



Convergence Partnership

A Progress Report

INTRODUCTION

The Convergence Partnership¹ is a collaborative of funders working together to help create communities of healthy people living in healthy places through policy and environmental change. It focuses on promoting approaches and policies that increase access to healthy foods and improve the built environment; building connections across different issue areas and sectors; engaging in advocacy to advance federal policy; and, institutionalizing convergence principles in practice. The Convergence Partnership brings together funders, advocates, policy-makers, and practitioners from many fields to coordinate and synergize their work.

Since forming the partnership in 2006, the funders—Ascension Health, the California Endowment, Kaiser Permanente, Kresge Foundation, Nemours, the Robert Wood Johnson Foundation (RWJF), and W. K. Kellogg Foundation—have provided \$19.6 million through May 2012. The Centers for Disease Control and Prevention (CDC) serves as a technical adviser.

See Appendix 1 for a list of individuals interviewed for this report.

WHAT PROBLEM IS THE CONVERGENCE PARTNERSHIP ADDRESSING?

Creating communities that support healthier lifestyles requires changes in both the food environment—how food is grown, processed, distributed, and sold—and the physical (or “built”²) environment—from how neighborhoods are built to the transportation systems that serve them.

¹ The *Convergence Partnership* was initially called the Healthy Eating Active Living Convergence Partnership. As its focus changed to healthy people, healthy places, the name was changed.

² The built environment is man-made surroundings, including buildings, public resources, land use patterns, transportation systems, and design features. These have profound consequences for individual and community health. The built environment includes the availability of parks and recreation facilities, accessibility to healthy and affordable foods, the “walkability” and “bikability” of neighborhoods, and safe and affordable transportation options.

People in low-income communities and communities of color have the least opportunity to be healthy. They have access to fewer grocery stores with healthy foods. Their communities are more likely to be unsafe for walking to school or playing outside and to have few places for physical activity.

To change the food and physical environments, funders, advocates, policy-makers, and practitioners in many fields must work together. “You bring together people from health, housing, economic development, transportation, criminal justice, and other fields because all of those things in combination are what affect communities,” said John Govea, JD, MPA, the senior program officer at RWJF overseeing the program.

Duplicating Efforts to Combat Obesity

Many funders, including the California Endowment, Kaiser Permanente, Nemours, RWJF, and W. K. Kellogg Foundation, had been working alone supporting efforts to combat obesity by promoting healthy eating and active living. They wanted to explore ways to work together to make more progress, eliminate duplicate efforts, and maximize their resources.

WHAT IS THE CONVERGENCE PARTNERSHIP ABOUT?

Formed in 2006, the *Convergence Partnership* is a collaborative of funders working to stimulate action nationwide to help create communities of healthy people living in healthy places through policy and environmental change. Convergence here means shared decision-making and leadership on equity-focused, multi-field efforts, and pooled funding.

The work of the *Convergence Partnership* is a blend of strategic investments and activities to help shape federal policy and build a field of people who will create momentum for change regionally and nationally. The partnership brings together funders, advocates, policy-makers, and practitioners from fields such as agriculture, transportation, economic development, health, and violence prevention.

The partnership’s founding partners are [the California Endowment](#), [Kaiser Permanente](#), [Nemours](#), the [W.K. Kellogg Foundation](#), and RWJF. The [Kresge Foundation](#) joined in 2008 and [Ascension Health](#) joined in 2011. Together, the partners have contributed \$19.6 million (through May 2012). For information about the partners and their funding of the *Convergence Partnership*, see [Appendix 2](#).

The partnership works with a number of organizations:

- PolicyLink provides leadership, strategic guidance, technical assistance, and communications to the partnership. It is a national research and action institute devoted to advancing economic and social equity by Lifting Up What Works[®].³
- Prevention Institute provides policy research and analysis as well as strategic support. It is a national nonprofit organization dedicated to improving community health and equity through effective primary prevention.⁴
- The Tides Foundation is the fiscal agent for the partnership. It is a nonprofit based in San Francisco that provides financial and management services to individuals and organizations engaged in social change.
- The CDC serves as the technical adviser.

Shaping Federal Policy

In the policy arena, the *Convergence Partnership* funds research and analysis on key policy issues, engages the field, and informs policy-makers. For example, the *Convergence Partnership* funded the Food Trust⁵ and the Reinvestment Fund⁶ to work in partnership with PolicyLink to educate policy-makers about the lack of access to healthy foods and the connection between poor eating and chronic diseases.⁷ Together, they worked to engage a diverse range of stakeholders in the policy development, advocacy for, and implementation of a national Healthy Food Financing Initiative (HFFI)—based on a successful model in Pennsylvania—to improve access to healthy foods in underserved communities across the country.

The *Convergence Partnership* also funded the American Public Health Association, Transportation for America, and the Leadership Conference for Civil and Human Rights to bring health and equity advocates into the federal transportation debate. To inform the field of the connections between transportation and health, the *Convergence Partnership* commissioned PolicyLink and Prevention Institute to write and distribute *The Transportation Prescription: Bold New Ideas for Healthy, Equitable Transportation Reform in America* and to edit and distribute *Healthy, Equitable Transportation Policy: Recommendations and Research*, composed of chapters written by academics and advocates. Both publications are available [online](#).

³ Based in Oakland, Calif., it has offices in New York City, Los Angeles, and Washington.

⁴ It is based in Oakland, Calif.

⁵ The Food Trust (Philadelphia) works to improve the health of children and adults, promote good nutrition, increase access to nutritious foods, and advocates for better public policy.

⁶ The Reinvestment Fund (Philadelphia) finances neighborhood revitalization in the mid-Atlantic region.

⁷ This work of PolicyLink was not funded by the partnership; it was supported by grants from RWJF and other funders.

When the CDC was developing its Community Transformation Grants program, the partnership provided lessons learned so that the program could best advance prevention, promote equity, and create healthy communities. The *Convergence Partnership* brought knowledge and experience from its national partners, and those participating in regional convergence efforts (described [below](#))—who could provide examples of effective place-based, multi-field, policy, and environmental change efforts.

Partners and staff from PolicyLink and Prevention Institute also communicated with the Obama administration and leaders of federal agencies on these and other policy issues.

Field Building

Through the regional convergences and its Innovation Fund described below, the *Convergence Partnership* is building a “field of fields”—connections among practitioners and funders across different issue areas and sectors—to coordinate and synergize work and help create healthy people in healthy places nationally, regionally, and locally. “Being healthy doesn’t just happen,” said Angela McGowan, JD, MPH, a senior program officer at RWJF. “We have a broad vision of what we can do to make sure that people can be healthy.” Getting more regional and local funders involved in this work is a key focus.

Regional Convergences

The regional convergence partnerships apply the *Convergence Partnership* model at the regional level to support the capacity to deliver on the goals of convergence and to leverage the successes from multiple fields and sectors. “The *Convergence Partnership* wants to strengthen existing work at the regional level, promote connections where there are no connections, and cultivate a peer-to-peer network,” said Amanda M. Navarro, MPH, associate director at PolicyLink.

The *Convergence Partnership* is currently supporting the formation and growth of 14 regional convergences, with engagement from more than 50 foundations—all working on strategies for ensuring healthy people in healthy places. In 2009, the partnership selected 10 regional partnerships that were “hot spots” for activity related to healthy people in healthy places and already had convergence-like partnerships or were interested in developing them. It added five more in 2011, four of which had also received Innovation Fund grants from the partnership (described [below](#)). One of the original regional convergences, New Jersey, stopped participating in late 2011. In multiple settings, these efforts are contributing to bringing convergence efforts to scale, showcasing how the commitment to core *Convergence Partnership* principles is leading to large scale application and impact.

For a list of the regional convergences, see [Appendix 3](#).

Supporting the Regional Convergences

Each of the regional convergence partnerships has an adviser from PolicyLink or Prevention Institute who provides customized technical assistance face-to-face and over the phone, and through a two-day annual meeting. Members of the regional convergences network among themselves and share successes and challenges through an ad hoc advisory committee, comprised of delegates from each region and Innovation Fund grantees.

During this process, program staff realized that, “while the funders were committed and explicit in demonstrating their interest in developing a regional convergence, there was a need for a catalyst, a spark to get them jumpstarted,” said Navarro. Therefore, the *Convergence Partnership* decided to offer seed money via matching grants across all the regions. It issued the first request for proposals in 2011 and funded a subset of nine regional convergences that requested funding to help draw other funders into their convergence, and for strategic planning and implementation activities.⁸

Examples of Regional Convergences

California’s Regional Convergence is a community-driven, statewide collaborative of representatives from more than 45 communities participating in obesity prevention initiatives developed by six funders, including the California Endowment, Kaiser Permanente, RWJF, and W.K. Kellogg Foundation, as well as the CDC. The communities are focusing on policy and environmental change in physical activity, nutrition, or both.

Reducing obesity is the focus of ***Shaping Kentucky’s Future***, a collaborative of the Louisville Foundation for a Healthy Kentucky, the Community Foundation for Hazard and Perry County, and several other Kentucky foundations. Shaping Kentucky’s Future has three policy priorities:

- Increasing physical activity and physical education in schools
- Requiring standards for nutrition and physical activity in licensed child-care centers
- Establishing [Complete Streets](#)⁹ policies

⁸ The grants ranged from \$35,000 to \$75,000 and covered a period of six months to two years. About half of the regional convergences requested and received grants of \$75,000, which required matching funds from local and regional foundations.

⁹ Complete Streets enable safe access for pedestrians, bicyclists, motorists, and public transportation users of all ages and abilities. They make it easy to cross the street, walk to shops, and bicycle to work. They allow buses to run on time and make it safe for people to walk to and from train stations.

Innovation Fund

In 2009, the partnership launched the Innovation Fund, which provides resources to local and regional philanthropies to support innovative, multi-field policy and environmental-change strategies through their grantmaking. “The Innovation Fund is working to change local and regional foundations to be more focused on policy and environmental change,” said Judith Bell, MPA, president of PolicyLink. The aim is to improve health and promote equity by enhancing the built environment and expanding access to healthy food.

In January 2010, the *Convergence Partnership* awarded Innovation Fund grants to 15 local foundations.¹⁰ The 10 community and family foundations and five health foundations represented urban and rural regions from the East and West coasts, the South, and the Midwest. Early in the summer of 2012, the partnership launched a new three-year Innovation Fund and expects to award grants in October 2012. For a list of the 2010–2012 Innovation Fund grantees, see [Appendix 4](#).

Examples of Innovation Fund Grantees

In South Carolina, the **Mary Black Foundation** used its Innovation Fund grant to integrate community input and community leaders into its grantmaking in two low-income, racially diverse communities in the Spartanburg area. This resulted in resident-led solutions to improving community health and improving equity that motivated residents, city leaders, and the surrounding community.

The **HNHfoundation** in New Hampshire used its Innovation Fund grant to partner with the local public health department to bring many fields together to work on policy change in one underserved community—Manchester. HNH *foundation* developed a countywide, multi-field policy leadership team that included community residents who worked on policy and environmental changes to create a healthy Manchester. This marked the first time a group of funders came together to fund “upstream” efforts to create a healthy community.

Violence Prevention—Healthy Eating, Active Living Initiative

In many communities, violence is a barrier to being healthy. “If violence or the fear of violence is in a community, it’s harder for people to be physically active, visit the local park, or to walk to the grocery store,” said Virginia Lee, MPH, CHES, program manager at Prevention Institute. “Experiencing or witnessing violence impacts their behaviors as well—including whether someone eats a healthy diet—and can also result in depression.” Lee also noted that violence is a barrier to investments in a community, such as in new grocery stores.

¹⁰ The grants totaled \$1,850,000 and ranged from \$30,000 to \$200,000 each.

The Violence Prevention–Healthy Eating, Active Living initiative explored the effectiveness of community-based, multi-field partnerships in preventing violence and promoting healthy eating and active living. In January 2010, the *Convergence Partnership* gave grants to partnerships in six communities with high rates of violence and chronic disease.¹¹

Example of Violence Prevention—Healthy Eating, Active Living Grantees

Chula Vista, Calif., produced recommendations to prevent crime by improving the built environment in parks and trolley stations. These recommendations catalyzed the city’s redevelopment agency to fund community art to cover over graffiti on utility boxes, improve safety at a trolley station, and adopt safer park maintenance recommendations.

For a list of the Violence Prevention–Healthy Eating, Active Living grantees, see [Appendix 5](#).

WHY ARE COLLABORATIONS BEST SUITED TO THIS WORK?

The pooled voices, expertise, and resources mean that the *Convergence Partnership* can have far more impact on creating healthy people in healthy places than any of the partners could have working alone. “The work is bigger than any of us can lift. Each of us has unique expertise and competencies that were necessary,” said Loel Solomon, PhD, MPP, national director of community health initiatives and evaluation at Kaiser Permanente.

“With limited resources and a big problem, the more we could coordinate our work, the better,” added RWJF’s McGowan.

Developing a Broader Framework for Action

Although each partner came to the table with its own focus and priorities (e.g., obesity, equity, or early childhood), the issues and outcomes they cared about required a broader framework for action. “That framework became healthy people in healthy places,” said Marion Standish, director of community health at the California Endowment. “It allowed each funder to simultaneously pursue its individual program strategies, while at the same time investing in the broader agenda that will be necessary to achieve sustainable impact across the programs, policies, and systems.”

For example, as a pediatric health system, Nemours is geared toward children, while the *Convergence Partnership* is not. Nemours’ staff saw this as an opportunity to take on issues outside its normal boundaries.

¹¹ Each grant was for \$80,000 and ran for 20 months.

Being part of the *Convergence Partnership* enabled RWJF to broaden its childhood obesity work. “Considering equity and place is part of the strategy of all the convergence partners, but we come at it from different perspectives,” said McGowan. “Working with partners who come at this work through different lenses, whether sustainable agriculture or the built environment or focusing on young children, has helped us to broaden our focus and learn from their expertise.”

Increasing Impact and Influence

“A single foundation does not have as much influence as a group of foundations,” said David D. Fukuzawa, MS, MDiv, program director for health at the Kresge Foundation. By working together, the funders have more impact and more influence on policy-makers and on the field of fields. “When funders speak with a unified voice on key issues, stakeholders pay attention,” added Standish.

WHAT HAS CHANGED SINCE THE *CONVERGENCE PARTNERSHIP* STARTED?

Major changes in the political and economic landscapes since the *Convergence Partnership* began have brought both opportunities and challenges. The partnership has also adopted a broader frame for its work.

More Opportunities but Less Money for Multi-Field, Equity-Focused Work

After the 2008 election, the Obama administration spearheaded multi-field, equity-focused initiatives such as the Healthy Food Financing Initiative and Community Transformation Grants. These enabled the *Convergence Partnership* to inform the work of policy-makers in Congress, connect to the work of the administration, and inform and work with federal agencies like the U.S. departments of agriculture, health and human services, housing and urban development, and transportation.

But the 2007 to 2009 recession and a slow recovery led to shrinking government support for services and infrastructure, just as communities’ needs grew. Budget deficits at every level hampered community-wide improvements. Government support shrank, not only for basic services—education, housing, and health and human services—but also for community infrastructure—roads, parks, and trails. Conditions for communities that already had less worsened. In spite of the changing economic and political climate, the partnership has remained committed and prepared to continue pushing its agenda and pursuing emerging opportunities where it can act to inform policy change.

A Broader Focus

Originally, the *Convergence Partnership* focused on healthy eating and active living. Over time, however, the members realized that their work was broader. “In stressing its commitment to policy and environmental change and equity, the partnership saw healthy people in healthy places as more reflective of what its work had grown into,” said PolicyLink’s Bell. In 2011, the Healthy Eating Active Living Convergence Partnership became simply the “*Convergence Partnership*,” and adopted the tagline “Healthy People Healthy Places.”

WHAT HAS THE *CONVERGENCE PARTNERSHIP* ACCOMPLISHED TO DATE?

“The *Convergence Partnership* has created a healthy people healthy places field in philanthropy and the public sector that includes a focus on equity, expanded access to philanthropic resources for communities, and a stronger movement for healthy people in healthy places among organizations across the country,” said the California Endowment’s Standish.

Informing federal policy discussions and championing the implementation of cross-agency, multi-field, and equity-focused policy efforts is a key accomplishment. The *Convergence Partnership* has also linked health to fields like access to healthy food and transportation, and connected people from different fields. It has built momentum for change.

Informing Federal Policy

The *Convergence Partnership*’s participation in federal policy debates has contributed to efforts like the Healthy Food Financing Initiative and the Community Transformation Grants.

Healthy Food Financing

The Healthy Food Financing Initiative (HFFI) supports projects that increase access to healthy, affordable food in low-income communities across the country. Over the last two years, HFFI has provided more than \$477 million in resources for innovative efforts. The U.S. agriculture, health and human services, and treasury departments are providing financial and technical assistance to community development financial institutions, other nonprofits, and businesses for projects such as building or expanding grocery stores, small retailers, food hubs, and farmers’ markets. “I don’t think the Healthy Food Financing Initiative would have happened absent the investments of the *Convergence Partnership*,” said PolicyLink’s Bell.

The Reinvestment Fund in Philadelphia received grants in 2011 from the federal departments of health and human services and treasury, and again from the treasury department in 2012 to increase capital available to healthy food projects.

Community Transformation Grants

The *Convergence Partnership* advised the CDC in designing its Community Transformation Grants, awarded in September 2011. These grants are supporting 61 states and communities—covering about 120 million Americans—in reducing chronic diseases by promoting healthy lifestyles through:

- Tobacco-free living
- Healthy eating and active living
- Evidence-based services to prevent and control high blood pressure and high cholesterol

Reducing health disparities and advancing health equity are core principles of these grants, which total about \$103 million.

The *Convergence Partnership* helped inform the development of strategies and guidelines for the Community Transformation Grants, including the recognition that grantees would come in different shapes and sizes and have different levels of capacity. The CDC awarded two types of grants: capacity building (26 states and communities) and implementation (35 states and communities).

Transportation Policy

The *Convergence Partnership's* support for health and equity outreach, advocacy, and education informed the policy debate on the reauthorization of the federal transportation legislation which was signed into law the summer of 2012. “Health and public health advocates and leaders now see transportation as a health issue. That wasn’t true when we started,” said Bell.

Building Momentum for Change

Through its field-building efforts—regional convergences, the Innovation Fund, and the Violence Prevention–Healthy Eating, Active Living Initiative—the *Convergence Partnership* builds support for the principles and strategies of healthy people in healthy places. It connects fields and leaders, provides training and information, and develops peer learning networks and new communities of practice.

“The Regional Convergences infuse new energy and leadership into the Convergence Partnership, ground our work, and dramatically extend the reach and impact of convergence ideas and strategies. The same is true for the Innovations Fund, which has

engaged philanthropy in a powerful way,” said Kaiser Permanente’s Solomon. Other funders agreed that the Innovation Fund has changed how foundations think about and do their work..

These efforts in the field, as well as the broader connections the *Convergence Partnership* has been developing, are seeding a national network of advocates for equitable policy and environmental change in communities, regions, states, and the nation. “The hope is that we’re helping other groups that want to work in this multi-sector, multi-field space,” said RWJF’s McGowan. “The more people connect and coordinate on these issues the better. If you have all the right partners at the table, the effort is more sustainable.”

Regional Convergences

With the help of the *Convergence Partnership*, the 14 regional convergences have developed, moving from exploration to implementation. They are now “promoting coordination and synergy across efforts in a region to scale up policy change in a way that will advance health and equity,” said PolicyLink’s Navarro. The *Convergence Partnership*’s used more than \$1 million in funding from regional convergence partnerships to leverage its initial investment. The technical assistance and funding provided by the *Convergence Partnership* has been invaluable to the work of the regional convergences according to ICF International.¹² They are glad to be part of the larger convergence movement and especially value their ties to a national convergence “brand” that gives them access to thought leaders in the healthy people in healthy places field, and an extensive network of peer advocates, community implementers, and experts.¹³

New Hampshire Regional Convergence—known as New Hampshire Healthy Eating, Active Living (NH HEAL) Campaign—credits the *Convergence Partnership* with providing leadership and guidance on how to engage partners from other fields and sectors. As a result of incorporating this new approach, the HEAL partnership connected with the state’s regional planning commissions in order to tap into their expertise around economic and community development. Several regional planning commission directors attended NH HEAL meetings and conferences.

More importantly, this led to NH HEAL providing a \$50,000 grant that helped the regional planning commissions secure a \$3.3 million federal Housing and Urban Development Sustainable Communities Initiative grant in 2011. The nine regional planning commissions across the state to integrate healthy eating, active living principles into their regional plans will share these funds. The NH HEAL executive director will

¹² Studies by ICF International included surveys of the regions, telephone interviews with PolicyLink and Prevention Institute staff and two regions also featured in case studies.

¹³ Also from the studies by ICF International.

provide technical assistance to the regional planning commissions throughout the three-year planning grant.

The *Maine and Missouri convergence partnerships* are refining their policy agendas to bring greater focus to addressing rural inequities and prioritizing the engagement of funders and community organizations from more rural regions.

Innovation Fund

The 15 local foundations that received the first Innovation Fund grants, which ended in January 2012, sparked more than 50 policy and environmental changes.

“The Innovation Fund is one of the greatest accomplishments,” said Laura Kettel Khan, PhD, senior scientist in the office of the director, division of nutrition, physical activity and obesity at the CDC, which serves as a technical adviser to the *Convergence Partnership*. “It is based on the premise that we want additional foundations to take on this work of healthy people in healthy places.”

Policy and environmental changes to which Innovation Fund grants contributed include:

- Zoning changes to support urban agriculture and community gardens
- Limiting the number of fast-food restaurants
- Safer intersections for walking and bicycling

St. Christopher’s Foundation for Children in Philadelphia, for example, used its Innovation Fund grant to support Farm to Families, which works with community-based organizations to supply North Philadelphia families with boxes of produce from local farmers for \$10 or \$15 (often valued at double the price). Other fresh items like eggs, meat, and seafood are also available at affordable prices.

People can pick up the food at St. Christopher’s Hospital for Children or four other locations in the neighborhood, including a church and a school. They can pay by cash, credit, or Supplemental Nutrition Assistance Program (SNAP) benefits.¹⁴

The Innovation Fund foundations used \$1.8 million from the *Convergence Partnership* to raise \$4.4 million more from new government grants, government partnerships, and in-kind support, as well as philanthropic funding.

For example, the *Mary Black Foundation*, the Innovations Fund grantee working in Spartanburg, S.C., received an \$800,000 Healthy Food Financing Initiative grant from the federal department of health and human services to develop the Northside Community Food Hub. The food hub will create a permanent home for the local farmers’ market and

¹⁴ The Supplemental Nutrition Assistance Program was formerly known as the food stamp program.

provide classrooms, community gardens, a café, a catering kitchen, and a retail space where vendors can sell produce and goods. It is expected to create 21 jobs and will provide a comfortable place for residents to gather, eat, work, and learn.

Through its Innovation Fund grant, the *Chicago Community Trust* made a new programmatic commitment to the built environment through funding projects in two low-income communities of color. In the first project, youth created greenhouses on school rooftops in a predominantly Latino community. The second project established a multi-field collaborative task force to address urban agriculture and food access issues in a predominantly Black community.

Both projects enabled healthy food access, as well as economic development opportunities by creating urban agriculture and zoning policies that enabled healthy food access, as well as economic development opportunities. Participation in the Innovation Fund also influenced the trust's new strategic plan, which focuses on transforming the region through sustainable development. Read a detailed [case study](#) of this effort.

Violence Prevention–Healthy Eating, Active Living Initiative

The Violence Prevention–Healthy Eating, Active Living grants helped make the case for preventing violence to achieve healthy and equitable communities and increased recognition of the links between violence and a healthy lifestyle among advocates, public health professionals, academics, and policy-makers. “The national partnership of funders brought weight and credibility to the issue that wasn’t there before. Safety is being featured more,” said Prevention Institute’s Lee.

For the six participating partnerships, the grants strengthened and accelerated their capacity to coordinate efforts across multiple fields to address safety and health.

Leveraging Resources in New Directions

As a result of the relationships built through the *Convergence Partnership*, the funding partners are also working in subgroups of two, three, or four on projects related to healthy people in healthy places.

Nemours, Kaiser Permanente, RWJF, the California Endowment, RWJF, W.K. Kellogg Foundation, and, more recently, the Kresge Foundation, for example, invested in the [Partnership for a Healthier America](#), formed in 2010 in conjunction with—but independent from—Let's Move! It is a nonpartisan, nonprofit organization that brings together public, private, and nonprofit leaders to broker commitments from the private sector and develop strategies to end childhood obesity. The Partnership for Healthier America works with unbiased third parties to monitor and publicly report on the progress the partners are making to show everyone what can be achieved when we all work together.

“The Partnership for a Healthier America got up and going within a very short period of time, mainly because of the relationships we had developed in the *Convergence Partnership*,” said RWJF’s Govea. The *Convergence Partnership* is “the most powerful partnership, in my mind, that CDC has been involved with in the last 10 years,” said Kettel Khan.

WHAT LESSONS HAS THE CONVERGENCE PARTNERSHIP LEARNED FROM THE CHALLENGES IT HAS FACED?

Challenges and Lessons about Becoming a Partnership

The *Convergence Partnership* has faced many challenges, starting with working in uncharted territory, which required the partners and staff to spend a lot of time determining strategy and identifying priorities. It was also difficult to define the purpose and scope of their work together and the nuts and bolts of how the work gets done, and to position the *Convergence Partnership* in relation to the larger field. It took a lot of hard work, trust, collaboration, and negotiation among the funders in order to develop a memorandum of understanding for doing the work—one that stated the funding would be used in ways that made sense to all the partners. Many partnerships do not reach that level of trust.

Regional Convergence Takes Time and Support

The regional convergences followed the same process as the national *Convergence Partnership* and also found that convergence took time. In some cases, an added challenge was that unlike the national partners, regional partners had not worked together before. “To begin to build those relationships from scratch has been challenging,” said PolicyLink’s Navarro.

Staff members from PolicyLink and Prevention Institute encourage the partners in the regional convergences to develop an agreement guiding their work together. PolicyLink and Prevention Institute staff also developed a request for proposals that regional convergences could use to find a qualified consultant or organization to help lead or facilitate their partnerships.

Ongoing and Recent Challenges and Lessons

Identifying the Convergence Partnership’s Unique Value

From the beginning, the partners have identified areas of focus and funding where they could achieve more together than alone or in smaller partnerships. “There is a continuing mantra: ‘What is the unique value that the partnership can bring?’” said PolicyLink’s Bell. “If you’ve already got three funders engaged in something, if the partnership can’t

bring something unique, it probably shouldn't step in." Providing fast and targeted funding for the work in Healthy Food Financing is an example of work best accomplished by the entire partnership, according to Bell.

Bringing in More Funders: the Food and Agricultural Policy Fund

As the *Convergence Partnership* has matured, the partners have wanted to expand the partnership, so that it can include other fields. But adding new members is a long process, and only two new partners have joined: Kresge Foundation in 2008 and Ascension Health in 2011.

While the *Convergence Partnership* continues to explore bringing on full partners, it has also created another, less intense, way for foundations to participate: as partners in discrete projects, starting with the Food and Agricultural Policy Fund.

Launched in 2012, the Food and Agriculture Policy Fund is a new collaboration to advance food and equity priorities such as policy in healthy food financing, healthy food incentives, expansion of SNAP benefits (formerly called food stamps), and strengthening of the regional food system infrastructure. All funders will participate in decision-making.

Allowing funders to participate in discrete projects enables those not ready or able to commit to full partnership to be involved. "To become a partner you have to commit time and dollars and leadership. That is a big threshold," said Bell.

Measuring, Demonstrating, and Communicating Impact

Measuring progress and demonstrating and communicating the impact of the work is another challenge. "Being able to quantify a value added is essential. It's been great, but ultimately, if foundations are going to continue to make this investment, they're going to want to see a quantifiable outcome," said RWJF's Govea.

"Demonstrating impact is always challenging," added Standish, from the California Endowment. The *Convergence Partnership* is focused on communications strategies to disseminate the partnership's progress and the impact of its work.

WHERE DOES THE CONVERGENCE PARTNERSHIP GO FROM HERE?

The *Convergence Partnership* continues its efforts to catalyze engagement and investment in healthy people in healthy places by organizations and foundations from within and outside the health field. It is working on establishing more relationships in fields like community development, economic development, education, the environment, housing, sustainable agriculture, and transportation—for existing or complementary convergence work.

Continuing Field Building

Field building for healthy people in healthy places remains a central focus of the *Convergence Partnership*, which issued a request for proposals for another round of Innovation Fund grants in June 2012. These grants are scheduled to start in October 2012. The regional convergences continue to be a key part of the field-building work.

As more funders and other organizations have become engaged in healthy people in healthy places, assisting them has become both a challenge and an opportunity. The partners have committed to getting more involved in helping their colleagues in philanthropy by sharing their experiences at meetings and through one-on-one interactions. “Having a colleague from a national foundation spend time to help them will have a huge impact,” said PolicyLink’s Bell.

Deciding What to Invest in and When to Move On

The *Convergence Partnership* is facing difficult decisions about what to invest in going forward. “We have to scrutinize the budget more and say, ‘What’s most important?’ We have to be more creative about how to make those areas of work happen,” said Bell. Difficult decisions about when to leave one issue behind to move on to another issue will also be called for. The *Convergence Partnership* will also need to ensure that the issues it chooses are broad and nonpartisan.

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APPENDIX 1

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Loel Solomon, PhD, MPP

National Director, Community Health
Initiatives and Evaluation
Kaiser Permanente
Oakland, Calif.

Marion Standish (input received via email)

Director, Community Health
California Endowment
Los Angeles, Calif.

JoAnn A. Webster, BSN, MBA

Vice President, Community Health
Ascension Health
St. Louis, Mo.

APPENDIX 2

Convergence Partnership Funding by Partner: May 2007 to May 2012

(Current as of May 30, 2012; provided by the grantee organization; not verified by RWJF.)

Ascension Health: \$250,000

[Ascension Health](#) is the nation's largest Catholic and nonprofit health system and the third-largest system (based on revenues) in the United States.

Kaiser Permanente: \$690,000

[Kaiser Permanente](#) provides health care services to improve the health of its members and the communities it serves.

Kresge Foundation: \$2,000,000

[Kresge Foundation](#) seeks to influence the quality of life for future generations by creating access and opportunity in underserved communities and by Kresge Foundation advancing environmental stability.

Nemours: \$350,000

[Nemours](#) is a national children's health care institutions dedicated to restoring and improving the health of children through care and programs not readily available, with high standards of quality and distinction regardless of the recipient's financial status.

Robert Wood Johnson Foundation: \$7,949,369

The California Endowment: \$1,757,500

[California Endowment](#) is a private, statewide health foundation whose mission is to expand access to affordable, quality health care for underserved individuals and communities, and to promote fundamental improvements in the health status of all Californians.

W. K. Kellogg Foundation: \$7,700,000

[W.K. Kellogg Foundation](#) supports children, families, and communities as they strengthen and create conditions that propel vulnerable children to achieve success as individuals and as contributors to the larger community and society.

APPENDIX 3

The Regional Convergences

Descriptions of the most of the Regional Convergences' activities are available on the *Convergence Partnerships* website, with links provided below, if available.

- California: [California Convergence](#)
- Colorado: [LiveWell Colorado](#)
- Florida: [Florida Convergence](#)
- Kentucky: [Shaping Kentucky's Future](#)
- Maine: [Maine Convergence \(Let's Go!\)](#)
- Massachusetts: [Massachusetts Convergence](#)
- Michigan: [Michigan Convergence](#)
- Missouri: [Missouri Convergence](#)
- New Hampshire: [NH HEAL Campaign](#)
- New Jersey Convergence
- North Carolina: [North Carolina Convergence](#)
- Ohio: [Ohio Convergence](#) (also an Innovation Fund grantee)
- Oregon: [Northwest Convergence](#) (also an Innovation Fund grantee)
- Pennsylvania: [Food Funders Affinity Group](#) (also an Innovation Fund grantee)
- Washington, D.C.: [Washington Regional Association of Grantmakers Health Working Group](#) (also an Innovation Fund grantee)

[Read more](#) about most of these regional convergences.

APPENDIX 4

The 2010–2012 Innovation Fund Grantees

- Chicago Community Trust, Chicago, Ill.
- Community Foundation for Greater Buffalo, Buffalo, N.Y.
- Community Foundation of Greater Memphis, Memphis, Tenn.
- Consumer Health Foundation, Washington, D.C.
- HNHfoundation, Concord, N.H.
- Health Trust, Silicon Valley, Calif.
- Humboldt Area Foundation, Humboldt, Calif.
- Mary Black Foundation, Spartanburg, S.C.
- New Mexico Community Foundation, Santa Fe, N.M.
- Northwest Health Foundation, Portland, Ore.
- Raymond John Wean Foundation, Warren, Ohio
- Rosalinde and Arthur Gilbert Foundation, Santa Monica, Calif.
- St. Christopher’s Foundation for Children, Philadelphia, Pa.
- Whatcom Community Foundation, Bellingham, Wash.
- Zilber Family Foundation, Milwaukee, Wisc.

[Read more](#) about the 2010–2012 Innovation Fund Grantees.

APPENDIX 5

Violence Prevention—Healthy Eating, Active Living Initiative

- Community: Chula Vista, Calif.
- Community: Denver, Colo.
- Community: Detroit, Mich.
- Community: Louisville, Ky.
- Community: Oakland, Calif.
- Community: Philadelphia, Pa.

[Read more](#) about the Violence Prevention—Healthy Eating, Active Living projects.

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