Missouri Foundation for Health

Using facilitation skills and developmental evaluation tools to build a more collaborative relationship with partners in a collective impact initiative

The Big Idea

When the Missouri Foundation for Health decided to partner with grantees to play a backbone support role in a new collective impact initiative, foundation staff deployed facilitation skills and developmental evaluation tools to help shift the nature of the relationship between grantmaker and grantees.

The Story

The Missouri Foundation for Health launched a collective impact initiative in two regions in Missouri, with a goal to reduce infant mortality by 15 percent over 10 years. Two years into the initiative, the foundation formed partnerships with three nonprofits that serve as backbone organizations in the two regions. Together, these organizations formed community-based steering committees and engaged additional partners.

As MFH worked with the backbone partners to explore and plan the first year of the partnership, foundation staff quickly realized they needed to change the relationship with their grantees in order to disrupt the typical grantmaker-grantee power dynamic. This required both grantmaker and grantees to think and act differently.
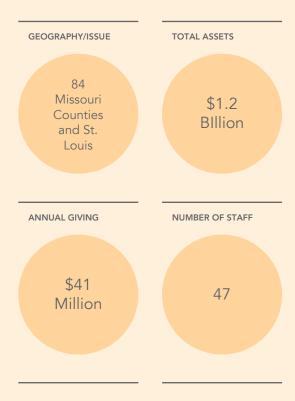
"When I first became a program officer, it seemed my role was to read applications, recognize the best organizations based on their proposal and visit organizations to monitor their progress, to the extent possible," said Kathleen Holmes, program director at the foundation. "In this initiative, however, we're much more intimately involved with the backbone organizations; we are relating to these organizations much more as partners as opposed to grantees, and that requires a different set of skills."

Missouri Foundation for Health

Missouri Foundation for Health is a resource for the region, working with communities and nonprofits to generate and accelerate positive changes in health.

TYPE OF FUNDER

Private Foundation

GEOGRAPHY/ISSUE	TOTAL ASSETS
84 Missouri Counties and St. Louis	$1.2 BIllion

ANNUAL GIVING	NUMBER OF STAFF
$41 Million	47

WEBSITE: WWW.MFFH.ORG

Holmes said some of these skills are strong communication, the ability to facilitate conversations that surface differing points of view, and a comfort with complexity and uncertainty.

Kendra Copanas, executive director of the Maternal Child and Family Health Coalition, noted a shift in the relationship with the foundation now that the coalition is a backbone organization. "Now we are able to talk about power dynamics and how they show up at different times. 'Power dynamics' were words we were fearful to use two years ago and now we feel comfortable talking about them," Copanas said.

To lay the groundwork for a trusting relationship Copanas and Holmes developed partnership principles "to undergird our new relationship and what we could expect from one another, how we would work together, and how we would address issues like transparency," Copanas said. In addition, monthly in-person meetings with co-created agendas helped cultivate new relationships between the foundation and its grantee partners.

"You have to be okay with ambiguity, and that's not a strong point for a lot of foundation staff. We often want things systematically spelled out and done. I'm one of those people," Holmes said. "So I had to learn to look at things differently, to appreciate what's going on when there's a lot of uncertainty. At some point you need to be challenged, as the uncertainty and ambiguity is where the creativity happens. You can't try to force things."

Just as Holmes and her team were adjusting to a new way of working with their

partners, the backbone organizations also had to adjust their expectations of the relationship with the foundation.

"As program officers, grantees often expect us to be experts, but there's also an expertise in the community that's extremely important to tap into," Holmes said. "We found that to be a significant barrier initially, because the organizations we work with were relying on our previous relationships, where we had said, 'This is what we want you to accomplish.' Now we are going into this without a plan, we want to develop it with them, and that is uncomfortable for the organizations. It is important for us not to fall back to our default way of working with them, and rather be as uncomfortable as they are and work through it."

The Maternal Child and Family Health Coalition also had to shift their approach in partnering with the foundation. "Being vulnerable with a funder was a new experience for us," Copanas said. "We had to get comfortable sharing with our funder that it was not clear how we were going to tackle an issue and how much it would cost."

Holmes said another challenge was helping grantee partners look at the issue of infant mortality from a systems perspective and sorting through differing viewpoints about the causes, barriers and opportunities for impact. Holmes found developmental evaluation tools valuable in working through these challenges. For example, when confronted with differing viewpoints about to what extent the initiative should focus on the role of the individual versus systemic causes of infant mortality, the foundation, with the help of a developmental evaluation consultant, created a survey to provide a space for partners to share their thoughts and opinions.

"The survey allowed counter opinions to be expressed, and it began to open people to other ideas," Holmes said. "It helped us set the stage for a more systems approach to this issue." Other tools that have been helpful include before- and after-action reviews and the emergent learning table.[1]

"A lot of this work is about process, and people get irritated when you're stuck in process a lot of the time," Holmes said. "But these tools help move people toward action and reflect on that action. They allow you to surface insights when you have a complex issue and the answer's not really obvious; they help lift differing viewpoints and hypothesize what it's going to take to get toward impact. Then you're able to test those hypotheses really quickly and put that learning back into the process. The tools get people engaged and allow everyone's voices to be heard."

"The foundation is finding ways to make progress happen more quickly by bringing additional resources to the initiative for work we do not have the capacity or skills to do," Copanas said. For example, after a grant was awarded to the coalition it became evident the initiative needed

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[1] For more on developmental evaluation, see J.W. McConnell Family Foundation, "A Developmental Evaluation Primer," 2006, available at http://www.mcconnellfoundation.ca/de/resources/publication/a-developmental-evaluation-primer; Jewlya Lynn, "Strategic Learning in Practice: Tools to Create the Space and Structure for Learning," (Spark Policy Institute and Center for Evaluation Innovation, 2012), available at http://www.evaluationinnovation.org/sites/default/files/SL_Tools_FINAL%20.pdf; and FSG, "Building a Strategic Learning and Evaluation System for Your Organization," 2013, available at https://www.fsg.org/publications/building-strategic-learning-and-evaluation-system-your-organization.

data collected and analyzed as well as communications expertise. Rather than amending the grant award to cover these costs or expecting the grantee to cover the costs with the current grant award, the foundation directly contracted with consultants and kept the initiative moving along. The foundation engaged Copanas in the bidding and selection process for the consultants. "The more involvement the backbone can have, given the conditions or the structures in the community, the better. The consultants become another member of our team and we need to be able to work well with them," Copanas said.

"Through the experiences of sharing information and working closely together you are able to deepen your trust," Copanas said. "But it takes an initial decision to trust another partner. If we did not choose to trust the foundation, we would not have initiated partnership principles conversation. It took a leap of trust – one that required a partner to give and not just earn it."

LEARNING NOTES

✚ Acknowledge power dynamics.

Staff at the Missouri Foundation for Health took intentional steps to try to mitigate the power imbalance with grantees. *In what ways can you address power dynamics for stronger relationships in your collaborations?*

✚ Help partners "see the forest for the trees."

Often, advancing a collaborative vision requires partners to take a systems-level view on the issue. This is not always a lens that organizations typically bring to their work. *How might you help partners learn to take a broader or systems view?*

✚ Shared decision-making strengthens the collaboration

Missouri Foundation for Health engaged the backbone organizations in the decision-making process to hire consultants that would lend expertise to the initiative. *What decisions could be better informed with the engagement of your partners?*