

# Philanthropy's causal: discovering how philanthropy strategy and learning can be informed through causal approaches

Case study from The Rockefeller Foundation

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## Who are we?



Shawna Hoffman
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The Rockefeller Foundation



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## Today's run-of-show

- 1. Context and program overview
- 2. Our journey into causal pathways
- 3. What did we learn?
- 4. Reflections & Discussion: So What? What's next?



## **About The Rockefeller Foundation**

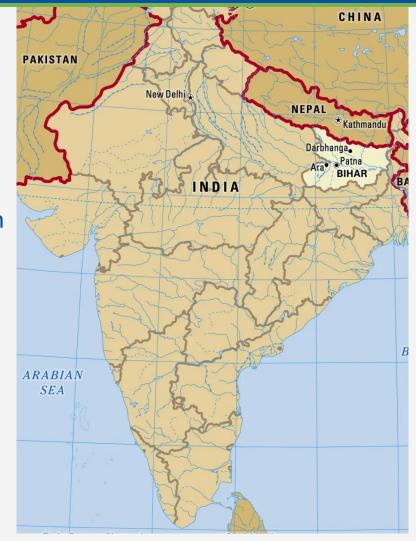
- 110 years old, HQ in NYC, with offices in Bangkok, Bellagio, Nairobi, and Washington DC
- Recent shift to focus on climate, at the intersection of energy, food, health and finance systems
- Long-standing portfolio in the energy space



## **Context and Program Overview**

## Program

- "Energy Service Framework" (ESF) program, launched 2019
- Goal: improve utility health through billing, metering and collections, which in turn would get reinvested, improving quality and scaling access





## **ESF and Causality**

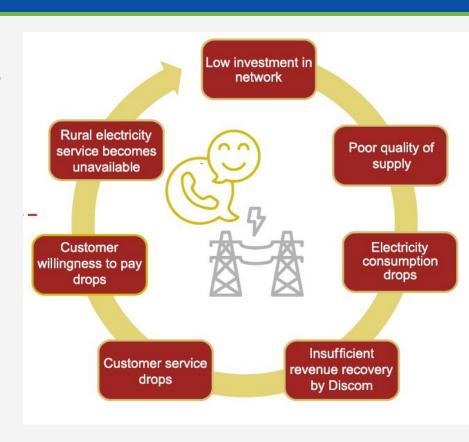
 Two years into the program (2021): lots of promising results. But questions about how / what is driving outcomes

Entry point into this journey was NOT an explicit plan to investigate causality. But we had important Qs, which led us there.



## **ESF** "theories of change"

 What did we have that loosely spoke to causality?



## **ESF** "theories of change"

### **Problem Definition and SPI's Approach**

RRF to eRRF | Enhance the RRF model from a 'collection franchisee contract' to a 'customer service contract'

Objective

Improve the RRF effectiveness and enable improved metering, billing & collection for the Discoms Result

Better customer experience & payment behaviour

Improve viability of rural customers leading to Discom enhancing service delivery in rural areas

#### **Tactics**

- Improve RRF scheme design and expand the scope to include customer servicing (eRRFs)
- Training & capacity building of the RRFs and Discom staff
- Customer awareness programme & standardized communication toolkit
- Technology intervention

   e.g. customer
   interface, monitoring
   dashboard for Discom

   field staff

Low investment in network city Poor quality of mes supply Electricity consumption drops Insufficient omer service revenue recovery drops by Discom



**eRRF** 

## So, what did we do?

**1. Take stock of pathways** through which HH-level impacts could be realized

What are the possible pathways through which a BMC intervention can "impact" people/households? What are we assuming?



## So, what did we do?

- **1. Take stock of pathways** through which HH-level impacts could be realized
- 2. Tested the validity of those pathways through lit review



## So, what did we do?

- **1. Take stock of pathways** through which HH-level impacts could be realized
- 2. Tested the validity of those pathways through lit review
- Used participatory approaches to interrogate causal relationships and strengthen our understanding



## What were the results? Why did causality matter?

- Understanding the HOW
- Understanding unintended consequences
- Understanding where our assumptions weren't holding up



## Reflections

So what: What value did this bring?

Now what: Where do we go from here?





## **THANK YOU!**