Finding What Works and Making it Work in Your Community

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Grantmakers in Aging, 2018 Annual Conference, October 17, 2018
• Short Presentations
• Group Polling
• Breakout Sessions at Tables
• Group Report-Out & Discussion
• Wrap-Up and Key Takeaways
What is your level of experience with evidence-based programs and evaluation, more generally (e.g. funding, creating, and implementing)?

- Just Getting Started (0-1 years)
- Intermediate (1-3 years)
- Advanced (3+ years)

When poll is active, respond at PollEv.com/gia2018. Text GIA2018 to 22333 once to join.
What are you struggling with around evidence-based programs and evaluation?

When poll is active, respond at PollEv.com/gia2018 or text GIA2018 to 22333 once to activate.

- Sustainability
- Collaboration

“The level of data reporting required of grantees”
What exactly do we mean by evidence-based programs (EBPs), and why should we invest in them?

Lesley Steinman, MSW, MPH
Changing demographics

- Diversity
- Chronic conditions
- Mental and emotional health
- Geriatric care
Context matters!

Health does not just = healthcare  

Social determinants of health

The Chronic Care Model

Community
Resources and Policies
- Self-Management Support

Health Systems
Organization of Health Care
- Delivery System Design
- Decision Support
- Clinical Information Systems

Improved Outcomes
- Informed, Activated Patient
- Productive Interactions
- Prepared, Proactive Practice Team

World Health Organization
The “Know-Do” Gap

14% of original (clinical) research is translated into practice
...and it takes 17 years on average for this translation

There is a gap between today’s scientific advances and their application: between what we know and what is actually being done. Action without knowledge is wasted effort, just as knowledge without action is wasted resource.

-Lee Jon-Wook, former WHO Director General.
### What are Evidence-Based Programs (EBPs)?

<table>
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<tr>
<th><strong>Rigorously tested</strong></th>
<th><strong>Controlled settings</strong></th>
<th><strong>Proven effective</strong></th>
<th><strong>Translated into practical models</strong></th>
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<tbody>
<tr>
<td>• Scientific research study</td>
<td>• Randomized trial, systematic review</td>
<td>• Results in desired effect, confirms scientific hypothesis</td>
<td>• Used in real-world settings, infrastructure for dissemination and implementation</td>
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EBPs = What Works
Closing the know-do gap with dissemination and implementation (D&I) research

Brownson et al, 2012
For example...

Began with grassroots RCT with local social service agencies

**WA State Unit on Aging**
PEARLS implementation toolkit /manual

**CDC**
Reaching underserved populations; fidelity measures

**Archstone Foundation**
promotoras and community-clinical linkages

**AARP Foundation**
financial and social impact (e.g. social isolation, SDOH)

**Administration on Community Living**
ROI w/ statewide EBP network + MSO + diabetes & falls prevention EBPs
I adopt EBPs so that I know that my dollars will be spent on a program that works and can lead to real, meaningful improvements for my communities’ health and well-being where people live, work, pray and play.

- Planner, community based social service agency
Where can I find EBPs?

ACL Title III D list / OAA
NCOA: https://www.ncoa.org/resources/ebpchart/

CDC: www.cdc.gov (e.g. physical activity, arthritis)

SAMHSA’s NREPP*
https://www.samhsa.gov/nrepp

AHRQ Innovations Exchange
https://innovations.ahrq.gov/

EBLC Locator
www.eblcprograms.org/

Connect to Affect
https://connect2affect.org/find-help/
Create a "logic model"

Here is our new simplified logic model

Give us $  We all WIN

Source: Chris Lysy, freshspectrum.com
Finding What Works and Making it Work in Your Community

Grantmakers in Aging 2018 Annual Conference
Presented by Matt D’Amico
October 17, 2018
Grantmaking to Advance Effective Solutions

AARP Foundation serves vulnerable people 50+ by creating and advancing effective solutions to secure the essentials.

Collaboration | Innovation | Legal Advocacy | Grantmaking
Program model supported by theoretical framework and/or previous research

Systematically collected data tracks who is served, and the outputs and outcomes that are achieved

Evaluations that support causal conclusions but cannot be generalized beyond the study group

Evaluation(s) support causal conclusions w/large range of participants or multiple evaluations supporting the same conclusion

*Adapted from the Corporation for National and Community Service’s evidence of effectiveness definitions.
INVESTMENT CRITERIA

Strategic Fit

Evidence of Need
Evidence of Demand
Evidence of Scale
EVIDENCE-BASED SOLUTIONS PORTFOLIO

PEARLS

CLARIFI®
lifelong financial literacy

CSH
The Source for Housing Solutions

AARP Foundation
For a future without senior poverty.
CASE STUDY: THE FRIENDSHIP LINE

Friendship Line
Innovation Concept
### Beyond Funding: Our Role as Grantmaker

#### Technical Assistance
- Hone business and program models
- Share evaluation expertise
- Invest in measurement tools (i.e. the Duke social Support Index)
- Provide strategic planning and innovation assistance

#### Policy-Informed
- Identify critical policies that have greatest impact
- Invest in research and engagement to inform and educate key decision makers
- Focus on turning policy into practice

#### Trusted Resource
- Leverage AARP Foundation & AARP as trusted brand to increase adoption
- Utilize our communication channels to increase awareness
- Serve as a ‘match-maker’ and facilitate shared value partnerships (i.e. healthcare, retail)
Challenges/Lessons Learned

Drive (Rather Than Assume) Demand

• Must Perfect Business Model/Evidence of Demand Before Scaling

Collaboration Across Organizations/Sectors Difficult

• Incentives Misaligned

Strong Leadership Key to Success

• Founder’s Syndrome Often Hampers Scaling Efforts

Scaling Strong/Moderate Evidence Expensive

• Often Several Hundred $ Per Outcome

End Goal is Systemic, Sustainable (Funded) Adoption

• Requires Building Political Will & Driving Policy Change
What You Can Do

Invest in outcomes, not just outputs

If we did nothing, what would be the result?

Fund data collection systems and measurement tools

Know your Baseline
Thank You!

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Social Break!

• Introduce yourself to at least 3 colleagues around you!

• Exchange cards or AirDrop contact info

• Take pics and share, check-in on the Conference Mobile App
Age Friendly Communities (AFC)

In partnership with AARP, the Age Friendly Communities program works to support local municipal adoption of the World Health Organization’s framework for Age-friendly Communities.
## Examples of Grants by Domain

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<tr>
<th>Transportation</th>
<th>Civic Participation</th>
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<tr>
<td>In “transportation poor” areas, The Jewish Family Services Project, connected older adults with a unique rideshare call center to provide secure and low cost rideshares to more than 300 people aged 55-80+</td>
<td>In the Serving Seniors Leadership Development Institute, older adults are empowered to lend their voices to policy-related issues. Over 1,000 low-income older adults have engaged in leadership training and public-benefits related policy campaigns</td>
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<th>Health Services</th>
<th>Social Inclusion</th>
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<td>The Olivewood Gardens, intergenerational, nutrition-based programs help older adults create healthy versions of the culturally significant foods they love, while sharing these practices with other communities. Directly and indirectly impacting 1,400+ older adults</td>
<td>The Children’s Initiative, re-engages experienced older adults through a second grade reading intervention program. 100% of older participants report increased “purpose in life” and 97% said the program improved their physical and mental activity.</td>
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Age Friendly Communities

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Building Local Capacity to Combat Older Adult Social Isolation

Grantmakers in Aging 2018 Annual Conference
Metta Fund identifies, advocates for, and invests in high-quality and innovative organizations to improve health for all in San Francisco, particularly its aging population and those who are furthest from economic opportunity.
Aging Portfolio: Older Adult Social Isolation
Our Learning and Evaluation

Determined gaps in services and funding through interviews & assessments

Developed Aging & Older Adults Portfolio strategies through extensive literature review and interviews

Engaged a third-party evaluator for retrospective & prospective analysis
Aging & Older Adults: WISE Strategies

Wired
Integrated
Sustained
Engaged
Unique ecosystem in San Francisco

Unique ecosystem in San Francisco
Unique ecosystem in San Francisco

Small universe of grantees

For many CBOs, receive >85% government funding
Being an Opportunistic Funder with General Operating Grants

▪ Metta does not use a framework to determine what stage of evidence-building a grantee is in
  ▪ We fund where there is interest, a plan, and a good evaluation partner
  ▪ Will also provide resources to develop a plan in some cases

▪ Few organizations are looking to scale, most are looking to be sustainable and diversify their funding sources

▪ As a funder, meeting grantees where they is imperative to success; pacing, skills and leadership is important to consider
Curry Senior Center

www.curryseniorcenter.org
Little Brothers Friends of the Elderly

http://littlebrotherssf.org/
Partners

- Considering other partners such as Pay for Success intermediaries, academia to find appropriate projects that are ready to build evidence base

- Create space for dialogue with grantees so that they are thinking big, and share their process and ideas

- Support opportunities that can help a group of grantees build a case for their work like gap analyses, needs assessments and data sets
Questions?

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supporting a healthier san francisco

www.mettafund.org
What are the key themes and questions emerging from your table discussion that you'd like to share and discuss?

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No responses received yet. They will appear here...