Good Data =
Good Decision Making
For Philanthropy
ABOUT US
Advancement Project California: We are a public policy change organization rooted in the civil rights movement. We engineer large-scale systems change to remedy inequality, expand opportunity and open paths to upward mobility. Our goal is that members of all communities have the safety, opportunity and health they need to thrive. For more information, visit www.AdvancementProjectCA.org.

Healthy City: A program of Advancement Project, transforms how people access and use information about their communities. Healthy City is an information + action resource that unites community voices, rigorous research and innovative technologies to solve the root causes of social inequity. For more information, visit www.HealthyCity.org.

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INTRODUCTION

Finding & Funding the Hardest Hit Communities

In these severe economic times, foundations are faced with shrinking funding portfolios and skyrocketing needs in the communities they serve. At the same time, many levels of government—traditional partners to philanthropy in serving the neediest amongst us—are responding to record budget deficits through intense program cuts.

Communities of color that in the best of times are in need of public and private investment to remedy systemic inequities have been hardest hit by the Great Recession. Rates of poverty and unemployment are soaring while health outcomes and educational attainment are slipping.

In this situation, it is imperative for philanthropy to stretch every dollar by accessing information and analysis to more effectively allocate resources.

In this quest, many foundations have successfully utilized GIS* technologies and data to design initiatives and assess the results of their work. Advances in available technologies and methods have compelled several foundations to use geographic data to drive their decision making and support their strategic grantmaking. These tools have helped ensure that the populations and needs many foundations were established to serve are benefitted from their giving.

In Southern California grantmaking institutions such as First 5 LA, California Community Foundation, and The California Endowment are leading the way in using mapping and data to successfully target and assess their giving and initiatives. Advancement Project has served as a strategic partner, bringing to bear multi-disciplinary expertise, tools, and methods to support philanthropic efforts in California. For this brief, we use examples from Advancement Project’s Healthy City program to highlight the role of geography in grantmaking and share ways foundations have used mapping technology, research, and data to transform their philanthropy. We also propose how other foundations can best integrate them into their respective grantmaking through lessons learned.

*Geographic information systems (GIS) are used to organize, display, and analyze location-based information. Computer software specifically designed for GIS are commonly used to create maps that show geographic features or population information.
The Role of Geographic Data in Grantmaking

Designing funding programs that effectively address community needs while leveraging community strengths is a central feature of effective, strategic philanthropy.

Utilizing relevant data and mapping to expose gaps in resources as well as opportunities can make this work easier and more cost-effective. While there are many streams of information and input required to develop an effective funding strategy, there are several key questions that geographic data and analysis are well suited to answer.

**VISUALIZING IMPACT**
What has been the geographic impact of our grantmaking? Where are investments going? Which communities are “touched” by a foundation’s grantmaking activities? And are these the communities and populations the grantmaker intended to impact with its grants?

**IDENTIFYING ASSETS**
What are the existing community strengths? Are there nonprofits, other foundation grants, government initiatives, or community leaders that a foundation can leverage to improve the chances that a particular funding strategy will achieve its intended outcomes?

**TARGETING NEED**
Where are the communities and families in the greatest need of philanthropic investment? Where will giving be felt most and do the most good to address inequities? Where are the under-resourced communities in relation to the populations and community issues that are targets for the foundation investments?

**UNDERSTANDING COMMUNITY BOUNDARIES**
How do communities define their geographic boundaries? Do boundaries established by “outside” entities truly reflect the shared sense of community by residents, leaders, and other stakeholders? Where are the natural or “on the ground” traditional boundaries for communities?

Of course, there are many questions that cannot be answered using mapping and data alone. For example, though mapping analysis can answer the question of whether a potential grantee is well located to serve an intended target population, it cannot determine whether that group has the right capacity to achieve a grant’s proposed goals. Nor can they determine whether the requisite political will from partner organizations or governmental entities is in place to ensure success.

Nonetheless, the type of questions best answered by mapping and analysis are a tremendous help in making targeted decisions. And, in coordination with answers to other strategic questions, funders can ensure more strategic and effective grantmaking. Throughout this document are illustrations of how several foundations partnered with Healthy City to approach answering one or more of these key questions. The final section presents our recommendations based on lessons learned in the field.
What has been the geographic impact of the grantmaking?

With communities' growing needs for private and public support, it has become vital for philanthropy to identify ways to assess and plan their individual and collective grantmaking within geographic areas.

Often a first step is to answer the questions “where are our investments going?” and, “what neighborhoods and populations are impacted by our giving?” to gain insight on their past and current grantmaking impact and inform future funding decisions. Healthy City’s work with California Community Foundation is one example of how it has applied mapping tools and methods to support a single grantmaker. Our work with the Los Angeles Partnership for Early Childhood Investment and our coordination of the Census 2010 outreach initiatives (funded by California Community Foundation and The California Endowment) are examples of how foundations have worked together to ensure investments would be well-coordinated and complementary in the planning and implementation of their funding efforts.
In 2010 California Community Foundation (CCF) partnered with Healthy City to conduct an assessment of its grantmaking in relation to regional needs. The assessment helped CCF better understand its current geographic impact and inform future planning efforts. Healthy City analyzed CCF’s giving by ZIP Code, program area, and the distribution over time.

CCF staff could see where their investments were concentrated and where potential gaps existed. To measure whether the investments served the population and community needs at the heart of CCF’s mission, Healthy City worked with staff to articulate and translate the investments into data indicators. For example, we created composite “need indices” for overall CCF priorities and specific program areas. Additionally, password-protected access to the data was provided via our online HealthyCity.org mapping portal for program staff to conduct their own analyses.

The analysis enabled CCF to easily visualize where its investments were already serving some of the highest need areas in Los Angeles County. The information is also helpful for future planning as CCF can now identify new opportunities for investments in areas with high need not yet being served or where there was need to increase resources.

*A need index indicates the relative level of need, defined by a composite score of select indicators and geography. Index Scores for each variable are derived by calculating how far each ZIP Code fell above or below the county average for the selected indicators.
In 2006 the L.A. Partnership for Early Childhood Investment (the Partnership) embarked upon a multi-year examination of its members’ philanthropic investments to assess opportunities for the strategic targeting of their collective funding.

The Partnership, which includes private foundations, county agencies and First 5 LA, worked with Healthy City to:

1. Gather data on the Partnership’s members’ grantmaking activities focused on Preschool through 5 years old early childhood issues throughout Los Angeles County.
2. Consolidate, analyze, and map the geographic distribution of the Partnership’s collective investments and grants.
3. Develop an online, interactive reporting tool for Partnership members to access this data for any neighborhood or geographic region within Los Angeles County.

The Partnership worked closely with Healthy City to define the research methods and tools to address their collective needs. This included developing key research questions, establishing a funding typology, and categorizing funding areas to identify common types of grants and fields of investment.

During the first year of the project, Healthy City analyzed investments for 13 private foundations and First 5 LA, totaling nearly $90 million in grantmaking across Los Angeles County. In year two, nine private foundations and First 5 LA participated, totaling $127 million collectively. The analysis supported collaborative discussions among the partners on how to increase funding opportunities within the identified high need communities. The analysis included how the foundations might increase outreach to nonprofits in those areas to enhance their capacity to seek funding opportunities with these foundations. And, while First 5 LA funding was well matched to the highest need areas, it too was able to utilize the information to further target its investments to those areas. Overall, the Partnership’s work with Healthy City expanded the members’ capacity to visualize the geographic context of their collective efforts and inform future planning and decision making.
To ensure an effective Census 2010 count, and that California received its fair share of federal funds over the next decade, several foundations made significant investments in community-based outreach efforts to complement the work of the Census Bureau, the state, and other municipal initiatives in enhancing Census outreach in “hard to count” communities. As the grants were being made, funders, including California Community Foundation and The California Endowment, worked with Healthy City to explore new ways to ensure that their investments would be well coordinated and complementary. Healthy City built a customized online mapping system presenting where census outreach was most needed and mapping Census outreach investment locations. To fill the system with timely, actionable information, partnering foundations provided data on all grants made to groups to conduct any form of Census outreach throughout the state of California. Healthy City then uploaded this data onto the mapping system and allowed the grantees to “draw” their intended outreach area on the map so everyone could see the office locations as well as the neighborhoods they would target for their work. Healthy City augmented that data by surveying any grantees that did not draw their own outreach areas on the online system and recorded the target populations and outreach activity types (canvassing, phone banking, etc.). Presenting the data online allowed funders and their grantees to see where there were gaps in the collective outreach strategy and to identify any unnecessary overlaps in efforts. As the Census count progressed, the mapping technology was critical in showing where the count was going well or poorly on a weekly basis and how investments could be reorganized to respond. To ensure the real-time utility of this data, Healthy City staff convened a statewide and several regional coordinating councils, which included community-based organizations, Census officials, and foundation staff, to share the analysis of gaps and opportunities on a weekly basis to help facilitate adjustments to outreach targets and strategies in response to the changing data.

This work to provide timely outreach information to help coordinate a wide range of stakeholders proved effective. In Los Angeles County, with Healthy City’s support of partner organizations, targeted neighborhoods for outreach outperformed similar neighborhoods that were not targeted for outreach. In our after-action analysis, we estimate that without the outreach efforts approximately 172,608 residents would have gone uncounted, preventing $300 million loss per year in federal funding for Los Angeles County.*

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**CALIFORNIA COMMUNITY FOUNDATION & THE CALIFORNIA ENDOWMENT**

Mapping Hard-to-Count communities for the 2010 Census allowed funders to coordinate outreach efforts and focus on areas with the most need.

**RESEARCH QUESTIONS AND METHODS**
Where should foundations target Census outreach funding to make sure their investments are well coordinated and complementary?

**OUTCOME**
Prevented $300 million loss per year in federal funding for Los Angeles County by ensuring 172,608 hard-to-count residents did not go overlooked and were included in the 2010 Census.

**GEOGRAPHIC REGION**
Statewide

* According to an estimate from the Brookings Institute (“Counting for Dollars: States and District of Columbia” March 2010), the total amount of federal assistance to California was $1,729.97 per person in 2008. For 2010, we assumed the same level of funding to calculate estimates.
Targeting need
Where are the communities and families in the greatest need of a grant or new initiative?

As noted in the previous case studies, often a funder will assess the impact of their grantmaking in relation to community need. Understanding where there are deficits and gaps in resources to best identify areas that are under-resourced can be supportive of planning for new initiatives or soliciting proposals.

Grantmaking staff must answer to a board, the public at large, and to their institution’s own mission. They need to ensure they are maximizing resources by making tough decisions about allocating resources to be impactful. Kaiser Permanente and the Buffet Early Childhood Fund each partnered with Healthy City to utilize data and mapping technology specifically to ensure they were allocating resources to communities of greatest need.
Kaiser Permanente (KP) launched a Healthy Eating and Active Living (HEAL) initiative to address the obesity epidemic and associated health issues. Through the initiative, KP is granting millions of dollars to place-based initiatives that transform community health. Organizations within KP’s service areas were encouraged to apply for grants if they supported aligned health outcomes in low-income and underserved communities of under 20,000 people.

Kaiser Permanente required applicants to submit detailed target community and population statistics demonstrating health need and socioeconomic status, as well as a map of the community. These statistics included the racial/ethnic composition, poverty status, insurance status, and prevalence of obesity in target communities. Notably, KP also asked applicants to include resources for potential partnerships in the application, such as schools, school-based health centers, and political representatives.

Kaiser Permanente asked Healthy City to train applicants on how to define the boundaries and gather statistics for the communities they serve. Through in-person trainings and customized webinars, Healthy City taught applicants how to create a community map on HealthyCity.org and use it to analyze information necessary for the application. Applicants benefited from learning how HealthyCity.org could help them build their community boundaries piece by piece, while seeing how each additional ZIP Code or Census Tract raised or lowered the overall prevalence of obesity for example, or changed the community’s racial/ethnic composition. The recent change in Census Tract boundaries following the 2010 Census proved challenging for some applicants, because of the impacts those changes would have on summarizing data for applicant communities. The training applicants received prepared them to effectively use Census data in their project planning.

In the end, nine communities in Southern California utilized our data and technology to submit proposals—six were successful in becoming Kaiser Permanente HEAL Zones and receiving a $1M grant to change policies as well as the physical infrastructure to promote healthier families and communities.

**KAISER PERMANENTE**

Empowering grant applicants to draw their own community boundaries and demonstrate where they see the highest need ensures funds reach these areas.

**RESEARCH QUESTIONS AND METHODS**

Which areas have the highest health need in regard to the obesity epidemic?

**OUTCOME**

Six high-need areas received a $1M grant to change policies as well as the physical infrastructure to promote healthier families and communities.

**GEOGRAPHIC REGION**

Statewide

**SEE THE CHART**

Riverside Service Area Population by Race/Ethnicity, Appendix Figure 4
In 2009, First 5 California and the David and Lucile Packard Foundation began exploring ways to introduce the Educare early childhood education program model to California. Educare is supported nationally by the Buffett Early Childhood Fund, Ounce of Prevention Fund, the W.K. Kellogg Foundation, George Kaiser Family Foundation, Bill & Melinda Gates Foundation, and the Irving Harris Foundation. Educare embraces a community’s most vulnerable children with programming and instructional support that develop early skills and nurture the strong parent-child relationships that create the foundation for successful learning. The effort needed help identifying communities that could benefit most from such a program. The Buffett Early Childhood Fund partnered with Advancement Project’s Educational Equity and Healthy City programs to map need across the state of California and develop community profiles for the 20 lowest-income communities with the largest preschool space shortages. Through this work, project leaders (a collaboration of local, statewide and national champions) began negotiations about placing Educare in two sites where its early child educational services could have the maximum impact—the Bell/Cudahy* neighborhood of Los Angeles and the Santee neighborhood of San Jose.

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* The Educare site for Los Angeles is still being negotiated by local partners, but Educare Santa Clara’s initial operating agreements have already been solidified.
To promote the development of children ages 0-5, First 5 LA partnered with Healthy City and Special Services for Groups to identify high need communities that had public sector infrastructure and leadership capacity to work effectively with First 5 LA programs. Healthy City created need indices around birth, child, and adult population indicators and "strengths" indices* around public infrastructure and investments in Los Angeles communities. Special Services for Groups utilized qualitative methods, such as interviews and focus groups, to identify community leadership strength and capacity. The strengths-based assessment evaluated 24 highest need candidate communities based on existing infrastructure strength, community leadership, and patterns of prior and current investments. Determining common indicators of community strength, listed on the following page, helped First 5 LA select its communities.

* A strengths index indicates the relative level of strength, defined by a composite score of select infrastructure and investment indicators and geography. The index score reflects the cumulative position of Best Start Community infrastructure and investment indicator values relative to their county averages.
Additionally, Healthy City created maps showing the distribution of candidate communities across the County in relation to other geographic boundaries of interest (e.g. Supervisorial Districts, Gang Reduction and Youth Development Zones) and racial/ethnic composition. Taken together, Healthy City and Special Services for Groups analyses supported First 5 LA in identifying and selecting high-need communities with varying strengths and geography for their five-year strategic initiative.
The United States Department of Education’s Promise Neighborhoods funding program aims to “significantly improve the educational and developmental outcomes of children and youth in our most distressed communities.” In 2010, Healthy City was asked by The California Endowment (TCE) to support a convening of philanthropic and governmental leaders that wanted to ensure that LA-based proposals for the Promise Neighborhood program would have the best possible chance. Healthy City started by mapping out the specific needs and issues that the Promise Neighborhood program was designed to address. It identified neighborhoods in Los Angeles County that best matched the need criteria. Healthy City then mapped all known place-based initiatives in Los Angeles County to see where there was overlap with the need criteria and with one another. This mapping task enabled TCE to align current investments with areas of high need based upon the criteria. Through analysis of the mapping, decision-makers had evidence to identify applications with the stronger need criteria, and then strategize appropriately.

After the initial analysis, Healthy City continued to partner with TCE to provide specific support to several of their Building Healthy Communities sites that were submitting applications. In the request for proposals, the Promise Neighborhoods Program outlined detailed requirements of applicants to define community boundaries and to report socioeconomic, educational, health, and safety statistics. Healthy City supported several applicants to draw those boundaries, gather data, and present the resulting statistics and analysis. Healthy City also provided grant writing support to the applicants. In the end, Healthy City supported seven applicants in California (out of 339 nationally) and two—Boyle Heights and South LA—were successful in receiving the initial planning grant for the Promise Neighborhood program.

RESEARCH QUESTIONS AND METHODS
Where is infrastructure being built to support efforts in high need communities?

OUTCOME
The U.S. Secretary of Education awarded 21 Promise Neighborhood grants nationwide, three in California, two of which were Boyle Heights and South LA—Healthy City partners.

GEOGRAPHIC REGION
Los Angeles County

SEE THE MAP
Los Angeles County Concentration of Place Based Initiatives and Target Populations Appendix Figure 6
Understanding Community Boundaries
How do communities define their geographic boundaries?

Once a community or neighborhood is identified as the focus of an initiative through data, mapping, and analysis, there is the necessary work to translate the boundaries of that community from the artificial boundaries set by the administrative data providers to a more natural and recognizable boundary by the people that live there. Especially in a time when place-based initiatives are so prevalent, boundary-setting is a powerful activity that can both impact the flow of private and public funding and create an opportunity to engage and include community directly in the planning process. It is imperative that those funds are directed to support the infrastructure and resources communities need to thrive.
In 2009, Healthy City launched “The Building Healthy Communities Data and Mapping Tool” for The California Endowment’s (TCE) 10-year strategic place-based plan in California. The online mapping tool was designed to support initial planning efforts and implementation of plans in the 14 places. It was important to TCE that the boundaries be vetted by their partners in the communities so that residents and other key stakeholders could identify their place boundaries as meaningful and practical representations of the communities.

Early on in the planning phase, Healthy City engaged TCE community partners in each of the 14 places on the application of the tool to place-level planning efforts and more specifically for boundary revisions. Healthy City trained representatives from each community on how to use the data to support the boundary revision process. Community partners used the data and mapping tool to explore potential boundary changes by creating their own maps and analyzing the impact of boundary changes on community demographics and health indicators. Using the online tool, each of the places eventually submitted proposed boundary changes to TCE for approval. TCE was then able to review and approve the proposed boundary changes knowing that they had been vetted by community partners. After the 2010 Census results were in, TCE also used Healthy City technology to redraw some of the boundaries.

**RESEARCH QUESTIONS AND METHODS**
How do communities define their own boundaries?

**OUTCOME**
Innovative tools for community-led planning efforts are now free and accessible on HealthyCity.org for anyone who wants to view data and draw boundaries.

**GEOGRAPHIC REGION**
Boyle Heights
Central Santa Ana
Central/Southeast/Southwest Fresno
City Heights (San Diego)
Coachella Valley
Del Norte & Adjacent Tribal Lands
East Oakland
East Salinas (Alisal)
Long Beach
Richmond
Sacramento
South Kern
South Los Angeles
Southwest Merced & East Merced County

**EXPLORE ONLINE**
healthycity.org/c/tce
In our continued partnership with First 5 LA, Healthy City led a community boundary revision process with 12 of the 14 Best Start communities in 2011. Healthy City worked with each community partnership and First 5 LA to develop a process that would support them in defining their boundaries. Healthy City facilitated conversations around community identity and need, so the partnerships could come to consensus on a common geographic boundary to represent each community. Healthy City provided laptops to allow community members and representatives of community organizations to view the existing boundaries, along with all of the relevant data on the HealthyCity.org website. Community members used the website to test out proposals to change the community boundaries. This allowed every participant to see how community boundaries directly affected the numbers of children, racial/ethnic make-up, and existing community resources within communities.

Utilizing a community-based participatory action research* approach and our innovative technology, the revision process moved forward successfully by ensuring community voices and solutions in the process. Eleven of the 12 communities submitted proposed boundary changes, along with some name changes, to First 5 LA in community plans for the initiative.

*Community Based Participatory Action Research (CBPAR) is a collaborative approach to research that involves all stakeholders throughout the research process for the purpose of education, action, and social change.
CONCLUSION

Targeting Investments with Data

In an economic climate where making the right decision the first time is all-important, many foundations are making better decisions about their programs and strategic planning by using geographic data and analysis.

Foundation capacity runs the gamut when it comes to starting new programs and implementing funding strategies. Larger foundations likely have research staff or capacity to conduct research as part of their due diligence when it comes to proposing new programs and grants. Smaller foundations often do not have this capacity and rely more on relationships and other partners.

Now with broader access to technology, mapping methods, and data, foundations large and small have the capacity to conduct deeper research to inform their decision making. Foundations can cost-effectively assess their current programs and inform their funding strategies. And they can assess community strengths and needs, choose the best location for a program, and identify the community geography and populations they want to fund.

By using geographic data and analysis to define both the needs and assets in a community, philanthropy can target its investments to have the maximum impact. This allows the institution or donor to honor the charitable impulses that it sets out with but more importantly to channel its commitment and concern to increase resources in underserved communities. Philanthropy is in a unique position to both target its investments but also to encourage other private funders, and public entities, to follow its lead.

To inform future endeavors, some of the lessons we have learned are described below.

1. Establish Purpose
An effective way to use this type of research and technology to its full potential is to not separate the research rationale from the overall initiative’s theory of change. In fact, all research and data gathering plans should flow from a clear articulation of the initiative’s goals and the answer to the simple question: “What changes in the community/system is this initiative seeking to make?” These goals then set the framework by which the research questions are developed, and define the type of data and analysis needed to fulfill goals. For example, is your goal to shift investments to a place-based strategy? The California Endowment and First 5 LA changed their grantmaking strategies to address social determinants of health using a place-based framework which then included partnering with local stakeholders to address their local priority areas.

2. Clarify Research Questions
Identify relevant research questions that are necessary to explore in order to fulfill goals. What is it you want to know or understand? Is it, “Where are the highest need communities”, “What are the demographics”, or “Where can investments best be leveraged?” The analy-
sis, data indicators, and geographic focus for the research conducted with The L.A. Partnership for Early Childhood Investment was guided by research questions developed with the collaborative. These included questions such as “Where are high need/vulnerable populations in Los Angeles County?”, “What types of investments are funders making and where are they making them?”, or “What resource gaps exist?” Determining the research questions early on in the process is critical to then facilitate the research design and steps necessary to answer the questions. It is important to identify which questions can be answered utilizing maps and data, and those that require other methods of research.

3. Identify and Organize Data
Data required for this type of research has to be associated with a specific location, address, or geography, such as ZIP Code. Questions such as accessibility and quality of data need to be examined. When obtaining data from external administrative or private sources, there can be challenges with sharing data, particularly online, that often requires a lengthy period of negotiation, review, approval, and agreements in order to obtain. Privacy concerns may also exist and limit data sharing. With respect to foundation investment and grantee data, we found with both individual foundations and collaboratives that data records are often not complete or consistent throughout. Thus, one needs to be prepared to designate sufficient time and resources for gathering and preparing data for the analysis in order to ensure validity in the outcomes of the research.

4. Generate Buy-In and Integrate Research into Decision Making
Foundations must engage, inform, and empower staff and their grantees so they understand how the results of the research and analysis can be valuable to their day-to-day work and that utilizing data in their grantmaking strategy and decision making is the norm a foundation seeks to establish. The research itself will be more successful if staff and intermediaries are identified who can support the process from beginning to end. This includes being able to establish an integrated process across the organization, a capacity to make decisions, translate information internally and externally, and sustain utilization of the research once completed.

For example, California Community Foundation sought to analyze its past investments to inform its future grantmaking within the goals of a current five-year strategic plan. Staff from across program areas were engaged early on in the process to advise on research design and data indicators selection to ensure final outcomes would support their work. In addition to sharing the final analysis with all Program staff, Healthy City trained them on how to access and utilize the information for future grantmaking activities. By providing an experiential approach and ensuring the results were relevant to current dialogues, it is more likely that staff will incorporate the research into their work practices and organizational decision making.
5. Engage Communities
A community based participatory action research approach that involves community stakeholders in the process can greatly benefit the outcomes of the research and implementation of strategies or projects initiated from the research findings. Primary data such as this can often help with overcoming issues with secondary data or fill gaps where data does not exist. Directly engaging communities in the research can deepen one’s understanding of a particular community and support building cohesion among all stakeholders. The boundary revision work conducted with First 5 LA Best Start Initiative is a good example of how one can engage community stakeholders in research and decision making. Through this process, First 5 LA and the Best Start communities bridged their knowledge, refined geographic boundaries to best reflect actual communities, and enhanced their community partnerships. Creating pathways for communities to engage and actively participate is fundamental to creating and sustaining change.

6. Disseminate Findings
A common goal for us all should be to advance research and contribute to the field. Sharing research findings with other funders, grantees, and the general public is necessary in order to collectively learn and build upon individual efforts. By disseminating information and creating opportunities for dialogue, we can improve the outcomes for all the communities we serve.

The foundations highlighted in this brief are realizing real benefits when coupling these tools and methods with their already robust research and philanthropic decision making capacities. They have laid the groundwork and serve as examples to inspire future efforts. We encourage others to take advantage of this work and further engage in informed and equitable decision making to improve the opportunities communities need to thrive.
Appendix

FIGURE 1
California Community Foundation
Need Index and Los Angeles County Regions

FIGURE 2
L.A. Partnership For Early Childhood Investment
Public Private Partnership for Infants and Toddlers

FIGURE 3
L.A. Partnership For Early Childhood Investment
First 5 LA: Dollars per ZIP Code (Analysis 2) with Need Index

FIGURE 4
Kaiser Permanente
Riverside Service Area Population by Race/Ethnicity

FIGURE 5
Buffet Early Childhood Fund
Los Angeles County Bell/Cudahy Region Early Childhood Demographic Characteristics

FIGURE 6
The California Endowment
Los Angeles County Concentration of Place Based Initiatives and Target Populations
FIGURE 1

Need Index and Los Angeles County Regions

California Community Foundation
Investment Analysis

Need Index by ZIP Code
- Low
- High
- No Data

About the Map
This map shows the need index with boundaries of 16 Los Angeles County regions and their neighborhoods. Need Index indicates the relative level of need in Los Angeles County ZIP codes with color: red as the highest need and green as the lowest need.

Index scores for each variable are derived by calculating how far each ZIP code fell above or below the county average for the following five indicators:
1. Overall Family Income (2010)
2. Poverty Rate (2010)
3. Unemployment Rate (2010)
5. Infant Mortality Rate (2008)

Highest Need in Los Angeles County
- South L.A., Eastside, northwest pocket of San Fernando Valley (Lakeview, Pacoima, Sun Valley), Pomona, and the western part of Southeast region shows concentration of ZIP codes in highest need.

Regions:
- Antelope Valley
- Angeles Forest
- Central L.A.
- Eastside
- Harbor
- Northeast L.A.
- Northwest County
- South L.A.
- South Bay
- Southeast
- Westside

Major Areas/Landmarks:
- Lancaster
- Twin Peaks East
- Downey
- Boyle Heights
- Long Beach
- Mount Washington
- Santa Clarita
- Pomona
- Burbank
- El Monte
- Whittier
- Torrance
- Exposition Park
- Downey
- Glendale
- Santa Monica

To access and map data, visit http://www.HealthyCity.org.

Created by Healthy City (InHyun Yoo, Research Analyst) - June 2011
Geographic Data from Los Angeles Times (2010), NAVTEQ (2010).
LA Partnership for Early Childhood Investment: Impact Area
First 5 LA Dollars by ZIP Code with High Need Index

Legend
First 5 LA Investments
Dollars by ZIP Code
- $6,000.00 - $32,041.75
- $32,041.76 - $77,760.50
- $77,760.51 - $380,199.78
- $380,199.79 - $955,472.43
- $955,472.44 - $4,601,425.10

Need Index
- Highest Need (> 1.5 Std. Dev.)
- High Need (0.50 - 1.5 Std. Dev.)
- Average Need (-0.50 - 0.50 Std. Dev.)
- Low Need (< -0.50 Std. Dev.)

This index combines the following variables into a cumulative index score:
1) Population 0-5 years of age
2) Families at or below 100% FPL
3) Number of births <1,500 grams (very low birth weight)
4) Adults with low educational attainment (less than high school)
5) Number of Teen Births

Index scores for each variable were derived by calculating how far each ZIP code fell above or below the county average.

Sources:
- Demographic Data: Claritas 2009 Estimates
- Birth Data: California Department of Health 2008
- Grantee Data: Survey (7/1/2007 - 6/30/2008)

Impact area is assessed here for all mappable grants by resident ZIP codes of clients served. Impact area boundaries were added to all traditionally mappable grants (direct services, capital building, and core operating grants with predefined service boundaries). Also included are capital grants that maintained the approximate client-level data. Some programmatic grants could not be assigned service areas and are therefore excluded from this analysis.
**FIGURE 3**
L.A. Partnership For Early Childhood Investment—read more on page 8

![First 5 LA Investments, Average $ per ZIP by Grantee Service Area (Year 1 & Year 2)](image)

**FIGURE 4**
Kaiser Permanente—read more on page 11

*Population by Race/Ethnicity Riverside Service Area 2010*


- **White**
  - 1990: 30,771
  - 2000: 45,105
  - 2010: 66,389

- **API**
  - 1990: 34,223
  - 2000: 57,753
  - 2010: 117,418

- **Black**
  - 1990: 55,984
  - 2000: 90,770
  - 2010: 125,358

- **Hispanic**
  - 1990: 291,303
  - 2000: 535,521
  - 2010: 927,871

- **Other**
  - 1990: 6,083
  - 2000: 3,498
  - 2010: 7,222

*Source: Nielsen Claritas, Inc.*
FIGURE 5
Buffet Early Childhood Fund—read more on page 12
Los Angeles County Place-Based Initiatives - Public Organizations

Legend
- Community Redevelopment Agency/LA
- City of Los Angeles (GRYD)
- County of Los Angeles (Demo Sites)
- Los Angeles Unified School District (Fict Zones)

Map Created by Healthy City, December 2009. Initiative Areas provided by organizations. Geographic data from Navteq, 2009.