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## ARTICLE NONPROFIT MANAGEMENT

# Audacious Philanthropy

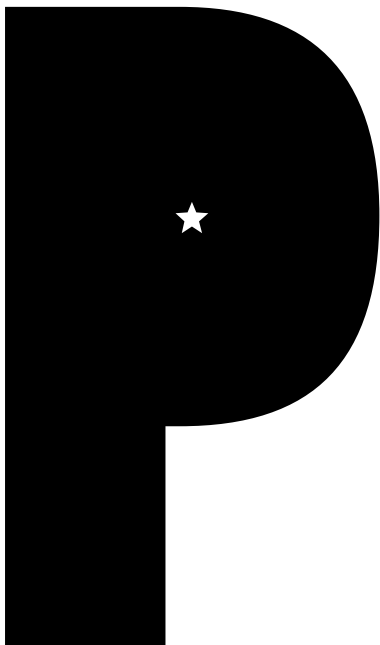
Lessons from 15 world-changing initiatives  
*by Susan Wolf Ditkoff and Abe Grindle*

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**LESSONS  
FROM 15  
WORLD-  
CHANGING  
INITIATIVES**

**BY SUSAN WOLF DITKOFF  
AND ABE GRINDLE**



Private philanthropists have helped propel some of the most important social-impact success stories of the past century: Virtually eradicating polio globally. Providing free and reduced-price lunches for all needy schoolchildren in the United States. Establishing a universal 911 service. Securing the right for same-sex couples to marry in the U.S. These efforts have transformed or saved hundreds of millions of lives. That we now take them for granted makes them no less astonishing: They were the inconceivable moon shots of their day before they were inevitable success stories in retrospect.

Many of today's emerging large-scale philanthropists aspire to similarly audacious successes. They don't want to fund homeless shelters and food pantries; they want to end homelessness and hunger. Steady, linear progress isn't enough; they demand disruptive, catalytic, systemic change—and in short order. Even as society grapples with important questions about today's concentrations of wealth, many of the largest philanthropists feel the weight of responsibility that comes with their privilege. And the scale of their ambition, along with the wealth they are willing to give back to society, is breathtaking.

But a growing number of these donors privately express great frustration. Despite having written big checks for years, they aren't seeing transformative successes for society: Think of philanthropic interventions to arrest climate change or improve U.S. public education, to cite just two examples. When faced with

setbacks and public criticism, the best philanthropists reexamine their goals and approaches, including how they engage the communities they aspire to help in the decision-making process. But some retreat to seemingly safer donations to universities or art museums, while others withdraw from public giving altogether.

Audacious social change is incredibly challenging. Yet history shows that it can succeed. Unfortunately, success never results from a single grant or silver bullet; it takes collaboration, government engagement, and persistence over decades, among other things. To better understand why some efforts defy the odds and what lessons today's philanthropists can learn from successful efforts of the past, we dived deep into 15 breakthrough initiatives, ranging from broad access to end-of-life hospice care to fair wages for migrant farmworkers in the U.S. to a lifesaving rehydration solution in Bangladesh (see the exhibit "Audacious Social-Change Initiatives of the Past Century"). Our research revealed five elements that together constitute a framework for philanthropists pursuing large-scale, swing-for-the-fences change. Successful efforts:

- Build a shared understanding of the problem and its ecosystem
- Set "winnable milestones" and hone a compelling message
- Design approaches that will work at massive scale
- Drive (rather than assume) demand
- Embrace course corrections

The role of philanthropists in these historical success stories varied. By and large they underwrote the efforts of others. The hands-on work fell, as it does today, to NGO leaders, service providers, activists, and many others on the front lines of social change. The common thread in these success stories was that philanthropists understood the importance of the five elements and were willing to fund any or all of them as needed. They acted as sources of flexible capital, identifying gaps left by others and directing their resources accordingly. Sometimes only minor support focused on one of the five elements was enough to tip the scales.

This framework does not constitute a simple or linear recipe. Real change is highly complex and driven by many forces, luck and timing play important roles, and causality is impossible to prove. Still, we believe that if ambitious philanthropists apply the framework over the arc of a campaign, they may substantially increase the odds of achieving transformative change.

## THE CHALLENGE

Before we look closely at our historical success stories, it's instructive to consider some high-level reasons why so many efforts wither on the vine. Most

### IN BRIEF

#### THE CHALLENGE

Many of today's philanthropists aspire to audacious results. But despite having written big checks for years, they aren't seeing large-scale results.

#### THE INSPIRATION

Historical initiatives ranging from the virtual eradication of polio globally to the legalization of same-sex marriage in the United States demonstrate that ambitious social-change efforts can succeed.

#### THE LESSONS

A deep dive into 15 successful initiatives reveals five common elements. Those efforts built a shared understanding of the problem; set winnable milestones; designed approaches that work at massive scale; drove demand; and embraced course corrections.

# DONORS DON'T WANT TO FUND HOMELESS SHELTERS AND FOOD PANTRIES; THEY WANT TO END HOMELESSNESS AND HUNGER.

of the initiatives we studied shared four important patterns: Success took a long time—nearly 90% of the efforts spanned more than 20 years (with a median of about 45 years). It frequently entailed government cooperation—80% required changes to government funding, policies, or actions. It often necessitated collaboration—nearly 75% involved active coordination among key actors across sectors. And at least 66% featured donors who made one or more philanthropic big bets—gifts of \$10 million or more.

Unfortunately, these patterns go against the grain of much philanthropic practice today. Donors know conceptually that achieving widespread change can take a long time, even for the most important and straightforward ideas. (As the physician Atul Gawande points out, the basic lifesaving practice of hand washing and sterilizing surgical instruments and facilities took 30 years to gain acceptance even after a leading medical journal published ironclad evidence in support of it.) Yet philanthropists often fund grantees with the expectation that much more complex change can be achieved in just a handful of years. Wary of red tape and of being perceived as “too political,” many donors have been unwilling to fund work that meaningfully engages with the U.S. government, despite the central role it plays and the trillions of dollars it spends addressing society’s toughest problems. Furthermore, collaboration of any type can be difficult and costly, so few philanthropists meaningfully support or engage in it, even though most are frustrated with the inefficient proliferation of siloed change efforts. And finally, only a small fraction of donor gifts for social change are large enough to make a dent—although philanthropists routinely commit \$20 million or more to infinitely simpler challenges, such as building a university library or a museum wing.

To be sure, in none of our success stories could a philanthropist declare total victory. Despite near-universal use of infant car seats, children still die in car accidents. Despite nationwide access to free and reduced-price lunch, schoolchildren still go hungry. Despite substantial increases, farmworkers still have not achieved truly livable wages. But by focusing on the elements in the framework above, the movements’ donors and change leaders enabled huge strides.

Let’s look at the five elements in detail and explore how a thorough understanding of each can help funders pave the way for meaningful change.

## **BUILD A SHARED UNDERSTANDING OF THE PROBLEM AND ITS ECOSYSTEM**

Everyone knows that you can’t solve a problem you don’t understand. The leaders of the successful social

movements we studied appreciated and carefully framed the issues they sought to address. They knew who was affected and what forces perpetuated the problems. They often studied deeply entrenched racial, cultural, and economic dynamics, enabling them to attack root causes; figured out who benefited from (and would fight to preserve) the status quo; and built evidence bases that propelled action. And they revisited these questions as the problems and surrounding ecosystems evolved or as the change effort moved into new population segments, geographies, or other frontiers.

Consider the movement to reduce tobacco use in the United States. Decades of research funding, including substantial investments from the American Cancer Society and the Robert Wood Johnson Foundation, among others, were needed to construct an airtight scientific case that tobacco was harmful to people’s health. The consensus that was built among scientists, doctors, government leaders, and eventually smokers was crucial to overcoming vigorous resistance and obstruction funded by Big Tobacco.

Still, getting people to break a socially reinforced habit involving a cheap, widely available, and chemically addictive product was extremely difficult. Recognizing the limitations of early smoking-cessation efforts, advocates continued to invest in research and problem reframing. This led them to modify their definition of the problem and pivot from smoking cessation per se to the broader aim of tobacco control.

To make it easier for individuals to quit, the movement refined the scientific and behavioral understanding of smoking as an addiction, facilitating the creation of products such as nicotine gum and patches. At the same time, it began to invest in changing the “system” of incentives and cultural norms that helped perpetuate smoking, resulting in laws to restrict smoking and protect the health of nonsmokers; significantly higher cigarette taxes; heavy restrictions or bans on sales channels such as vending machines; the outlawing of smoking in public places, advertising aimed at children, and ultimately mass-market advertising; and a decline in Hollywood and TV portrayals of smoking. Cigarettes eventually became expensive, inconvenient, and socially stigmatized, and smoking rates among adults plummeted from 42% a half century ago to 15% in 2015.

The best philanthropists understand that agreeing on the problem to be addressed is a seemingly obvious but highly tricky step, and they commission actionable research and policy analysis that foster consensus around why a problem persists and how to attack it. They also understand that such investments must be ongoing, because the problem and its ecosystem shift over time. Had antitobacco advocates relied only on the research reports commissioned in the 1950s and 1960s, their efforts might have been scientifically correct but largely failed. And note that cutting the smoking rate to below 15% is likely to require further research and reframing of the problem, because the challenge is

substantively different, in much the way solving the “last mile” challenge in business (how to reach customers in the most remote or challenging contexts) differs from growing a nascent customer base.

### SET WINNABLE MILESTONES AND HONE A COMPELLING MESSAGE

Making progress is hard when the goal is big and vague; behavioral science teaches us that it’s human nature to get paralyzed. The leaders in our case studies often kept people motivated and engaged by identifying concrete, measurable goals—what we call “winnable milestones”—and pairing them with emotionally compelling messages or calls to action. Honing an emotionally resonant message requires a range of activities, such as polling, message testing, and conducting focus groups, that lie outside the traditional scope for donors and are typically considered unacceptable “overhead” when they appear in non-profit budgets.

Tim Gill and other philanthropists who support LGBTQ rights demonstrated the importance of setting milestones. In the early 2000s, at the urging of movement leaders including attorney Evan Wolfson, they began devoting considerable resources to the very specific objective of legalizing same-sex marriage nationwide. For decades the movement had focused on the broad goal of “advancing LGBTQ rights,” and although that work continued, leaders hoped that a significant push on a concrete winnable milestone would more powerfully advance the larger cause. They further concentrated efforts on a targeted set of states in order to build momentum and lay the public and legal foundations for a national victory.

Leaders of other successful movements have similarly focused on concrete goals, such as “eradicating polio” (as opposed to lowering childhood mortality rates) and increasing migrant farmworkers’ wages by “one penny per pound.” But even so, those movements made little progress until they landed on core messages with emotional resonance—ones that spoke to the heart as well as the head, such as searing images of crippled children and harrowing accounts of farmworker abuse. Indeed, the marriage equality movement struggled to connect with the general public as recently as 2008, even losing a well-funded ballot initiative in left-leaning California. In the aftermath of that and other setbacks, supportive philanthropists financed polling and focus groups to help movement leaders understand how to reframe the core message. The research revealed that many voters perceived the movement as driven primarily by same-sex couples’ desire for the government benefits and rights

**BILLIONS OF DOLLARS ARE Poured INTO SOCIAL INITIATIVES THAT ARE NOT VIABLE AT SCALE.**

# AUDACIOUS SOCIAL-CHANGE INITIATIVES OF THE PAST CENTURY

conferred by marriage—and they did not find that a gripping rationale. This insight was pivotal: The movement refocused its communications strategy on equality of love and commitment, arguing that “love is love”—a message that struck a chord. Victories piled up, culminating in the 2015 Supreme Court ruling that legalized same-sex marriage throughout the United States. And although limited in scope, the push for marriage equality advanced the broader LGBTQ rights agenda in ways that might not otherwise have been possible or that would have taken much longer.

## DESIGN APPROACHES THAT WILL WORK AT MASSIVE SCALE

A solution that doesn't work at the scale of the problem isn't a real solution. Unfortunately, billions of philanthropic dollars are poured into perfecting social services and products that are truly viable only for small numbers of an affected group—5,000 people, five cities, even five states. Such efforts are often local, entrepreneurial, or academic responses to unmet needs or low-quality, underfunded government services (a different way to waste money). But the “innovations” themselves are often too expensive, too complex, or too dependent on specialized talent to be viable at the extent of the need. And even when small-scale solutions are tested with larger groups, the leap is usually from, say, 500 people to 1,000—which reveals almost nothing. The real question should be whether an innovation that can serve 500 people can effectively serve 50,000 or 500,000 people.

Of course, designing a solution or a change strategy that works at scale is enormously challenging. Like any innovation process, it may involve many false starts. The key test is to determine what it would take for the proposed approach to be implemented at full scale—and then critically evaluate whether that is realistic. Often, simple math demonstrates that it is not. For example, if 10 million impoverished American youths need help getting into and graduating from college, and a high-quality program costs \$5,000 per person, we need to ask whether any funding model, even one led by the government, could feasibly cover the \$50 billion a year needed to serve them all. Could any police force realistically control illegal logging in the dense and gigantic Amazon rainforest? Can we expect that 25 million nurses across India will learn and reliably implement a 20-step procedure for sterilizing medical equipment? Do we believe that billions of concerned coffee drinkers will do their own research to make sure that their particular blend is grown under fair conditions? Those tactics might work at limited

We studied 15 social movements that defied the odds and achieved life-changing results to uncover lessons for today's ambitious donors. Although we now take their success for granted, most of these initiatives took many decades to achieve breakthroughs.

<b>THE ANTI-APARTHEID MOVEMENT</b>	The institutionalized oppression of South Africa's nonwhites came to an end in the 1990s—more than four decades after apartheid first became law—thanks to a tireless campaign of social, political, and economic activism.
<b>ARAVIND EYE HOSPITAL</b>	Using a highly efficient surgical model and variable pricing, this hospital chain has reduced cataract blindness in Tamil Nadu, India, by more than 50% and serves all patients regardless of ability to pay.
<b>CAR SEATS</b>	By 2006, some 98% of U.S. children traveling by car were restrained in safety seats, reducing their risk of death in an auto accident by 71%.
<b>CPR TRAINING</b>	More than 18 million Americans a year learn this emergency procedure, administered to nearly half the people who experience cardiac arrest outside a hospital.
<b>THE FAIR FOOD PROGRAM</b>	Fast-food boycotts and other efforts led by migrant farmworkers significantly improved working conditions and increased wages for tomato pickers in Florida and other U.S. states.
<b>HOSPICE CARE</b>	This system of specialized palliative care, started in the late 1940s, now supports 60% of dying patients in the U.S.
<b>MARRIAGE EQUALITY</b>	A focused initiative of the LGBTQ agenda, this social movement culminated in the legalization of same-sex marriage in the United States in 2015.
<b>MOTORCYCLE HELMETS IN VIETNAM</b>	Helmets specially designed for tropical climates, along with a national helmet law and advertising campaign, raised rates of use in Vietnam from 30% to 95%.
<b>THE NATIONAL SCHOOL LUNCH PROGRAM</b>	By 2012, some 31 million U.S. children—more than half of all public school students—received free or reduced-price meals.
<b>911 EMERGENCY SERVICES</b>	Nationwide access to a trauma response system and other emergency services via a three-digit phone number was made available in the U.S. in 1968.
<b>ORAL REHYDRATION SOLUTION</b>	Widespread adoption of a sugar/salt rehydration mixture by Bangladeshi households resulted in a 90% reduction in children's deaths from diarrheal diseases.
<b>POLIO ERADICATION</b>	Following the development of a vaccine in 1955 and decades-long inoculation efforts, polio has been virtually eradicated globally.
<b>PUBLIC LIBRARIES</b>	Early investment by Andrew Carnegie, coupled with long-running advocacy by interest groups, has provided 96% of Americans with easy access to free libraries.
<b>SESAME STREET</b>	The first TV show to achieve early-childhood learning gains, launched in the U.S. in the late 1960s, is now viewed by more than 156 million children around the world.
<b>TOBACCO CONTROL</b>	The long-term antismoking effort, started in the 1950s, eventually reduced smoking rates by more than 60% among U.S. teens and adults.

scope, but they're all likely to break down at the full scale of the need.

Still, cracking this nut is possible. All 15 initiatives in our study achieved impact at scale, although no two followed the same path. Some did it by investing deeply in R&D and developing an innovative form of an existing product, program, or process; some found a breakthrough business model; some took advantage of an existing distribution system instead of trying to build a new one; and some hit upon one or more novel leverage points to influence the relevant field or system. Often, philanthropy is needed to support this kind of innovation and experimentation, especially for solutions that truly work at scale.

Consider Aravind Eye Hospitals. The organization was founded in 1976 by Govindappa Venkataswamy (Dr. V), an Indian physician who set out to eliminate preventable cataract-caused blindness among the 48 million residents of the state of Tamil Nadu. Initially financed by the "philanthropy" of Dr. V and his family (he mortgaged his home for start-up funds), Aravind developed an ultra-efficient surgical process and paired it with a business model based on a variable fee structure. Together these allowed Aravind to treat hundreds of thousands of poor patients at little or no charge by attracting enough paying patients to cover the costs for the poor. Now serving some 250,000 people a year—with quality equal to or better than the British National Health System's, and at one one-thousandth of the cost—Aravind has propelled a dramatic drop in the rate of blindness throughout Tamil Nadu and has expanded to serve and share its model in other regions as well.

Consider also the lifesaving technique known as CPR, which achieved widespread adoption in the United States thanks to its "product" innovation. The leaders of the movement relied on significant simplification of the technique—work funded largely by research and local philanthropic grants—so that almost any layperson could remember and perform it. This enabled it to be picked up and broadly disseminated through massive existing distribution channels. Beginning in 1975, the American Red Cross incorporated CPR into its network of first aid, workplace safety, and lifeguarding courses; the American Heart Association soon followed. Today more than 18 million Americans, including many high school students taking health classes, are trained in CPR every year, and the procedure is administered to almost 50% of people who experience cardiac arrest outside a hospital, doubling or tripling their chances of survival when performed within the first few minutes.

Finally, in a David-versus-Goliath triumph, a group of migrant farmworkers in Florida—who pick almost

all the winter tomatoes in the United States—hit upon a scalable model and leverage point to gain humane working conditions and a 70% increase in wages. This wasn't simple or quick; it required years of trial and error. For decades the workers had endured wage theft, verbal and physical abuse, racial discrimination, and sexual harassment in the course of punishing 70- to 80-hour workweeks—and for earnings amounting to just \$10,000 or so a year. In 1996, when a worker was badly beaten by his crew leader for asking to take a water break, the community had had enough. A group called the Coalition of Immokalee Workers (CIW) responded for years with protests, hunger strikes, and a 234-mile march along a major highway to try to pressure farmers into improving conditions.

These actions had little effect. But CIW, aided by modest local philanthropy, a few faith-based funders, and the Public Welfare Foundation, continued to experiment until it found a strategy with the potential to affect the problem at scale: applying grassroots pressure to consumer-facing bulk purchasers of tomatoes, such as fast-food restaurants. These companies were much more vulnerable than growers to pressure tactics, because their clientele was the public. With the support of other grassroots networks, including the Student/Farmworker Alliance and Interfaith Action, CIW launched a series of fast-food boycotts, starting with Taco Bell.

From 2002 to 2005, CIW and allies at 22 universities and high schools nationwide ended sponsorships and removed or blocked the opening of Taco Bell restaurants on their campuses. They launched campaigns in dozens of other communities as well. The pressure tactics worked: Taco Bell's parent company, Yum! Brands, agreed to pay growers an additional penny per pound of tomatoes to go directly to workers' wages; it also agreed to require that its growers adhere to humane working standards and allow monitoring by an independent nonprofit entity. With increasing philanthropic support from national funders such as the Kresge, Kellogg, and Ford foundations, CIW extended the boycott to other companies, and over the next few years it won the support of McDonald's, Subway, Burger King, and Whole Foods, along with food service providers Bon Appétit, Compass, Aramark, and Sodexo. In 2010 the growers agreed to raise wages and improve working conditions. The reforms have since been adopted by growers as far away as New Jersey and agreed to by chains including Walmart, Stop & Shop, Giant, and Trader Joe's. The movement's success has been celebrated by the White House and the United Nations.

The best funders understand that effectiveness and scalability must be equals. Rather than incrementally

#### FURTHER READING

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John C. Camillus  
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# THE BEST DONORS UNDERSTAND THAT EFFECTIVENESS AND SCALABILITY MUST BE EQUALS.

growing a small-scale strategy or solution, a donor may get more bang for the buck by patiently supporting grantees in rigorous R&D and testing until they discover an approach that works at scale.

## DRIVE (RATHER THAN ASSUME) DEMAND

Even if you build it, they may not come. The philanthropists behind our successful case studies realized this. So they invested in solutions that users and partners actually wanted. They funded robust sales and marketing efforts to support their ambitious goals. They supported the creation of new government requirements or regulations. And they ensured strong distribution networks that helped drive uptake by providing easy access.

Consider the effort to reduce traffic fatalities in Vietnam by encouraging the use of motorcycle helmets—a campaign funded in large part by Chuck Feeney’s Atlantic Philanthropies. One of Atlantic’s first grants of the campaign went to the Asian Injury Prevention Foundation, in 2000. Although motorcycle helmets had been around for a long time, AIPF’s founder, Greig Craft, believed that the inappropriate design of existing helmets for tropical climates contributed to the very low rates of use in Vietnam. Atlantic provided \$1.5 million to help launch a factory to manufacture lightweight, well-ventilated helmets specifically for the tropics. With this new solution in hand and a shared understanding of the problem thanks to philanthropically funded research and cross-sector working groups, Vietnam’s National Assembly drafted a new law mandating helmet use. Before the law took effect, AIPF helped mobilize funders to back a huge advertising push that used TV, billboards, sides of buses, and other channels to help educate and change behavior among the public. The campaign, which was based on best practices from other parts of the world, achieved a breakthrough relatively quickly: According to the World Health Organization, rates of use jumped almost immediately after the helmet law took effect, in 2007, from less than 30% to roughly 95%, and have stayed relatively constant since.

Significant investments in demand generation also contributed to the scaling of a simple, affordable intervention that has saved millions of lives in Bangladesh. As recently as the 1980s, dehydration from diarrheal diseases caused 20% of the deaths of children under the age of five, killing hundreds of thousands of children each year. That was despite the availability of a cheap and highly effective oral-rehydration solution consisting of nothing more than a precise mixture of sugar, salt, and water, developed more than a decade earlier by researchers in Dhaka. The government had

distributed packets of the solution to its clinics across the country, but most sat on the shelf, unused. The problem was twofold: The solution was not in keeping with long-held cultural beliefs about treatment, and government clinics were rarely used in rural areas—more than 80% of Bangladeshi mothers relied instead on traditional healers, village health volunteers, and other informal providers for their health needs.

Two major donor-funded efforts helped turn things around. Starting in 1980, several aid agencies and international NGOs invested more than \$22 million (in 2016 dollars) in a 10-year education campaign run by the Bangladesh-based NGO BRAC. The campaign trained thousands of local women to mix the solution and sent them door-to-door to teach more than 12 million households about the lifesaving treatment. And in 1983, USAID began a multimillion-dollar funding of the Social Marketing Company, a local social enterprise incubated by Population Services International, to mass-produce, market, and sell the packets. To meet the distribution challenge and further drive demand, SMC built connections with the thousands of unlicensed health-care providers who served most Bangladeshi families. It also secured partnerships with private distributors, who by 2007 had brought the packets to 91% of the country’s pharmacies and 32% of its grocery stores. Today the solution is used by 80% of Bangladeshi households, and children’s deaths from diarrheal diseases have plummeted by 90%.

Finally, let’s look at *Sesame Street*. In the late 1960s, the Carnegie Corporation’s vice president, Lloyd Morrisett, commissioned television producer Joan Ganz Cooney to explore the then-revolutionary concept of early learning for children via television. The two collaborated on an ambitious budget for the initial season: roughly \$55 million (in 2016 dollars). Cooney advocated investing in strong design, including hiring a leading children’s entertainment producer—thus

# FUNDERS MUST CREATE THE SPACE TO LEARN, ADJUST, AND EVEN FAIL.

boosting the odds that the show would resonate with its target beneficiaries. She pushed for ongoing research to test how well the program captured children's attention and improved their learning. And a significant share of the budget—8%—was earmarked for publicity and outreach.

Morrisett secured a \$7 million contribution from Carnegie and raised the rest from other philanthropies and the government. *Sesame Street* succeeded spectacularly. In its first week, more than 1.5 million children tuned in—twice the number of children attending preschool. Within a year the program was reaching 36% of all preschool-aged children; by 1993 the figure was 77%. Today *Sesame Street* is viewed by more than 156 million children around the world, and numerous studies have demonstrated that it significantly advances early learning, contributing to a rise in similar programming by other broadcasters.

## EMBRACE COURSE CORRECTIONS

Every long-haul effort hits roadblocks. To achieve winnable milestones over decades, funders need to support their grantees' capacity to continuously improve. Experienced funders recognize that challenges may differ by context (urban versus rural versus last mile) and population segment (early adopters versus laggards) and that social-impact organizations need to experiment, measure, and adapt as those factors change. But only a handful of philanthropists today invest deeply in creating the space and infrastructure for grantees to learn, adjust, and at times fail. Patience is limited, and what little money is earmarked for measurement and evaluation too often prioritizes accountability and attribution of credit rather than learning for continuous improvement.


Course corrections were important in all the stories above. Recall the numerous setbacks suffered by the marriage equality movement; because donors were patient, it could learn from those setbacks and ultimately discover a winning strategy. Philanthropy played a smaller but still critical role in the course correction of another initiative: the National School Lunch


Program. The concept of school lunches for poor children had been around since the early 1900s, and the federal government had subsidized them since the Depression. Many saw the effort as a great success. But the Field Foundation of New York continued to invest in research into the issue, and in 1968 two reports illuminated the depths of hunger that still existed and the terrible gaps in the program's coverage, galvanizing the public, Congress, and the president to renew their focus. Over the next two years the government amended the program. Among other things, it established federal guidelines for eligibility (rather than leaving that to local school districts), shifted the emphasis toward helping the needy rather than subsidizing lunch for all students, and increased funding. By 2012, some 31 million children a day—more than half of all public school students—were receiving free or reduced-price meals. Although issues of access have not been fully resolved—advocates are continuing to work on destigmatizing delivery and increasing adoption by children themselves—the improvements have been dramatic.

For the types of social challenges targeted by audacious philanthropists and other change makers, adaptation informed by robust measurement is key. To fuel progress, funders need to make sure that both their attitudes and their funding reflect that reality.

## THE PAST AS PROLOGUE

What can today's most ambitious philanthropists learn from those who helped solve big, important problems in the past? At the highest level, the successful strategies we uncovered ran counter to prevailing funding practices. They included decades-long persistence, even when the pace of change felt slow; financial support for collaboration among key actors, even when it meant giving up some control; engagement with governments to influence funding and action, even in uncertain times; and big philanthropic bets that shifted power from the donor to the doers and beneficiaries.

The issues most deserving of investment today are different from those of past decades; what remains constant is the need for shared and dynamic problem definition, clear and winnable milestones, solutions built for scale, robust investments to drive and serve demand, and adaptive capacity among philanthropists and grantees alike. Understanding and acting on these elements can help funders achieve the audacious successes they seek.  **HBR Reprint R1705J**

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