Lake County Funders Call
Wednesday, June 9, 2021
11:00 a.m. – 11:45 a.m.

Participants

Alex Arias, Julian Grace Foundation
Brenda Asare, The Alford Group
Jon Ashworth, iGrow Lake County, LCHD and Live Well Lake County
Frank Baiocchi, Hunter Family Foundation
Angela Bentsen, AgeGuide
Steven Bugg, Great Lakes Credit Union
Cindy Camacho, Julian Grace Foundation
Hector Carrasquillo, Evangelical Lutheran Church of America
Courtney Combs, The Lake County Community Foundation
Marla Fronczak, AgeGuide
Scott Humphrey
Pia Infante, The Whitman Institute
Nadine Johnson, First Midwest Bank
Suzanne Knoll, Jack Miller Family Foundation
Alison Lopez, Julian Grace Foundation
Maureen McGrain, The Lake County Community Foundation
Carlette McMullan, William Blair
Sheri Miller, Charmm’d Foundation
Maggie Morales, The Lake County Community Foundation
Gail Nelson, Steans Family Foundation
Terri Olian, Highland Park Community Foundation
Taquita Pendleton, Circle of Service Foundation
Leah Perri, The Lake County Community Foundation
Taryn Placko, Advocate Condell Medical Center
Anne Posner, RRF Foundation for Aging
Cheri Richardson, Gorter Family Foundation
Quinton Snodgrass, United Way of Lake County
Emily Weber, The Lake County Community Foundation
Anna Yankelev, Lake County Health Department

Welcome & Call Goals
Maggie Morales, Executive Director for The Lake County Community Foundation, thanked participants for joining the call and noted the goals for the conversation were to:

- Hear updates on the state of Lake County and how our health and human service providers are responding
- Hear from Pia Infante, Co-Executive Director of The Whitman Institute, on Trust Based Philanthropy

State of Lake County
Anna Yankelev, Lake County Health Department Strategic Planning Analyst, shared several updates with the group.
Lake County has had over 62,991 confirmed COVID-19 cases and 1,030 deaths. Over 1.2 million tests have been administered. Lake County’s recovery rate is 98.3 percent.


As of July 31, the Region 9 positivity rate is 4.8% (Lake 4.2%) (McHenry 6.4%). Region 9 has had 9 days of increases in COVID patients in the hospital in the past 10 days, and ICU bed availability is at 30%

- Region 9 data: [http://www.dph.illinois.gov/regionmetrics?regionID=9](http://www.dph.illinois.gov/regionmetrics?regionID=9)

In total, over 750,000 doses of the COVID-19 vaccine have been administered to Lake County residents. Over 365,000 of our residents, or 52.16% of our population, are fully vaccinated. Over 85% of our 65 and older population and 66% of our population age 16-64 have received at least one dose.

- Vaccination data: [http://www.dph.illinois.gov/covid19/vaccinatedata?county=Lake](http://www.dph.illinois.gov/covid19/vaccinatedata?county=Lake)

The CDC recently released guidance advising that individuals wear a mask in public indoor settings in areas of substantial or high transmission regardless of vaccination status.

- Additionally, the CDC is recommending universal masking regardless of vaccination status for all individuals in K-12 schools.
- The Lake County Health Department fully endorses CDC guidance and encourages all residents to take necessary precautions to stay protected against COVID-19 and its variants.

As of this weekend, Lake County is experiencing high community transmission per the Centers for Disease Control (CDC).

- Areas of substantial transmission are considered by the CDC to be those with 50 to 99 cases per 100,000 people over a 7-day period and/or 8 to 9.99% of COVID-19 PCR tests that are positive during the past 7 days. Areas of high transmission are considered to be those with more than 100 cases per 100,000 people over a 7-day period and/or equal to or greater than 10% of COVID-19 PCR tests that are positive during the past 7 days.
- Lake County is currently at 117/100,000 cases.

- The Delta Variant (B.1.617.2) was announced to be a variant of concern by the CDC in June 2021. In July 2021, following multiple large public events in a Barnstable County, Massachusetts, town, 469 COVID-19 cases were identified among Massachusetts residents who had traveled to the town during July 3–17; 346 (74%) occurred in fully vaccinated persons. Testing identified the Delta variant in 90% of specimens from 133 patients.
  - Early data, including results of the MMWR from Massachusetts, suggest that individuals who are vaccinated may still be able to spread the Delta variant.
  - Vaccinated individuals are less likely to experience severe COVID-19 symptoms if infected including hospitalization and death.
  - Read the MMWR: [https://www.cdc.gov/mmwr/volumes/70/wr/mm7031e2.htm](https://www.cdc.gov/mmwr/volumes/70/wr/mm7031e2.htm)

- The Delta variant has shown to be more contagious and spread more quickly than previous COVID-19 variants.
  - To stop the spread of COVID-19 and protect yourself and others against variants, all should get vaccinated as soon as they are able.
  - All individuals in areas of substantial or high transmission should practice the 3 ws: wear a mask, watch their distance, and wash their hands.
- Immunocompromised individuals or those who live with immunocompromised individuals may want to consider masking in indoor public settings regardless of the area’s transmission rate or their vaccination status.

- **Our Health Department encourages people to explore their options for COVID-19 vaccination.** The sooner we all get vaccinated, the sooner we can put an end to the pandemic.
  - Use the State’s Vaccine Locator website that lists pharmacies and other public sites; [https://coronavirus.illinois.gov/s/vaccination-location](https://coronavirus.illinois.gov/s/vaccination-location) or call the state Vaccine Appointment Call Center at 833-621-1284. The call center is open 7 days a week from 6 a.m. to midnight.
  - Check with your health system (i.e. hospital system or healthcare provider group) for registration and availability; and
  - Community vaccination sites are opening and are being listed on our website as they become available – [https://www.lakecountyil.gov/vaccine](https://www.lakecountyil.gov/vaccine).
  - **Another resource for locating a vaccine is the recently launched search on vaccines.gov** – you may select a vaccine brand and see which locations near your zip code have it in stock. [https://vaccines.gov](https://vaccines.gov)

- **The Regional Vaccination Site at 102 W. Water Street in Waukegan is operating 1 day a week.**
  - This site is a walk-up-only location.
  - Appointments are available on AllVax or by walking up to the site. **The Health Department is currently providing vaccinations at our Grand Avenue Health Center, Zion Health Center, and Midlakes Health Center.**
    - Appointments are available on AllVax. Community members who wish to receive the Johnson & Johnson vaccine should call (847) 377-8130 for an appointment.
  - Our mobile vaccination clinic is in the community offering vaccinations and other health resources. All of our mobile vaccination clinics are accompanied by Community Health Workers who can answer questions about the vaccine and offer health education and resources.
    - To sign up for an appointment at a mobile vaccination clinic, visit [https://allvax.lakecohealth.org/s/?language=en_US](https://allvax.lakecohealth.org/s/?language=en_US)
    - If you would like to host a Mobile pop-up vaccination event or include vaccinations at your upcoming event (including fairs, farmers markets, back to school events), please register here: [https://lchd.iad1.qualtrics.com/jfe/form/SV_72vtQQ7kKnvQaZE](https://lchd.iad1.qualtrics.com/jfe/form/SV_72vtQQ7kKnvQaZE)
      - Contact Daniela Dawson ddawson2@lakecountyil.gov with any additional questions.
    - If you would like to have Community Health Workers ONLY at your event to provide health education and outreach (NOT vaccinations), please contact Candace Browdy cbrowdy@lakecountyil.gov
Trust-Based Philanthropy Project – Pia Infante, Co-Executive Director of the Whitman Institute

Background
The idea for the Trust-Based Philanthropy Project (TBPP) started in 2014 when The Whitman Institute (TWI) got important feedback from their grantees through a grantee perception report: that the way that TWI showed up in the community made a big difference in the overall health and well-being of their nonprofit partners.

As the foundation approached spend-down, grantees advised that TWI should actively work to share their lessons with the philanthropic field in order to help it become more inclusive, more impactful, and more authentic to everyone involved.

The big surprise for TWI in this grantee feedback report was that they were to spend all resources and attempt to change behavior. This required TWI to be learners together with grantees rather than evaluators of the work in these decision-making roles. Grantees pushed TWI to become advocates and organizers in the community.

Today, the Trust-Based Philanthropy Project builds on these practices to include a growing community of funders committed to making the ecosystem of philanthropy one that is trust-based, and examining the structural and relational conditions necessary for that ecosystem to:

- Center equity, humility and transparency
- Recognize the power imbalance between funders and grantees, and work to actively rebalance it
- Deeply value the quality of relationships, and honor the how we treat others on the path to winning on our issues, as much as the act of winning itself.

Opening Activity (What does Trust Based Philanthropy (TBP) mean to you?)

- Acknowledging the power dynamics
- Viewing philanthropy as a partnership and shifting power
- Multi-year investments
- Redistributing power
- Knowing that the funder will do what they say they will do

Why does the philanthropy sector need to change?

Philanthropy needs to acknowledge that we are essentially hedge funds giving away a little bit of money. Need to acknowledge the power dynamics and re-examine internal structures.

Important questions to consider:

- What changes funder behavior the most? Funders admitted that the times they created any kind of structural/behavioral change it was often peer-to-peer influence.
- What is it that creates a trusting relationship?
  - Coming into the relationship in a spirit of service.
  - The ability to be vulnerable.
  - The desire to be helpful and listen.
The desire to try and understand what is going on within that person’s context because we can’t possibly know what it is like to be in someone else’s shoes.

And then finally, trying to be consistent.

For grantees, it is hard to feel trust with a funder because at end of the grant cycle they feel like they are being evaluated or graded, and they have to reapply each year for support. The idea that funders ask grantees to promise a list of deliverables and then deliver on them perfectly is unfair. The level of uncertainty and volition happening within the social and political and economic context we are in makes it unfair to hold a nonprofit organization to something they thought about a year ago.

How the Trust-Based Philanthropy Project went about this work:

TBPP invested a lot of time engaging with peers. What they found was a lot of peers were doing TBPP but weren’t calling it that. Evaluation was collaborative, for example. There are things the grantee is tracking, but the funder is asking “How should we track them with you? What did you learn? What do you want us to know?”

TBPP created a small cohort of foundations of different kinds and sizes and leadership profiles and set out to influence and organize. They listened to grantees and wanted to get rid of bureaucracies, be more collaborative, etc. They created a group of funders that went out to influence folks who weren’t already seeing philanthropy in this way. They achieved varying levels of success – difficult to measure the effects of this sort of work.

Questions that funders began asking themselves through this process:

- Are we holding ourselves accountable? Who are we accountable to?
- Are we operating in a way that invests in our relationships with our communities?
- Are we are embodying these values of equity and collaboration and partnership?

Hard to diagnose what is changing in internal structures of these institutions. Saw a lot of promises during pandemic, but it is untested whether those promises will be carried into the future.

Key ways to implement trust-based philanthropy in your institutions:

1. **Long-term unrestricted flexible adaptive capital.** Anything shorter than a 5 year commitment is performative. Maybe not all available funds should be designated for long-term investment, but a portion can be long-term pledges. Then part of funds could be emergent and responsive in order to respond to new efforts/collaborations/organizations coming onto the scene, etc. But some portion of portfolio should be long term commitments. Nonprofit leaders are already burdened by the application process, evaluation, and donor solicitation process. Long-term investments cut down on that so they are able to focus on executing the work.
   
   a. Example shared: In a community in Montana, all of the nonprofits voted each year on which organization would receive the lion’s share of funds ($250,000) from Headwaters Foundation for Justice.

2. **The strategic capacity of a nonprofit organization is more important than a strategic plan.** If an organization has enough of a senior team, a bench, a reserve, strong advisors, diversified set of resources, etc. that is strategic capacity. Often funders reward organizations for having a formal
strategic plan in place, but funders should nurture organizations who have strategic capacity and potential for impact.

3. **Seeking risk.** Philanthropy was built on the banking model (risk-aversion). When thinking about structural inequity, the most difficult loans to get are home loans and business loans for those of BIPOC backgrounds. The entire bank loan setup is a great example of bias. So many communities are locked out of these resources because of this structure. Philanthropy is modeled after banking, and a lot of these processes are built with bias.

Funders are supposed to operate like partners to a community and not be based on a risk-aversion model. Funders must be willing to spend resources and experiment and build trust over time. The philanthropy sector has to work against the inherent biases that are engrained in internal structures and culture and needs to shift to become risk-seeking. That is not to say there shouldn’t be some sort of due diligence process. But it is important to remember that the nonprofit sector is not filled with con artists. Most are earnest people who are mission-driven.

Also, funding institutions are built in such a way that we are better equipped to take hits than nonprofits. Our flow of funding can afford to be more risk-seeking. Funders can stop operating like bankers trying to protect the bank. Funders could be operating as partners and learners who want to see the same changes these nonprofits want to see. So instead of the nonprofits working so hard to get funders to trust them, funders can invest trust in them up front. This requires the philanthropy sector to actively work against personal biases and the biases that are built into institutions. And it requires funders to not take things personally. If funders can perform an accurate assessment of what vulnerabilities are as an institution, that will help in re-examining how to think about risk.

**Q & A**

**One issue that comes up with this idea of trust-based philanthropy is the issue of accountability. How do you talk to your boards about this?**

- Trust-based philanthropy isn’t about just liking people or organizations and therefore trusting them. It is about really working with organizations who have impact. This process is not blind trust. The funder needs to be clear about mission, strategy, and the specific initiatives hoping to support, so that the funder can proactively seek out partners. As a TB funder, TWI decided early on to seek out organizations that get the least amount of foundation funding. When TWI put TB framework to work, focused on funding non-traditional organizations, BIPOC, queer folx, Black folx, who just haven’t gotten long-term capital. Wanted to find them and fund them long term.

- It’s really important for Boards to think the money is having the desired impact. The question is creating that shared sense of the impact between the funder and grantee. Often the Board is very separate from the community it is serving. So there is a need to crisscross those networks more. It is important to hear feedback directly from the community and grantees on the issues that need support and the strategies that can be employed. Must figure out how to bridge the gap between the Board and the community your institution is accountable to. Need some sort
of meeting of the minds. Community members might feel like they have to perform and convince. Funders need to hear from them how they want institutions to focus funding or shift grant making style. Boards sometimes feel they are accountable to the endowment/portfolio. We are not accountable to the endowment, we are accountable to the community.

- Can’t do TBP if you don’t have a clear sense of what you want to do as an organization. “What is the desired impact? Who are you accountable to?” Must have a very focused and clear purpose and vision and end up saying “no” a lot of the time to applicants.

- Long-term capital and trusted collaborations allow foundations and nonprofits to be more creative together. That is true innovation. Creativity and generativity is very important and these kinds of relationships nurture creativity and trust. Important to articulate this to the Board.

One thing grantees struggle with is on deliverables. Within the TBP framework, what does measuring success and collecting meaningful data/impact look like?

It’s important to think about the return on relationships. How many long-term relationships are being built in this work? Ask partners to build out what sense of evaluating impact is. Sometimes it is, “What did you learn and what can we learn from what you learned?”

- A great resource is the Robert Sterling Clark Foundation’s evaluation tools: https://www.rsclark.org/evaluate Evaluative conversations are not meant to determine if the grantee is going to get a renewal but it is in place of a report with bullet points of impact measurables. The conversation is essentially what the grantee wants the funder to know, what was unexpected in the process, etc.

- General Service Foundation and other TBP models use a dialogic tool. It’s important to ask the grantee what were the basic themes/issues throughout the process but also the information that can come from a learning conversation is so much richer than a list of deliverables. It is a much more creative and generative process and the funder is learning alongside of them.

It goes back to how funders want to be accountable to the community and how they want to partner. There are many creative ways to ask these deliverable questions and still have a sense of feeling good about the impact together.

Are your grants now larger and fewer?

TWI would make 5-year commitments of larger grants and then had annual fund that was smaller and more responsive. TWI is spending down and will make one single final grant to a native land trust because money originally came from a railroad family work that probably caused a lot of harm.
How do you frame these conversations with funders when you are not going into a conversation on equal footing? (For entities that fundraise as well as make grants) And how do you explain that fundraising for staff and infrastructure is essential in order to do this work?

- Need to explain that it is the most effective use of their dollars. Educate them on these issues and on trust-based philanthropy. Nonprofit Finance Fund has great resources on why the importance of helping nonprofits build reserves. If funders don’t want nonprofits or other community organizations to collapse and want to build sustainable work cultures, and want these organizations to have strong senior teams, then they should want them to have reserves.

- It is important to invest in infrastructure and staff. Why is it important to treat staff well and pay them well? Because the better an organization treats staff and the more reserves they have in the bank, the less they are burning the candle at both ends. It is a question of, “Do you want to be the kind of funder that says, ‘let’s burn the candle at both ends,’ or do you want to be the kind of funder that says, ‘let’s put 10 candles together and create positive change.’”

- Also, it’s very hard for grant makers to support organizations in having a sustainable reserve and healthy team culture if they themselves are not operating this way. Philanthropy is obsessed with diagnosing nonprofits. Philanthropy needs to diagnose ourselves for how we embody our values and mission. There’s very little self-reflection in the philanthropy sector. The ability for a nonprofit to thrive and succeed is dependent on the people within it. We want our foundations to look like that too.

It is time funders stop acting like the FBI within due diligence process and start spending more time engaging in community learning and joy and not always being perfect but being together. Most of us are in this field because we are people-centered. Need to make processes and structures more people-structured. And nonprofits should feel comfortable coming to their funder and saying, “Hey, I am struggling, we are struggling,” etc. but the trust needs to be built there.

The mental health of people working in the nonprofit sector is at risk. Funders need to invest in these leaders so they feel validated and supported. Also need to spend funds on mental health support. It doesn’t need to be a big secret kept from the Board so they agree to keep funding an organization. But the philanthropy sector should be striving for a different relationship where people don’t feel like they have to perform. We are all struggling right now. Let’s not make the walls so high. The experiences and struggles that nonprofits are having right now are many of the same we are having too as funders.

Next Lake County Funders Call - 11 a.m. on Wednesday, Sept. 8th