



Robert Wood Johnson Foundation Local Funding Partnerships

An RWJF national program

Robert Wood Johnson Foundation Local Funding Partnerships is a national program that provides matching grants for innovative community-based projects aimed at improving the health and health care of underserved and vulnerable populations.

Since 1988, the program has awarded 369 grants in collaboration with 1,488 local funding partners for projects that implemented a range of health services and interventions. In 2009, the program added a special solicitation, *Peaceful Pathways: Reducing Exposure to Violence*, to attract smaller, under-resourced, diversity-focused funders and local programs

The Robert Wood Johnson Foundation (RWJF) Board of Trustees has authorized \$146.2 million for *Local Funding Partnerships* from its inception through 2014, when it will end.

CONTEXT

The premise underlying *Local Funding Partnerships* has remained constant over its 25 years—by collaborating with local funders instead of acting alone, RWJF could improve the health and health care of Americans, while getting a larger return on its investment. Also, RWJF hoped that some of the funded projects would yield innovative approaches that the Foundation could bring to scale at the national level.

While this purpose remained unchanged, *Local Funding Partnerships* underwent a number of modifications over the years in response to changes in Foundation leadership, restructuring of its priorities, and shifting trends in philanthropy. For these reasons, National Program Director Pauline (Polly) Seitz, MPA, has called the program “a work in progress.”

Early Years

Shortly after its establishment as a national philanthropy in 1972, RWJF made an effort to encourage local foundations to develop primary health care centers in their communities. The effort, however, came across at the community level as arrogant meddling.

As described by Jane Isaacs Lowe, RWJF senior program officer, in a short history of this early period in the RWJF *Anthology*,¹ local foundations “were not pleased that this big national philanthropy—an 800-pound gorilla—should come to tell them how to spend their money.”

Terrance Keenan, then an RWJF program officer promoting the initiative, understood and appreciated the local reaction—and figured out how to soften it. “I realized it would be easier to get a favorable reception if I had some money to put on the table,” he explained later.

Following through on Keenan's strategy, RWJF developed a program in the early 1980s that provided \$6.8 million to stimulate local support for new community health centers. Called *Community Care Funding*, the program attracted more than \$7 million in matching funds for 19 new health facilities across the country.

Although pleased with this concept of local partnership, leaders at RWJF concluded that the Foundation should not limit itself to health facilities. Specifically, RWJF was interested in infant mortality, teenage pregnancy, alcohol and drug abuse, chronic mental illness, and the needs of senior citizens. At the time, relatively few local foundations were funding projects targeting problems of that kind.

In 1987, the RWJF Board of Trustees phased out *Community Care Funding Partners* and authorized \$8 million for a two-year trial of a new, broadly focused matching grants program, christened *Local Initiative Funding Partners*. The board anticipated awarding up to 10 grants a year, each totaling up to \$400,000 paid out over three or four years.

(In 2008 RWJF changed the program's name to *Robert Wood Johnson Foundation Local Funding Partnerships*. For clarity, this report uses *Local Funding Partnerships* throughout.)

In 1989, RWJF leaders decided not to continue the program—at least not immediately. The decision rested in part on discomfort among some RWJF staff with the diverse and—in certain instances—unorthodox nature of the funded projects. Also, the end of the two-year trial coincided with a general scaling back of RWJF grantmaking.

¹ Wielawski IM. “The Local Initiative Funding Partners Program,” in *To Improve Health and Health Care, 2000: The Robert Wood Johnson Foundation Anthology*, Isaacs SL and Knickman JR (eds). San Francisco: Jossey-Bass, January 2000. Available [online](#).

Program Renewal

In 1990, in conjunction with the start of the tenure of Steven A. Schroeder, MD, as RWJF president, staff advocates for the program made a successful pitch to restart it under slightly different ground rules. Foremost, they proposed that from that time on all funded projects would have to represent an innovative response to a problem in one of three programmatic areas identified by Schroeder as RWJF's goals:

- Assuring Americans access to health care
- Improving care for people with chronic conditions
- Reducing the harm caused by substance abuse

With this direction and a few other changes—including an increase in the grant maximum to \$500,000—the RWJF Board of Trustees authorized renewals of the program: in 1991 for \$15 million, in 1994 for \$16 million (later reduced to \$15 million), in 1997 for \$28 million, and in 2001 for \$38 million (later reduced to \$37 million).²

In the late 1990s, with only a few projects focusing on substance abuse, the program responded by placing an increased emphasis on attracting promising initiatives in that area.

Alignment with the Vulnerable Populations Portfolio

In 2003, under the leadership of Risa Lavizzo-Mourey MD, MBA, RWJF's new president, the Foundation restructured its investments to target a set of priorities. In this transition, *Local Funding Partnerships* became part of the Vulnerable Populations program area—a portfolio of grantmaking programs that identifies new approaches for improving health by recognizing the integral relationship between our health and where we live, work, learn, and play.

With this transition, the grantmaking priorities of *Local Funding Partnerships* had to “adapt and adjust,” said Seitz. Funded projects focused on issues and interests relevant to vulnerable populations—child trauma, violence, mental health—whereas previously, program policy was to support projects that fell within any of RWJF's funding areas—from health care coverage to oral health and chronic disease management.

These new priorities guided grantmaking in the two final funding authorizations—the 2005 authorization for \$21 million and the seventh and final authorization for \$27 million in 2008.

² Ibid. For more on this and other aspects of the program's early development, see the *Anthology* chapter , available [online](#).

THE PROGRAM

Many matching grants programs set up by national foundations seek to replicate ideas formulated by the national institution itself. *Local Funding Partnerships* would turn that tradition on its head. The community—not RWJF—would identify a pressing health need, design the strategy to address it, and put together the funding package.

In short, instead of top-down, this program would be bottom-up—with an emphasis on innovation. Local "ownership" would, in turn, ensure sufficient support to keep the funded project going long after the RWJF grant ended. That was the strategy then, and bottom-up remained the program's guiding philosophy through its final funding cycle in 2011.

A Lead Role for Local Funding Partners

To stimulate local philanthropic activity in the health field, *Local Funding Partnerships* considered only innovative community projects that were nominated by a local grantmaker acting in concert with other local funders. The nominating funder served as liaison between the RWJF office in Princeton, N.J. and the other local supporters. The community-based organization conducting the project was the grant recipient.

Each project had one nominating funder, but RWJF encouraged the formation of multiple funding sources as a strategy for ensuring sufficient support to continue the project after the RWJF grant ended. To maximize local support, the definition of "local funding partner" was broad, including family foundations, community foundations, corporate foundations, and individual donors.

A state or regional philanthropy could qualify as a local partner if the proposed project site fell within its service area. In addition, the program permitted the use of city, county, or state government funds if the applicant could demonstrate that no private philanthropic support was accessible in the region—for example, in an isolated rural area. In 2012, program staff estimated that projects had an average of six local funding partners per grant over the lifetime of the program.

Community funders were required to provide at least one dollar of support for every one dollar of RWJF grant money. Whatever the source of local matching funds, the match had to represent new spending specifically for the project; it could not be a reshuffling of funds to continue a service already provided. See [Appendix 3](#) for more information.

Program Management

In October 1987, RWJF contracted Ruth S. Hanft, PhD, a specialist in health policy, to organize and manage the new program.³ Within RWJF, Keenan and then-program officer Seitz collaborated with Hanft in the development process. Over the years, the national program office has been housed at George Washington University, the New Jersey Hospital Association and, since 1995, at the Health Research and Educational Trust of New Jersey.

Seitz left her position at RWJF to run the program and has been program director since 1994. She will remain in this post until the program officially closes in 2014. Curtis Holloman, MA, is deputy director. Leticia Peguero, MPA, served as deputy director from 2008 until February 2012.

For a history of national program offices and staff, see [Appendix 1](#).

The program's national advisory committee has had about 12–13 members appointed by RWJF program staff in consultation with Seitz. The membership consists of three general categories:

- Leaders of local foundations. The committee chair has always been from a local funding organization.
- Academics in health-related fields
- Community-based project personnel, including one former program grantee agency

See the program [website](#) for the current list of committee members.

The committee's main function has been assisting in the site-selection process. Members also help monitor funded sites and attend meetings of the grantees.

Annual Awards Program: The Core Component

From 1988 through 2011, RWJF awarded about 10 to 12 annual *Local Funding Partnerships* grants a year. The awards, which ran either three or four years, ranged from \$200,000 to \$500,000 depending on the scope of the activity. The grants were nonrenewable. However, RWJF has supported the expansion and replication of projects developed under *Local Funding Partnerships*. See [A Sampling of Local Funding Partnership Projects](#) for information on some of them.

Occasionally the program has made other, smaller types of grants, including planning grants to support projects that showed potential but needed additional preparation before they could obtain a full *Local Funding Partnerships* matching grant. For example:

³ PC147.

- In 2002, a Fort Collins, Colo., coalition sought support to improve local mental health and substance abuse services. The proposal was impressive but not sufficiently developed for the program. The coalition received \$72,050 to complete the planning process. The next year the coalition reapplied and received a regular \$290,000 project grant to implement the proposal.

In addition to financial support, projects over the years have often benefited from the resulting respect that an RWJF grant confers. According to many of the program's local participants, the grant gives a project increased credibility that helps them raise money from other sources.

As Terry Bell, president of the [Rockwell Fund](#), a local funding partner in Houston, puts it, “Everyone wants to back a winner.”

Peaceful Pathways: Reducing Exposure to Violence

In 2009, the national program office launched a special solicitation—*Peaceful Pathways: Reducing Exposure to Violence*—in order to prompt collaboration with small local organizations and funders from even more diverse, under-resourced communities than the annual program reached.

The focus of the special solicitation was violence, which had become a dominant theme of program grants over the past decade. As the 2010 call for proposals noted, “violence is too often an obstacle on the pathway to good health. While violent behavior is not confined by economic class, language, or location, certain populations are at higher risk for injury and harm.”

Peaceful Pathways targeted these populations, which include communities of color and people isolated because of their gender, sexual orientation, race, tribe, ethnic group or remote rural or frontier location.

Selecting the Grantee Organizations

Regular Program Grants

Applying for a *Local Funding Partnerships* annual grant was a two-part process that began with submission of a five-page project summary (called a brief proposal). Each year, the program office received more than 100 brief proposals. Six people independently read each and filled out a sheet rating the project on several criteria (see [Appendix 2](#) for the key review criteria). The ratings of the six readers determined whether the applicant was invited to submit a full proposal.

About 50 applicants received this invitation each year. From these, the national advisory committee selected about 20 finalists for site visits. Based on the site visitors' recommendations, Seitz, her deputy directors, and RWJF's Lowe, who is the program's

officer and director of the Vulnerable Populations Portfolio, recommended the top 10 to 12 candidates to RWJF for grants to implement their projects. (For a more detailed description of the selection process, see [Appendix 3](#).)

Peaceful Pathways Grants

The selection criteria and process for *Peaceful Pathways* differed from the annual grant program in the following ways:

- The nominating funder had to be a diversity-focused funder principally concerned with the community to be served, such as: a Black United Fund, an Asian-American/Pacific Islander Foundation or a Women’s Foundation. An additional requirement was that projects be planned and led by members of the group or community to be served.
- Projects had to focus on reducing violence and use the selected community’s assets to address threatening or violent behavior that resulted in emotional, psychological, or physical harm. For example, projects could address intimate partner violence, child or elder abuse, gang activity, school violence, or post-war trauma.
- The national program office accepted applications throughout the year with three designated review dates and an expedited review process. Only a brief proposal was required. RWJF and program staff identified promising applicants and interviewed them by telephone. Awards ranged from \$50,000 to \$200,000 over two years.
- Recognizing that small, diversity-focused organizations might struggle with the matching requirement, *Peaceful Pathways* required only a 75 percent dollar-for-dollar match with up to 25 percent from in-kind contributions.

Providing Technical Assistance to Help Projects Succeed

From the application process through the completion of the grant period, the national program office provides assistance and direction to local project participants. Helping them succeed is a major objective of the staff—and central to the program's philosophy.

“We are your advocates. We are your best cheerleaders,” Seitz tells directors of incoming grantee organizations.

The primary source of technical assistance is the annual meeting of program grantees. At these multiday sessions—held in various conference settings around the country—speakers conduct workshops on such topics as management skills, public relations strategies, and fund-raising techniques. The meetings also facilitate the exchange of ideas among grantees. In addition, the national program office:

- Brings clusters of staff from similar projects together for meetings focused on their common area of activity. For example:

- In June 2006, leaders of projects focused on mental health issues and youth met in Philadelphia to focus on media relations strategies.
- In February 2003, leaders of projects aimed at reducing violence met in Orlando, Fla.
- In June 2002, leaders of projects concerned with oral health met in Providence, R.I., site of a project focused on pediatric dental care.
- Assists prospective applicants by putting them in contact with current and former grantees working in the same program areas

For example, an Oakland, Calif., group seeking funding for a gang violence reduction program got helpful pointers from programs in Lowell, Mass., and Chicago—that previously received grants for projects in this area.

- Helps grantee agencies get assistance from other RWJF programs. For example, the *Local Funding Partnerships* program office recommends project staff for participation in the Connect Project, an RWJF initiative that helps grantee agencies build relationships with their members of Congress and other policy-makers.⁴
- In 2010, the national program office added a series of webinars customized to give grantee organizations more tailored and in-depth assistance. Afterward, an expert in the featured topic provides one-on-one consultation to help project staff apply information learned from the webinars.
- In 2012, the national program office is exploring use of social networking to maintain connections between grantee organizations that serve similar populations.

For more information on technical assistance and program monitoring, see [Appendix 4](#).

KEY RESULTS

The Program Supported Collaborative and Innovative Health Improvement Projects

From 1988 through September 2011, when grantmaking ended, RWJF awarded 369 program grants to implement a wide range of health services and interventions in collaboration with 1,488 community foundations, corporate grantmakers, and other local funding partners.

- **Through *Local Funding Partnerships*, RWJF has provided more than \$129 million to stimulate health-improvement projects in communities spread across 49 of the 50 states; Washington, D.C.; and Puerto Rico.** (See program [website](#) for a database of projects searchable by state, grantee organization name, project type, or

⁴ By law, RWJF funds cannot support lobbying but grantees are free to educate elected officials on health challenges facing their home areas and what their projects are doing to help address these challenges.

demographics of the served population. A [printable list](#) of all awards from 1988 through 2011 is also available.)

- Between 1988 and 2011, RWJF made 355 awards totaling some \$127 million under the annual program for projects that addressed a wide range of community-defined needs.
- Between 2009 and 2011, 14 awards totaling \$2.76 million went to diversity-focused projects that addressed violence prevention under the *Peaceful Pathways: Reducing Exposure to Violence* special solicitation.

The Projects Sustained Themselves Over Time

- **All but a handful of the grantee organizations accomplished the objectives they proposed to RWJF.** Since the program's beginning, only 12 projects have had to close before the end of the grant period because of inability to meet grant objectives, according to program staff.
- **Most projects continued operating after their RWJF funding ended.** Two evaluations by Mathematica Policy Research,⁵ one surveying projects funded from the program's inception through 2001 and the second surveying projects funded between 2003 and 2009, found that four out of five funded projects lasted at least one year after their RWJF grant ended. (See [Evaluations and Their Findings](#).)
- **The program's central philosophy of responding to locally determined needs has remained constant, and the specific kinds of projects funded under the program have evolved in response to community requests and needs.** Dental care projects were popular at one point, for example, asthma projects at another, and health promotion initiatives at still another.
 - In response to a growing number of requests for support of oral health projects, RWJF's own staff investigated the need for additional investment in that area. As a result, the Foundation funded two new dental care national programs: *State Action for Oral Health Access* (for more information see [Program Results](#)), and *Pipeline, Profession & Practice: Community-Based Dental Education* (for more information see [Program Results](#)).
 - Some of these project waves have also flowed from changes in national circumstances and RWJF's own grantmaking interests. In the 1990s, for example, as more and more immigrants moved farther and farther into the country's interior, communities that previously had few foreign-born residents sought funding for projects to help their growing immigrant populations.

⁵ [Mathematica Policy Research](#) is a public policy research and evaluation organization based in Princeton, N.J.

A SAMPLING OF LOCAL FUNDING PARTNERSHIPS PROJECTS

The Annual Grant Program

Over the past 25 years, projects supported by *Local Funding Partnerships* have offered innovative locally based and locally funded solutions for meeting the needs of vulnerable populations. Many of these have attracted the interest and support of RWJF and other private and public funders.

“Leading the way” is a phrase that “captures that impact pretty well, said Seitz. “These are projects that may not be unique but are very early adopters—and adapters—that help move the idea forward.”

The following is a small sampling of *Local Funding Partnerships* projects identified by Seitz and her staff as “leading the way” in providing innovative, effective, or replicable models of care for vulnerable populations:

- **Projects that RWJF has advanced by providing further grant support or by making them the prototype for a national program.**
 - ***Vote and Vaccinate*** (ID#s 32299, 45513, 51610). This project began in 1997 with grants to Sickness Prevention Achieved through Regional Collaboration (SPARC), a regional collaborative promoting innovative wellness promotion strategies for residents of western Connecticut, Massachusetts, and New York.

A SPARC initiative—providing influenza vaccinations to seniors at polling places on Election Day—served as the prototype for RWJF’s national program, *Vote and Vaccinate*. In 2004, *Vote and Vaccinate* provided demonstration grants to 15 public health departments to set up special influenza vaccination clinics near polling places on Election Day.

RWJF continued to support the replication and expansion of *Vote & Vax*. In 2008, with additional support from AARP, the program delivered 21,434 influenza vaccinations at 331 locations in 42 states and the District of Columbia See also the *Vote & Vax* [website](#) and the [Program Results](#).

In 2006, the Centers for Disease Control and Prevention (CDC) replicated SPARC’s full complement of health promotion strategies in Atlanta and three surrounding counties in Georgia. A local, regional, state, and federal collaboration produced SPARC-Atlanta.

- ***Portland Identification and Early Referral Program*** (PIER) (ID# 46139). In this project run by the Maine Medical Center, mental health clinicians worked with primary care physicians, teachers, and school counselors to identify young people at risk of schizophrenia and other psychotic disorders and provide treatment in partnership with the family, with the goals of reducing the incidence of psychosis and preventing disability from psychotic disorders.

In 2007, RWJF launched a national program to replicate PIER.

- ***CeaseFire: the Campaign to Stop the Shooting*** (ID# 37315). From 1999 through 2002, this Chicago-based group mounted a strategic effort that used street-level outreach, public education, community mobilization, and other public health methods to reduce gun violence. After CeaseFire proved successful in Chicago, RWJF provided further support for CeaseFire and two additional grants to replicate it in 15 other cities.⁶ For more information, see the [Grantee Profile](#) of CeaseFire’s founder and executive director, Gary Slutkin, MD, and the chapter about CeaseFire in the RWJF *Anthology*.⁷

In October 2009, U.S. Attorney General Eric Holder cited the project as an evidence-based best practice model.

CeaseFire staff also mentors two other *Local Funding Partnerships* projects to reduce gang violence:

- The Streetworker Program in Lowell, Mass. (ID# 48872), an outreach initiative to engage gang-involved youth in alternative activities at a teen center. See [Program Results](#) for more information on this project.
 - Caught in the Crossfire, in Los Angeles (ID# 51422), an effort to break cycles of gang retaliation and re-injury by having young adults who have overcome violence in their lives mentor young gang members who are hospitalized due to injuries resulting from violent encounters.
- ***Child FIRST*** Community Partnership (ID# 53605). This model program aims to decrease the incidence of serious emotional disturbance, developmental and learning problems, and abuse and neglect among high-risk inner-city children ages 0–5. When mental health and child development problems first arise, staff members work with pediatricians, teachers, and other community providers to assess and intervene with vulnerable children and their families.

In 2009, project staff was invited to consult with seven other communities in the state regarding replication. After funding for evaluation,⁸ RWJF awarded more than \$3 million to expand the model from its original site in inner-city Bridgeport to five more sites in Connecticut.⁹

- **Projects that have been replicated nationally or statewide through other funding sources;**

⁶ The grants to support CeaseFire in Chicago are ID#s 49802, 55535, and 56522. ID#s 60697 and 68156 support the replication effort.

⁷ Diehl D. “The Chicago Project for Violence Prevention” in *To Improve Health and Health Care: The Robert Wood Johnson Foundation Anthology*. Isaacs SL and Knickman JR (eds). San Francisco, Jossey Bass, January 2005. Available [online](#).

⁸ Grant ID# 60068 for \$124,580.

⁹ Grant ID#s 66121 and 69466.

- ***Naturally Occurring Retirement Community (NORC) Initiative*** (ID# 22530). This 1993 award to the United Jewish Appeal Federation in New York supported one of the first naturally occurring retirement communities. These communities provide support services for elderly residents in government-assisted housing. Replicated through congressional allocations were 45 sites nationwide in 2006 and 55 programs in New York State.
- ***California Screening, Brief Intervention, Referral and Treatment*** (ID# 22521). This project of the City of Escondido, which ran from 1993 through 1997, was a community collaboration to screen nondependent alcohol and substance users during routine medical visits and intervene by engaging them in appropriate treatment programs. Subsequently, the federal Substance Abuse and Mental Health Services Administration (SAMHSA) invested millions of dollars nationally in state SBIRT (Screening, Brief Intervention, Referral and Treatment) programs.

Chicago Health Connection’s Doula Project (ID# 29806). This project which ran from 1996 to 2000 was one of the first to use lay women or “doulas” to provide birthing and parenting support for pregnant teens in low-income communities. As of 2007, the project had been replicated in 10 states and 18 Illinois communities, and profiled in numerous national publications, including the *New York Times*. For more information, see [Program Results](#).

In 2008, the U.S. Health Resources and Services Administration (HRSA) awarded Health Connect One (formerly Chicago Health Connection) a two-year grant to provide training, technical assistance, and evaluation to a cohort of six new HRSA-funded community-based doula programs across the country.

- ***Hearth Connection*** (ID# 37329). Working with a broad range of partners, Hearth Connection, funded from 1999 to 2003, has helped break the cycle of homelessness for people with chronic chemical dependency, mental illness, or HIV/AIDS. The project has expanded from two counties in Minnesota to 26 counties, maintaining an emphasis on successful programs that could also be more cost-effective for government.

- **Projects that are “ahead of the curve”:**

According to the national program office, these projects received early support from *Local Funding Partnerships* and later evolved into accepted standards of best practice.

- ***Healthy Communities Farmers Market*** (ID# 29814). This grant, which ran from 1996 through 1999, enabled Kahuki Hospital in Hawaii to sponsor farmers markets on the hospital grounds, including offering diabetes screening and education with an emphasis on fresh, healthy food.

- ***Improving the System of Care for Latinos with Diabetes and Heart Disease in Orange County*** (ID# 24384). Funded from 1994 through 1997, this California project was an early model of hiring and training “promotoras” as community health workers and agents of change within the Latino community. The grantee organization was a small agency that became a strong community resource and now offers nationwide consultation and training to develop new promotora programs.
- ***Developing Accessible, Affordable Health Services for Underserved Teenagers*** (ID# 29819) From mid-1996 to mid-1999, the Lakeside High School Wellness Center in Wilmington, N.C., dealt with pregnancy, depression, abuse, fights, and learning disabilities. The Wellness Center—a source of more comprehensive services than are available at the typical school nurse's office—is a satellite operation of Wilmington Health Access for Teens, a nonprofit health facility for youth that opened in 1997. For a look at how this project developed, see the sidebar [Health Access for Teens: From Pregnancy to Grief](#).

- **Projects that addressed the influence of violence and trauma:**

The disruptive influence of violence and trauma on individuals, families, and communities became of dominant trend in the *Local Funding Partnerships* portfolio after 2000. Community and local funding agencies reported that violence was becoming a significant health concern.

“It wasn’t considered that way before,” said national program director Seitz. “We had programs that looked at domestic violence, or elder abuse, or gang violence, but not at community violence per se. After 2000, we saw a startling increase in projects that looked at the impact of violence on behaviors that continue across the life span and profoundly affect a family’s or an entire community’s ability to function.”

Under the final funding authorization (2009–2011), Seitz estimates that 90 percent of grantmaking is focused on the disruptive impact of violence, trauma, and related health and mental health problems. Examples include:

- ***Serving Together: Troops, Veteran, and Family Care Project***. (ID# 69171). This project works to improve the health and well-being of U.S. troops, veterans, and their families by promoting a common referral system between military, veteran, and community-based programs. A Web-based map with links to the full range of health, housing, education, financial, and other civilian services in Montgomery County, Md., will cross-reference with military and veterans programs.
- ***Reentry Through a Child’s Eyes*** (ID# 67912). To alleviate the adversity experienced by the children of incarcerated parents, this public/private partnership in Pittsburgh works to address the child's psychosocial needs, prevent family deterioration resulting from separation, and make the experience of visitation less traumatic. The primary goal of this comprehensive re-entry program is to reduce the number of children who experience the reincarceration of a parent.

- ***Porch Light Initiative*** (ID# 67921). This project aims to reduce the stigma of mental illness, increase awareness of mental health resources, and promote support for those in recovery through large outdoor mural making and poetry writing. The [Philadelphia Mural Arts Program](#) leads artistic collaborations with agencies serving some of the city's most underserved and under-resourced neighborhoods. Participants will include homeless women and children, youth in recovery, and Latino seniors.
- ***PATHH Collaboration (Providing Access Toward Hope and Healing)*** (ID# 69165). This new referral and triage program links victims of child sexual abuse to services as soon as possible and offers families and children the opportunity to join psychoeducational groups as an intermediary intervention. The Chicago-based project offers a potential national model to reduce the long waiting lists abused children typically face when seeking mental health care.

Peaceful Pathways: Attracting Small, Diversity-Focused Grantmakers

According to former deputy director Peguero, organizations receiving *Peaceful Pathways* grants would not have been competitive under the regular annual program. The focus on community violence along with the lower matching requirements was key to engaging these organizations, said Peguero.

She pointed to the following examples of the innovative and effective programs and funders that *Peaceful Pathways* was able to engage:

- ***Coalition for Gender Equity in Schools*** (ID# 67096). A partnership of youth, parents, school staff, and community-based organizations is working to end gender-based violence and sexual harassment in New York City public schools. The project is developing youth leadership and empowering young women and men to recognize sexual assault and advocate for themselves in reporting harassment. The nominating funder is the New York Women's Foundation.
- ***Promotora Bar Outreach Project*** (ID# 69209). Voces Latinas, a small Latino-focused organization, is using this grant to reach out to sex workers posing as waitresses in Queens, N.Y. After converting bar and restaurant managers into project partners, Voces Latinas assigns peer advocates ("promotoras") to help sex workers overcome their isolation and connect to culturally and linguistically appropriate services. The New York Women's Foundation also funds this project.
- ***Peace in the Home*** (ID# 68684). The Dallas Women's Foundation is collaborating with the all-volunteer Texas Muslim Women's Foundation and funders from the Muslim community to expand domestic violence prevention and intervention for Muslim women and children. Project staff members provide crisis services, referrals, case management, and counseling and educate both mainstream providers and Islamic organizations about the specific needs of Muslim women.

- ***Power Up! Speak Out!*** (ID# 67904). Domestic and Sexual Violence Services of Carbon County (DSVS) in Red Lodge, Mont., created a culturally appropriate prevention program to address teen dating violence in Western frontier and rural communities. Focusing on grades 7 through 9, the student-driven curriculum uses images and messages relevant to frontier youth living in sparsely populated, rural areas and isolated small towns.

For a more detailed description of these and all projects funded by the program since its inception, see the [Search for a Project](#) section of the program website. For links to full descriptions of a selection of projects, see [Project Reports and Sidebars List](#).

Communications Results

The program's principal communications product is its [website](#), which explains the program's purpose, identifies the program staff, provides a locator map, and features a brief description of each funded project. The website was launched in May 2000 and has been periodically redesigned and enhanced since then.

In 2009, for example, the national program office redesigned the website to include details on both the annual grantmaking and *Peaceful Pathways* programs (CFP's, FAQs, Eligibility, etc.) and different portals of information for grantmakers and grantees. Working with YellowBrickRoad Communications, the national program office also produced a new [program video](#).

In 2012, the website is undergoing another revamping to prepare for the close of the *Local Funding Partnerships* in 2014 and the dissemination of model programs, case studies, and lessons learned from more than 25 years of operations. Starting in 2012 and continuing over the next two years, the website will be updated to feature what Seitz calls funded projects that “led the way.”

On the local project level, communication has been a key component of projects aimed at changing health-related behavior. For example, a project in Portland, Maine—the Early Identification and Treatment of Adolescent Psychosis¹⁰—used intensive media outreach to notify parents of the early warning signs of psychosis in young people and the help that is available to prevent full-blown mental illness.

The national program office staff refers project staff to communications training conducted for selected RWJF grantees by an outside firm. Also, the annual meeting typically has included assistance in communications.

The national program office helps selected projects get additional publicity through RWJF's own communications resources. For example, the Foundation profiled Carrie

¹⁰ ID# 46139. As noted earlier, this project turned into a national program, *National Demonstration of Early Detection, Intervention and Prevention of Psychosis in Adolescents and Young Adults*.

Whipper, coordinator of *Heart and Soul*, a South Carolina project, on the [RWJF website](#) and featured her in an ad in *Roll Call*, a Washington newspaper focused on Congress.

See the [National Program Office Bibliography](#) for details of other communications activities.

EVALUATIONS AND THEIR FINDINGS

RWJF has commissioned four outside evaluations of the *Local Funding Partnerships*.

First Evaluation: Relationship with Local Philanthropies, 1994

Undertaken as RWJF considered whether to reauthorize the program in 1994, the first evaluation¹¹ assessed the program's effect on and relationship with local philanthropies that were funding partners.

Staff at the Indiana University Center on Philanthropy interviewed 22 project directors and representatives of 72 local funders.

Findings

The evaluation team told RWJF that the program "received extraordinarily high marks from all who are involved." However, the team's February 1994, report also noted:

- About half of the funders felt "all the give" was required of the local partners and none of RWJF. "There was also the conundrum about who made the commitment first, RWJF or local funders, and it often caught the grantee in the crossfire."
- Most funders had little or no contact with RWJF and did not consider the program to be a true partnership with RWJF. One respondent said: "A partnership usually indicates that one is seated at the table when discussing ideas and programs, while in this program RWJF is a name people will mention, but there is no face associated with the Foundation...."
- "Many considered the prestige of working with RWJF to be important in bringing local community support to the project as well as assisting in building community response to a health need."

Second Evaluation: Technical Assistance and Partnership, 2000

In preparation for the 2001 reauthorization, RWJF contracted with Mathematica Policy Research¹² to assess (1) the program's capacity to attract innovative but inexperienced applicants and (2) the program's role in local philanthropy. Researchers interviewed

¹¹ ID# 22773.

¹² ID# 40161.

program staff, advisory committee members, and 12 applicants—six that received grants and six that did not—and their local funders.

Findings

Attracting Diverse Applicants

The January 2001 report to RWJF indicated the national program staff was running a successful program and that respondents praised the quality of the technical assistance provided by the office.

However, the report also noted the program office “could improve its outreach and technical assistance activities by approaching them more systematically and proactively.”

The report offered recommendations for several changes, including providing nontraditional applicants with more technical assistance and designating specific national program office staff as contacts for technical assistance requests.

In response, Seitz increased the role of the program's communications director and reorganized staff and resources to provide more technical assistance and expand services to potential applicants. Also, RWJF authorized the hiring of a second deputy director.

Relationships with Local Funders

On the second issue—the program's role in local philanthropy—the evaluators reported that while local funders support the program, “most feel no partnership” with it.

“Funders were not asked for much input on their projects or notified on key communications between the national program office and the project,” the report said. “Many [funders] commented that they had no sense of their assigned role.”

The report recommended changing either the role of the local funders or the program's name and promotional language. “The current rhetoric annoys many of the local funders because it promises a connection that is not delivered.”

(The [Challenges and Lessons Learned](#) section of this report discusses efforts by RWJF and the program staff to increase the sense of partnership among local funders.)

Third Evaluation: Factors Influencing Project Sustainability, 2002

In 2002, RWJF contracted with Mathematica Policy Research¹³ to analyze completed *Local Funding Partnerships* projects in order to identify factors that influence sustainability.

¹³ ID# 44597.

The research team traced 120 projects that received grants and completed their projects between the program's beginning and December 31, 2001. The evaluation's first phase was a summer 2002 telephone survey of the projects' directors and local funders to determine:

- Which projects continued operating after RWJF funding ended
- Among those continuing, how the grantee organizations replaced RWJF money and what other survival steps they took

The evaluators were able to locate and survey respondents for 112 of the 120 projects.

The second phase of the evaluation consisted of 10 in-depth case studies of specific projects and their survival methods.

Given the community-based, innovative nature of program-supported projects, evaluators Beth Stevens, PhD, and Deborah Peikes, PhD, anticipated at the outset that they would find that about 40 percent of the projects survived after their RWJF funding ended. The study results were a surprise.

Findings

The evaluation team reported its findings in a 2006 article ("When the Funding Stops: Do Grantees of the Local Initiative Funding Partners Program Sustain Themselves?") published in the journal *Evaluation and Program Planning* (see the [Evaluation Bibliography](#) for details):

- **Of the 112 projects surveyed, 92 percent (103) survived at least one year after RWJF funding ended, and 80 percent were still operating at the time of the survey, August 2002.**
- **Assuming that the eight projects not located had closed after their grants ended, 75 percent of the 120 grantees were continuing to operate as of August 2002.** (Because of the projects' varying start dates, the length of their survival times varied. The average follow-up period for the projects at the time of the survey was 4.8 years.)
- **Based on project director reports, 34 percent of the projects had been replicated by another organization,** and some 41 percent of the project directors reported that some part of their project model had been adopted by another organization.
- **While the survival rate was high, evaluators found “that projects faced many challenges in securing new resources to continue operations.”** The challenges included filling substantial budget gaps, developing new ways to earn revenue, and “finding ways to retrench.”

- **Of the 103 projects that were sustained at least one year, 71 percent were able to completely replace their lost RWJF and local funder revenues and “continue with the same or an increased annual operating budget.”**
- **Among the sustaining projects, two-thirds raised money from new funders, most commonly foundations.** In addition, 35 percent survived by beginning to generate revenues from project activities.
- **Project-related factors that increase sustainability include (1) support from sponsoring organizations, (2) charismatic leadership, and (3) pursuit of survival tactics, such as strategic planning, development of a diversified funding stream, and use of a professional fund-raiser.**
- **In addition to astute management and organizational sponsorship, projects “cannot survive without support from external actors like community members, local political leaders, and funders who can provide financial, political, and technical support.”**

In a 2003 presentation at RWJF, evaluators identified a number of factors that they said helped explain the projects' high survival rate:

- The program's rigorous selection process weeds out weaker projects.
- Many projects were not start-ups. Some 40 percent were already operating before their RWJF grant began.
- Many projects were hosted by larger, established organizations able to provide various advantages—including financial subsidies and expertise—that helped the projects survive. Some 69 percent of the survivors operated within a host organization as opposed to being a stand-alone. Some 66 percent of these host organizations had an annual operating budget greater than \$1 million.
- Many projects had staff members who were assertive in their pursuit of funding to sustain the project. Some 70 percent of the projects began seeking replacement funding during the first two years of their RWJF grant, and 64 percent employed professional grantwriters or development staff.
- Many projects were able to secure ongoing reimbursement—such as Medicaid payments and training fees—for at least some of their services.
- The board members of some project organizations provided crucial expertise and political support to help secure alternate sources of funding.

Fourth Evaluation: Innovation, Sustainability, Replicability, 2009

RWJF made a one-year \$587,174 grant¹⁴ to Mathematica Policy Research in September 2009 for the fourth evaluation. This evaluation addressed four major questions:

- Are the projects funded by *Local Funding Partnerships* innovative? How do they compare with those in similar programs that seek to promote social innovation?
- Can *Local Funding Partnerships* projects generate evidence of their effectiveness?
- Are the *Local Funding Partnerships* projects sustainable? What factors contributed to or challenged their sustainability?
- Have *Local Funding Partnership* projects been replicated? What types of replication occurred and what factors contributed to or challenged their replication?

Evaluators Beth Stevens and Jung Yee Kim, MPH, also asked questions about the structure and operations of *Local Funding Partnerships* and how well it fit within the larger and evolving landscape of the philanthropic sector.

The questions were answered through:

- Surveys of organizations funded between 2003 and 2009 and their local funders
- Development of a scale to measure the degree of innovation of *Local Funding Partnerships* projects in comparison to a matched sample of projects awarded by the Harvard Kennedy School's Innovations in Government Awards Program and the Ashoka Fellows Program
- Case studies of four projects that have sustained themselves after RWJF funding ended and four that both sustained and replicated themselves
- Interviews with experts on the philanthropic sector
- A survey of local foundations that never applied to *Local Funding Partnerships* for support of innovative health and health care projects for underserved and vulnerable populations in their communities.

Findings

The December 2010 evaluation report notes:

- **Grantee organizations and their local funders believed that their projects were innovative, but innovation was not the only reason funders nominated a project.**
 - More than 61 percent of grantee organizations and 88 percent of funders surveyed considered the projects they implemented or supported provided a new service or combination of services.

¹⁴ ID# 66543.

- Some 97 percent of local funders said they funded the project because it served a critical need, 67 percent said the project represented a best practice, and 48 percent said they funded the project because it would be sustainable.
- **Some respondents expressed doubt about the capacity of local funders to nominate truly innovative projects that have broad social impact.** One philanthropic expert told the evaluators “Local foundations have to be responsive to their communities.” A local foundation representative said, “A lot of local foundations recognize that borrowing from other places is often a better strategy than innovating anew in a community. . .we are less enamored by innovation; it’s more about learning from previous efforts.”
- **Local Funding Partnerships and its two comparison programs (Harvard and Ashoka) were all innovative, but in different ways.** Lowe and the evaluation team noted that assessments of a project’s innovation vary depending on how “innovation” is defined.
 - New model development is central to RWJF’s notion of innovation, said Lowe, and on that score, *Local Funding Partnerships* projects were less innovative than Harvard and Ashoka projects: 100 percent of Harvard projects and 98 percent of Ashoka projects offered new models, compared with 86 percent of *Local Funding Partnerships* projects.
 - On other dimensions of innovation, *Local Funding Partnerships* projects performed well, said Lowe. *Local Funding Partnerships* projects were significantly more likely than either Harvard or Ashoka projects to offer programs that addressed a new group (68% versus 34%) or a new location (64% versus 36%).
- **Almost all grantee organizations (97%) evaluated their effectiveness, but there were problems with the rigor of the evaluations in many cases.** Some carried out the evaluation themselves (28%); others commissioned third parties (52%). Agencies used several types of evaluation, often employing more than one type.

While most Local Funding Partnerships grantees had some evaluation capacity, few were able to provide solid evidence of their project’s effectiveness. Analyses of seven completed evaluations revealed problems in research design and data collection methodologies, including small sample sizes, reliance on self-report for outcome measures, and the absence of a comparison or control group.

- **Four out of five projects surveyed sustained their operations for more than one year after their grant ended.** The sustainability level for projects funded between 2003 and 2009 was comparable to that reported in the 2002 evaluation for projects funded between 1988 and 2001.

- Rather than scaling back operations after their funding ended—as many projects in the earlier study did—the 2003 to 2009 cohort was able to either maintain the same level of operations or increase aspects of their operations.
 - Almost all (97%) maintained or increased the geographic area they served, and 82 percent maintained or increased the size of the population served.
- **Analysis of eight case studies uncovered 10 “pathways to sustainability” shared by *Local Funding Partnerships* projects.** The evaluators highlighted the following five as “central paths:” (For a list of the 10 pathways, see [Appendix 5](#).)
 - Addressing an important unmet need by finding a service niche
 - Developing and maintaining internal organization support for the program
 - Having a program model that has been proven effective
 - Focusing on sustainability from the beginning
 - Leveraging funding relationships to gain access to new funding sources.
- ***Local Funding Partnerships* projects replicate themselves less often than they sustain themselves:** 40 percent of grantee agencies reported that their projects were replicated (14% as full replications and 26% as partial replications).
 - The majority of grantees and funders expressed a desire to replicate their project and took action to spread information about it.
 - Over half (55%) intentionally tried to have their project replicated.
 - A large majority (91%) received media coverage and invited outsiders to tour the project (85%).
 - Over 60% provided technical assistance to other organizations trying to implement similar projects.
- **Replication requires substantial time and resources.** Based on their analysis of four cases of successful replication by *Local Funding Partnerships* grantee organizations, the evaluators identified five critical steps:
 - Preparing the project for replication by packaging the model and addressing weakness that might hamper replication, such as high project costs or need for expert staff
 - Providing clear information on the project for potential users
 - Possessing the internal organizational capacity, infrastructures, and funding to manage the replication process. Replication activities include communicating with prospective sites, organizing and implementing trainings, creating guides and training materials, and providing technical assistance to replication site staff.

- Screening and selecting the best sites for replication
- Addressing legal issues (such as branding and licensing the program to clarify ownership issues) up front

CHALLENGES AND LESSONS LEARNED

The program faced two broad challenges: developing and maintaining effective partnerships with local funders, and sustaining the projects after RWJF funding ended. RWJF and national program staffs responses to the challenges improved the program and yielded lessons for others.

Partnerships with Local Funders

The nature of the relationship between the local grantmaker and RWJF has at times been a source of tension. RWJF's large size and program role create the opportunity for resentment at the community level.

Requiring applicants to secure a formal funding commitment from their local backers before RWJF made its site-selection decisions was an early source of tension. In some instances, local institutions mounted public drives to raise the necessary match but ended up not receiving a grant. The resulting anger and embarrassment undermined the cooperative spirit that the program was supposed to generate between RWJF and its sister philanthropies at the local level.

To avoid that situation, RWJF revised its eligibility rules in 1991, requiring only a letter from the sponsoring foundation stating its intention to secure the necessary match if the proposal were successful. Once awarded, the RWJF grant would be conditional on fulfillment of the local match intention.

Dropping the need for a formal funding commitment helped improve the climate. However, two program evaluations commissioned by RWJF—in 1993 and 2000—documented a perception among some local funders that *Local Funding Partnerships* was a partnership in name only. (See [Evaluations and Their Findings](#).)

"Doing partnerships between national and local foundations is very difficult," says Robert E. Eckardt, senior vice president for programs and evaluation at the [Cleveland Foundation](#) and a former national advisory committee member. The rejection of a proposal puts the local funding organization that endorsed the project in an uncomfortable position, he adds.

Eckardt says that while RWJF can point to a high success rate among its many funded projects, a local foundation that backs a failure has a 100 percent failure rate. Also, he notes that while RWJF may be providing more money to a project than any one local

funder, the local organization's support may represent a larger investment in terms of its total giving.

A further complication is that local funders do not all want to be treated the same way. Some, says Eckardt, are anxious to be involved in their project and work closely with RWJF and the grantee organization; others are content to write a check and let RWJF handle the rest.

RWJF and the program office staffs are sensitive to these issues and, said RWJF's Lowe, have made an increasing effort to involve local funders as true partners. Eckardt agreed with that assessment in a 2004 interview noting that the result was a greater sense of partnership among local funders than in the past. National program staff also invites the lead local funders to attend the annual meeting along with their grantee's staff and meets separately with them to discuss program issues and concerns.

A change made several years ago in the grant-notification procedure is another indication of RWJF's increased emphasis on partnership. It used to be that the first telephone call from the national program office went to the successful applicant, who then might call the local funder to pass on the good news. Now, the local funding organization gets the first notification, allowing it to be the one that tells the applicant.

It sounds like a small matter, said Eckardt, but the revised sequence helps make the local funder feel like a real partner, not just a mathematical one.

Similarly, Eckardt said, the program staff made a greater effort to involve local funders in on-site monitoring visits—a step that he suggested paid dividends in oversight. A local foundation actively engaged in a project was less apt to feel like a tattletale if its staff notified the national program office of a problem, Eckardt says.

In another sign of the effort to involve local grantmakers, program staff instructs new grantee organizations to discuss proposed changes in their project budget with their local funders before coming to the national program office for permission to make the changes.

In June 2003, RWJF invited the local grantmakers to Foundation headquarters in Princeton for a special day-long meeting on program issues. Unlike the annual meeting, this session was exclusively for local funders—only the second time in the program's history that RWJF had hosted the funders by themselves.

RWJF President and CEO Lavizzo-Mourey expressed her commitment to expanding the partnership and making it more effective. Lowe urged the funders to provide feedback on what works with the program and what does not.

RWJF can look back over the 25 years of *Local Funding Partnerships* and find both great progress in partnership building and persistent challenges, according to Lowe. “There are

many more collaborative and cross-funder partnerships than when *Local Funding Partnerships* started. Partnerships are much more the norm now, and *Local Funding Partnerships* helped make that happen.”

Within *Local Funding Partnerships*, Lowe notes a trend that remains a challenge for building local partnerships. “The goal was to have a local funder nominate a great project idea, but in reality what we were seeing more and more was that nonprofit agencies were going to local funders, asking to be nominated. Calls to the national program office were shifting away from funders towards nonprofits looking for funders to support them.”

This shift affected buy-in by local funders and their sense of themselves as partners with RWJF, adds Lowe. “If the funder nominated a project, that meant ‘we think this idea has legs and we will make it work.’ That type of nomination kept the local funder connected to us and also meant that the project paid equal attention to its local funders and to RWJF. When the project asks for a nomination, and the funder agrees to provide some support, that is very different. It is not an investment on the part of the local funder.”

Sustaining the Projects

Even with the excellent record of sustainability among the projects, sustainability is a continual challenge—ensuring that projects have sufficient support to continue when their RWJF grant ends. Since the grants are designed to be a catalyst and cannot be renewed, each project's future depends on maintaining the support of its local funders and finding new sources of funding. As Seitz has told incoming project staff, “RWJF is just a phase you're going through.”

To better prepare grantee organizations for life after RWJF funding, the program staff increased their attention to sustainability issues at the annual meetings. “Attract Resources with Best Practices” was the title of one workshop at the 2007 meeting, for example. “Basics of Successful Fundraising: Planning and Research” was another.

Sustainability is a concern of the local grantmakers, not just RWJF. “We don't want to be the lifelong funders,” said Jana Mullins, program officer for the Rockwell Fund, a Houston foundation that was lead local funder of a *Local Funding Partnerships*-supported project at a health center in an underserved Houston neighborhood. Through the national program office, the project received technical assistance in business planning and encouragement to pursue reimbursement and other funding sources.

MissionWise: A Case Study of Supporting Sustainability

Business planning for long-term sustainability and model dissemination was the focus of a \$399,151 grant¹⁵ awarded to the [Comprehensive Health Education Foundation](#) in

¹⁵ ID# 52828.

Seattle in 2005. Between 2005 and 2010, 20 organizations participated in MissionWise, a division of the Comprehensive Health Education Foundation that helps nonprofits establish alternative income sources geared largely to dissemination of their product or service to other geographic areas.

BodyLove,¹⁶ a radio soap opera in which African American characters confront common health problems, is an example of how MissionWise helped projects “think out of the box,” said Seitz. Faculty from the departments of public health and theater at the University of Alabama had created BodyLove and wanted to use their *Local Funding Partnerships* grant to expand and disseminate it to more radio stations.

Technical assistance from MissionWise helped the BodyLove staff see that they needed to evolve from an academic model, where growth is dependent on research grants and donor development, into a business enterprise, said Seitz. BodyLove staff set up a new nonprofit, [Media for Health](#), to market and sustain BodyLove within the context of the entertainment industry, rather than academia.

See [Program Results](#) for information on how MissionWise helped with the replication plans of another grantee organization—In-SHAPE, a health promotion program for people with mental illness.¹⁷

Local projects and funders also received help in weathering the acute financial crisis that began in 2008. In 2009, the national program office surveyed projects to assess their financial needs in light of reduced revenues and increased demand for services. For the first time, RWJF awarded supplemental funds to seven projects to complete their matching funds requirement. In 2010, 27 grantees of *Local Funding Partnerships* received RWJF *Response to Economic Hard Times* grants to sustain their services.¹⁸

Seitz and the evaluators offered the following lessons based on these experiences with partnership creation and project sustainability:

1. **Engage local funding partners as active participants in a project.** Local funders can bring more than money to a philanthropic partnership; they can also help firmly root the project in the community.

Local funders are able to attract other supporters and deal with community leaders to resolve problems. A local funder that becomes involved in a project may have a

¹⁶ ID# 51424.

¹⁷ ID# 63029.

¹⁸ All told, 61 organizations received grants under this \$10 million two-year authorization that the Board of Trustees approved in January 2009. The purpose was to support community-based nonprofits that were struggling to continue their missions of serving vulnerable individuals and families during the recession. These organizations were seeing dramatic increases in the demand for their services, even as their resources were decreasing due to cutbacks in state and local funding and reductions in grant funds. Although aimed at grantees, it was also open to organizations that had not received RWJF funding.

bigger impact on its outcome than one that writes a larger check but does not otherwise participate. “I’m saying money isn’t everything.” (Program Director/Seitz)

2. **Be open to the viewpoints and priorities of local funders when developing a project.** Remember it is their support that will sustain the project over the long term. Developing a good understanding of local philanthropy and working closely with local grantmakers have been factors in the success of projects supported by of *Local Funding Partnerships*. “They are our eyes and ears on the ground. They tell us what’s innovative and creative and what works in a community.” (Program Director/Seitz)
3. **Be accessible to grant applicants, project staff, and local funders.** Respond promptly to problems and inquiries. The accessibility of the *Local Funding Partnerships* program staff has been a factor in the program's accomplishments. Accessibility generated good relationships with organizations in the field, and good relationships facilitated the staff's ability to address difficult situations as they arose. (Program Director/Seitz)
4. **Use a “bottom-up” (locally based) funding strategy to maximize your chances of sustaining a project.** The 2009 evaluation found that 83 percent of local funding partners reported providing additional funding after RWJF funding ended. They also provided in-kind support. This suggested to the evaluators that local funders might view *Local Funding Partnerships* as a longer-term investment in their communities. (Evaluators/Stevens and Kim)

WHAT DOES THE FUTURE HOLD?

The national program office will provide technical assistance and monitoring to some 64 new, active, and closing *Local Funding Partnerships* projects through 2014. Seitz stresses the importance of assuring this last group of grantees that they will receive the same active, high-quality technical assistance as earlier award recipients. In fact, said Seitz, they are likely to receive special attention, like the “last kids going off to college.”

“We used to spend half of our time recruiting and reviewing new grants. Now we’ll have more opportunity to focus on our projects. We want to know how *Peaceful Partnerships* projects fare, what their technical assistance needs are, and whether they are able to embed their work in community.”

The national program office is also preparing for the close of the program and will complete a formal dissemination plan in 2012. “We want to capture and disseminate lessons learned over 25 years, identifying trends from programs and funding partnerships. The idea of a funding partnership was an aberration when we began, and now it is the norm,” said Seitz.

“We are tracking down every project funded since 1988 to learn how many are still in existence. We want to know are the doors open and the lights on, but more important, can

they still be identified as a project. Have they endured and established themselves in the community?”

The national program office will develop and disseminate case studies to give other communities “real world, real time” examples of what *Local Funding Partnerships* accomplished and how the projects sustained themselves after RWJF funding ended.

Prepared by: Michael H. Brown and Jayme Hannay

Reviewed by: Mary Nakashian and Molly McKaughan

Program Officer: Jane Isaacs Lowe

Evaluation Officer: Laura Leviton

Program area: Vulnerable Populations

APPENDIX 1

History of the National Program Office

In October 1987, Ruth S. Hanft, PhD,¹⁹ a specialist in health policy and RWJF's Terrance Keenan and Polly Seitz began to organize and develop an office to manage the program. Shortly thereafter, Hanft joined the George Washington University faculty, and RWJF made two 12-month grants²⁰ to the university to cover the services of Hanft and clerical help for two years.

At this time, RWJF also established a full-fledged national program office at George Washington University to manage the application and selection process, monitor the funded projects, and report results to the Foundation. In addition to Hanft, again selected program director, the new program office included a full-time deputy director and secretary.

RWJF funded the new office through four consecutive 12-month grants to George Washington University²¹ starting in August 1991. The Foundation appointed a national advisory committee—including some holdovers from the *Community Care Funding Partners* advisory committee—to assist the site-selection process and help set overall policy.

Relocation of the National Program Office

In 1995, RWJF moved the national program office from George Washington University to the Health Research and Educational Trust of New Jersey, located in Princeton, N.J., a short drive from the Foundation.

Although not the sole reason for the move of the national program office from Washington to Princeton, the move did allow RWJF to implement a concept it was interested in testing: placing two similar programs under one administrative roof in order to share resources and achieve other synergistic benefits.

RWJF made the new national program office—located at the Health Research and Educational Trust—responsible for both *Local Funding Partnerships* and a second program, *New Jersey Health Initiatives*.

Like *Local Funding Partnerships*, *New Jersey Health Initiatives* funds innovative community-based health projects (see [Program Results](#)). However, it supports only

¹⁹ RWJF contracted with Hanft via PC# 147.

²⁰ ID#s 12903 and 31196.

²¹ ID#s 18513, 19313, 21070, 22940.

projects in New Jersey—RWJF's home state—and does not require matching grants from other funders.

Since 1995, RWJF has funded the managing office through a continuing series of 12-month grants. Factors internal to RWJF and unrelated to the program were largely responsible for the office move.

Seitz, who had helped initiate the program as an RWJF program officer, became director in 1994, and has continued in that position ever since. In addition to Seitz, program staff includes a deputy director, Curtis Holloman. Orin "Ted" Hardgrove retired as deputy director in 2006. Sandra Lopacki and Leticia Peguero completed their service as deputy directors in 2007 and 2012 respectively. Deborah Dunn Solomon was the director of media and public information from 1999 through 2011.

Until 2001, Seitz directed both programs, with a deputy director for each. In 2001, RWJF moved *New Jersey Health Initiatives* to the Camden campus of Rutgers University. *Local Funding Partnerships* remained at Health Research and Educational Trust of New Jersey under the direction of Seitz.

By then, both programs were experiencing significant growth. RWJF concluded that separate staffs would be better able to manage their expanded project portfolios. Also, running two grant competitions out of one office resulted in what Seitz called "calendar collision."

APPENDIX 2

Key Application Review Criteria

- Commitment of funding partners to provide matching funds was apparent. (Highest scores for multiple grantmakers and/or firm commitments.)
- Potential impact on service delivery in state and local community was demonstrated.
- Clarity of program design. The proposed intervention and objectives were clearly described and reasonable.
- Impact of the initiative was demonstrated through quantified service goals.
- Innovation in community was discussed, and there was a potential for replication if the project was successfully implemented.
- Capacity of the agency to achieve proposed objectives was demonstrated.
- Collaboration among community providers and public agencies was evident.
- Budget was reasonable and project was cost-effective.

- Sustainability was addressed and appears feasible.
- Evaluation plans were described.

APPENDIX 3

The Selection Process

Applying for a Local Funding Partnerships grant was a two-part process, beginning with submission of a five-page brief proposal. Each year, the program office received a total ranging from 112 to 334 brief proposals; they reviewed 4,869 brief applications between 1988 and 2011. Six people independently read each and filled out a sheet rating the project on several criteria, outlined in [Appendix 2](#).

The six readers included two national advisory committee members, the program director and two deputy directors, as well as RWJF’s Jane Isaacs Lowe who also directs the RWJF Vulnerable Populations Portfolio, or another RWJF program staff member. The ratings of the six determined whether the applicant was invited to submit a full proposal.

Each year through 2011, about 50 applicants received invitations to submit full proposals. To help the invited applicants prepare their submissions, the national program office used to hold two proposal-writing workshops, one on each coast.

In 2003, however, the program office began disseminating the information through Web-based conferences. These “virtual workshops” eliminated travel expenses for the applicants and *Local Funding Partnerships* staff.

Eight people (four national advisory committee members plus the program director, deputy director, and Lowe) separately read and evaluated each proposal.

The full advisory committee then met to discuss the recommended proposals and vote on which projects to move into the site visit—and final—phase of the competition. For each proposal, an advisory committee member acted as primary reader and made the initial presentation to the committee. Members of the program and RWJF staffs offered comments but did not vote.

Each year, about 20 projects received site visits. The visiting team usually consisted of a program staff member and an advisory committee member. Lowe and other RWJF program officers with expertise relevant to the prospective project might also participate.

The visit team met with leaders of the applicant agency, officials of the local funding organizations and usually with local civic leaders. To be selected, a project needed to have strong community backing, and applicants typically used the site visit to demonstrate a breadth of support.

“I think I met everybody in Bluffton, Indiana,” Sandy Lopacki said only half jokingly, after visiting that Wabash River town to explore a proposed—and ultimately successful—project to promote physical activity. (Lopacki retired as one of the two deputy directors in 2007.)

The site visit was an opportunity for face-to-face evaluation of the strength and commitment of the applicant and funding partners. The visit team sought clear evidence that the first-year local match would be in place at the start of the grant and that funding sources for subsequent years were identified.

In at least one instance, Seitz believed a greater financial investment by the local participants was warranted, and she used the visit to make that point directly. The organizations agreed to increase their support, and the project was funded.

The team members wrote a report on their site visit with a recommendation on whether to fund the proposed project. Seitz, the deputy director(s) and Lowe reviewed all the reports and recommend the top candidates to RWJF for grants.

In most cases, the site visit left little doubt whether funding was warranted, said Lowe. Each year, however, a few projects were borderline, and their fate might be influenced by other factors, such as geographic distribution, said Seitz.

APPENDIX 4

Project Monitoring

The grantee organizations submit semiannual written progress reports. Also, all projects receive a site visit—usually by a national program staffer and an advisory committee member—at some point in their second grant year. The visit is an opportunity to see firsthand how the work is proceeding and discuss any problems.

In addition, the project's local funding partners often assist the national program office in its monitoring function. In one case, the local funder became concerned about the apparent lack of project activity and asked the program staff to make a special site visit. As a result, RWJF terminated the grant just 13 months after it started. On other occasions, site visits have helped get struggling projects back on track.

"We're a very user-friendly office," said Hardgrove (now retired). The staff understands that projects will hit unexpected bumps, especially during the start-up phase.

Turnover in project leadership can be especially disruptive. Of the 18 projects selected in 2002, five experienced unanticipated changes in leadership in the first two months, due to serious illness, a transferred spouse, or job termination. Four of the five projects were able to successfully meet their objectives.

The program staff tells new grantees that what is important is to keep their local funding partners and the national program office informed—of the bad news as well as the good. The one thing the staff does not want, says Seitz, is surprise.

APPENDIX 5

Factors in Project Success

In their 2010 evaluation report,²² Mathematica Policy Research evaluators Beth Stevens and Jung Yee Kim analyzed eight case studies of *Local Funding Partnerships* project that sustained their work after RWJF funding ended and identified 10 pathways to sustainability that the projects shared:

- Addressing an important unmet need by finding a service niche
- Having a program model flexible enough to adapt to changing conditions while maintaining core elements
- Developing and maintaining internal organizational support for the program
- Gaining broad visibility through multiple communication channels
- Developing a network of key external supporters or champions
- Developing and maintaining a reputation for providing excellent service
- Having a program model that has been proven effective
- Focusing on sustainability from the beginning
- Leveraging funding relationships to gain access to new funding sources
- Sharing responsibility and capacity to increase efficiency and redistribute costs

²² Stevens B and Kim J. *Evaluation of the Local Funding Partnerships Program: Final Report*. Princeton, NJ: Mathematica Policy Research, December 31, 2010.

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PROJECT REPORTS AND SIDEBARS LIST

Program Results and sidebars on a selection of *Local Funding Partnerships* projects are posted on www.rwjf.org. Click on a report's title to go to it.

- [A Capitol Endeavor: Low-Income Washingtonians Get One-Stop Clinic](#) (December 2005)
- [Adults with Severe Mental Illness Get In SHAPE](#) (January 2011)
- [African-American Hairstylists Enlisted as Lay Health Promoters in Eight Michigan Cities](#) (June 2007)
- [Angels in the Carolinas: Interfaith Teams Overcome the Stigma of AIDS](#) (December 2005)
- [Baltimore Elderly in “Safe at Home” Program Experience Fewer Falls, Better Health](#) (February 2007)
- [Chicago Project Delivers Support to Young Mothers-to-Be](#) (April 2008)
- [Connecting With Care in Low-Income Boston Neighborhoods](#) (November 2012)
- [Florida Hospice Uses Grant to Improve Outreach, Service to Hispanics](#) (August 2006)
- [Giving Shelter and Health Care to Homeless in Savannah, Ga.](#) (December 2005). Also see a [Grantee Profile](#) of Rev. Micheal Elliott, MDiv, MSW, Union Mission's Pastor, and an RWJF Community Health Leader
- [Hawaiian Health Foundation Launches Program to Diagnose and Treat Child Abuse Victims Entering Foster Care](#) (March 2007)
- [Health Access for Teens: From Pregnancy to Grief](#) (a sidebar) (June 2008)
- [Health Center Screens and Treats Depression and Addictions on Cape Cod](#) (June 2009)
- [Indianapolis Project Reaches African-Americans With Free HIV Testing and Support](#) (February 2007)
- [In Indiana Project, Economically Disadvantaged Cancer Patients Get Supportive Counseling, Medical Equipment and More](#) (February 2007)
- [In Orlando, Florida Free Walk-In Primary Care Clinics Add Services, Capacity](#) (August 2006)
- [Milwaukee Clinic Provides Dental Care to Low-Income and Homeless People as Part of RWJF's Local Funding Partnerships](#) (August 2006)

- [Model Community-Based Treatment Program Reduces Hospitalization and Jail Time Among People with Mental Illness and Substance Abuse \(September 2008\)](#)
- [New Mexico Foundation Places Nurses in Family Service Agencies to Improve Immunization Rates, Reduce Parental Smoking and Screen Parents for Alcohol Abuse \(February 2007\)](#)
- [New York Study Shows Telemedicine is Effective for Care of Low-Income Children in School-Based Settings \(April 2007\)](#)
- [Promoting Community Health Workers to Reduce Health Disparities in Minnesota \(December 2012\)](#)
- [Providing Modern Dentistry for Folk Who Cling to Old Ways \(December 2005\)](#)
- [Rural Puerto Ricans Get Lessons in Self-Managing Chronic Diseases \(July 2006\)](#)
- [Streetworkers Mediate Gang Violence and Connect Teens to Health Services in Lowell, Mass. \(November 2008\)](#)
- [The Heart and Soul of Black Churches \(a sidebar\) \(May 2012\)](#)
- [Using Telehealth for Mental Health \(February 2012\)](#)
- [When Students Have an Emergency, the Brookline Resilient Youth Team Steps In \(April 2011\)](#)
- [Where Did You Get That Bruise? Identifying and Treating Domestic Violence Victims in Kansas City \(November 2009\)](#)