Hedwig van Ameringen

EXECUTIVE LEADERSHIP IN ACADEMIC MEDICINE

Program for Women

Transformational Philanthropy

2005 Forum on Emerging Issues
April 20-21, 2005

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Acknowledgments

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ELAM would like to thank the **University of Texas M.D. Anderson Cancer Center** for its partnership in sponsoring the 2005 Forum on Emerging Issues.

We would like to extend our sincere thanks to **John Mendelsohn, M.D.**, President and **Margaret L. Kripke, Ph.D.**, Executive Vice President and Chief Academic Officer for their efforts in bringing our institutions together.

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ELAM Overview

Founded in 1995, ELAM is the only in-depth national program that focuses on preparing senior women faculty at academic health centers (AHCs) to move into positions of institutional leadership. ELAM is a core program of the Institute for Women’s Health and Leadership (IWHL) at Drexel University College of Medicine. Together, ELAM and the IWHL continue the long legacy of advancing women in medicine that began in 1850 with the founding of the Female Medical College of Pennsylvania. FMCP, the nation’s first women’s medical school, is a predecessor of today’s Drexel College of Medicine.

ELAM’s year-long fellowship program mixes traditional executive seminars and workshops on topics pertinent to AHC management with group and individual projects aimed at developing personal leadership. Throughout the year, there are opportunities to meet with nationally recognized leaders in academic medicine, healthcare, government and industry and to interact with peers from different disciplines and institutions. The program year culminates in a 1½ day Forum, when the Fellows, their Deans, and other invited guests gather with top experts to explore a new methodology or strategy for addressing a timely issue facing AHC leadership.

Recognition of ELAM’s importance and the leadership potential of its graduates is evidenced in the following statistics: nearly 90% of U.S. medical schools and 50% of U.S. dental schools have sponsored ELAM Fellows. ELAM participants now hold senior posts (Department Chair or higher) at close to 100 U.S. academic institutions, including 10 deanships.

ELAM Recognition and Support

ELAM has been honored in every facet of its work. In higher education, it has received the American Council on Education’s Office of Women in Higher Education Network Leadership Award; in medicine, the Association of American Medical Colleges’ Women in Medicine Leadership Development Award; and in dentistry, the Dr. Edward B. Shils Entrepreneurial Education Fund Award.

ELAM is supported by program fees, grants, gifts, and in-kind contributions from individual donors, ELAM classes, foundations, and corporations. Individual funding partners include Patricia Kind and her late mother, Mrs. Hedwig Pfaltz van Ameringen, in whose memory the program was named and has been permanently endowed; also ELAM alumnae Suanne Daves, M.D., Nancy Hardt, M.D., Kristine Lohr, M.D., and Sarah Morgan, M.D. Institutional partners include the Jessie Ball duPont Fund; the Connelly Foundation; the Josiah Macy, Jr. Foundation; the University of Michigan Medical School; the University of Utah School of Medicine; the University of Texas Medical Branch-Galveston; the University of Texas M.D. Anderson Cancer Center; the WMC/MCP Alumnae/i Association; Colgate Palmolive Co.; Korn/Ferry International; Witt/Kieffer; PricewaterhouseCoopers LLP; and Wyeth Pharmaceuticals.

ELAM also receives contributions from the ELAM Alliance, a consortium of independent consultants working in academic medicine and higher education committed to the advancement and success of women in leadership positions, and from the Society for Executive Leadership in Academic Medicine (SELAM International), the organization founded in 1998 by ELAM alumnae.
The ELAM Program’s Forum on Emerging Issues

The Forum on Emerging Issues is the capstone event of the ELAM spring session, when Fellows are joined by senior delegates from their home institutions, most often the Deans, along with invited guests (see Appendix for list of this year’s participants). Each year, the ELAM Forum explores an innovative concept or methodology that has direct application to leading and managing an academic health center. The Forum’s interactive format enables participants to explore potential applications of the new concept in a collegial and creative environment.

The 2005 Forum, “Transformational Philanthropy” led by national fundraising expert Karen Osborne, explored how institutions can attract the investments they need to “transform” their organizations.

**Past Forum Topics:**

“Diagnosing and Overturning the Immunity to Change: Personal Learning and Professional Development” (2004). Led by Robert Kegan, Ph.D., Meehan Professor of Adult Learning and Professional Development at Harvard University’s Graduate School of Education. Sponsored by the University of Texas Medical Branch at Galveston.


“Building the Leadership Engine for Academic Health Centers” (2002). Led by Noel M. Tichy, Ph.D., Professor and Director, Global Leadership Program, The University of Michigan Business School. Sponsored by the University of Michigan’s Medical School, School of Dentistry, and Office of the Provost.


“Exploring Complex AHC Systems with Computer Simulation” (1999). Customized simulation software enabled participants to explore the impact of implementing various management decisions on complex systems such as AHCs. Led by Bruce Gresh, Ph.D. Sponsored by the Colgate-Palmolive Company.

Philanthropy can transform an institution. Investments in your students, your teaching, research and practice can help you achieve important goals and realize a compelling vision for the future. Over the course of one and half days, we explored success factors for this kind of transformational philanthropy.

Philanthropy Today

Investments of over $240 billion in 2003 allowed over one million not-for-profits to achieve their dreams. Eighty-three point five percent of the contributions made came from individuals and 74.5% from living individuals. Health care enjoyed an 8.2% increase from the previous year for a record $21 billion.

That is the backdrop. Americans are uniquely philanthropic, most of the philanthropy comes from individuals rather than corporations (5% on average) or foundations (10% on average) and health is often the third largest sector in terms of receiving gifts. Religion is the largest with education following.

Community based medical schools receive a relatively small portion of their revenue from philanthropy (2%). Research based medical schools receive a larger portion (6%). For both types of institutions, there is an opportunity for growth.

In today’s philanthropic marketplace the best return on investment is from major gift fundraising. In a recent study by The Advisory Board, located in Washington, DC, the highest performing hospitals in terms of philanthropy received an 8.1% return on investment for major gift fundraising compared to 4.4% for annual giving and 2.9% for special event fundraising. This makes sense in light of another study completed by The Institute for Charitable Giving, Chicago, IL. They found in a study of 23 institutions in campaigns of $100,000,000 or more that 95% of the money given came from 1.7% of the donors.

The implications for this are clear:

- Focus on major gifts
- Identify the critical few
- Broaden the donor base

Other important trends include:

- Donors have more choices (1.3 million not for profits and the number continues to grow)
- Donors are more selective
- Donors are more sophisticated
Emerging Markets: Minorities and Women

According to Target America, a wealth-screening firm:

- Minority owned businesses make up 15% of the nation’s non-farm business
- Generate $591 billion
- Asian owned firms average $336,000
- $195,000 norm for minority businesses
- 38% of African American firms owned by women

African Americans actually give larger average gifts ($1,204) than white Americans ($1,072). Again, this is an opportunity. Nine out of every 10 dollars from blacks goes to the church. This is the challenge. Asian Americans average $796 annually and Hispanics average $538.

Women provide another opportunity:

- Women’s charitable giving rose by more than 20% in 2003
- 54% of business women make their own philanthropic decisions
- Women control 60% of wealth in America
- In the next eight years, this will increase to 70%
- Nearly half the Americans with assets of $500,000 or more are women
The Power of Big Ideas, Accountability and Stewardship

Donor motivation has also experienced a sea change. For years research confirmed that, people give major gifts for the following reasons:

- They believe in your mission and share your values
- They are grateful for care, education, service they received
- They believe in their community and want to improve it
- They trust the institution; that it is fiscally responsible
- They trust the leadership of the institution
- They are engaged in a meaningful and satisfying way
- Someone asked them!

People give big gifts to big ideas, shared values and because someone came to see them, engage them and ask them. The article that accompanies this summation speaks directly to this point. Big ideas beget big investments.

However, a study completed in 2003 revealed an increased interest in accountability. Consider the following chart. On a scale of 1 to 10, with 10 being the most important, individuals rated what mattered when considering giving.

<table>
<thead>
<tr>
<th>Reason</th>
<th>Score</th>
</tr>
</thead>
<tbody>
<tr>
<td>How org spends</td>
<td>7.1</td>
</tr>
<tr>
<td>Mission</td>
<td>7.1</td>
</tr>
<tr>
<td>Community</td>
<td>6.5</td>
</tr>
<tr>
<td>Details on my gift</td>
<td>6.5</td>
</tr>
<tr>
<td>Statement on uses</td>
<td>6.4</td>
</tr>
<tr>
<td>Case for support</td>
<td>6.1</td>
</tr>
<tr>
<td>Stats on how many people helped</td>
<td>5.4</td>
</tr>
<tr>
<td>Stories</td>
<td>5.4</td>
</tr>
<tr>
<td>Info on how to help in addition to money</td>
<td>5.3</td>
</tr>
<tr>
<td>Progress over past year</td>
<td>4.9</td>
</tr>
<tr>
<td>Receiving thank you gifts</td>
<td>2.7</td>
</tr>
</tbody>
</table>

Notice that six of the 11 reasons have to do with accountability. Providing stewardship for more than endowed gifts is critical and deans and faculty play a huge role in this endeavor. Six months, 12 months, 18 months, 24 months after a donor has given and after the thank you notes, hearing about the impact a gift has had, and is continuing to have is essential.
Finding those prospective donors – individuals, corporations, foundations – who can make six, seven, eight figure gifts or more, is everyone’s responsibility.

Grateful patients with this kind of giving capacity sometimes feel off-limits to physicians. The physicians and dentists are concerned that fundraising is either unethical or will negatively change the relationship with the patient or both. In fact, one can refer a patient to the development office without mentioning that he or she is a patient. HIPPA lists a variety of ethical practices including:

- Physician initiation
- Patient initiation
- Referral by employed physician
- Referral by volunteer physician
- Can refer without mentioning person is a patient
- Signed patient releases
- Past donors

For more information, contact your development office.
Asking Great Questions and Listening

Do you know me? Potential donors tend to give significant gifts to leaders who know them, understand their philanthropic motivations and values. Investments follow understanding and appreciation.

That means we must questions and listen to the answers.

According to social scientists, people remember more of what they say than what you say. Think about it. In fact, they believe more of what they say than what we say unless we are discussing an area of expertise. Finally, people enjoy conversations in which they spoke the most.

The implications are clear. We must get our potential donors to tell us why our institutions are so important and what the impact of our work could be, has been and should be.

That too requires asking questions and listening to the answers. Seventy percent of the time, we should listen; 30% of the time, we should ask questions, share our story and engage in give and take conversation. Are you a talker?

- “What are your impressions of our vision for the future?”
- “What impact do you believe it will have on health care?”
- “How has your education at our school impacted your life?”
- “As you think about your philanthropy, what factors go into your decisions?”
- “In my home, my spouse and I make our philanthropic decisions together. How does it work in your home?”
- “Where on your list of philanthropies is the university?”

Probing

We seldom get the full story without asking following up questions.

- “Can you say more about that?”
- “How so?”

Open Ended Questions

You want to pose your questions in such a manner that you will elicit the most information. So ask it in a way that does not call for a yes or no response. Ask about values, attitudes, impact and consequences. Good questions require thinking before answering; so don’t be afraid of silences. The other person is thinking and that helps create true relationships.
The Donor Puzzle©

What we are trying to uncover are the components of The Donor Puzzle© for this individual prospective donor.

- Philanthropic motivation and values
- Knowledge of the institution and medical school
- Philanthropic decision makers
- Natural partners are those individuals who know the school and prospective donor well. They can often provide insights about the prospective donor or introduce others to the donor. Often faculty members and physicians are natural partners.
- Issues are those potential objections to a major gift. Uncovering issues prior to solicitation gives you an opportunity to take care of them early on.

Involvement, contribution and stewardship preferences are as important as knowing how much to request, when and for what purposes.

*We use the above information to construct a donor plan or strategy that includes steps or “moves” that increase explicit motivation to give and decrease explicit potential objections to giving.*

The result of that strategy is answers to all of “The Rights.”

**“The Rights”**

- The Right **Gift Purpose and Impact**
- The Right **Request Amount**
- The Right **Solicitors**
- The Right **Time** – when the donor is ready to say yes joyfully
- The Right **Place**
- The Right **Materials** to bring on the solicitation
- The Right **Participants** – who on the institution’s side should attend, whom among the donor decision makers should attend

It is easier to get a slower “yes” than to overcome a fast “no.”
How to Never Get a “No”

The goal is to never, ever get a “No.” It is easier to get a slower, “Yes,” than to overcome a fast, “No.”

As you engage a donor, you are seeking a yes first to the institution and the school. Perhaps when you started, the school was number 12 on the prospective donor’s list of philanthropies. Where is it now? You want to ask, check if we are actually making progress and moving the donor closer to a yes. Next, you want a yes to the leadership because that is important to donors. “The Dean greatly respects your opinions and has enjoyed her conversations with you. I hope you feel the same” Pause. Let it stand until the donor speaks. Do not jump in. Silence elicits answers just like a direct question. You are seeking a yes to leadership. Next, you want a yes to the purpose and impact. The goal is to have the potential donor say, “I want to make that happen.”

With an affirmative response to each, and clarity about the financial scope of the project or the leadership role the potential donor can play, you are ready for a solicitation visit.

Picture an upside down triangle with the point of the triangle representing the point of the conversation – “I would like you to consider a gift of (specific amount).”

Starting at the broad top, you want to confirm the “yes” to the institution and school.

- **You:** “When we last met, I was struck by your positive comments about the university and medical school. I remember you said that last year we were low on your list of philanthropies. It feels like we are high on that list now. Am I correct?”

- **The Prospective Donor:** “Yes, you are. Back then, I had no idea how much you are accomplishing in cardiovascular health. Your vision for stopping heart disease in women within our lifetime and reducing it substantially every year truly resonates.”

You have your first yes. Move down the triangle.

- **You:** “The Dean and I are so pleased to hear that. Her vision is one that everyone on the faculty embraces. Her leadership convinces us, and I hope convinces you, that we can make this happen.” Pause

- **The Prospective Donor:** “Yes, she is an amazing leader. I believe she will get this done.”

You have your second yes. Move down the triangle.

- **You:** “Faculty support (the new building) (the Dean’s Priority Fund) is key to the success of this vision. Have I answered all of your questions concerning this?”

- The Prospective Donor: “Yes, I see how without faculty support (the new building) (the Dean’s Fund) this will not happen. It is critical.”

The potential donor is ready for the question and you are at the point of the conversation.

- **You:** “That is why, we would like you to consider a philanthropic investment of ($specific amount).”

- **Silence Please.** Wait. Let the donor speak next. She is thinking.
Overcoming Objections

Techniques for Overcoming Objections

- Listen, clarify, seek understanding
- Empathize – let the prospective donor know that you understand
- Respond
- Probe before responding or offering solutions
- Restate the objection
- Reconfirm belief in mission, vision, shared values
- Work your way down the pyramid again
- Together, invent options for mutual gain
- Involve the donor in inventing those options
  “How can we make this happen?”

A Wise Agreement

- Improves relationships
- Meets the legitimate interests of each party (the donor and your institution)
- Is fair
- And durable

When the donor is considering:

- Find out what factors will go into his or her decision
  “As you consider our request, what factors will go into your decision?”

- Set a definite follow-up plan
  “May I call in a few days to find out where you are in your decision making process? Would Thursday work for you?”

- Thank for considering (state the purpose again and amount)
  “Thank you for considering how you might help us stop heart disease in women by investing in our faculty and students with a gift of $250,000.”

- Follow-up – do what you said you would do!

Remember, helping you help others is a noble thing. Asking others to help you, help others is equally noble.

Seeking and giving a philanthropic investment is a JOYFUL experience!
Appendix

A. List of 2005 Forum Participants…………………………Page 14
   * Titles & Institutions correct as of 2005

B. Faculty Bio………………………………………………Page 20
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Nationally and internationally recognized as a leading expert in all aspects of institutional advancement and as an excellent presenter and workshop leader, Karen has taught a wide variety of fund raising, management and marketing topics at hundreds of conferences and private sessions. CASE awarded Karen the Steuben Crystal Apple for Outstanding Teaching and Public Speaking. She receives invitations from all over the United States and the world including Australia, South Africa, Europe and Canada, to make presentations and consult with independent schools, colleges, universities, health organizations and not-for-profits.

Often quoted in authoritative articles, Karen has also published articles and book chapters. She has conducted interactive distance learning workshops via live television and video and audio conferencing.

As an advancement officer, Karen served as Vice President for Advancement at Trinity College in Hartford, CT bringing them from $5,000,000 a year to $13,000,000 in three years and leading their $100,000,000 comprehensive campaign. Prior to that Karen worked at RPI in Troy, NY leading their successful $200,000,000 campaign. For the past eight years, Karen has headed her own training, consulting and management company.

Her current clients include: National Academies, DC; Teachers College Columbia, NY; William Paterson University, NJ; Fairleigh Dickinson University, NJ; Nazareth College, NY; Xavier University, LA; Hotchkiss School, CT; Westminster School, CT; Wildlife Conservation Society, NY; National Big Brother Big Sisters of America; Equal Justice Works, DC; National Easter Seals, IL; The Oakwood Health System, MI; NSPCC in the United Kingdom; and Kids in Distress, FL.

Major Gifts OnLine, an international, state-of-the-art, distance-learning fund development training school, is Karen’s latest training venture. She has also made two major gift training videos and two audio training programs. If you would like to learn more about Karen, her company The Osborne Group, Inc. or Major Gifts OnLine, visit her website at www.theosbornegroup.com
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