

Health Advocacy:

Yes, No, or Maybe So?

Although engagement in public policy is viewed as a mission-critical strategy by an increasing number of health funders, many foundations are still considering whether and how they should support health advocacy efforts. This Issue Focus article briefly addresses some of the key questions foundations are likely to confront as they determine what role, if any, they should play in the public policy arena.

► **What is advocacy?** Advocacy is an important (but not the only) way for funders to engage in public policy. As illustrated in Figure 1, funders can inform and influence public policy through three major types of activities: (1) by framing problems and examining potential policy solutions, (2) by advancing particular solutions, and (3) by assisting in policy implementation. Advocacy (that is, advancing policy solutions) is central to this policy engagement continuum and represents a critical step in moving from ideas to implementation (GIH 2010).

The Alliance for Justice (2012) defines advocacy as “any action that speaks in favor of, recommends, argues for a cause, supports or defends, or pleads on behalf of others.” It includes a broad range of activities such as public education, policymaker education, coalition building, regulatory work, litigation, work before administrative bodies, lobbying, voter registration, and voter education. Some funders, however, may use the term “advocacy” more broadly to encompass neutral forms of policy engagement such as objective analyses. Others may use the term more narrowly

to refer to specific activities like policymaker education. This article adopts the Alliance for Justice definition and focuses on a diverse range of position-based efforts aimed at advancing policy change objectives.

It is important to note that health funders have used different approaches when determining policy positions for advocacy purposes. A number of health funders have developed written policy agendas that clearly articulate their policy goals and have established board-level policy committees to monitor and guide their organizational position on key policy issues. For example, the Health Foundation of South Florida created a Public Policy and Communications Committee in 2006 to guide foundation staff in the identification of public policy priorities, and publicly releases a legislative agenda that both outlines the foundation’s current policy goals and prioritizes concrete policy options for achieving those goals. Other foundations utilize broadly defined policy objectives, such as improving access to health care services, and rely on grantee organizations to develop more specific advocacy positions independently.

► **Is advocacy legal?** Yes. Legal restrictions for foundations focus narrowly on prohibitions and limits specifically related to lobbying (Alliance for Justice 2004). While all lobbying is advocacy, not all advocacy is lobbying. Lobbying is a specific type of advocacy activity that seeks to influence a particular piece of legislation or legislative proposal. Private foundations are not permitted to lobby, and public founda-

FIGURE 1: PUBLIC POLICY CONTINUUM FROM IDEAS TO IMPLEMENTATION

	Problem Definition/ Solution Development	Advancing Solution/Advocacy	Implementation
Goal	To clearly articulate problem(s) and solution(s)	To build political will to take action	To foster effective implementation
Components of Policy Change	<ul style="list-style-type: none"> • Research and Analysis • Polling • Issue Framing and Messaging • Convening • Engaging Stakeholders • Testing Alternative Approaches 	<ul style="list-style-type: none"> • Advocacy Capacity Development • Coalition Building • Community Organizing • Polling • Message Refinement • Public Education • Education for Opinion Leaders and Policymakers • Media Advocacy • Litigation • Direct Lobbying of Legislators • Grassroots Lobbying 	<ul style="list-style-type: none"> • Public Education • Capacity Development for Government Agencies • Monitoring • Evaluation

tions face limits in the amount of lobbying they may pursue. Lobbying includes two general types of activities: (1) direct lobbying is communication with legislators that expresses a view or opinion on a specific piece of legislation, and (2) grassroots lobbying is communication with the general public that both reflects a view on a specific piece of legislation *and* a call to action urging the public to contact their legislators. All funders have broad latitude to support the wide range of advocacy activities that do not fall under these specific definitions of lobbying. The Alliance for Justice offers technical assistance and training to foundations to help them navigate the rules and regulations related to advocacy grantmaking.

► **Why invest in health advocacy?** Each foundation must carefully consider its own goals, assets, circumstances, and existing grantmaking portfolio before committing resources to advocacy purposes. An increasing number of funders, however, have determined that support for advocacy is a smart, strategic investment. Changes in public policy have the potential to yield broad-scale, sustainable advances in population health that cannot be attained through philanthropic action alone. Relatively small investments in health advocacy can result in large improvements in the accessibility, quality, and efficiency of health care, as well as systemic changes that address the social determinants of health and promote health equity. A 2012 study conducted by the National Committee for Responsive Philanthropy found that each philanthropic dollar invested in advocacy efforts yielded \$115 dollars in community benefits. This impressive rate of return suggests the extent to which advocacy funding leverages foundation investments to achieve significant results.

While the business case for advocacy is compelling, many foundations support advocacy primarily because they view these activities as central to their philanthropic mission. Some foundations have determined that they cannot achieve their strategic goals absent changes in public policy. Others view advocacy as a critical means of giving voice to people who are underserved and underrepresented, such as children, racial and ethnic minorities, and those living in poverty.

► **How can funders support advocacy efforts?** Foundations may advocate for public change directly or they may fund others to conduct advocacy efforts (GIH 2005). Although private foundations cannot earmark funds for lobbying and public foundations must limit their lobbying expenditures, all foundations can fund organizations that lobby. Advocacy investments include program grants for specific advocacy campaigns or advocacy-related projects; general operating support for advocacy organizations; grants for capacity development and coalition building; and technical assistance to address underdeveloped capabilities, such as communications capacity. Funders experienced in supporting advocacy efforts recognize that a long-term financial commitment is

needed to develop a strong, diverse, and cohesive health advocacy field. General operating support provides a particularly flexible, yet secure, platform for advocacy efforts, allowing grantees to adapt their activities to changing community needs or political opportunities in ways that restricted program grants may not.

► **Can advocacy-related grantmaking be evaluated?** Yes. The ability to evaluate advocacy grants is a significant area of concern for many funders, but rigorous approaches are available and have been tested by a diverse range of philanthropic organizations. Well-crafted advocacy evaluations recognize the dynamic nature of the public policy process and provide interim measures of effectiveness that can support decision-making and strategy development within advocacy organizations. While advocacy evaluation requires techniques that are somewhat different from those used to evaluate more traditional program grants, methods, metrics, and tools for advocacy evaluation have become increasingly sophisticated in recent years. These advances have been achieved through the sustained support of funders who view evaluation as a key component of advocacy. For example, The Atlantic Philanthropies, The California Endowment, The David and Lucile Packard Foundation, and the Foundation for Child Development have funded the Center for Evaluation Innovation to conduct research, training, and other activities designed to move the field of advocacy evaluation in new directions and into new arenas. The center has partnered with the Innovation Network to develop a clearinghouse of advocacy evaluation resources called the Point K Learning Center.

► **How can funders learn from peers experienced in health advocacy?** Grantmakers In Health (GIH) sponsors a variety of programs focused on advocacy and other public policy strategies. Connect with Eileen Salinsky, GIH program advisor, at esalinsky@gih.org to discuss your interests and information needs.

SOURCES

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