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EXECUTIVE SUMMARY

In 2009, with the support of The California Endowment, the Building Movement Project launched an initiative to explore whether California-based health and human service providers engage in activities beyond direct services and how these programs address the causes of the problems facing their constituents. Anecdotal evidence indicates there is growing interest among groups that deliver direct services in becoming more involved in “social change” activities such as policy advocacy, grassroots organizing, and community engagement. The information presented in this report represents an opportunity to better understand and define this integrated approach to service and social change with new quantitative, as well as qualitative, data gathered from a segment of California nonprofits.

Catalysts for Change is a two-part document. In Part One, we discuss findings from a survey of more than 450 California nonprofit service providers about the ways in which they are (or are not) integrating social change activities into their work. Part Two offers five in-depth case studies of California-based health and social service providers that are engaging in non-service activities to address systemic issues—including poverty, inequality, and health disparities—as well as build the voice and power of their constituents. To read Part Two—Case Studies of Catalysts for Change, go to http://buildingmovement.org/pdf/catalysts_part_two.pdf. The survey results demonstrate that the language and activities of civic engagement, constituent voice, and social change are familiar to service providers in California, even if they may not be universally agreed upon.

Five main themes emerged from the survey findings and the case studies: constituent civic and leadership development, external action, internal capacity, strategic partnerships, and organizational leadership. While the survey findings point to the role that any of these factors can play in bolstering a service provider’s ability to expand their reach beyond direct services, the case studies underscore the powerful, long-term impact that pursuing a combination of these elements can have to help groups achieve a larger vision for social change.

The survey results discussed in this part of the report are concentrated in three of the five main themes listed above: constituent civic and leadership development, external action, and internal capacity. Some of the key findings in each area are listed below.

Constituent Civic and Leadership Development: Clients ➔ Change Agents

Nonprofit direct service providers have frequent contact with people whose voices are often silenced in our society. These relationships present a unique opportunity to strengthen our democracy by supporting the capacity of groups that have been marginalized to take leadership on the issues that affect them and their communities. Despite this, we found that:

› Fewer than 50 percent of the groups surveyed consistently offer activities that build clients’ capacity for community engagement and civic participation, with one notable exception: 52 percent of groups report providing training and education on constituents’ rights within larger systems (e.g., health, education, etc.).

› Only a quarter of respondents regularly provide training on legislative processes or policies that affect clients and their communities. For example, there are few groups that frequently or always offer opportunities for clients to register to vote (25%), make calls or visits to legislators (20%), or attend election-related candidate/issue forums (10%).
External Action: Making Connections → Taking a Stand

A significant number of direct service providers are finding ways they can take action in order to affect broader social change. These include activities such as public policy advocacy, grassroots organizing, and voter registration/education. The survey results also reveal that there is room for these organizations to do more.

- The majority of survey respondents (84%) regularly engage in alliance-building activities that address larger social issues. A much smaller number report that they are advocating for policy or legislative changes (40%), and still fewer are providing opportunities for clients to engage in activist activities such as grassroots, youth, or community organizing (38%), or rallies, marches, or protests (15%).
- On the whole, health service providers engage more frequently and in a wider range of advocacy activities, while smaller organizations (fewer than 25 staffers) are significantly less likely to incorporate advocacy into their work.

Internal Capacity: Learning → Decision Making

We learned that organizations that engage in activities beyond service delivery need to have the internal capacity to make the connection between individual and systemic change.

- Most groups frequently provide opportunities for their board of directors (62%) and staff members (69%) to learn about the root causes of issues facing clients. However, far fewer offer board members (27%) or staffers (45%) the opportunity to discuss these issues directly with clients.
- Respondents that integrate non-service activities into their internal operations (e.g., mission/vision statement, strategic plan, and/or staff job descriptions/evaluations) are significantly more likely to provide staff, board members, and clients with training, skills building and other opportunities to engage in social change-oriented activities in and outside of the organization.

Recommendations

We conclude the Catalysts for Change report by offering four recommendations for future action and investigation that are directed not only at service providers, but also at the groups that support and influence their work, including funders and intermediaries. They are to:

1. Encourage and support nonprofit direct service providers to lift up the voices of constituents in and outside of their organizations.
2. Connect service providers to venues where they can take action on key issues that lead to larger, systemic change for their constituents.
3. Expand the role and effectiveness of intermediaries and nonprofit networks by focusing their work with service providers on targeted efforts for larger social change.
4. Conduct more research on the impact direct service providers can have on long-term solutions to systemic issues facing constituents and communities.
INTRODUCTION

Every day thousands of nonprofit organizations across the state of California deliver direct health and human services to those who need them most. These services form an essential safety net that helps vulnerable Californians lead healthier, more productive, and more prosperous lives. However, in these times of growing economic insecurity and social inequality, nonprofits are continually asked to do more with less and many are overwhelmed by the demand for their services. Against this backdrop, there has been a renewed interest in the role that direct service providers can play in addressing both the causes and the consequences of poverty, inequality, and health disparities.

In 2009, with the support of The California Endowment, the Building Movement Project launched an initiative to explore whether California-based direct service providers are offering non-service related programs and activities to address the root causes of the problems facing their constituents. Given the wide range of terms and phrases that different groups use to identify this aspect of their work—including civic engagement, advocacy, social change, and systems change to name just a few—we struggled with how to describe these practices from the very beginning of our study. In order to focus on the activities groups are involved in (rather than how they label their work) and avoid jargon, in the end we elected to adopt the inclusive (albeit cumbersome) phrase activities beyond direct services.

Factors such as external government regulation, funding constraints, and internalized fear within the nonprofit sector itself may influence an organization’s approach to service delivery and affect whether it engages in activities that are geared toward broader social change. There have been many critiques of how the expansion of nonprofit services has led to an industry that is more focused on self-preservation than social change. In addition, as the availability of public and private money for nonprofit services continues to decline, groups are more dependent than ever on the demands of their funders.

Despite this challenging environment, there are signs that a growing number of nonprofit organizations and networks are looking to do more than deliver direct services. Based largely on our discussions with providers in California and in other parts of the United States, we know that many groups are trying to affect larger social change by engaging in activities beyond the delivery of direct health and human services. However, there has been little quantitative data that provides insight into the type and frequency of these practices.

In order to better understand the landscape of service and social change in California, the Building Movement Project conducted a short survey of nonprofit organizations to ask about their activities beyond direct services, as well as the obstacles or barriers that are preventing them from engaging in these types of activities. In addition to presenting key findings from the 460 respondents, this report details the major themes that emerged in the survey results and features five in-depth case studies focused on California-based health and human service providers. The case studies, which are included as Part Two of the Catalysts for Change report, provide concrete, on-the-ground examples of a dual approach to service and social change.
The purpose of this report is not to suggest that policy advocacy, community organizing, alliance building, or other activities should *supplant* the provision of direct health and human services. Rather, we assert that these kinds of endeavors can be *central* to the mission of a direct service provider through a variety of practices. The survey findings provide an initial snapshot of how some California-based nonprofits are considering this approach to service and social change. It is evident that most groups are engaging in some activity beyond service delivery ranging from participating in coalitions (highly likely) to taking direct action on key issues through advocacy, activism, or community organizing (far less likely). In future research, it will be important to ask more about these practices in order to assess their effectiveness and their impact on developing leadership among the clients/constituents that groups serve.

The survey results also indicate that there is a clear role that funders, nonprofit technical assistance providers, intermediaries, academics, and others can play in helping organizations integrate social change-oriented efforts into their existing direct service work. Indeed, we hope to encourage and challenge more nonprofits—along with the networks and institutions that support them—to find new and innovative ways to combine direct services and activities beyond direct services, amplifying their effects and increasing their impact on a wide range of issues.
MAJOR THEMES

Five cross-cutting themes emerged in the survey results and the case studies. These themes serve to highlight key areas that service providers can focus on in order to increase their capacity to engage in activities beyond direct services (they also help to inform the recommendations we present at the end of this report). The five themes are:

1 **Constituent Civic and Leadership Development** – Service organizations have daily contact with people whose voices are often silenced in our society. Because of their trusted relationships with these individuals, service providers have the opportunity to help develop constituents’ ability to serve as community leaders. Some groups are listening to their clients and providing training and support so they can better identify and speak to the issues that affect their constituents. They are doing this in a variety of ways that range from helping constituents to better understand their rights, to providing opportunities for them to engage in advocacy activities as well as community and legislative forums. Supporting clients to claim their voice and power can be transformative not only to the individuals who are speaking out, but also to those around them including their families and other community members.

2 **External Action** – In addition to building clients’ capacity to take action on the problems that affect them, some service providers are finding other ways to engage their constituents and partner organizations to impact a variety of social issues. These activities include public policy advocacy, grassroots organizing, and voter registration/education. These efforts are focused on preserving or securing organizational funding, but as the case studies illustrate, others have moved beyond resource issues to more direct constituent concerns. Participating in external action aimed at creating social change can help service providers strengthen ties with other organizations, build relationships with policymakers, and identify community issues that inform the delivery of individual services.

3 **Internal Capacity** – Organizations that engage in activities beyond service delivery must have (or develop) the internal capacity to identify the systemic causes of problems that go beyond individual circumstances or behaviors while still meeting clients’ immediate needs. They are doing this in a number of different ways that range from soliciting client input and feedback about the organization’s programs and priorities to providing opportunities for staff and board members to learn about the root causes of issues facing constituents and their communities. The groups featured in the *Catalysts for Change* case studies highlight the importance of creating an organizational culture where the connection between service delivery and social change is consistently and frequently reinforced. The act of aligning internal activities (e.g., providing opportunities for clients to inform program work, developing a mission/vision statement that reflects a commitment to social change, etc.) and the kinds of external action mentioned above can have a powerful effect on an organization’s ability to address larger and more intractable social issues.

In addition to the topics above, two major ideas emerged from the case studies and comments provided by survey respondents. They are mentioned here to round out the five themes from the research, and they deserve fuller attention in future work.
4 **Strategic Partnerships** – By seeking out strategic partnerships and alliances, organizations burdened by high demand for their services can still participate in larger change efforts even with limited resources. Although we did ask a question about alliances in the survey, the responses—along with the lessons that emerged from the case studies—indicate that this is an area that needs more in-depth attention and investigation. As available resources continue to shrink, alliances help groups advocate to meet their basic funding needs; they are also important venues for addressing policy changes or taking collective action on issues that directly impact constituents and their communities. In the case studies, organizational partners and larger networks offer special expertise, knowledge, or practice experience that the service provider might not bring to the table. This collaborative approach has been successful in affecting change despite the fact that service providers’ constituents have few resources and little political clout.

5 **Organizational Leadership** – The importance of having strong, focused, and value-driven leadership is a key factor that emerged in the case studies. It is especially evident among the groups whose executive director, CEO, or leadership team—supported by the board of directors—has been able to successfully articulate and fulfill a mission focused on helping individuals and changing unjust systems. In addition, these leaders are committed to developing both staff and constituent leadership at all levels of the organization, as well as holding them accountable for implementation of this joint mission (i.e., delivering direct services and affecting larger social change). Finally, strong leadership helps to ensure that the organizational culture supports serving clients, listening to their needs and concerns, identifying larger issues, and creating plans for action.

The overlapping circles in Figure 1 represent the five cross-cutting themes that emerged in the survey results and case studies. There is a continuum of engagement within each area and different groups are involved to varying degrees (and some not at all). But as the case studies reveal, it is more likely than not that there will be some level of activity in each area among those organizations that are committed to integrating social change activities into their service work over the long term.

![Figure 1: Main Themes](image-url)
WHO PARTICIPATED IN THE SURVEY AND CASE STUDIES?

Between December 2009 and early January 2010, the web-based Connecting Beyond Services survey (see Appendix A on page 20 for a list of survey questions) was distributed to nonprofit organizations that provide direct health and human services in California. A variety of intermediary groups, funders, and nonprofit organizations assisted with survey distribution and snowball sampling which increased the reach of our efforts. There were a total of 460 respondents with 324 (70%) who completed the entire survey. We asked for one respondent per organization and in most cases the survey was completed by a person in an executive management position (54%) or a program director/manager (28%). Sixty-one percent of respondents were from the Bay Area.

Most survey respondents represent organizations serving children, youth, and families (38%), multi-service organizations/family resource centers (21%), and those providing health services (17%). (For a complete list of services provided by survey respondents, see Appendix B on page 23). Just over half the groups have 25 or fewer staff members, another quarter are mid-sized with staffs of 26 to 100, and the rest are larger organizations with 100+ staff members.

The respondents are not a representative sample of nonprofit health and human service providers in California. However, the survey results provide us with some initial data as well as a window into how this subgroup of nonprofits is acting beyond service delivery, both of which should be the basis for further exploration.

After the survey was completed, the project’s Advisory Group (see page 24 for a list of Advisory Group members) identified a subset of organizations for inclusion in a separate but related series of case studies. The five groups ultimately chosen were selected on the basis of various criteria established by Advisory Group members and other project advisors, including representatives from The California Endowment. These criteria include: geography (one organization is located in far Northern California, one is in the Central Valley, and three are in Southern California); type of organization (two are health clinics, one is a family resource center, one is a full-spectrum social service agency, and one is a culturally-based service provider); constituent demographics (there is a diverse range of ethnicities and races represented among the five); and size (including organizational budget, number of staff, and number of constituents served).

KEY FINDINGS

The survey results demonstrate that service providers are familiar with the language and activities of civic engagement, constituent voice, and social change even though groups may not always agree on what they mean when they use these terms. Our findings indicate that the time is ripe to offer support and incentives to help organizations adopt a more active stance in these areas. In fact, a significant number of survey respondents offered comments indicating that their organizations are in the process of assessing how they could become more involved in larger systems change work through activities beyond direct services.

Almost all of the direct service providers we surveyed have engaged—at least occasionally—in activities that go
beyond direct services in order to affect some sort of larger social change. Although we identified five major themes that run through the survey results and the case studies, the most prevalent practices named in the survey were concentrated in three areas: constituent voice, external action, and internal capacity. The kinds of activities that are correlated with each theme are seen in Figure 2.

**Figure 2: Examples of Strategies and Activities Associated with Survey Themes**

<table>
<thead>
<tr>
<th>CONSTITUENT VOICE</th>
<th>EXTERNAL ACTION</th>
<th>INTERNAL CAPACITY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Training/skills building to increase civic engagement</td>
<td>Coalition/alliance building on social change issues</td>
<td>Mission/vision statement, strategic plan, and/or job descriptions/evaluations reflect a commitment to social change</td>
</tr>
<tr>
<td>Opportunities to attend candidate/issue forums</td>
<td>Grassroots/community/youth organizing</td>
<td>Meeting with clients/constituents to discuss their views on key social change issues</td>
</tr>
<tr>
<td>Opportunities to make calls/visits to legislators</td>
<td>Participation in campaigns, rallies, boycotts</td>
<td>Tracking or coding for the purposes of outcomes and evaluations related to social change activities</td>
</tr>
<tr>
<td>Training/skills building to engage in local politics or to testify before legislative or decision-making bodies</td>
<td>Meeting with policymakers about specific issues, policies, legislation</td>
<td>Opportunities for staff/board members to learn about root cause issues and policies/legislation impacting clients</td>
</tr>
<tr>
<td>Voter/census education, voter registration</td>
<td>Engaging in public policy/advocacy work, issuing public policy or issue-based reports</td>
<td>Taking the 501(h) election</td>
</tr>
<tr>
<td>Involvement in internal (organizational) decision-making, goal-setting, program planning processes</td>
<td>Taking public positions on policies, legislation that directly impacts clients</td>
<td>Staff and board members reflect the diversity of the clients/communities served</td>
</tr>
</tbody>
</table>

While we found some variation in the data across different questions, one clear trend emerged: the organizations surveyed tend to focus more on internal capacity building activities and less on developing the leadership of their constituents or engaging in external action. For example, 69 percent of organizations surveyed frequently or always provide opportunities for their staff and board members to learn about the root causes of issues facing the clients that they serve, while only 27 percent report that they frequently or always take public positions on policies/legislation affecting clients. In the following sections we explore these findings in more detail and report on other results from the survey.
KEY FINDING #1: CONSTITUENT VOICE, CLIENTS → CHANGE AGENTS

Most direct service providers have frequent—even daily—contact with people from low-income communities, communities of color, and other groups that have been marginalized. For community health clinics and large-scale social service providers, the number of client “encounters” that take place over the course of a year is significant, as is the deep reach of many smaller community-based groups. Therefore, we asked survey respondents about how they are (or are not) engaging in activities that support their clients’ ability to develop leadership skills and to build their civic voice both in and outside of the organization.

The survey findings speak to the different ways in which service providers are encouraging client voice and leadership. First, we looked at the way organizations support clients’ community engagement, such as learning how larger systems work (e.g., public health, education, etc.), developing skills to actively participate in community life, and creating venues for peer/community education. But we also looked at whether and how service providers support their clients’ capacity for civic participation related to legislative, policy, and electoral processes.

Figure 3 shows the percentage of respondents who report that their organizations regularly offer activities related to building client community engagement, which include opportunities for skills building and direct participation.

Figure 3: Building Constituent Capacity for Community Participation

<table>
<thead>
<tr>
<th>MY ORGANIZATION PROVIDES OPPORTUNITIES FOR OUR CONSTITUENTS TO:</th>
<th>PERCENT FREQUENTLY/ALWAYS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Build relationships through shared action (e.g., community gardens, sports leagues, etc.)</td>
<td>46%</td>
</tr>
<tr>
<td>Participate in educational forums on issues facing their community</td>
<td>43%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>MY ORGANIZATION PROVIDES CONSTITUENTS WITH TRAINING OR SKILLS BUILDING TO:</th>
<th>PERCENT FREQUENTLY/ALWAYS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Understand their rights within broader systems (e.g., health care, education, etc.)</td>
<td>52%</td>
</tr>
<tr>
<td>Serve as promotores* or community/peer educators</td>
<td>43%</td>
</tr>
<tr>
<td>Examine the root causes of issues/problems facing their community</td>
<td>40%</td>
</tr>
<tr>
<td>Enhance their participation at decision-making tables in and outside the organization</td>
<td>33%</td>
</tr>
<tr>
<td>Learn more about legislative processes and/or specific policies that affect them and their community</td>
<td>25%</td>
</tr>
</tbody>
</table>

Figure 3 shows that fewer than 50 percent of the groups surveyed consistently offer activities to build client capacity for community engagement, with the exception of providing training on their rights within larger systems (52%). Only a quarter of the respondents are regularly providing training on legislative processes or policies that affect clients and their communities.
The results in Figure 4 demonstrate that this is still room to build client capacity for civic participation. Although 52 percent report regularly providing training to increase client “civic engagement,” there are few groups that frequently/always offer opportunities for clients to register to vote (25%), make calls/visits to legislators (20%), or attend election-related candidate/issue forums (10%).

**Figure 4: Building Constituent Capacity for Civic Participation**

<table>
<thead>
<tr>
<th>MY ORGANIZATION PROVIDES OPPORTUNITIES FOR OUR CONSTITUENTS TO:</th>
<th>PERCENT FREQUENTLY/ALWAYS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Register to vote</td>
<td>25%</td>
</tr>
<tr>
<td>Learn about census participation</td>
<td>20%</td>
</tr>
<tr>
<td>Make calls/visits to legislators</td>
<td>20%</td>
</tr>
<tr>
<td>Attend election-related candidate/issue forums</td>
<td>10%</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>MY ORGANIZATION PROVIDES CONSTITUENTS WITH TRAINING OR SKILLS BUILDING TO:</th>
<th>PERCENT FREQUENTLY/ALWAYS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Increase their civic engagement</td>
<td>52%</td>
</tr>
<tr>
<td>Engage in local politics</td>
<td>43%</td>
</tr>
<tr>
<td>Prepare them to testify before local, state, or federal legislative bodies</td>
<td>40%</td>
</tr>
</tbody>
</table>

Clearly, the service providers we surveyed tend to shy away from frequent engagement in activities that might be considered “political” even when they are completely nonpartisan. There are various reasons why this may be the case. They may be unsure about the limits of tax-exempt lobbying, individual funding streams may constrain an organization’s activities in specific ways, or staff members and organizational leadership may lack experience in these arenas themselves. It may also be that these issues are not viewed as relevant to organizational missions that focus on providing direct services or perhaps they are not supported by funding sources.
KEY FINDING #2: EXTERNAL ACTION, MAKING CONNECTIONS → TAKING A STAND

The survey results that correspond to the theme of External Action stem from questions about three main types of activities: alliance building, advocacy, and activism. As detailed below, our findings reveal that most respondents regularly participate in alliances that are aimed at addressing larger social issues; a smaller number report that they are advocating for policy or legislative changes; and still fewer are engaging in activist activities.

→ Alliances

Across size, issue area, and region, most groups (84%) participate on a regular basis (that is, frequently or always) in alliances, partnerships, and other collective bodies that seek to address systemic issues impacting clients. These include community coalitions that advocate on policies or legislative issues (74%), coalitions that develop common platforms on key issues (67%), and online groups that seek to address key issues affecting clients (67%).

→ Advocacy

When it comes to advocacy, close to three-quarters (74%) of respondents report they are frequently or always involved in one or more of the activities listed in Figure 5. But the percentage is far lower for each individual activity such as engaging in policy/advocacy (40%), meeting with legislators (35%), or taking public positions on policies affecting clients (27%). In a related question, only one-third (34%) of respondents said their board members have frequent opportunities to take public positions on policies or legislation affecting clients.

Advocacy activities represent one of the few areas in which organization type and size make a difference. As shown in Figure 5, health service providers are more likely to engage in all advocacy activities, but their participation is highest when it comes to meeting with policymakers about legislation (52 percent for health service providers versus 40 percent for all respondents) and taking public positions on policies/legislation affecting clients (43...
percent versus 27 percent). We did not ask about the goal of these advocacy activities (e.g., to secure funding, improve health policies, health care reform, etc.) or the process for engaging in them (e.g., coordinated through strong intermediaries, led by a policy coordinator/department within the organization, etc.). Further exploration could help identify specific aspects of health service providers’ advocacy work and whether they could be a model for other service organizations.

In a set of related findings, Figure 6 reports on the percentage of groups that never engage in advocacy activities by organizational size (as measured by the number of staff members). The data show how the smallest organizations (1-25 staffers) are less likely to participate in practices ranging from meeting with or calling legislators, to using research to inform their advocacy activities, to taking public positions on policies and legislation that affect clients. However, the rate of engagement does not increase in proportion to the size of the organization. It would be helpful to find out if smaller groups have fewer resources or less capacity than larger organizations and therefore require additional support to integrate advocacy activities into their work. In addition, it would be useful to learn why some mid-sized and larger groups are more likely to engage in advocacy than others.

Activism

The groups we surveyed are least likely to be involved in external action that involves activities we labeled as activism. These activities include: engaging in grassroots, community or youth organizing; participating in letter-writing or telephone campaigns; and taking part in rallies, boycotts, and other types of collective action. Figure 7 offers a snapshot of groups that frequently or always provide opportunities for their constituents to participate in activist activities.
Compared to the other two types of external action discussed in this section (advocacy and alliance building), activism can be more labor intensive and there can be greater risk that these activities will be seen as unrelated to an organization’s efforts to provide direct services. Consequently, it could be harder to convince board and staff members, funders, and other stakeholders of the value of investing in these practices—despite their strong potential for achieving systemic change. In addition, we do not know if service groups we surveyed are engaged in alliances with activist organizations to achieve a similar impact without a direct investment of limited resources in this area.

Overall, the survey results indicate that groups are taking external action on systemic issues that affect their clients. They are more likely to do this by joining alliances or coalitions and less often by regularly engaging in direct actions that push for change.

The current economic environment—in which the need for essential health and social services is growing while available resources are shrinking—presents a unique opportunity for more groups to actively address policies and systemic issues that affect their clients. However, in order to be effective, organizations need to have the internal capacity to engage in external activities. These practices are described in the next section.

KEY FINDING #3: INTERNAL CAPACITY, LEARNING → DECISION MAKING

The survey asked a variety of questions about activities related to the internal practices of nonprofit service providers that support activities beyond direct services. In this section, we look at how the organizations surveyed seek to build the capacity of staff and board members to better understand the causes of issues facing clients, as well as the role (and voice) of clients/constituents within the organization. We also discuss their systems of internal accountability.

Training Staff and Board Members/Listening to Constituent Voice

An impressive 87 percent of respondents report their organizations frequently or always provide opportunities for staff and board members to participate in at least one of the following activities:
Learning about the root causes of issues facing constituents (staff 69%; board 62%)
Learning about policies and legislation that affect constituents (staff 60%; board 60%)
Meeting with constituents to discuss their views on key issues beyond service delivery (staff 45%; board 27%)

This type of internal education and training helps to prepare service providers for building client voice and taking external action on key issues. The survey results clearly indicate that respondents are committed to understanding larger systemic issues facing the people they serve. Notably, our findings also point to the fact that there is still a reluctance to actually include constituents in the process of educating staff and board members on these issues.

Looking more closely at client voice within the organizations surveyed, most groups (62%) report that clients are frequently or always asked to participate in program evaluation activities. Given the recent focus on consumer satisfaction, we might have expected this percentage to be even higher. A smaller percentage (46%) of respondents frequently or always ask clients for input about their organization’s mission or vision, while even fewer (39%) report constituents regularly contribute to organizational decision-making or program planning activities. Only 35 percent of groups frequently or always ask clients to participate in board meetings and/or other internal decision-making bodies. In fact, 28 percent of the groups surveyed say constituents never participate in organizational decision making.

**Internal Accountability**

The survey sought to identify some internal structures of accountability that service providers put in place to insure that their staff, board members, and other stakeholders put into practice activities beyond service provision. Seventy percent of groups surveyed say that their mission or vision statement references activities beyond direct services. Two-thirds (67%) report that their strategic plans reference activities beyond direct service delivery, and 63 percent include non-service-related activities in staff job descriptions and evaluations.

We looked more closely at how these structures of internal accountability impact organizational practices. It turns out that groups that include activities beyond direct
service in their mission/vision statement, strategic plan, or their staff job description/evaluations are statistically more likely to involve their clients in internal decision-making processes, develop client leadership, and/or engage in external action geared toward social change.

Figure 8 reveals the difference that having these internal commitments can make. Specifically, groups that have incorporated activities beyond direct services into their mission or vision statement, strategic plan, and/or staff job descriptions/evaluations (the “yes” percentages in Figure 8) are more likely to engage internal learning and external action oriented toward systemic change.

Significantly, organizations that incorporate activities beyond direct services also experience a corresponding increase in the likelihood that staff or board members will have opportunities to meet with clients to discuss their views on key issues, learn about policies/legislation impacting clients, and learn about the root causes of issues and problems facing constituents (Figures 9 and 10).  

Other areas that are positively, though not significantly, impacted by the adoption of one or more of these internal accountability structures include providing opportunities for constituents to register to vote, learn about census participation, and participate in program evaluation activities.
Finding External Support for Building Internal Capacity: The Role of Intermediaries

Organizations that are interested in adopting new practices—or changing existing ones—often rely on outside consultants or intermediaries for help. Survey respondents were asked if they have sought assistance for their work beyond direct services from an outside source. As seen in Figure 11, most report that they primarily turn to nonprofit support organizations and consultants (59%) and coalitions/networks (54%). Surprisingly, 39 percent report they use online resources or consult with peer organizations, two often overlooked resources.

We also asked survey respondents about what supports or resources would help them to pursue social change activities beyond the direct services that they provide. Over three-quarters of the respondents (77%) said they need additional funding or other resources to do so. Among respondents who reported that their organization had not engaged in activities beyond direct services during the past year, 54 percent said it was due to resource constraints, 35 percent said it was not in their mission, and 21 percent answered they lacked the necessary skills/expertise.

In addition, 44 percent of respondents report that they are part of an affiliate network, listing close to 150 names of intermediaries, parent organizations, and other groups to which they are connected. These range from well-known national entities, such as Girls, Inc. and Catholic Charities, to local alliances like the East Bay Asian Consortium or the Los Angeles Child Care Alliance. We did not ask respondents to articulate the value or impact of these affiliations; in truth, we were surprised by the sheer number of examples that were offered. It would be particularly interesting to explore the role these groups play beyond advocating for needed resources—such as advancing broader social change goals—for these providers.

Figure 11: Technical Assistance for Activities Beyond Service Delivery

<table>
<thead>
<tr>
<th>MY ORGANIZATION HAS RECEIVED HELP/TECHNICAL ASSISTANCE WITH ACTIVITIES BEYOND DIRECT SERVICES FROM:</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Nonprofit support organization/consultants</td>
<td>59%</td>
</tr>
<tr>
<td>Coalition or network</td>
<td>54%</td>
</tr>
<tr>
<td>Peer organization</td>
<td>41%</td>
</tr>
<tr>
<td>Online resources</td>
<td>39%</td>
</tr>
<tr>
<td>Intermediary</td>
<td>19%</td>
</tr>
<tr>
<td>Parent organization</td>
<td>13%</td>
</tr>
</tbody>
</table>

Among respondents who reported that their organization had not engaged in activities beyond direct services during the past year, 54 percent said it was due to resource constraints, 35 percent said it was not in their mission, and 21 percent answered they lacked the necessary skills/expertise.
CONCLUSIONS AND RECOMMENDATIONS

The *Catalysts for Change* report explores whether and how a subset of California-based nonprofit service providers are engaging in activities beyond service delivery in order to create systemic change. We view the survey results—and the accompanying case studies—as an important first step in 1) understanding how service providers are engaging in social change activities as well as the barriers that are preventing them from doing so, and in 2) guiding future research and investigation on this topic. We also believe that if service providers work to integrate practices that lift up the voices and civic capacity of their clients and engage in external, change-oriented action at the organizational level, they could have a significant impact on addressing the larger systemic issues facing their constituents.

In these times of enormous financial crisis, service delivery groups are being asked to do more and more with less and less. Activities that seek to address systemic issues are more important than ever, but our findings indicate that these endeavors may take a backseat among organizations that are already stretched thin and overwhelmed by the demand for their services. Though many groups are building their internal capacity to engage in activities beyond service delivery, it is unclear if these efforts are enough to provoke actions that result in significant social change. Therefore, we are interested in whether there are specific incentives or supports that might encourage more nonprofit service providers to build the voice of their constituents and to take a visible and active stance on important systemic issues that affect the clients and communities they serve.

Based on our findings, we have developed four recommendations directed at service providers and the groups that support and influence their work, including funders and intermediaries.

1 *Encourage and support nonprofit direct service providers to lift up the voices of constituents in and outside of their organizations.*

The groups we surveyed are involved in activities beyond direct services, but they tend to be focused on internal capacity and alliance building efforts. Far fewer actively engage in building voice and power among their constituents both in and outside of their organizations. Involving clients meaningfully in decision-making processes, as well as external opportunities for civic engagement, can be transformational for clients and offers greater potential for promoting and sustaining social change. It also demands that funders, nonprofit technical assistance providers, and other intermediary groups work with direct service providers and their allies to provide them with the tools and resources they need to build constituent involvement in the organization and the community.

2 *Connect service providers to venues where they can take action on key issues that lead to larger, systemic change for their constituents.*

Overall, we are encouraged that so many groups are already thinking beyond service delivery to other ways that they can serve as catalysts for systemic change. While most see the value of forming organizational partnerships, the survey findings present evidence that most direct service providers tend to shy away from certain activities presumably because of their “political” nature, even though they are completely legal and nonpartisan. In addition to educating nonprofit service providers about the wide range of permissible
activities within this realm, efforts should be made to connect them to venues where they can take joint action on key issues in partnership with other organizations.

We believe there is enormous untapped power in both building alliances and engaging in external action (e.g., policy advocacy, grassroots organizing, voter registration, activism, etc.). Further, our findings show that specific practices—such as including a commitment to activities beyond direct service in a service provider’s mission/vision statement, strategic plan, or staff job descriptions—go a long way in supporting these activities within an organization. More of these practices need to be identified and supported to signal clients, staff, board members, volunteers, and other stakeholders that the organization sees a connection between individual change and systemic change.

3 **Expand the role and effectiveness of intermediaries and nonprofit networks by focusing their work with service providers on targeted efforts for larger social change.**

The survey results and the case studies underscore the many connections between nonprofit service providers and the intermediaries, networks, and technical assistance providers that support them. The groups we surveyed indicate that they turn to these organizational partners and affiliates in order to engage in activities beyond direct services—both in terms of helping to build their capacity for pursuing social change work as well as their ability to jointly take action on specific issues. These entities represent an important point of contact with service providers as well as vehicle for supporting their activities beyond direct services. Going forward, we need to learn more about what these intermediary groups do now and how they could be mobilized to have a larger and more targeted social change impact.

4 **Conduct more research on the impact direct service providers can have on long-term solutions to systemic issues facing constituents and communities.**

The time is right to look for bold solutions to pressing social issues affecting communities that have been marginalized or disenfranchised. And direct service providers have a key role to play in this process, particularly if they feel empowered to set specific organizational goals that are aimed at reducing poverty, health disparities, and social inequalities. Along with quantitative analyses that will help to answer these questions, it will be important to continue to share case examples (like those found in Part Two of this report) that provide a variety of models for—and approaches to—combining service and social change work. To achieve this goal, service organizations must be willing to examine their internal capacity for engaging in activities beyond direct services, while funders, intermediaries, and other organizational supporters can help by providing the tools and resources to inform and guide this learning process.

Nonprofit service providers help build the fabric of our society by providing a critical safety net for those most in need. These groups have enormous reach into many communities that are not always recognized or consulted by those who make policy decisions that affect their lives. Direct service providers can play a crucial role in our democracy by supporting client voice and civic engagement, and taking action that results in systemic change. As we move into the second decade of the 21st century, it is time to rethink the role and impact of service providers in creating a better world for all.
ENDNOTES

1. In this document we use the terms constituents and clients to refer to the people and the communities served by nonprofit health and human service organizations.


3. Snowball sampling asks participants to suggest others who might be willing or appropriate to participate.

4. Since survey respondents are oversampled in the Bay Area, we elected not to include a case study from this region. Many of our advisors pointed to Asian Health Services (AHS) in Oakland as an excellent model of an organization combining service delivery and social change. The success of AHS’s approach is currently being documented and additional information about their work can be found by visiting [http://www.ahschc.org](http://www.ahschc.org).

5. The table includes examples from the survey, but is not inclusive of all questions that were used to develop the themes related to the survey results.

6. Promotores/as (outreach workers) provide outreach and education to members of their community. Often their training is on the job, not formal, and in many cases they are volunteers. Promotores/as are an integral part in linking underserved populations to existing resources and services. See: [http://hia.berkeley.edu/promotoras.shtml](http://hia.berkeley.edu/promotoras.shtml).

7. These differences are all statistically significant to p < .001.

8. The board findings are significant to p < .01.
APPENDIX A: SURVEY QUESTIONS

Part I: Demographic Information

1. What are the primary services provided by or the main focus of your organization?
2. What is the primary population(s) served by your organization?
3. Where is your organization located?
4. What is the service area of your organization?
5. What is the size of your organization?
6. Is your organization a member of a larger affiliated network?
7. What is your primary role with your organization?

Part II: Engaging Clients Beyond Direct Services

Response scale: Never, Occasionally, Frequently, or Always

1. My organization provides opportunities for our clients/constituents (i.e., the people your organization serves) to:
   - Attend election-related candidate/issue forums
   - Build relationships through shared action (e.g., community gardens, sports leagues, etc.)
   - Engage in grassroots/community/youth organizing
   - Give testimony to policy-making bodies
   - Learn about census participation
   - Make calls/visits to legislators
   - Participate in educational forums on issues/problems facing their community
   - Participate in letter-writing or telephone campaigns
   - Register to vote
   - Take part in rallies, boycotts, or other types of collective action
   - Other (please specify)

2. My organization provides clients/constituents with training or skills building to:
   - Engage in local politics (community boards, city councils, etc.)
   - Enhance their participation at decision-making tables (in and outside of the organization)
   - Examine the root causes of issues/problems facing their community
Increase their civic engagement
Learn about the legislative process and/or specific policies that affect them and their community
Prepare them to testify before local, state, or federal legislative or decision-making bodies
Serve as “promotores” or community/peer educators
Understand their rights within broader systems (e.g., health, education, criminal justice, etc.)
Other (please specify)

3. Within my organization, clients/constituents:

Provide input about our mission/vision
Participate in organizational decision-making/program-planning
Participate in program evaluation activities
Help set organizational goals/priorities
Participate in board meetings and/or other internal decision-making bodies
Other (please specify)

Part III: Additional Questions About Your Organization

1. In your organization: Response scale: Yes, No, In Progress, Don’t Know, N/A

Does your mission/vision statement reference activities beyond direct services?
Does your strategic plan include reference to activities beyond direct services?
Do your staff job descriptions/evaluations include activities beyond direct services?
Does your infrastructure allow for engagement in activities beyond direct services? (e.g., accounting system allows for lobbying, listservs to mobilize constituents, etc.)
Have you taken the 501(h) election? (Allows 501(c)(3) organizations to allocate a percentage of their budget to direct lobbying activities.)
Do your staff members reflect the diversity of the community served by the organization?
Do your board members/advisors reflect the diversity of the community served by the organization?
Do you provide limited English proficient (LEP) clients/constituents with resources (e.g., language interpretation, translated written materials, etc.) to facilitate their participation in activities beyond direct services?

2. My organization has not engaged in any activities other than direct services in the past 12 months because:

Our board members are not interested
Our clients/constituents are not interested
Our organizational leadership is not interested
This work is not within our mission
We are afraid of losing funding/resources
We don’t have the necessary skills/expertise
We lack adequate funding/resources
N/A
Other (please specify)

3. It would be more possible for my organization to engage in activities beyond direct services if we had:

A change in our organizational mission/vision
Additional funding or other resources
Approval from our board or other advisory body
Help in carrying out a strategic planning/visioning process
Interest expressed by our clients or community members
Support, guidance, or advice from other groups that are doing this type of work
Training, education, or other informational resources
Other (please specify)

Part IV: Additional Comments, Information

In the space provided, feel free to elaborate on any of the answers that you provided above or provide us with any additional information about your organization or your work that is relevant to the topic of this survey.

In particular, we encourage you to share success stories and/or specific challenges or obstacles related to engaging in activities beyond direct services to individuals and families and that seek to address the root causes of problems facing your clients/constituents.
APPENDIX B: PRIMARY SERVICES PROVIDED BY SURVEY RESPONDENTS (INCLUDES FILL-IN RESPONSES)

- Arts/cultural programming (includes art therapy, community art making, cultural arts, arts education)
- Business training, self-employment training, microenterprise
- Children, youth, and families (includes adoption and foster care, child abuse and neglect, child care, child support, family/domestic violence)
- Community development/economic development
- Community service/volunteering
- Conflict resolution/mediation
- Consumer issues (includes consumer protection, energy assistance, personal finance)
- Crime and safety (includes crime/safety/victims’ issues, support services)
- Disabilities issues/services
- Domestic violence/gender violence/sexual assault services and support
- Dwarfism support and resources
- Education/training (includes civic education, early childhood education, ESL)
- Emergency and disaster preparedness/response
- Employment services (includes job training/workplace issues)
- End of life services, palliative care, hospice, grief support
- Environment/energy conservation
- Faith-based services
- Food security/agriculture (includes farming/agriculture, food security/justice, poverty/hunger)
- GLBT issues
- Health/health services/community clinic (includes HIV/AIDS client services, reproductive health)
- Homeless services
- Housing/housing assistance
- Human rights/civil liberties
- Immigration/immigrant’s rights/refugee services
- Indigenous rights, indigenous language interpretation, cultural sensitivity
- Information and referral
- Leadership development
- Legal services/assistance
- Men’s/fathers’ rights, responsibilities, advocacy, education
- Mental health services
- Multi-service community agency/Family Resource Center (FRC)
- Offender/ex-offender services
- Peace and nonviolence
- Recovery/addiction/abuse
- Senior/elderly services
- Sports/recreation/leisure
- Transportation
- Tribal organization
- Veterans’ issues
- Workplace organizing
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We are tremendously grateful to the many individuals and organizations that helped to make this report possible. First and foremost, we would like to thank the staff, board members, and clients of the five organizations featured in the case studies: Hill Country Health and Wellness Center; the Friendly Center; SHIELDS for Families; St. John’s Well Child and Family Center, and the Centro Binacional para el Desarrollo Indígena Oaxaqueño. They generously shared their time, insights, and experiences with us in order to enhance and enrich our understanding of their work. We were profoundly moved by the positive impact that these organizations are having in their communities, and we know that many other groups will be inspired by their leadership and innovation.

In addition, we would like to thank the representatives of the 460 California-based direct service providers who took part in the Connecting Beyond Services survey. Through their participation, these groups have provided the field with a deeper understanding of how nonprofits are delivering direct health or social services as well as engaging in other activities in order to create social change. We are grateful to the organizations, networks, and institutions that helped to widely distribute the survey.

We are grateful for the generous support that The California Endowment provided for this project, which is part of the foundation’s larger efforts to build healthy communities and a healthy California. In particular, we want to acknowledge and thank Dianne Yamashiro-Omi, Program Manager for Equity and Diversity, and Sandra Davis, Program Manager for East Oakland, who have been instrumental in guiding our work and who helped to make this report possible.

Graphic designer Irene Lau skillfully translated our vision into reality on each page of this report, and Gretchen Dukowitz, our copyeditor, provided exceptional attention to detail.

Finally, we want to extend a special thanks to the members of the Building Movement Project Team who were integrally involved in this project—Melanie Butler, Helen Kim, Caroline McAndrews, Cristie Scott, and Trish Tchume.
ABOUT THE BUILDING MOVEMENT PROJECT

The goal of the Building Movement Project is to build a strong social justice ethos into the nonprofit sector, strengthen the role of nonprofit organizations in the United States as sites of democratic practice, and promote nonprofit groups as partners in building a movement for progressive social change.

Many individuals in the nonprofit sector are strongly motivated by the desire to address injustice and promote fairness, equality, and sustainability. The Building Movement Project supports nonprofit organizations in working toward social change by integrating movement-building strategies into their daily work.

To learn more about the Building Movement Project and our work, please visit:
http://www.buildingmovement.org

ABOUT THE AUTHORS

Frances Kunreuther directs the Building Movement Project, which works to strengthen U.S. nonprofits as sites of civic engagement and social change. She is co-author of From the Ground Up: Grassroots Organizations Making Social Change (Cornell, 2006) and Working Across Generations: Defining the Future of Nonprofit Leadership (Jossey Bass, 2008). Frances is also a senior fellow at the Research Center for Leadership and Action at New York University and spent five years at the Hauser Center for Nonprofit Organizations at Harvard University. She headed the Hetrick-Martin Institute for LBGT youth, and was awarded a year-long Annie E. Casey Foundation fellowship in 1997 for this and her previous work. Over the years, Frances has worked with homeless youth and families, undocumented immigrants, crime victims, battered women, and substance users. She is a writer and presenter on variety issues related to nonprofits, leadership, and social change.

Felecia Bartow is a nonprofit consultant who served as the California-based project coordinator for this initiative of the Building Movement Project and The California Endowment. Felecia conducted all of the interviews and served as the primary author for the five case studies included in Part Two of this report. In addition to her work as a consultant, Felecia has been involved in the field of immigrant and refugee rights since 1993. She has held positions with various immigrant rights organizations including the National Immigrant Justice Center in Chicago, Illinois, and the American Friends Service Committee in Philadelphia, Pennsylvania.
ADDITIONAL TOOLS AND RESOURCES

We also encourage you to consult the following Building Movement Project resources and publications for additional frameworks for approaching social change work:


This guidebook was developed for staff and board members of nonprofit service organizations who are interested in learning how to incorporate progressive social change values and practices into their work. It introduces a step-by-step process for nonprofit organizations that can be used to identify how groups can address systemic problems through social change work within the context of their usual services and activities. The process proposed in this guide can help organizations decide which strategies and actions will work best for them.

**Making Social Change: Case Studies of Nonprofit Service Providers (2009)**

The Building Movement Project developed this set of case studies as a response to numerous requests from groups looking for real-life examples of the often challenging process of incorporating social change models into social service work. The organizations highlighted were selected not to lay out a set of best practices for all organizations, but to serve as practical illustrations of how groups decide to extend their work to promote client/community voices and the challenges posed by that decision. The case studies—geared toward practitioners, board members, and funders interested in this work—include organizational profiles, a reflection guide, and a list of additional web resources.


In many cases, not knowing how to demonstrate results of civic engagement and social change work has hindered service providers from adopting these activities and prevented them from receiving funding for this work. The Building Movement Project, the Alliance, and the Ms. Foundation, came together to draw on their collective experience with their networks and respond to this call for methods and tools for measuring the impact of social change work. This report examines how organizations currently view their relationship with impact measurement, presents a brief summary of the key findings that came out of the Civic Engagement Evaluation Summit convened by the partner organizations, and ends with a set of recommendations for how to increase the nonprofit sector’s capacity to respond to the increasing need for tools to measure the impact of civic engagement and social change work.

**Tools for Social Change (Fall 2010)**

This online resource provides dynamic exercises and engagement models for organizations ready to take the process of incorporating social change models into traditional service work to the next level. The toolkit is targeted to service providers but written to be useful to all groups interested in this area.

Opportunities for learning, reflection, and evaluation are consistent throughout this online resource, along with tools and models that focus on culturally relevant models of engagement. To access Tools for Social Change, visit: [http://buildingmovement.org/news/entry/140](http://buildingmovement.org/news/entry/140).

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