Key Findings and Recommendations from
Health Forward Foundation’s Stakeholder Perception Report
Prepared by The Center for Effective Philanthropy

In June and July of 2020, The Center for Effective Philanthropy (CEP) surveyed stakeholders of Health Forward and achieved a 27 percent response rate.¹

The following memo contains the Center for Effective Philanthropy’s synthesis of findings and recommendations from Health Forward’s survey of its stakeholders.

Customized surveys of external stakeholders provide insight about different groups’ perceptions of you and your work. These perceptions should be interpreted in light of Health Forward’s unique goals, strategies, and context. Where applicable, we have included comparisons to other funders whose external stakeholders CEP has surveyed.

Health Forward’s full online report contains more information about survey analysis and methodology.

Overview

Survey respondents express a very favorable impression of Health Forward, rating Health Forward in the top 25 percent of funders in CEP’s comparative dataset on this measure.

- Health Forward’s impact on the Greater Kansas City Region is its biggest strength, according to respondents. When asked about different aspects of the Foundation’s work, stakeholders agree most strongly that Health Forward “has a role in supporting and/or implementing health reform” and has a thorough understanding of key issues that influence health.

- To further increase its impact, stakeholders suggest Health Forward “take a more active role in legislative change to improve health and wellbeing of Kansas Citians” and to “Continue to sharpen leadership on policy matters and focus as much on system level change as service access.”

¹ It is important to note that CEP fielded this survey at time of great uncertainty. To better understand survey respondents’ experiences at this time, CEP conducted statistical testing of grantees’ responses during this time to those surveyed in 2019 or earlier. This analysis revealed that, for nonprofit grantee organizations, there were no consistent differences in ratings from those who took the survey during or the spring/summer of 2020.
Differences by Respondent Groups

Across most survey measures, perceptions of Health Forward and its work vary by the type of relationship that respondents hold with Health Forward, whether they are a grantee of Health Forward, and by the length of time that they have been familiar with Health Forward. Ratings for members of each group are provided in Health Forward’s online report, and key differences in ratings – those that are statistically significant – are mentioned here.

Respondent Type

- **Grantee Organizations** (defined by Health Forward for the purposes of this survey as organizations that received at least three grants in the last five years) provide significantly more positive ratings across nearly all measures in the survey.

- **Health Providers & Associations** rate significantly lower than other respondents for their perceptions of Health Forward’s understanding of key issues, measures related to public policy, measures related to Health Forward’s rebranding, and Health Forward’s impact on the community. Health Providers & Associates were also less likely to report having personal contact with Health Forward’s associates or board.

- **Funders** rate similarly to other groups on most survey measures, though they provide significantly lower ratings for their agreement that Health Forward “partners with key organizations to develop solutions” and that its rebranding “improves external perceptions of its work.”

Grantee Status

- **Current Health Forward grantees** – as indicated by Health Forward on its list of stakeholder contacts – provide significantly more positive ratings than other respondents on nearly every measure in the survey.

Length of Familiarity

- Sixty percent of respondents indicate having known Health forward for **ten years or longer**. Across nearly every measure of the survey, these respondents provide significantly more positive ratings for their perceptions of Health Forward. There were no consistent differences in ratings between respondents who report being familiar with Health Forward for less time (less than 1 year, 1-3 years, 3-5 years, or 5-10 years).

Other Respondent Characteristics

- Across the report, ratings across other stakeholder groups and characteristics – for instance, by respondents’ scope of work, gender, or race/ethnicity – vary on some individual measures, but not in a consistent or statistically significant way. Nevertheless, certain patterns of engagement with Health Forward – particularly increased resource use and direct contact with Health Forward’s staff or board – are associated with more positive perceptions of Health Forward and its work.
Continued Strong Role in Community Leadership and Advancing Policy

Overall, most stakeholders indicate that Health Forward exhibits an important leadership role in the Greater Kansas City community. Stakeholders rate Health Forward positively for its understanding of the local communities in which it works, for advancing the state of knowledge, and for its impact on stakeholders’ local communities.

Goals, Strategies, and Grantmaking

Regarding Health Forward’s current goals, respondents indicated that Health Forward is most effective at “support[ing] access to a safety net of quality health and oral health services.”

- Stakeholders stress the importance of access when asked to list three issues affecting health facing the Greater Kansas City region, most often naming access to limited resources – the availability of resources to meet daily needs (housing, food insecurity, transportation), access to affordable healthcare, and access to educational, economic, and job opportunities. A smaller, though substantial, proportion mention racial inequity and community violence.

- When asked how Health Forward can improve, stakeholders’ most frequent topic of suggestions relate to strategy – specifically, a desire for Health Forward to move more deeply into advocacy and system change work. One stakeholder suggests, “Consider expanding opportunities for partnership on testing new ideas to address health disparities – systems change” and another writes, “I would like to see a clear commitment to funding/supporting policy advocacy at the state and federal levels. Funding for direct-service is really important to meet the immediate needs of residents, and yet there is an opportunity to help more people more sustainably through policy change.”

Advancing Policy and Key Issues for Policy Efforts

Health Forward’s policy influence is both a key strength and continued opportunity for the Foundation, according to its stakeholders. Most respondent types rate Health Forward in the top 20 percent of CEP’s comparative dataset for the extent to which Health Forward has affected public policy.

- In a series of statements about Health Forward’s policy work, stakeholders agree most strongly that Health Forward “has a role in supporting and/or implementing health reform” and “plays a leadership role in improving the health of community members.”

- As it pertains to policy work, most stakeholders (80 percent) believe “ensuring access to health/mental health care (e.g. affordability, availability)” is most important for Health Forward to focus its policy work in order to advance health.

- Stakeholders’ open-ended comments echo these themes: when asked to suggest issues that Health Forward should address in its policy efforts, they most frequently suggest access to care – with specific mentions of pushing for Medicaid expansion. Other often-mentioned policy topics include advancing racial equity, addressing racial disparities in health, and maintaining a broader focus on other social determinants of health.
Strengths and Opportunities in Foundation Interactions and Communications

Learning about Health Forward
Stakeholders see Health Forward a source of credible information, rating Health Forward are in the top 20 percent of funders in CEP’s dataset for this measure.

- Nearly all stakeholders have used personal contact with associates or board to learn about Health Forward; they find this to be the most helpful way of learning about Health Forward’s work. More than three-quarters of respondents also report using Health Forward’s email newsletters and publications or reports and rate their helpfulness positively.

- Nevertheless, three-quarters of stakeholders suggest Health Forward should be more visible in the community than it is now; in their comments, some respondents call on Health Forward for “more outreach to the entire Metro” and to “come to the community more often.”

Varied Feedback on Health Forward’s Rebranding
Nearly all respondents were aware of Health Forward’s name change and rebranding prior to the survey. They agree most strongly that Health Forward’s new name more closely aligns with its mission and differentiates it from other foundations, but show only moderate agreement, on average, that Health Forward’s rebranding more effectively emphasizes health equity, connectivity, and diversity.

Stakeholders comments about the rebranding were mixed:

- More than a third of comments were positive – one stakeholder writes, “The roll-out of the new name and brand were handled very well. It seemed seamless to me, and I love the new name and brand, as both are warmer, more ‘approachable’ and fresh/modern. Well done!!”

- Just over a quarter of comments were neutral – echoing others, one respondent notes, “I don’t get hung up with the name change. It is much easier to say; however, I’m more interested in the work.”

- About a third of responses were more critical, noting that the new name removes the funder’s place-based focus, seems “jargony” or “generic,” and may not have been the best use of Health Forward’s resources. Others note that they wished that there had been more communications related to the reasoning for the rebranding.

Positive Impressions of Staff and Board; Opportunities to Improve Responsiveness and Accessibility
Overall, and compared to most other funders in CEP’s comparative dataset, respondents hold positive impressions of Health Forward’s staff and board. Many praise Health Forward’s “dedicated board,” “strong leadership,” and “trusted” and “talented” staff as the Foundation’s key strength.

- Nearly 90 percent of respondents reported interacting with a Health Forward staff or board member over the past year, and those stakeholders provide significantly more positive ratings across many aspects of this report.

- Of note, ratings are less positive, compared to other funders, for staff’s responsiveness and accessibility. While respondents rate Health Forward toward the positive end of CEP’s 1-7 scale (rating responsiveness and accessibility at 6.32 and 6.27, respectively) these ratings place Health Forward in the bottom half of CEP’s comparative dataset. Ratings from Business and Civic Leaders and Health Providers & Associations trend less positively than other respondents on both measures.
Recommendations

Based on its stakeholder feedback, CEP recommends that Health Forward consider the following in order to build on its strengths and address potential areas for improvement:

- Continue to share the goals and strategies of Health Forward’s policy work, and where possible, the current progress and next steps of specific issue areas.

- Staff and board conversations are crucial opportunities to share information with stakeholders on Health Forward’s goals, strategies, processes, and resources. Explore ways to improve perceptions of accessibility and responsiveness.

- In light of the differences in ratings across respondent types, consider targeted outreach to specific groups (e.g., health providers and associations, business and civic leaders, and individuals or organizations newer to Health Forward) – which could include, for instance, conversations initiated by Health Forward to share the Foundation’s resources information on its goals and strategy.

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