

Fellows VIII Evaluation Findings

Final Report Executive Summary

Submitted by Jennifer Avers

January 15, 2016

EXECUTIVE SUMMARY

Overview of the Evaluation

On December 4, 2013 the Evaluation Team met to launch the Fellows VIII evaluation. Program staff informed the evaluator about the structure, content and objectives for the program and clarified the ways in which the Kansas Leadership Center (KLC) and Kansas Health Foundation (KHF) would implement the eighth iteration of the Fellows program. The issue area explored in this cohort was decreasing tobacco use among people with mental health illnesses.

As they have in the past, KLC staff provided leadership development training, whereas KHF program staff played a more intentional and significant role than they have in the past. Unique from former cohorts, KHF envisioned three distinct phases for this cohort's formation, development and ongoing relationship with KHF. Phase One: Leadership Development; Phase 2: Discovery; and Phase 3: Initiative Development.

An evaluation framework and methodology were developed to align with these three programmatic phases. Prior to the cohort's orientation session in May of 2014, the evaluator interviewed the 23 participants (Fellows) accepted into the Fellows VIII program. In November 2014, nearly seven months after the first phone interviews, the Fellows were asked to complete an online survey about their experiences in the program. In April of 2015, the evaluator observed the sessions taking place at KLC and facilitated a discussion with the Fellows. Between late November and early December of 2015, the evaluator interviewed the Fellows to capture their final reflections about their participation, the program and their sense of next steps as individuals and as a cohort related to this issue, as well as in relationship with KHF. Throughout the duration of the Fellows VIII program, the evaluator stayed in communication with KHF program staff, conversing by email, facilitating conference calls around the Fellows' gatherings and then conducting individual interviews with KHF staff after the program ended.

This evaluation report presents key evaluation findings from the pre and post program interviews, online survey, evaluator observations and Evaluation Team discussions. As many initial and mid-program findings have already been shared with KHF in past reports, this final report emphasizes those program experiences and individual and collective outcomes realized at the close of the program. Moreover, the evaluator seeks to provide data and insight around the future challenges and opportunities related to continuing to invest in and sustain individual and collective progress on this issue.

Summary of Findings

KHF Program staff and cohort members agree that Fellows VIII was a worthwhile and productive program. Every single participant easily references how the program positively impacted their understanding of themselves and equipped them with tools and resources to effectively exhibit leadership behaviors in a number of settings (e.g., professional, civic, political, personal, etc.).

Each cohort member expresses significantly increased understanding of the issue area, a much better grasp on state and national data related to tobacco use and the mental health community, a richer understanding of the challenges and opportunities in terms of making progress on the issue and an overall confidence that progress can and will be made by them and their cohort members and with KHF's continued leadership and funding in this area.

Fellows find great personal and professional value in their relationships with other members of the cohort, and the majority of those in the cohort have already initiated shared efforts with some of their peers to address the issue of tobacco use as well as other health issues they find mutually important.

Cohort members have a deeper understanding of KHF as a funder and as a community partner.

While the majority of cohort members are generally satisfied with the Fellows VIII Work Plan and were initially pleased with KHF's drafting of the RFP to address the issue, there remain concerns about how the group will continue to make progress without KHF or another entity playing a convening and coordinating role.

While cohort members take pride in the label "Fellow" and appreciate having a shared civic leadership language with their peers and many others in their communities who have participated in KLC programs, they are unsure how to leverage their Fellows' status, and most do not have a sense of how or whether or not they should connect with Fellows from other cohorts.

Most Fellows would like KHF to convene them again to continue to develop and implement the Fellows VIII Work Plan as well as continue to consider ways to support the cohort's efforts (e.g., technological resource to share documents and connect, etc.).

KHF program staff recognize that the issue area is an adaptive challenge, and they understand that while cohort members are making progress, many still look to KHF to lead, direct and fund. KHF understands cohort members like to be convened, but program staff wonder, for what purpose at this stage? KHF has captured insight and advice from cohort members in drafting the *Request for Proposals: Supporting a Tobacco Free Culture for Behavioral Health Consumers*, which will be reviewed by the KHF Board in January 2016. Program staff seem open and flexible in terms of how the intended leadership and advisory structure unfolds. They presume they will ask some cohort members to review proposals and that others may become grantees. While KHF has committed to fund efforts in this area, it is crucial to KHF that cohort members lead, manage and sustain efforts within their own circles of influence. In terms of continuing to make progress around this issue area, **KHF may wish to consider recent collective impact and social movement research as part of and in addition to their proposed grantmaking strategies.**¹

As KLC has grown in capacity significantly since the beginning of the Fellows program, so too has KHF refined its Fellows-related strategies and increased its capacity to effectively improve the health of Kansans. Both organizations are well positioned individually and as partners to clarify, if not intensify, how they develop leaders and contribute to lasting change throughout the state.

¹ SSIR and others have recently shared relevant research regarding collective impact as well as building better movements.