

# Consumer Advocacy Funding Strategy - Brief 8: Results of the May 2018 Convening

Prepared by Spark Policy Institute on behalf of The Colorado Health Foundation June 2018

#### **OVERVIEW**

In spite of a challenging political and policy environment, consumer health advocates in Colorado have been able to make progress and build momentum. Advocates' success can be attributed to both four years of support from The Colorado Health Foundation (The Foundation), and advocates' resilience, adaptability, and perseverance. The final Consumer Advocacy Strategy and Learning Convening in May 2018 offered Colorado-based consumer health advocates an opportunity to celebrate their wins over the last four years, reflect on what was learned, and think ahead to what the field still needs to advance health policy (see Figure 1 below for some significant policy wins influenced by grantees and other consumer advocates). It also led to several recommendations generated by advocates to help inform The Foundation and the larger funding community regarding what is needed to support advocacy to "bring health in reach for all Coloradans."

This brief highlights recommendations from advocates in attendance at the convening. It also includes three summaries of relevant learnings to support these recommendations (pull out boxes). These summaries consider information from prior evaluation reports and the insights shared at the May 2018 convening. This brief is intended to help The Foundation and advocates identify how best to support advocacy in the years to come.

Figure 1. Examples of Policy Wins Influenced by Consumer Health Advocates



#### Recommendations

Key recommendations coming out of the May 2018 Consumer Advocacy and Strategy Learning Convening include:

## Invest in movement building and consumer engagement

Future investments are needed to build the capacity of advocacy organizations to engage in consumer-directed work and movement building. This includes elevating the experience of consumers and financing long-term organizing and outreach capacity to reach new populations within and outside the Denver metro area. These investments could include leveraging existing models of consumer engagement to consult and coach within the field.

## Welcome non-traditional partners to the table

To influence a view of health that goes beyond physical and mental to include social determinants like transportation and housing, advocates need to engage important actors not currently at the table. This includes recognizing the dangers of taking a narrow view of health and actively supporting partnerships that include allied organizations (ex. environment, social justice). Non-policy players including communications and technology experts are also necessary. It also means rethinking "collaboration" to enable non-traditional players in the field to engage more effectively.

## Position The Foundation as a genuine advocacy partner

The Foundation is led and governed by powerful brokers with influence and access to decision-makers. Advocates called on The Foundation's leadership and Board of Directors to engage their personal networks as thought partners, conduits for sharing of lessons learned from grantees, ambassadors for strengthening the field, and most importantly as advocates themselves for critical policy changes to support Coloradans' health.

## Innovate around flexible and adaptive funding supports

Future investments in advocacy organizations should continue The Foundation's original focus on promoting flexibility to respond to the changing policy environment, building advocacy and communications skills, and enabling continued work to influence rules and regulations.

# INVEST IN MOVEMENT BUILDING AND CONSUMER ENGAGEMENT

## **Invest in Community-Focused Organizations**

From advocates' perspective, future investments in advocacy should prioritize movement building (see *Winning Hearts and Minds*). To build movements, shift political power, and champion community-led work, there needs to be purposeful investment in community-focused organizations that supports:

- Breaking down of silos between community organizations and under-the-dome advocates;
- Recruiting health care providers who bring a critical voice to consumer health care debates;
- Building the leadership and organizational capacity of organizations working outside the Denver metro area, including by bringing them to the table through convenings and other networking opportunities.

## **Train on Engaging with Consumer Experience**

Advocates recommend building advocacy groups' capacity to elevate consumer experience. This way, advocates will be able to develop the authentic relationships needed to activate a base of support for key advocacy activities and build public will, both of which were missing in the recent effort to protect and advance the ACA. Capacity building includes training more staff in how to facilitate conversations with community members as well as how to authentically engage community at all levels. Some constituent-led groups currently in the cohort of grantees are well-placed to serve as consultants or contractors in this regard.

# **Elevate Existing Efforts**

Reflecting on past work highlights the need to look for existing efforts that are successful in lifting consumer experience. The Foundation, in its role as convener and funder, is positioned to help advocates identify and engage consumers by forging connections with and broadcasting the work of these efforts.

## Winning Hearts and Minds

#### Where we were ...

At the outset of this funding opportunity, advocates prioritized protecting the ACA and ensuring effective implementation, but they lacked strong representation from community-led groups and had largely neglected community engagement and public will building. The early agenda focused on technical issues related to system reforms did not resonate with consumers. The 2016 presidential election highlighted the need for more focus on consumer engagement in agenda development, not just message development. It also galvanized the grassroots to fight to keep recent policy wins and counter anti-ACA messages.

#### Where we are now...

Advocates, upon reflection, recognized they had not yet successfully "won the hearts and minds" of consumers. Yet, there was a shared sense that since 2016, progress has been made in the field's capacity to build movements and authentically engage consumers. This progress can be leveraged going forward into a movement around championing health equity, which is benefitting from the recent decline in support to repeal the ACA.

### ...and remaining challenges.

As advocates' focus shifts to public will building, many continue to struggle to craft messages with rather than for consumers. Advocates also disagree about how to deal with elevated partisanship, including whether cost is the best messaging frame. Investing in training to better engage consumers, build movements, and making connections with existing efforts will help advocates overcome these challenges.

# WELCOME NON-TRADITIONAL PARTNERS TO THE TABLE

# **Expand Narrow Views of Health**

A challenge since the beginning of the funding opportunity has been dealing with the divides between:

- Grasstops organizations with extensive knowledge about and experience doing advocacy work and grassroots groups with a stronger focus on community engagement'
- Organizations with a sole focus on health advocacy and organizations working on broader issues; and
- Organizations in the Denver metro area and organizations in rural or non-metro areas.

These divides have meant that important advocates were not fully engaged, contributing to the lack of a solid public support for health reforms.

Advocates made progress over the course of the funding opportunity to expand the field (see *Expanding the Field,* right), and participants at the May 2018 convening were eager to bring more voices to the table to build the consensus around health reform that is essential for a movement to take root. While many advocates recognized at the start of the funding opportunity the importance of a broad coalition of allied groups, the presidential election in 2016 was a galvanizing moment in pushing the advocates to engage more broadly.

Partially as a result of a focus on implementing ACA reforms, advocates noted that a barrier facing the field is its narrow view on health, which makes it hard to bring other groups to the table. Advocates recognize that additional progress on the following efforts need to occur to further expand the discussion:

- Making connections between those focused on physical and mental health with those focused on the social determinants of health;
- Simplifying for a broader audience issues of payment and system delivery reform, cost

## Expanding the Field

#### Where we were...

At the onset of this funding opportunity, the focus was largely on highly knowledgeable, experienced, and interconnected advocates primarily working in Denver. Groups new to consumer health advocacy sometimes struggled to find a voice in working with more experienced and established organizations. Effort put towards understanding the intersection of issues led to important partnerships with non-traditional partners such as the Denver Metro Chamber of Commerce, who joined groups like the Center for Health Progress in defending the ACA. The Foundation created incentives for and enabled in-person time, including "small stuff" like easy parking and food to make it possible for everyone to come to the table. The stability created by the funding mechanisms allowed for participation in the network to building lasting partnerships.

#### Where we are now...

Advocates share a general view that collaboration is critical. Some note that it took experiencing the benefits of having groups who have nothing in common come to open discussion and witnessing recent gains from that collaboration to understand the potential of this strategy.

### ...and remaining challenges.

Although advocates recognize the need to advance, the group acknowledges there are still significant barriers standing in the way of realizing this strategy, including missing voices (ex. lack of provider participation) and a lack of infrastructure for collaboration (ex. meeting space, shared policy agenda, mapping of the field).

- containment, and integration of care, including through connecting them to the specific challenges faced by consumers; and
- Connecting advocacy groups working to ensure and protect implementation of the ACA with those who can build public will for health system reform, including organizations working on potentially allied issues like environmental or social justice.

A major consequence of slow progress on these efforts was that a core set of highly knowledgeable, experienced, and interconnected advocates primarily working in Denver (namely, the grantees of this funding opportunity) was privileged over others. While this group was well positioned to make progress on the policy targets identified early on in this initiative, it was not as well not poised to successfully respond to challenges brought on by the 2016 election.

# Advance an Inclusive View of Health and Advocacy

Participants at the May 2018 convening agreed The Foundation can help prevent narrow views of health and their consequences by taking an inclusive view of health to support a large portion of the advocacy spectrum. This includes:

- Viewing those who work on allied issues like transportation and housing also as health advocates. In combination with advocates working on health system reform, addressing these issues is critical to addressing health care cost;
- Valuing a wide variety of advocacy strategies, notably community engagement and constituent-led work; and
- Engaging staff members with other skills or experiences beyond policy, including communications, social media, and consumer experience. These staff have the skills needed to do effective public will building.

# **Support New Thinking Around Collaboration**

Grantees have shifted how they think about what it means to collaborate in the advocacy space. Early in the initiative, many advocates viewed collaboration as getting to consensus on achieving a shared objective and realigning the activities of their organizations to achieve those objectives. They now see collaboration as coming together, sharing their respective objectives, and identifying ways to support each other in reaching those objectives. Advocates speculate this latter view of collaboration

is better at leveraging strengths of partners, maximizes investments, and better enables groups with broader views of health to engage in advocacy. Investment supports that encourage this type of collaboration would allow organizations to stay focused on their strategy while advancing a common set of results.

# POSITION THE FOUNDATION AS A GENUINE ADVOCACY PARTNER

## **Additional Ways to Support Advocacy**

Advocates at the convening noted that partnership with The Foundation above and beyond financial investment would help advance advocacy efforts. They called on The Foundation to use resources, to:

- Leverage organizational connections to local and national funders to further infuse resources into the field;
- Embrace a "willingness to try, and willingness to fail" mentality in which innovative projects are encouraged and failure treated as valuable learning experience;
- Adopt a stronger learning orientation by creating opportunities for advocacy peers to learn from each other and from The Foundation. The Foundation could work directly with advocates as a thought partners on moving the work forward; and
- Continue to convene groups and go one step further by connecting groups through technology solutions and other organization infrastructure improvements (ex. shared policy agendas, maps of the field, etc.).

## Go Beyond the Walls of the Foundation

In addition to building field capacity to advance advocacy, advocates also called on The Foundation's leaders and Board of Directors of to tap their personal networks to advance policy positions. This includes board members taking advocacy back to their own organizations and spreading activism beyond the walls of The Foundation. These are the kind of asks that the advocacy organizations make of their boards,

so it would signal that The Foundation is a genuine partner in the work.

# INNOVATE AROUND FLEXIBLE AND ADAPTIVE FUNDING SUPPORTS

## **Continue valuable general operating grants**

Grantees benefitted from the flexibility of multi-year general operating grants. They enabled advocates to:

- Pivot their work and respond in real-time to emerging threats to the ACA and Medicaid expansion (protecting successes);
- Better do the often slow and grinding work involving regulations and implementation;
- Shift short-term thinking to a proactive orientation focused on coalition building, movement building, and narrative change (see From Reactive to Proactive); and
- Focus on skill building, leadership development, and organizational development.

While recognizing The Foundation should support a wide variety of advocacy organizations, convening participants stress the importance of ensuring organizations continue to have the multi-year general operating support they need to be proactive and flexible in their advocacy work and to build their organizational capacity.

## **Invest in Skills Trainings and Convening**

Advocates also request continued support to grow skills and capacity around communication, social media, and diversity, equity, and inclusion. Moreover, there is a continued need to pair general operating support with convening advocates to develop strategy over multiple years in partnership with other organizations.

### **CONCLUSION**

As we near the end of this funding opportunity, advocates and The Foundation can feel positive about the gains made. There are many opportunities to leverage in the next iteration of advocacy funding;

### From Reactive to Proactive

#### Where we were...

Early on, many grantees reacted to changes and opportunities in the advocacy environment rather than proactively working toward long-term goals. This approach reflected the realities of short-term program focused non-profit funding cycles since a lot of time can be spent revising grant milestones rather than focusing on adaptation new outcomes. The approach also reflected the realities of a focus on protecting wins against direct threats, and the competing priorities of policymakers that meant responding to interests rather than needs. General operating grants were pivotal in creating more space for grantees to take a longer-term view, adapt approaches quickly, and participate in important field building activities like convenings.

#### Where we are now...

Many grantees are stronger thanks to general operating grants, which enabled them to build staff skills (ex. general operating helped create the space for one organization to engage in Diversity, Equity, and Inclusion training) and support the field through convening and networking. The relatively new focus on movement building and narrative change (which reflect a shift to a more proactive orientation) requires strong support from The Foundation and other funders.

### ...and remaining challenges.

This support notwithstanding, many advocates still face the scarcity pressure involved in being a non-profit and must continually adapt to rapid shifts in the advocacy environment.

recommendations surfaced at the convening make it clear advocates believe that supporting the field will involve a shift in how to do consumer healthcare advocacy, including taking a new view on collaboration, bringing different voices to the table, and committing to public will building. The task at hand is to identify what commitments funders and advocates are willing to make for the field to become more effective.