

Can a Healthcare Foundation Practice “Social Acupuncture?”

Gary Hubbell



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Gary Hubbell has served others for more than three decades. Across that wonderful span of time, he's come to listen for the voice of his vocation. As his awareness grows, Gary routinely asks himself: "What animates me? What fosters that total alignment of my gifts and my desires; my contributions and the opportunities I seek; my intention and my attention?"

Hubbell strives to strengthen organizations for inevitable change and greater impact. He gets animated by the passions and energies of individuals and teams (inside and outside organizations) who are trying to change the world. He is energized by people who are on the cusp of big moves—whether they're conscious of it or not—helping others "see" in new ways, illuminating blind spots on the path to great things—not for themselves but for our shared world.

This motivating intention has led to a career arc characterized by: learning to tell a clear story (public relations); discerning interests and attitudes (opinion research); unlocking potential (employing appreciative inquiry and organizational development); setting about on new directions (scenario thinking, planning, facilitation, organizational change initiatives); catalyzing opportunity and unlocking joy (all aspects of philanthropy); and curating meaningful conversations (executive coaching and *GHC Conversations*).

Gary's work is a source of energy and renewal; an opportunity to learn and to teach; an opportunity to immerse himself in the noble pursuits of gifted and impassioned colleagues. He is animated by participating with people who have the courage to walk into their fear and through it, in pursuit of something they can uniquely contribute to making the world a better place.



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Philanthropy—and the Social Sector—is in a Conceptual Emergency

In *Why Connected Action is so Hard*, Ken Hubbell exhorts social sector leaders to look for new solutions to languishing—wicked—social problems. Using behavior over time analysis for the Arkansas Single Parent Scholarship Fund, he makes a persuasive argument that little lasting needle moving is really happening. Leaders of social sector organizations large and small may read that analysis and feel despair that wicked problems prevail despite their valiant efforts. Mainstream philanthropy—that which is practiced by these same organizations large and small—works mightily to make a dent, again often having little discernible sustained impact.

This situation seems to have all the telltale signs of what systems thinkers call “a conceptual emergency:”

The world we have created has outstripped our capacity to understand it. The scale of interconnectivity and interdependence has resulted in a step change in the complexity of the operating environment. These new conditions are raising fundamental questions about our competence in key areas of governance, economy, sustainability and consciousness. We are struggling as professionals and in our private lives to meet the demands they are placing on traditional models of organization, understanding and action. The anchors of identity, morality, cultural coherence and stability are unravelling and we are losing our bearings. This is a conceptual emergency.¹

Like most conceptual emergencies, they don’t present themselves in bold type and neon blinking lights. They linger, often because we continue to try to do more of that with what we’re most familiar. This is often true of programmatic initiatives within the social sector and organizations focused on philanthropy—private grant-making foundations and operating foundations attached to large enterprises. Of particular interest in this essay is the response of contemporary health care system foundations who see the collective, focused generosity of their many donors as a catalyst for social change.

A question arises within the context of this conceptual emergency: Will/How will generosity become truly grass roots in nature? Can philanthropy become a real catalyst for

¹ Leicester, G. and O’Hara, M. (2009), Ten Things to Do in a Conceptual Emergency, International Futures Forum/Triarchy Press Ltd., p. 5.

a large healthcare foundation, or—as Leicester and O’Hara would frame it—can a healthcare foundation practice “social acupuncture?” The authors maintain that most of us assume big problems need big solutions. Not true, they posit, saying “you cannot control complex systems, only disturb them. And even a small disturbance, artfully designed, can have large systemic effects. We call this social acupuncture.”²

Grassroots philanthropy is nothing new. However, by linking it to the concept of practicing social acupuncture, a higher threshold arises. While the 2014 ALS ice bucket challenge exemplified the notion of broad based generosity and a call to action gone viral, there’s a question as to whether the majority of “challengers” donated money to ALS and/or subsequently got personally involved in the organization’s work. My hunch is that they did not, thereby making the ice bucket challenge a cool, flash in the pan that caught our collective attention but likely didn’t shift a wicked problem. What emerges for me is the grassroots generosity/social acupuncture equation:

Heightened social awareness + broad based personal participation + giving + sustained involvement = social acupuncture.

HealthEast Care System/HealthEast Foundation: A Work in Progress Case Study

So let’s explore the question of whether a large, traditional health care organization can practice social acupuncture through grassroots philanthropy. Consider the case of HealthEast Care System and HealthEast Foundation in St. Paul, Minnesota. This multi-hospital system and its captive foundation have recently been navigating a dramatically shifting landscape—as are most healthcare providers in America since the advent of the Affordable Care Act (ACA). Like many of their contemporaries, both the hospital system and the Foundation have been traditional in nature. The care system has been predominantly focused on caring for the sick and injured, ringing their service area with primary care clinics as a feeder system for inpatients. The Foundation has been focused on raising charitable gifts to support hospital capital projects and infrastructure. Then, with the arrival of a new system CEO in early 2012 and a year-long formation of a shared vision, the system proudly—albeit perhaps a bit naively—proclaimed its vision of “optimal health and well-being for our patients, our communities, and ourselves.” Inspired, Foundation Executive Director John Swanholm began to imagine what shift in role the Foundation might embrace in order to help foster optimal health and well-being for the East Metro (greater St. Paul) community.

For the past year, the Foundation staff, board, and system CEO have been rehearsing the requisite mindset shift and preparing its approach. To her credit, CEO Kathryn Correia didn’t simply relent to the shifting financial reimbursement pressures that come with

² Ibid, p. 19.

becoming an accountable care organization under the nation's new health care paradigm. She continually interprets for her team that HealthEast has a moral obligation to focus on the well-being and vitality of the entire community because "we live here, we don't just work here." Similarly inspired, the Foundation began in late 2013 to articulate its own role in fully living into this moral imperative. HealthEast Foundation articulated a theory of change that would require the near complete uncoupling from its previous business model:

[We will] move forward in a concerted "dance" with the community and partners that elevates increased health & well-being. We will galvanize social interest around key social determinants and act with resolve and without apology to improve them. We will use the power of philanthropy to link the social sector in intentional collaboration that leads to a broad, shared vision and a clear set of "needles" we must move to catalyze well-being in the East Metro in the next 10 - 15 years.

Our thinking and work reflects our mindset shift that acknowledges the whole East Metro system is connected; 2) We are intentionally moving from a transaction orientation to a more transformative change-making, connector role in community; 3) We will catalyze the HealthEast vision by positioning the Foundation to act bigger and adapt better in a networked world; 4) Our plans are invitational, calling leaders and community members to a higher place of shared responsibility; 5) Our leverage is the way philanthropy is pursued and our approach to meaningful relationships and deep engagement; and 6) We will include diverse individuals and groups in a collaborative approach to fulfilling the vision.³

How can this foundation for a large healthcare organization, one formerly focused entirely on galas, direct mail, and employee annual giving campaigns retool itself to practice "social acupuncture" and live into the language that compels new behavior? Here are some suggestions:

1. ***Articulate your hedgehog concept*** – Before concerted action can be pursued in a meaningful way, the Foundation should articulate its hedgehog concept.⁴ This is an important early step that should be completed along with recently completed work to articulate the Foundation's new business model. With that insight clear, the Foundation is much better positioned to screen and invite partners in their work, asking each what their core competency (the hedgehog concept) might be. It's unlikely that any collaborative venture can succeed without finding an effective way to harness the distinctive competency of each partner. This internal and external discovery process will

³ Drawn from HealthEast Foundation strategic plan 2014 - 2016.

⁴ Collins, J. (2005). Good to great and the social sectors: A monograph to accompany Good to Great. Recall that Collins sees the hedgehog concept as that unique intersection of three things: 1) the organization's greatest passion; 2) what the organization can be best at in their marketplace; and 3) that which drives the organization's revenue engine.

help the Foundation know what it needs from other partners and what value proposition it brings to the table.

2. ***Harness your own employed people power*** – HealthEast is in the process of formally selecting five East Metro neighborhoods on which to focus its energies and resources for social acupuncture. The system and Foundation will:
 - Focus on reducing health disparities in Ramsey County because this is our home and because health disparities are increased by socio-economic and cultural constraints which are the center point of the Neighborhood Integration rationale.
 - Initially focus on health disparities through three linked strategies: 1) improve access to health; 2) improve preventive approaches and healthy behaviors; and 3) increase support for stress, coping with daily life and mental health.
 - Look for leverage around the social determinants of health and focus on the disparities that show up in the studies. We will work with other partners who are reducing the impact of housing and access to care (for example).
 - Piggyback on the existing county health plans and the partnerships already developed in order to figure out where to work and when around the identified priorities.

Consider that the HealthEast system employs more than 7,000 people, most of whom live in the East Metro service area. Imagine the possibilities for heightening awareness and engaging people personally if HealthEast makes it possible within a 24 month period for all 7,000 employees to volunteer for one day within one of the five targeted neighborhoods. This wouldn't be a bunch of "do gooders" just randomly showing up throughout the year to do *something*. Instead, their efforts would be coordinated and focused, a role well played by the foundation in concert with the many personal connections the team is making in these targeted neighborhoods.

Imagine that HealthEast wouldn't work alone, nor would they work blindly. Imagine that the focus of this sustained volunteer force was designed by the neighbors themselves—the result of many listening sessions and trust-building over time. Imagine that these 7,000 HealthEast volunteers coordinated their efforts with other local partners—each with their own networks, skill sets, and programmatic heft. These partners could include some of the 88,000 3M corporate employees, 38 LISC staff volunteers, 200 YMCA members/volunteers, and 40 East Metro food shelter employees. Imagine if they decided to act in a concerted manner for a two-year duration (as a social acupuncture learning experiment) to focus on a set of common needles to move in this defined geography. What if the Foundation's primary engagement was around the project management logistics, relationship networking, active listening in neighborhoods, and superbly integrating messages of linking the three cornerstones of the central message: a) we are pursuing optimal health and well-being in a whole

ecosystem way; b) we're here to stay; this isn't an "event;" and c) gifts of time, talent, and treasure foster neighborhood opportunity. What is possible then?

3. *Incubate, sponsor, and support local giving circles or collectives* – HealthEast's growing mantra is "doing with," rather than "doing to" the community. Therefore, any strategy to practice social acupuncture in highly diverse neighborhoods will necessitate that HealthEast foster natural, independent, and organic action at the local level – which HealthEast won't control. Therefore, the approach to broad based generosity must be different than in the previous traditional model. One suggestion is to incubate, sponsor, and support local giving circles or collectives. Circles are a form of participatory philanthropy where groups of individuals donate their own money or time to a pooled fund, decide together where to give these away to charity or community projects and, in doing so, seek to increase their awareness of and engagement in the issues covered by the charity or community project. Many circles, in addition to donating their money, also contribute their time and skills to support local causes.⁵

They are powerful because they bring involvement, which I believe is even more powerful than the money generated. Recent quantitative research on giving circles⁶ documents their effectiveness, especially among diverse communities.

Giving circles connect people to like-minded individuals and lead to more meaningful, intentional and hands-on charitable giving, as well as increased community engagement....Giving circles translate group traditions into group action for the greater good[C]ollectives allow people to become more strategic, educated givers, no matter how much or how little they contribute monetarily, and to get hands-on experience in evaluating prospective grantees and creating intentional, values-driven charitable goals....No matter the contribution level, all giving circles promote a democratic process in which members must come together to learn about, advocate for and vote upon their grantees. Many participants say that part of the appeal of giving collectives is that they aggregate individual members' contributions – at any level – to have a greater impact through the collective action of the group.... For many giving circle participants, socioeconomic advancement is not just about making and having more money but also about effecting changes within the philanthropic system itself (emphasis added).⁷

This sounds like effectiveness and sustainability to me. It is the epitome of "doing with" the community and is a complete redefinition of the Foundation's approach to

⁵ Wikipedia, downloaded February 7, 2015 from http://en.wikipedia.org/wiki/Giving_circles

⁶ See Connected to Give: Giving Circles, www.connectedtogive.org

⁷ *For Diverse Communities, Giving Circles Strengthen Involvement in Philanthropy*, in *Advancing Philanthropy*, Winter 2015, pp. 14 – 15.

philanthropy. It may, therefore, be evidence of the different kind of approach that Ken Hubbell observes is required from the social sector.

Of course, giving circles are not new to the Twin Cities. Several exist today on both sides of the river. Most notable are:

- Community Capital Alliance – and Fourth Generation Fund (through the Minneapolis Foundation). Community Capital Alliance was created in 1998 as a volunteer led 501(c) 3 organization committed to developing community leaders through engaged philanthropy. It was comprised of a group of young professionals committed to learning together about the community and how to make an impact on non-profits. Through a collective and strategic grant making process, Community Capital Alliance educated and engaged early to mid-career professionals in the Twin Cities. By 2012, the organization made more than \$225,000 in contributions to local nonprofits and more than 7,000 hours of volunteer community service.
- Hmong Women’s Giving Circle of Minnesota (HWGC) - In 2004, Hmong staff at the Women's Foundation of Minnesota was instrumental in developing the nation's first Hmong Women's Giving Circle (HWGC) to promote philanthropy within the community, encourage activism and create social changes for Hmong women and girls in Minnesota. With the help of the Foundation and donors, the 16-member circle raised \$23,000 in two years to make social change grants in the Hmong community.⁸
- Building More Philanthropy with Purpose, or the BMPP Giving Circle, is a collective of families who believes that they can build a better future for all children by coming together to celebrate, learn, and provide resources to fuel the change that they want to see in the world. They are Asian American immigrant and refugee families who’ve benefited from the generosity of those who’ve come before them, and understand that it is their role to lead by example for future generations. Their families come from generations of giving, and now they want to model that giving by finding new practices in philanthropy that help them continue building a better world for their children and future generations.⁹

HealthEast has conducted significant social network analysis that has identified those in their area who are most trusted and most connected. This data could be invaluable in developing the initial networks to create circles where none exist. Circles could be selected/created based upon overarching HealthEast intent to address the key social determinants of health and community vitality index markers. The Foundation’s roles

⁸ http://www.mcf.org/donors/giving_circle#sthash.x6i9cTDx.dpuf

⁹ <http://headwatersfoundation.org/ways-to-give/giving-circles/building-more-philanthropy-with-purpose>

could include: giving circle administrative infrastructure support and communication, a “backbone” role, reporting, coaching / teaching / supporting each group, and/or fund administration. Part of this strategy could be to simply nourish and support some of the existing giving circles in St. Paul.

This belief in broad based generosity as a lever for social change—coupled with the dedicated neighborhood-focused volunteer effort—could position HealthEast Foundation to become a catalyst for healthier, more resilient pockets of their community while at the same time ingraining the philanthropic spirit in culturally sustainable ways. Truly grassroots philanthropy is about sustaining a relevant personal engagement in social change (regardless of scale) that promotes reciprocal joy and satisfaction (for the giver and for the beneficiary). If social acupuncture is going to produce meaningful and sustainable improvement for people, it seems to me that all actors—the Foundation in this essay—will need to accept the reality of pursuing more action without control. The Bhagavad Gita impels us in this same direction: “Without concern for results, perform the necessary action; surrendering all attachments, accomplish life’s highest good.”¹⁰ This is anathema to many of us (individuals and organizations) in the west because we are so performance driven and metrics focused. Perhaps real social change—aka, moving the needle—requires first one person, then many, then one organization, then several, then many—to act without attachment to results and “simply” pursue an embrace of all residents of one’s neighborhood. Even more pointed is the advice of noted systems thinker Donella Meadows, who reminds us:

Don’t be stopped by the “if you can’t define it and measure it, I don’t have to pay attention to it” ploy. No one can precisely define or measure justice, democracy, security, freedom, truth, or love. No one can precisely define or measure any value. But if no one speaks up for them, if systems aren’t designed to produce them, if we don’t speak about them and point toward their presence or absence, they will cease to exist.¹¹

4. ***Use microfinance in the East Metro to catalyze local vitality*** - Generosity (philanthropy) is at its best when it is a personal expression of right being and wise concerted action in community. Therefore, the current East Metro environment calls for bold action that little resembles traditional philanthropy. HealthEast Foundation would be wise to consider Muhammad Yunus’ Grameen Bank’s successful experience of the past 40 years, which provides ample evidence of microfinance’s power if done in a manner that reflects, honors, and reinforces the cultural norms of the population. Microfinance refers to an array of financial services, including loans, savings and

¹⁰ Gates, R. (2012), *Meditations from the Mat*, Anchor Books: New York, p. 210.

¹¹ Meadows, D. (2002), *Dancing With Systems*, *The Systems Thinker*, Vol. 13, No. 2, Pegasus Communications, Inc., p. 5.

insurance, available to poor entrepreneurs and small business owners who have no collateral and wouldn't otherwise qualify for a standard bank loan. The goal of microfinancing is to provide individuals with money to invest in themselves or their business to help get them out of poverty. When providing loans, microfinancing institutions do not require collateral, but do insist that the loan is repaid within six months to a year.

Could the HealthEast Foundation step in to play this type of role, again targeting the five selected East Metro neighborhoods where all other well-being initiatives will be focused? Despite this move being a huge departure for the Foundation's earlier business model, it now seems completely aligned with the culturally authentic, learn as you go, concerted action approach that is becoming the Foundation's heartbeat. By employing microfinance solutions, HealthEast would be working to foster economically sustainable solutions to long-standing barriers to personal independence for people trapped in poverty. Does this seem like a stretch for a "healthcare foundation?" Sure, but only if you remain trapped in the old model of thinking about that role. HealthEast Foundation is busting out of their previously self-imposed blindness to the plight of people all around them. Now, they see health and well-being as a product of whole community resilience. Therefore, this is exactly the type of stretch this healthcare foundation should be making.

Again, HealthEast won't have to invent this path nor walk it alone. Others are already well established in this space and geography. In the Twin Cities, four micro-lenders—the Minneapolis Consortium of Community Developers (MCCD), the African Development Center (ADC) in Minneapolis, and the Neighborhood Development Center (NDC) and WomenVenture in St. Paul—will make about 180 micro-loans combined this year. Altogether, they have made more than 1,100 micro-loans over almost three decades.¹²

Is HealthEast Foundation the best positioned organization to consider microfinance in the East Metro, recognizing they're not alone? Maybe, maybe not. While this role is more typically adopted by community foundations and poverty mitigation/community development agencies, who's to say that HealthEast can't make an important impact here? Surely, the whole systems view that HealthEast has adopted means that they are gaining clarity internally about why, how, and what to do in order to optimize community health and well-being. The Foundation would do well to begin its work in this area by seeking to support, leverage, and extend the work already being done by these organizations. Then, if spotting untapped opportunities or areas of limited attention, HealthEast can enter with a simple loan strategy. This will likely be a go-slow

¹² <http://www.adcmnnesota.org/page/media-coverage/micro-lending-big>

approach initially, as HealthEast will have to earn credibility in a relative brand vacuum. Early outreach indicates that many existing community organizational partners know little about HealthEast and typically view the system in very traditional hospital-centric ways.

Social Acupuncture May Force Some Boundary Crossing

These suggestions could inevitably force HealthEast Foundation to encounter a limit to its growth and adaptability as an agent for social change. There is some question as to whether their current IRS tax exempt designation (Type 1 foundation) will permit grants to entities beyond its own HealthEast Care System. Foundation executives should be mindful of this question and seek legal opinion. If leaders discover that this social acupuncture stance violates the current exempt boundaries, should the Foundation retreat back within the boundaries or plow ahead? The answer seems clear in the face of a CEO who is lifting the entire system's moral obligation to act in concert with the whole community to catalyze optimal health and well-being. My suggestion: seek to change the designation and get on with the work. Again, Donella Meadows offers the right perspective.

Boundaries are of our own making, and...they can and should be reconsidered for each new discussion, problem, or purpose. It's a challenge to stay creative enough to drop the boundaries that worked for the last problem and to find the most appropriate set of boundaries for the next question. It's also a necessity, if problems are to be solved well.¹³

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¹³ Meadows, D., quoted in Community Wealth Partners, *Where to Start: Setting a Bold Goal* (2013), p. 8. <http://community-wealth.org/content/where-start-setting-broad-goal>

Gary Hubbell Consulting *Conversations* are one central element of our work. GHC was founded on the belief that every individual and each organization is capable of bringing about profound change in the world. We are personally and professionally committed to learning and, by choice, place ourselves where we can partner with like-spirited leaders, engaged continually in a process of discovery to deepen presence, impact, and value. We seek to be in the community of wise change makers.

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