Consumer Advocacy Funding Initiative: Evaluation Overview

A funding strategy like The Colorado Health Foundation’s Consumer Advocacy Funding Initiative that seeks to be successful in a complex, adaptive environment depends on two equally important capacities:

- **The capacity to be adaptive**, including structuring the funding strategy so that it can change over time to meet emerging challenges and opportunities. In this funding opportunity, General Operating funds can be refocused after two years, the Program Grants refocused yearly, and Rapid Response Grants deployed at any time as unexpected needs arise.

- **The capacity to systematically gather and use information to guide adaptations**, including capturing many different perspectives on what is occurring in the health policy environment and evaluating the effectiveness of advocates’ strategies given that policy environment. This is the role of the evaluation as well as the twice-yearly Advocacy Strategy & Learning Convening.

The evaluation is designed to carefully balance the need for frequent information to inform adaptation with the need for accountability information about the impact of the funding strategy as a whole. As part of this, the evaluation is leveraging two key frameworks:

- The scenario mapping completed in Spring 2014, which identified the two major drivers of the future health policy environment (progress on health reform implementation and the political environment); and

- A theory of change which explores how advocates and the Foundation can advance the policy targets, including interim outcomes and smaller policy wins along the way (see below).

The evaluation recognizes that at any given time, some policy targets will be more viable than others and some advocacy strategies (and thus interim outcomes) will be more important to achieving success on a policy target than others. For this reason, the evaluation will look for evidence of movement across a variety of interim and policy outcomes, but not attempt to find evidence of movement across all outcomes at any given time.

Prepared by Spark Policy Institute | www.sparkpolicy.com
DATA COLLECTION & LEARNING CYCLES

The evaluation will deploy two learning cycles each year, each leading up to an Advocacy Strategy and Learning Convening. The general flow of learning across the two convenings each year will include:

Learning Cycle 1 (Jan - May)
- Analysis of grantee surveys
- Follow-up learning related to interim outcomes/policy targets most frequently identified by grantees

May/June Strategy & Learning Convening
- Bellwether interviews to understand the policy landscape
- Rapid-response learning based on asks coming from the May/June convening

Learning Cycle 2 (June - Nov)

Nov/Dec Strategy & Learning Convening

To inform the Spring learning cycle, general operating grantees will be asked to participate in an online survey in January of each year (general operating and program grants) or within three months of closing a grant (rapid response grants). The survey will ask about:

- Efforts to influence one or more of the policy targets in the previous year;
- Efforts related to one or more of the interim outcomes in the previous year (e.g. building the salience of the issue among decision-makers, developing policymaker champions, engaging consumers/constituents in advocacy, issue framing/media engagement, or overall building the capacity of the advocacy field and individual advocacy leaders);
- Evidence of policy wins related to the policy targets;
- Barriers to making progress on the policy targets;
- Strengths and areas for improvement in the overall field of health policy advocates as well as specifically among advocates representing consumer interests; and
- Any supports that would help strengthen the overall capacity of consumer advocates in healthy policy.

After analyzing these reports, the evaluation team will conduct a second round of data collection during Learning Cycle 2, which will vary each year depending on the information received from grantees. For example, if multiple grantees identified issue framing/earned media engagement as a major part of their advocacy strategies related to one or more of the policy targets, the evaluation may analyze the framing of the issue in earned media, interview key media contacts, or otherwise learn about the media environment. The evaluation will use other data collection strategies to answer any questions that emerged from the November convening or questions that may be helpful to explore at the May/June convening.

Evaluation results will be shared at the convenings with time for advocates to discuss the implications. Results will also be used at the Foundation to inform the ongoing strategy adaptations and shared with other health policy funders. Ultimately, the evaluation’s findings will also be shared with the Foundation board to describe the impact of the adaptive funding strategy on the health policy landscape and the policy targets.

To inform the fall learning cycle, the evaluation did, and will in later years also conduct bellwether interviews with leaders throughout the state who have a strong understanding of the overall health policy environment, the political dynamics and the progress of health reform in the state. The evaluation will use other data collection strategies to answer any questions that emerged from the May/June convening or questions that may be helpful to explore at the November convening.