

The California Wellness Foundation

Grantmaking for a Healthier California

Reflections REFLECTIONS

On Public Policy
Grantmaking



The California Wellness Foundation

Reflections is a series produced by The California Wellness Foundation to share lessons learned and information gleaned from its grantmaking practices and strategies. This document and others in the series are available on the Internet at www.tcwf.org.

May 2002 • Volume 3 • No.2

Reflections On Public Policy Grantmaking

By Ruth Holton

Funding in the public policy arena has always been an integral part of The California Wellness Foundation's grantmaking program and it complements our direct-service grantmaking,¹ which is 50 percent of our annual grants. Founding board members believed that funding public policy was one of the critical components for achieving the Foundation's mission: "to improve the health of the people of California by making grants for health promotion, wellness education and disease prevention." Its importance is reflected in one of the Foundation's four goals: "to inform the development of public policies that promote wellness and enhance access to preventive health care." Each of the Foundation's five initiatives, Violence Prevention, Teen Pregnancy Prevention, Work and Health, Children and Youth Community Health, and Health Improvement, had public policy aspects, and public policy has been a substantial part of the Special Projects Fund's grantmaking. Public policy is also one of the cross-cutting themes of the Foundation's eight current priority areas.²

TCWF public policy grantmaking covers the gamut of legally permissible philanthropic activity to inform the legislative, administrative or judicial actions of all levels of government. To date, TCWF has given grants totaling more than \$346 million, of which approximately 20 percent has been in the public policy arena. The three main areas of our public policy grantmaking are for public education campaigns, policy research and analysis, and advocacy.

The purpose of this paper is to share with the field our experience in funding public policy, the reasons why we continue to see it as central to improving the health of Californians, and, by sharing these experiences, encourage others to consider funding in the public policy arena.

First some general observations:

- **A foundation should determine if public policy has the potential to affect its mission.** Many health foundations have missions to improve health or to improve access to care. Public policy has definite implications for achieving such missions. Specific public policy goals can serve as important guideposts against which to assess potential projects. This clarity is also helpful for new directors and new staff.
- **One of the most effective ways to leverage foundation dollars is by funding public policy efforts.** Many long-term, sustainable solutions for the issues that health foundations are addressing, such as building healthy communities, bringing effective programs to scale, improving the delivery of service, and increasing access to health and social services, involve changing public policy. We strongly believe we have the potential to improve the health of far more Californians through the work of our public policy grantees than we could ever hope to reach through funding direct service alone.³

- **Public policy isn't just for "policy wonks."** Some of the most effective public policy work is done by those directly affected by the problem that needs to be resolved: community members, including youth, working to make their communities healthy and safe places to live; direct-service providers who know what the problems are and have solutions; and individuals who don't have access to basic services because of eligibility barriers or lack of funding. TCWF grants to build the capacity of community coalitions, community organizing groups and grassroots organizations to engage in policy efforts have helped grantees ban the sale of Saturday night specials⁴ in their communities; increase local funding streams for health care for the uninsured; make their neighborhoods cleaner and safer; and restrict the number of liquor stores allowed in the community.
- **Foundations can be influential in determining what information is available to policy-makers, opinion leaders and the public on the issues being debated.** Nonprofit policy and advocacy organizations face particularly difficult fundraising challenges. Unlike funding for direct-service organizations, policy and advocacy organizations have limited sources for funding. Few have wealthy individual patrons or produce revenue-generating materials, so most have to rely for the bulk of their funding on foundations. Because of this reliance, foundation support is one of the key determinants of what information is available to inform decision makers, and whether those without their own resources will be able to participate in the debate.
- **Effective public policy grants can be either high cost or low cost.** TCWF's grants have ranged from multimillion-dollar public education campaigns to several thousand dollars for a report. Both high-profile/high-cost and low-profile/low-cost grants can be successful. Like any other type of grantmaking, high-profile/high-cost grants can also be costly failures.
- **A foundation does not have to fund the full gamut of policy activities to have an impact.** Our grantmaking has ranged from a series of complementary policy activities to pursue the policy goals of an initiative, to a single grant for a report analyzing the potential effects of proposed policy. Such an analysis can sometimes have a substantial impact on a policy debate.
- **Policy changes do not happen overnight.** It is important for the funder and the grantee to be realistic about the time it takes to change policy. It is frequently a long-term process subject to multiple variables, many of which are beyond the control of the grantee. For example, it took six years for our Violence Prevention Initiative grantees to achieve their goal of a state ban on the production and sale of Saturday night specials. The best grantees know how to use the media and grassroots to keep an issue before the public and educate policy-makers until action is taken.

- **It can be difficult to attribute a policy achievement to the actions of specific grantees.** Grantees are always eager to claim credit for a policy change, but frequently such change is the result of the combined effort of several organizations and political factors outside the control of the grantees. Sometimes the full impact of the work of a grantee may not be realized until years after the end of the grant. Grantees should therefore be asked to identify objectives that are measurable and indicative of the steps necessary to achieve their policy goals. An objective stating that a grantee is to achieve a specific policy change is generally unrealistic and may in fact cross the line into an area of lobbying that is prohibited for private, independent foundations such as TCWF.
- **Expert legal counsel is a must.** While there is a great deal that foundations can do in the area of public policy grantmaking, it is important, particularly if the issue is controversial, to have access to expert legal counsel. The attorney should be well-versed in federal tax law applicable to foundations and state laws governing political activities. It is also important to understand that the answers you get from an attorney will often depend on the questions asked. If you ask to be totally protected, you'll probably get a very conservative answer; if you ask how far you can push the envelope, you'll get a more liberal opinion.⁵

PUBLIC EDUCATION

Targeted public education campaigns with clear policy goals and widespread support have tremendous potential to reframe policy debates.

Over the years, TCWF has funded multimillion-dollar grants for several high-profile public education campaigns to inform and educate policymakers and opinion leaders on the issues of youth violence, teen pregnancy, health access and tobacco control.

Both our Violence Prevention Initiative (VPI) and our Teen Pregnancy Prevention Initiative (TPPI) have significant public education campaign components. The campaigns reframed the issues of violence against youth and teen pregnancy in order to change the focus of the public debate and lay the groundwork for the policy changes being sought. When the VPI was launched, youth violence was perceived as a criminal justice matter. The overall message of the VPI is that violence against youth is preventable and best addressed as a public health problem. The first VPI public education campaign focused on youth as victims of violence rather than just the perpetrators. The central message of the public education campaign was: handguns are the leading cause of death for California's youth. The public policy solution was: restrict access to handguns. Reframing the issue in this manner was critical to the Initiative's grantees' successful efforts to inform policymakers about the need to ban the sale of Saturday night specials in communities throughout California.

In the case of the TPPI, the goal has been to shift the perception of teen pregnancy as an individual and family problem to viewing it as also an adult and societal problem. The message of TPPI is that without a realistic approach to teen pregnancy, prevention efforts will not be as successful as they might be. TPPI's current "Get Real About Teen Pregnancy" campaign focuses on encouraging adults to get involved in the lives of teenagers and learn ways that they can help solve the problem of teen pregnancy. The policy goals are to improve sex education and increase access to contraceptives. The Get Real campaign was cited by a legislator as a factor in the passage of his bill requiring that sex education classes provide information that is medically up-to-date and free of racial, ethnic and gender bias.

It is important to note that these campaigns were part of multifaceted policy efforts including community organizing and local and state advocacy. When we first embarked on the public education campaign strategy, we did not realize the galvanizing effect it would have on the other grantees in the initiatives, particularly the community-based groups. Because of the campaigns, grantees felt that they were part of something much larger, part of a movement, which helped energize them and kept them focused.

Outside of the initiatives, our public education campaigns have focused on informing policy-makers and opinion leaders about the health implications of proposed public policies. We funded a \$4 million grant for a public education project designed to increase the awareness and knowledge of Californians on the merits, background and potential consequences of a state ballot measure, Proposition 188.⁶ According to a nonpartisan study, Proposition 188 would have had the effect of weakening tobacco control laws throughout the state, resulting in hundreds of millions of dollars in increased health care costs. Our policy goal was to make sure that the voters understood both sides of the debate before casting a vote. The campaign took no position, pro or con, on the measure; it simply laid out the facts as they appeared in the ballot pamphlet.⁷ These facts included who funded the Proposition, which was a list of tobacco companies, and those who were listed as opposing the measure, which included the American Lung Association of California and the American Heart Association's California affiliate. The campaign also urged voters to read their ballot pamphlets before voting on Proposition 188. The grantee strictly avoided any contact with the proponents and opponents of the Proposition so no one could charge that the grantee had coordinated its strategy with any partisan purpose. The week before the public education campaign, polls showed the measure winning. Within a week of the campaign's launch, the numbers reversed and Proposition 188 ended up losing 70 percent to 30 percent, a huge defeat for the tobacco industry, which put \$35 million into trying to pass the Proposition.

While this was a large grant for the Foundation, the payoff in savings to the state in health care costs that would not be incurred was huge. This grant was also one of our most controversial. The tobacco industry tried to challenge the ads, but because we had done our legal homework and were within our legal bounds, the challenge was unsuccessful.

Lessons Learned

The “how tos” of funding a public education campaign are beyond the scope of this paper; however, we would like to share some of our lessons learned.

- **Just putting the information out there is not enough.** Our public education campaigns have been most successful when they have been informed by professional market research; linked to specific policy goals; targeted to key legislative districts or specific media markets, such as areas with the highest rates of teen pregnancy or youth violence; linked to complementary efforts at the state and local levels; and provided a means for the public to get engaged, our most frequent tool having been an 800 number for more information on how to get involved.
- **Be prepared.** A foundation needs to develop an internal communications and public relations strategy that can respond to any inquiries or negative reaction generated by a high-visibility campaign—especially if the campaign touches on a sensitive issue, such as teen pregnancy prevention. A foundation should see the advertisements before they go public and know when they are being released so they will be ready to respond to any fallout. With any public policy focused campaign, a foundation should also seek the advice of expert legal counsel before embarking on the campaign.
- **Foundations should not pick the message.** While we might like to think that we know what will sell, we don’t. An effective public education campaign needs to be designed by experts who, through market research, can identify an effective message and the appropriate population to target.
- **Whether to feature the foundation depends on the goal.** In our early campaigns, our foundation’s name and logo were featured prominently on campaign materials to reinforce the message that violence prevention was a public health issue. We also wanted to attract more philanthropic support for the issue. When a foundation’s name is used in this manner, the foundation is responsible for the product and should exercise editorial control over it. More recently, some of our public education grantees have made no reference to our Foundation in their campaign materials. When a reference is made, it can only be used to state that the grantee is “funded by a grant from The California Wellness Foundation,” unless the grantee can make a strong case for why the Foundation’s name should be featured. When we are not referenced or merely referenced as the funder, the Foundation chooses to exercise no control over the product. This provides a useful measure of protection as the Foundation cannot be held responsible for the content.

- **Be careful about public service announcements.** If you want to target a specific audience, paid media is the best approach, especially if the campaign is about a controversial issue. Since PSAs are free, you have no control over when they are aired and, therefore, who is really getting the message. We learned this important lesson in the early stages of the VPI campaign. We had no control over when PSAs were aired so they were mostly seen by gun advocates who strongly disagreed with our message and let us know it by having computer-generated calls jam the 800 number. Paid ads, however, reached a targeted audience that was supportive of restricting access to handguns.

POLICY ANALYSIS AND RESEARCH

Various types of grants for analysis and research can generate valuable data to support key public policy messages and galvanize communities.

A significant portion of TCWF's public policy funding has been for policy analysis and research, which is essential to educating policymakers and opinion leaders about the nature of a problem, raising public awareness about neglected issues, developing effective solutions and building support for those solutions.

TCWF funding in this area has ranged from multimillion-dollar grants to establish public policy institutions to a few thousand dollars for data collection and analysis for a local policy project. Grantees have also ranged widely from the traditional public policy institutions, universities and think tanks, to local community collaboratives and youth groups. Grants have been both for projects and for core operating support for organizations working on policy issues consistent with our mission.

State Level

Through our initiative grantmaking programs, we funded the establishment of two policy institutions to fill the void in research and nonpartisan analysis available to policymakers and opinion leaders in the areas of violence prevention and health promotion. The Pacific Center for Violence Prevention was established to advance the policy goals of the Foundation's Violence Prevention Initiative. The California Center for Health Improvement (CCHI)⁸ was established as part of our Health Improvement Initiative to advance health promotion and disease prevention policy efforts at the statewide level. Both institutions also provided substantial technical assistance to their initiatives' community action programs working on local policy issues. The research and analyses they have published has been widely used by policymakers, advocates and the media at both the state and local levels.

The Pacific Center's use of the scientific literature and analysis of existing databases was critical in building the case for focusing on the role of handguns as an issue in the prevention of youth violence. Through its data analysis, the Pacific Center found that handguns killed more youth up to the age of 19 than motor vehicle crashes, drugs or disease. This information became the linchpin in the public education campaigns and an important tool in shaping the debate about handgun violence. The Pacific Center's policy briefs and fact sheets helped VPI grantees, policymakers and opinion leaders make the case for handgun control. Other research that played a critical role in advancing the VPI's goal to restrict access to handguns was a grantee's report⁹ showing that 80 percent of the nation's Saturday night specials were made by five companies within a 45-mile radius of downtown Los Angeles. The report galvanized activists and brought the issue home to the media and policymakers. The Legal Community Against Violence's legal resource manual for cities and counties on enacting legally sound local ordinances banning firearms provided invaluable guidance to local policymakers. These research efforts are certainly part of the reason why today 41 cities and four counties have bans on Saturday night specials, which led to the Legislature passing a law to ban them throughout the state. Prior to the efforts of the VPI grantees, only eight cities in California had local handgun ordinances.

Similarly, CCHI reports have been used by state policymakers to address the issues of tobacco prevention, alcohol and drug treatment, mental health, school-based health and physical education. For example, CCHI's policy briefs on early brain development, alcohol and drug treatment parity, and school-based physical fitness helped inform state policy and programmatic efforts. CCHI is now the leading technical assistance provider to local Proposition 10 Commissions,¹⁰ and its award-winning website¹¹ provides local activists with the tools they need to enact health promotion and disease prevention policies in their communities.

Research and analysis have also been an important component of the state policy efforts of the grantees in our Teen Pregnancy Prevention Initiative and our Work and Health Initiative. Studies on access to family planning services, responsible teen sexual behavior and effective teen pregnancy prevention policies have contributed to efforts to preserve state-funded teen pregnancy prevention programs, increase teen access to confidential contraceptive care, and educate policymakers about teen insights and experiences with sex education. Our Work and Health Initiative's annual Health Insurance Policy Program report¹² has become the reference guide for all sides of the debate on the problem of the uninsured. Even though the statistics do not change dramatically from year to year, producing an annual report has kept the issue of the uninsured in front of the media by providing the "hook" needed to discuss the issue. Advocates at the local level are also able to take advantage of the coverage to give the issue a local spin.

Outside of the policy work of our initiatives, much of the analysis and research work has been funded through our Special Projects Fund and has been focused on the multitude of issues raised by the devolution of federal responsibility for health and welfare to the states and from there to the counties. When devolution first began, we funded core operating support grants to several state policy organizations to assist in their efforts to analyze the effect of the various federal and state proposals and to generate alternatives that would better serve those in need. The grantees' policy briefs educated policymakers and the media and gave advocates the information they needed to prevent the adoption of the worst of the proposals and make the case for more effective alternatives. For example, surveys conducted by California Food Policy Advocates, after the passage of welfare reform, found a demonstrable increase in the number of immigrant families, who had previously been eligible for food stamps, without access to adequate food. This documentation helped lead to the establishment of the California Food Assistance Program, which provides state funds for food stamps for legal immigrants.

Now that welfare reform, Medi-Cal managed care and Healthy Families¹³ are well-established, the focus of our policy grantees within the Special Projects Fund has been on monitoring the implementation of these programs, improving their effectiveness and increasing access to health care for the uninsured. These policy grantees have also played an important role in educating local service providers, community groups and local advocates about new programs so that they can help ensure that those who are eligible are made aware of the services and enroll. Since the state has limited capacity to collect data on how programs are working, a particularly valuable role that several of our policy grantees¹⁴ have played is documenting how Healthy Families and Medi-Cal changes are being implemented and the barriers faced by those who are eligible. Such documentation has been key to successful advocacy efforts to improve the enrollment process for both programs, including simplifying the application form, reducing filing requirements and permitting applications to be mailed in. This past year, the state passed legislation to expedite the enrollment process in Medi-Cal and Healthy Families for children who are already enrolled in the school lunch program or receiving food stamps. A core support grant to the Children's Partnership helped support the research and development of the "Express Lane Eligibility" proposal, which served as the basis for this legislation.

Local Level

Much of the local policy work has been done by the membership, primarily youth, of our initiatives' local community action programs (CAPs).¹⁵ While many of the CAPs did not initially begin with a policy focus, they quickly found that in order to address the issues they had identified as important to improving the health of their communities, they needed to get involved in the policy process. For many, the first foray into policy work was research and data collection. These efforts

included asset mapping and needs assessments, surveys of neighborhood health and safety concerns, and quality-of-life reports. With good data in hand, many of the CAPs were able to effectively organize community members and educate the local media and policymakers.

The Pasadena/Altadena Health Partnership, a Health Improvement Initiative grantee, did a community assessment that revealed that a high number of children were not receiving adequate dental care. The information led government agencies, schools and health care providers to make dental care one of their top concerns. Now more than 3,000 low-income children in the community receive dental screenings at school, and a new dental clinic has been opened. A Teen Pregnancy Prevention Initiative grantee, Camp Fire Boys and Girls-Orange County Council, conducted a survey of fellow high school students about their sexual knowledge, attitudes and behavior, and polled parents and teachers about what they would like to see taught in schools. They presented their research to the school board and asked that they get better information on sexually transmitted diseases and birth control. The effort received wide media coverage, and the school board has invited the teens back to continue the discussion.

Lessons Learned

- **The most effective research and policy papers are those that make an issue “come alive” and are tailored to the needs of their audiences.** If the purpose is to inform policymakers and the media, the documents need to be written in “plain English,” concise and easy to review. If the purpose is to inform the academic community, then an academic paper is appropriate. Some of our least effective policy grants have been for academic papers that were meant to inform policymakers.
- **Research and analysis need to be disseminated to the right outlets to be effective.** Policy grantees need to have a dissemination strategy that ensures their information will reach the intended audiences. A shotgun approach to dissemination will generally lead to the study collecting dust.
- **Policy briefs need champions.** One of the most effective uses of data to influence public policy is by advocates in support of their arguments. Grantees who are not advocates themselves need to work with advocates to have the greatest potential to affect public policy.
- **Institutions established via grants to serve a foundation’s purpose face unique sustainability problems.** It is important for institutions founded to serve a foundation’s purpose to be able to establish their own identities and demonstrate their value outside of the work of the foundation if they are to sustain themselves over time. Foundations that establish such institutions need to fund them long enough—at least five years—to allow a reasonable opportunity for sustainability.

- **Effective data do not have to be complex or costly to collect.** The data collected by community action programs included documentation of the number of liquor stores in a community, a survey of the placement of tobacco display shelves in local stores, and community opinion surveys. Several of these projects were designed and carried out by youth. The CAPs have used the data to educate policymakers about community concerns and to organize community members to take action.

ADVOCACY

Direct-service providers and grassroots organizations that recognize the importance of public policy to their long-term goals can be effective at advocates if given the tools to succeed.

The public education campaign and the research/analysis elements of our public policy grantmaking strategy lay the foundation and provide the tools for the third component of our strategy: advocacy.¹⁶

To ensure that policymakers are responsive to the health needs of California’s underserved communities, it is critical that these communities’ interests are represented at both the state and local

government levels. Our advocacy grants provide resources for state and local organizations to educate policymakers and the media, monitor the actions of administrative agencies, organize those who are affected and engage them in the policy process, and build coalitions needed to advance an issue. At the state level, our grants help support the efforts of organizations working to advance the policy goals of our priority areas and improve the health of California’s underserved communities. At the local level, our funding supports the advocacy activities of community members who are working to improve the health of their communities.

We also encourage our direct-service grantees to engage in advocacy as they are in an excellent position to know what policies work and what needs to be improved. They can document the problems and make a case for improving the system. Policymakers respect the input of direct-service providers because their solutions are grounded in reality. Since there is a lot of confusion about what level of advocacy is permissible for 501(c)3 nonprofit organizations among those that are not accustomed to it, we occasionally send our grantees information about the regulations governing advocacy activities.¹⁷

While many equate advocacy with lobbying, most advocacy is not. Lobbying, as defined by the IRS, applies to a narrow set of activities: urging action by a legislative body on a specific piece of legislation, or urging members of the public to communicate to lawmakers about action as to a specific piece of legislation. In order to protect the Foundation, we specify in our grant agreement letters that the “grant funds are not earmarked to be used in any attempt to influence legislation within

the meaning of IRC Section 4945(e), or to engage in any other activity that, if conducted directly by the Foundation, would result in the imposition of any tax on the Foundation under IRC Chapter 42.” This language does not unduly limit our grantees’ ability to engage in lobbying activities within the limits permitted by their 501(c) 3 status.¹⁸

State Level

Much of our funding for advocacy at the state level has been through the Special Projects Fund. A major cluster of our grantees have and continue to work on the issues related to devolution and increasing access to health care for the uninsured. Many of the grantees referenced in the policy/analysis section receive core support, which provides them with the flexibility to engage in a diverse array of advocacy efforts.

One focus of some of our devolution grantees has been administrative advocacy. Getting legislation passed and signed is only the first hurdle in changing public policy; how the policy is implemented is critical to its success. For foundations that are concerned about funding advocacy efforts that may creep into influencing legislative action, there are no constraints on funding efforts to influence administrative agencies. Support of such efforts can have a major effect on how and whether policies are implemented according to the intent of the legislation. For example, the Western Center on Law and Poverty found, through its study of counties’ implementation of a Medi-Cal program for the working poor, that some problems had occurred because of state inaction and flawed information from the state. The Western Center brought these problems to the attention of both the federal and state agencies responsible for overseeing implementation of the program. The federal agency mandated that the state address several of the concerns raised by the Western Center, and the state has clarified some of its directives to the counties to address the problems raised.

Another administrative advocacy success has been the work of the Managed Care Consumer Advocacy Collaborative, a pilot for a new approach by the Foundation to funding advocacy. In 1999, the Department of Managed Care and the Office of Patient Advocate was established. This provided a unique opportunity for consumer interests to influence the development of the regulations that would guide how the department exercised its oversight responsibilities over the managed care industry and protect the interests of consumers. We did not want to be in a position of deciding which consumer groups we would support or choosing which groups should collaborate, so we asked one of the consumer groups that had been a leader in the legislative effort to identify some partners. Instead of funding each of the groups separately, we asked them to jointly develop an advocacy plan and we provided a pool of funds to implement the plan. We left it up to the collaborative to determine how the funds should be distributed but urged them not to take the easy route of just dividing the resources evenly amongst themselves.¹⁹ Collectively, the group decided to

provide each of the partners with a small amount for a “seat at the table.” The remaining funds were used to support additional advocacy and policy expertise, a public education effort and internal communications. As a result of the Collaborative’s advocacy efforts, there was a substantial augmentation in the department’s budget for outreach and education, improved staffing levels and increased focus on the issues of cultural and linguistic competency. While the group has had its usual share of aches and pains with collaboration, it has remarked that this experience has helped it develop and implement a much more strategic approach than it usually does when collaborating informally.

Three years ago, we began hosting an annual two-day retreat for advocates working on the issue of increasing access to the health care for the uninsured. The goal was to help build a stronger sense of community among advocates, provide them an opportunity for strategic thinking and identify opportunities for collaboration. This retreat has become an important forum for discussing common agendas and helping build relationships among the many organizations working on the issue.

Outside of devolution, other areas of funding include supporting efforts of groups representing underserved populations to educate policymakers and opinion leaders about their constituents’ health needs. Examples of these grantees are the California State Rural Health Association, Asian & Pacific Islander American Health Forum and Latino Coalition for a Healthy California. These grants are all for core operating support.

We have also been supportive of organizations working to engage groups that are not considered the “usual suspects” in their advocacy efforts. For example, core support grants to Californians for Pesticide Reform have helped it to get doctors and the mainstream medical associations engaged in a campaign to eliminate the use of the most toxic pesticides in schools and playgrounds. A core support grant to Fight Crime Invest in Kids supports its efforts to engage law enforcement officials in advocacy efforts to increase resources for after school programs. Bringing new voices into a policy debate, particularly those with political influence, can be an effective way of capturing the attention of policymakers.

Another area of support is for organizations that engage their grassroots in state-level policymaking. An example is a core support grant to establish a Sacramento office for an interfaith organizing project, the California Project of the Pacific Institute for Community Organizations (PICO), which has 13 local congregation-based advocacy organizations throughout the state. Since establishing its office, PICO has put a face on the problem of the uninsured for policymakers. In its first year in Sacramento, PICO brought 3,000 members to talk to lawmakers and the governor. Policymakers have credited the advocacy efforts of these members with helping to win increased funding for clinics and expanded access to care.

Our Work and Health Initiative has had similar success with its Computers In Our Future (CIOF) grantees.²⁰ The CIOF leaders realized that policy decisions made at the local and state levels would be critical to their ability to strengthen and sustain their programs, so they formed a statewide policy group. Their goal was to ensure that community-based organizations in low-income neighborhoods would have access to state resources that were being allocated for technology. In order to make a strong case, they engaged their staff, participants and local partners so policymakers could hear directly from community members how technology has helped meet the needs of their communities. When the CIOF leaders began their advocacy efforts, the only technology access projects that policymakers were considering were through schools and libraries. Within two years, two bills that supported technology access through community-based organizations made it to the governor's desk. Funding was allocated through the state's Workforce Investment Board for Community Technology Access, and the Governor's Commission on Building for the Twenty-First Century recommended establishing a Community Technology Grant Program. Lawmakers are now coming to the network for suggestions on how to address the issue of the digital divide. CIOF leaders' success can be attributed to a previous dearth of expertise on addressing this issue. The CIOF leaders also had a strong track record in local communities and could demonstrate the effectiveness of their programs.

Local Level

Much of the advocacy we have funded at the local level has been through our initiatives' community action programs. As mentioned earlier, for many of the CAPs this was not part of their original objectives, but became a part of their efforts when they identified the importance of advocacy to realizing the changes they wanted to make in their communities. Particularly important to the success of many of the CAPs' efforts was the training and guidance they received from the initiatives' technical assistance providers on the basics of advocacy, including working with the media. As one of the VPI technical assistance providers said of media advocacy: "If an issue doesn't exist in the media, then it is not really an issue for decisionmakers and the larger public. Media exposure provides visibility, credibility and legitimacy for the issues being discussed."²¹

The following are just a few examples of the CAPs' advocacy successes. The Chinatown Wellness Village, a Children and Youth Community Health Initiative CAP in San Francisco, identified through its health needs assessment that gambling was a serious problem, so it formed the Chinese Community Task Force on Problem Gambling. The task force brought the issues to the attention of policymakers via the media, public hearings and town hall meetings. The San Francisco Board of Supervisors ordered the Department of Public Health to direct funds to address problem gambling and \$75,000 was secured for the Chinese Community Problem Gambling Project. Pedestrian safety was one of the major issues that Goshen's Children and Youth Community Health

Initiative CAP had identified through its health needs assessment. The community had tried unsuccessfully for years to get the State Department of Transportation to address the problem of children having to use a narrow overpass to cross a major freeway to get to school. The Goshen CAP brought the issue to its congressional representative and after several meetings, with the representative's help, secured \$1.5 million through the governor's transportation Congestion Relief Program to build a pedestrian bridge across the freeway. A Health Improvement Initiative CAP in Mendocino County successfully advocated for \$2.5 million in county funding towards an integrated service center housing public health, probation, social service, mental health and community-based organizations.

Lessons Learned

- **Core operating support provides important flexibility for advocacy grantees.** Given the inherently unpredictable nature of factors that influence the political process, it is important that advocacy organizations have the capacity to respond quickly to windows of opportunity to advance their policy agendas. Core support grants enable grantees to take advantage of such opportunities.
- **Core support grants are the easiest way to protect a foundation from the limitations on funding lobbying activities.** The secondary benefit of core support grants is that they can be used for all advocacy activities permitted by a nonprofit organization's 501(c)3 status. This frees the grantee from the burden of segregating its expenses related to lobbying from its overall budget. To protect the grantor foundation, it is important to include the statement in the grant agreement letter that the funds are not earmarked for any attempt to influence legislation.
- **Demystifying the policy process is key to engaging community members in advocacy.** For most people, the policymaking process is a mystery that makes participation intimidating. Our CAP grantees did not initially design projects that involved public policy, nor were they receptive to the idea. It was only when they saw the importance of policy to achieving their long-term goals that they became interested. Our technical assistance providers were then able to help them develop effective approaches. Particularly important was training CAP grantees on using the media to build public support for their efforts.
- **Engaging community members in advocacy has long-term benefits:** Changing public policy can be an empowering experience. Once community members have experienced a public policy success, they are more likely to stay engaged in efforts to improve their communities and hold policymakers accountable. Many of the youth involved in our CAPs have learned the advocacy skills they need to make their communities better places to live.

- **An important ingredient of a successful advocacy effort is engaging the grassroots.** In the era of term limits, policymakers are less likely to have knowledge of the issues, so it is particularly important that policymakers hear from their constituents. Constituents put a face on the issues, and their solutions are seen as grounded in reality. Many state policy groups, however, do not have a grassroots capacity and need to learn how to seek out and work with grassroots organizations. Grassroots organizations, in turn, rarely have the resources to get engaged in state policy issues. It is important to provide resources to both types of groups so that they can work effectively with each other.
- **Organizations with expertise working with youth are generally more effective in engaging youth in advocacy than organizations whose primary expertise is policy.** When youth are trained in the “how-tos” of advocacy, they can be very effective. This is especially true when they are allowed to identify the issues of concern and are part of developing the proposed solutions. Youth do not want to be used as props. Grantees without experience working with youth often have difficulty giving up the control necessary to take full advantage of the resources youth bring, thus making it a frustrating experience for both parties.
- **Be careful the messenger does not detract from the message.** It is important when giving grants to advocacy organizations to know what their reputations are with policymakers. If policymakers have had a bad experience with a grantee, they are unlikely to be receptive to its message.

CONCLUSION

Successful public policy work depends on coordinated efforts over long periods of time, but the results can directly and dramatically affect underserved populations.

At the state level, our grants have helped advocates for California’s neediest populations educate policymakers and opinion leaders about barriers to care and ways to address them. The work of our grantees has been instrumental in reframing the debates about preventing teen pregnancy and violence against youth, expanding access to health and social service programs, and improving existing health care programs.

At the local level, our grants have helped youth to get engaged in the policy process so they can build healthier communities, helped secure funding streams for health services, and increased access to health promotion and disease prevention services.

As with all grantmaking strategies, we've also had failures: policy reports that sit on shelves unread, organizations that appeared promising and then fell apart, and advocacy efforts that have gotten nowhere. Evaluation of this work is always a struggle; our experience has made us more realistic about what actually can be achieved in the policy arena in a traditional grant period. We also understand that to move a policy agenda at the state level, it generally takes multiple groups to work all the angles: grassroots organizing, policy analysis and research, and education of policymakers and opinion leaders.

Because of the limited sources of funding for public policy groups, we struggle with how often we should fund a group that is playing a valuable role in advancing the policies we care about. As our current rule of thumb, we ask organizations to take a break for at least a year after they have gone through two grant cycles. In the long run, the best hope for the many important policy organizations working in this state is for more foundations to venture into the field of funding public policy and, realizing there are no "quick fixes," commit to sticking with organizations and issues over an extended period of time.

Ruth Holton is program director at The California Wellness Foundation for the Special Projects Fund. The Special Projects Fund allows the Foundation to respond to grantmaking opportunities that fit within its mission but are outside the established priority areas. Holton brings 14 years experience as a public interest advocate in the fields of maternal and child health, adult education, government reform and consumer protection to the Foundation. She was formerly director of the Peninsula Partnership for Children, Youth and Families, a project of the Peninsula Community Foundation. Between 1989 and 1997, Holton served as a lobbyist for and later executive director of California Common Cause, an affiliate of the national government watchdog group. During her tenure at Common Cause she led two successful statewide initiatives for campaign finance reform and ethics. Prior to that she served as the health lobbyist for the California Children's Lobby, during which she helped lead the successful effort to significantly expand access to prenatal services for low-income women. Holton holds a master's degree in educational administration from the University of Chicago. She currently serves on the boards of California Common Cause and TURN (Towards Utility Rate Normalization). She is also a member of the California Association of Nonprofits' (CAN) Nonprofit Policy Council.

ENDNOTES

- 1 Our direct service grantmaking was made a requirement by the California Department of Corporations when the Foundation was established in 1992.
- 2 Diversity in the Health Professions, Environmental Health, Healthy Aging, Mental Health, Teenage Pregnancy Prevention, Violence Prevention, Women's Health, and Work and Health.
- 3 As the Public Policy Task Force for the Council on Foundations states in its report (December 1999, p.17): "one option for fulfilling the obligation to serve the public good is by participating in public policy because governmental action and inaction affects the public more broadly than the decision of any other group."
- 4 Saturday night specials are cheap, poor-quality handguns that lack basic safety features.
- 5 Excellent legal resources include "Myth v. Fact: Foundation Support of Advocacy," Thomas Asher, Alliance for Justice, 1995; and "Foundations and Lobbying: Safe Ways to Affect Public Policy," J.A. Edie, Council on Foundations, 1991.
- 6 A case study of this campaign can be found in "A Case Study using Private Foundation Funds to Educate Voters" by Gregory Colvin, *Journal of Taxation of Exempt Organizations*, May/June 1995, Vol. 6, pp. 276-279.
- 7 To comply with IRS rules prohibiting lobbying activities it is critical that, if the issue involves a specific piece of legislation or a ballot measure, the education efforts do not reflect a point of view on the measure but rather provide information to the public in an objective manner so that voters can form their own opinions.
- 8 The California Center for Health Improvement is now named the Center for Health Improvement.
- 9 "Ring of Fire: Handgun Makers of Southern California," Dr. Garen Wintemute, Violence Prevention Program, University of California, Davis, 1994. The report is available on the Pacific Center for Violence Prevention's website, www.pcvp.org.
- 10 Proposition 10 is a statewide initiative, passed in 1998, that increased tobacco taxes to support early childhood programs and improve health and developmental services for young children and their families. Eighty percent of the revenue is distributed through County Proposition 10 Commissions.
- 11 www.healthpolicycoach.org.
- 12 "The State of Health Insurance in California," Helen H. Schauffler, PhD, and E. Richard Brown, PhD, Regents of the University of California, Berkeley.
- 13 Healthy Families is California's version of the State Children's Health Insurance Program (S-CHIP).
- 14 Western Center on Law and Poverty, National Health Law Program, National Center for Youth Law, Health Access, Families USA and Latino Issues Forum.
- 15 CAPs are a major component of all five of TCWF's initiatives.
- 16 Advocacy is best defined as "the pursuit of influencing the outcomes—including public policy and resource-allocation decisions within political, economic, and social systems and institutions—that directly affect people's lives. Advocacy consists of organized efforts and actions based on the reality of 'what is.' These organizational actions seek to highlight critical issues that have been ignored and submerged, to influence public attitudes, and to enact and implement laws and public policies so that visions of 'what should be' in a just and decent society become a reality." "Advocacy for Social Justice, A Global Action and Reflection Guide," David Cohen, Rosa de la Vega and Gabrielle Watson, p. 8.
- 17 A particularly helpful document is "Worry-Free Lobbying for Nonprofits," Alliance for Justice. Charity Lobbying in the Public Interest has also published several useful fact sheets and guides on lobbying by nonprofit organizations.
- 18 An excellent guide for foundations is "Myth V. Fact, Foundation Support of Advocacy," by Thomas Asher, Alliance for Justice, 1995.
- 19 The original grant to the Managed Care Consumer Advocacy Collaborative was for \$150,000 over one year; it later received a second grant for an additional two years. The Collaborative participants are the California Pan-Ethnic Health Network, Center for Health Care Rights, Consumers Union, Health Access, Latino Issues Forum and the Western Center on Law and Poverty.
- 20 The 11 CIOF centers located in low-income communities throughout the state serve as a technology resource where low-income residents can acquire the technology skills needed to obtain good jobs and their corresponding health benefits. Community organizations, businesses and local institutions also have access to technology to strengthen their endeavors and the community as a whole. The story of CIOF is told in "Computers in Our Future: What works in closing the Technology Gap," by Linda Fowells and Wendy Lazarus. It is available at www.ciof.org.
- 21 "Media Advocacy: A Strategy for Advancing Policy and Promoting Health" by Lawrence Wallack, DrPH and Lori Dorfman, DrPH, *Health Education Quarterly*, Vol. 23 (3): 293-317 (August 1996), p. 299.

ADDITIONAL REFERENCES:

- “Strategies for Shaping Public Policy, A Guide for Health Funders,” Grantmakers in Health, January, 2000.
- “Where the Public Good Prevailed,” Stephen L. Isaacs and Steve A. Schroeder, *The American Prospect*, Vol. 12, Issue 10.
- “Looking Upstream,” Dorothy S. Ridings, *Foundation News & Commentary*, May/June, 1997, pp.16-18.
- “The Public/Private Balancing Act,” Dennis P. Mcilnay, *Foundation News & Commentary*, May/June, 1997, pp. 25-30.
- “A Democratic Landscape, Funding Social Change in California,” National Committee for Responsive Philanthropy, April 2000.

The following previous issues of *Reflections* can be accessed at www.tcwf.org in the Publications section:

"Reflections On Our First Initiatives"

"Reflections On the Impact of Devolution on California"

"Reflections On the Connections Between Work and Health"

"Reflections On Strategic Grantmaking"

"Reflections On Capacity Building"

"Reflections On Sustainability"

THE CALIFORNIA WELLNESS FOUNDATION

Headquarters

6320 Canoga Avenue
Suite 1700
Woodland Hills, CA 91367
818 593.6600 phone
818 593.6614 fax

Branch Office

One Kearny Street
Ninth Floor
San Francisco, CA 94108
415 217.3700 phone
415 217.3709 fax

Website

www.tcwf.org