or networks develop clearer, more informed and more impactful strategies to achieve their goals.
- **Project management:** Administrative, logistical, and analytic support that allows organizations, workgroups, coalitions, and/or networks to move forward with the development and implementation of key projects.
- **Elevating issues and approaches:** Increased visibility, awareness and buy-in for specific approaches across the community as a whole, as well as among key constituents such as policy makers, funders, and community institutions.
- **Leveraging resources:** Projects gain increased access to financial and other resources.
- **Building organizational and individual capacity:** Organizations become more effective in developing and implementing their programs as well as strong in their operations, staffing, finances, governance, etc. Leaders within those organizations also develop their individual capacity.

Each project was coded as to whether or not CHMI contributed these forms of support. For the vast majority of projects, CHMI contributed in at least 3 distinct ways.

Charting CHMI's Contribution as Projects Developed

	STAGE								
	Idea	Initiation		Developing	Operating	Sustained			
Get Tested									
<i>CHMI: Enhancer</i>									
KEY									
	developed / informed idea	provided crucial coordination	facilitated action items	helped project continue	maintained a presence				

Charting CHMI's Contribution as Projects Developed

Site	Project/area	Idea	Initiation	Developing	Operating	Sustained
CV	Get Tested					
	Better Together	CHMI: Enhancer				
	UW 9 Weekly Walks and Wellness Challenge	CHMI: Activator				
	Senior Collaborative	CHMI: Enhancer				
	Desert Volunteer Connect	CHMI: Driver				
		CHMI: Supporter				
AR	AR Promise					
	Act 943	CHMI: Enhancer				
	ConnectHome	CHMI: Enhancer-Supporter				
	Fresh2You	CHMI: Enhancer				
	AR Impact Philanthropy	CHMI: Activator				
		CHMI: Activator-Enhancer				TBD
TX	PRAPARE	CHMI: Supporter-Enhancer				
	Food insecurity/mapping	CHMI: Enhancer-Activator				
	Play deserts	CHMI: Activator				
	ETHAN	CHMI: Supporter-Enhancer				
	Near Northside Intersection Revitalization	CHMI: Supporter-Enhancer				
FL	NEFL Food, Hunger and Nutrition Network	CHMI: Activator-Enhancer				
	Substance use	CHMI: Enhancer				
	Bike-Pedestrian Safety	CHMI: Driver				
	ABC Market	CHMI: Enhancer				
	Mission 1 Million	CHMI: Enhancer-Supporter				
	NARCAN donation	CHMI: Driver				TBD
IL	Food insecurity					TBD
	Access to care					
	Substance use					
	Walking School Bus					