Advancing a Bold Campaign to Promote Health Access for All Californians

January 2017
Acknowledgements

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Harder+Company Community Research works with public- and social-sector organizations across the United States to assess their impact and sharpen their strategies to advance social change. Harder+Company supports the Endowment’s learning and evaluation goals by synthesizing data and surfacing key insights for Affordable Care Act-related investments.

Cover photo obtained from The California Endowment’s Facebook page.
Introduction & Background

The #Health4All campaign uses communications and advocacy support to make California’s health care system inclusive of all Californians, including undocumented residents, over a million of whom remain uninsured after the passage of the Affordable Care Act (ACA). Built on the premise that our health care system works best when no one is excluded, The California Endowment (hereafter, the Endowment) launched #Health4All to find statewide and local solutions so that all Californians have access to affordable, quality health coverage.

#Health4All works at multiple levels: locally in neighborhoods, cities and counties, including Building Healthy Communities (BHC) sites; regionally (i.e., cross-county); and statewide. This investment has four focus areas, as outlined below.

#Health4All Focus Areas

Organizing
Grants to support capacity building for grassroots organizations, advocates and other key partners to organize, engage, educate and mobilize various constituency groups.

Communications
Reframing how access to health care for the undocumented is discussed through carefully crafted messages about the social and economic contributions of undocumented Californians, disseminated via a communications platform.

Issue Analysis and Research
Educating communities and key influencers about the contributions of undocumented Californians and their health care needs through issue analysis and research.

Partnerships
Cultivating new partnerships and strengthening the networks and coalitions of partners committed to changing the narrative and engaging in advocacy on behalf of undocumented Californians.
The Report

This report provides preliminary findings about successes and challenges from the first two years of the Endowment’s #Health4All campaign and draws upon multiple data sources to answer the following questions:

- What progress did the #Health4All campaign make in changing systems and policies that increase access to health care for undocumented Californians?

- In what ways did The California Endowment contribute to the progress achieved by the #Health4All campaign?

- How are #Health4All partners and other entities working together to “change the narrative” about undocumented Californians?

The report is organized into six sections:

1. **Situating #Health4All** provides an overview of the major changes that have occurred in local safety-net programs over the last three years;

2. **Distinguishing Contributions** addresses how the Endowment’s investment and partnership strategies provide significant value to #Health4All. This section describes the nature of the partnerships the Endowment cultivates with grantees, its communications and messaging support, and its role cultivating and supporting a network of local and statewide partners;

3. **Spotlight on California’s Policy Landscape** discusses the way in which a favorable policy environment has impacted the efforts to expand health care coverage and health care access;

4. **Notable Achievements** focuses on outcomes and results of the Endowment’s efforts by demonstrating how #Health4All helped shape and “change the narrative,” provided tools and resources to a unique network of health and immigrant rights groups, and both contributed to and took advantage of a favorable statewide policy window;

5. **Spotlight on Perspectives of the Private and Philanthropic Sectors** shares emerging themes from the philanthropic and private sectors in select counties; and,

6. **Moving Forward** identifies potential areas of action to inform mid-course adaptations and decision-making as #Health4All enters its third year of implementation.

While this report was being finalized, Donald Trump was elected President of the United States. Based on President-elect Trump’s campaign promises and Congressional Republicans’ repeated attempts to repeal the Affordable Care Act (ACA) since it passed in 2010, many experts predict officials to pursue health policy changes* (e.g., elimination of subsidies to purchase insurance, elimination of programs to provide Medicaid coverage to those in poverty) that could increase the number of uninsured Americans. In the short-term, stakeholder groups with a vested interest in expanding health access to all Californians should expect uncertainty about the durability of the ACA given President-elect Trump’s public commitment to a full repeal of the legislation. The California Endowment is now engaged in a post-election strategy to preserve the gains made to increase health care access across the state, and is working with other funders and partners to make investments necessary to promote health and wellbeing for all Californians.


Spotlight sections provide an opportunity to further situate the work of #Health4All and to highlight emerging findings from sectors not previously engaged.
Evaluation Approach and Methods

The evaluation employs a developmental approach and is designed to promote real-time learning and reflection. This evaluation draws on three primary data sources to address the research questions:

- In-depth interviews with 24 Endowment staff, funded partners, and business and other key thought leaders
- Robust curation from secondary data sources, including county safety net programs, public polling data, and estimates about the number of undocumented residents without health care coverage
- Current literature in the field about theories to inform advocacy and policy change efforts

This mixed methods design allows for a deeper understanding of the impact of #Health4All’s efforts within the broader context of California’s policy landscape.
Situating #Health4All

The Endowment’s #Health4All campaign is part of a broader movement that seeks to expand access to health care for all Californians. Many of those efforts have involved policy advocacy at the local level. As a result, over the past three years—from 2013 to 2016—the number of California counties providing at least some non-emergency health care to undocumented immigrants grew from 11 to 47 (Exhibit 1 and Exhibit 2). While many of these county initiatives have limitations, such as capped benefits and finite timelines, the overall development in the state landscape is noteworthy.

Exhibit 1. Total Counties with Safety-Net Programs by Year

<table>
<thead>
<tr>
<th>Counties with Safety-Net Programs</th>
</tr>
</thead>
<tbody>
<tr>
<td>2016</td>
</tr>
<tr>
<td>2013</td>
</tr>
<tr>
<td>All CA Counties</td>
</tr>
</tbody>
</table>

Exhibit 2. Changes in Safety-Net Service Access by County, 2013-16

1 Provides at least some non-emergency healthcare service

A number of factors contributed to the increase of non-emergency healthcare access in this three year period. First, overall improvements in the state’s fiscal outlook made it more feasible to expand healthcare access expansion. Second, the implementation of the Affordable Care Act also reduced counties’ financial responsibility to provide safety net services to their residents, with many former service recipients gaining coverage under Medi-Cal or Covered California. A number of counties used these financial opportunities to expand safety net healthcare access to undocumented immigrants. Lastly, the expansion of access across the state is also a result of overall growth in political and social will around providing services to undocumented residents. Over this three year period, community organizers, local public leaders, and advocacy organizations all contributed to raising awareness, harnessing support, and influencing policy change.
Distinguishing Contributions of #Health4All

The Endowment’s contributions to advancing the goal of affordable, quality health coverage for all Californians fall into three key areas:

- **Funding**
- **Robust Communications & Messaging**
- **Network Building**

This section highlights primary findings from staff, grantees, and external stakeholders as to the Endowment’s contributions in the first two years of #Health4All implementation. In an effort to highlight aspects of the Endowment’s efforts that may benefit from reflection, this section also offers points for consideration that may have implications for the work moving forward.

**Funding**

The Endowment’s relationship with grantees extends beyond the traditional funder/grantee relationship.

The Endowment has established long-term, open relationships with its grantees, which allows grantees to serve as strategic thought partners. This bi-directional relationship allows the Endowment to utilize grantee expertise to inform its own strategic decision making. In turn, grantees feel supported and respected and appreciate the Endowment’s sensitivity to their perspectives and strategic insight. As described by one grantee: “[the Endowment is] a strategic partner... we are constantly talking with them, working with them, strategizing with them in many ways. It goes beyond a traditional funder-grantee relationship...They ask our opinion about what’s going on in the [political] landscape.”

While most grantees and partners interviewed appreciated the type of relationship they have with the Endowment, a few shared that they would like to develop a stronger relationship that would allow them to serve as a thought partner when the Endowment is developing content for their media and communications campaign. One grantee explained, “It seems like we could be doing more work with them on developing content. They have run things by us to make sure it’s accurate more recently, which is great. [But I’d like to feel] like we are more engaged in the [communications] work with them.”

The nature and longevity of the Endowment’s grantmaking strategy demonstrates its long-term commitment to the issues it supports.

By providing funding opportunities that account for the amount of time required to work toward equitable access to health care, the Endowment provides grantees with the latitude to focus on their work without being hindered by restrictive and unrealistic timelines. This is particularly true for research and community-based organizations that typically have to regularly apply for grants in order to maintain a steady level of funding to support their work.

“It is...important to be able to have that flexibility and [to have] the peace of mind of knowing that no matter what, [the work] is going to continue and the fund[ing] is going to continue.”

- Grantee
Distinguishing Contributions of #Health4All

The Endowment’s grantmaking strategy also reflects its willingness to fund grantees it believes to be necessary partners in the campaign for health for all, including community-based organizations that solicit and offer community perspectives and voices. As observed by one grantee, “[Often,] a lot of money ends up going to…well-established organizations… [Typically] a lot of the really community-linked organizations often get overlooked [for funding]. [But] I think the Endowment [provides] a lot of good funding [for] that sort of work.”

Robust Communications and Messaging

The Endowment’s contributions in this area include its internal #Health4All communications and media capacity, as well as communications-related funding to grantees. Together, these elements have fostered a platform that authentically engages individuals in a dialogue about health care access and has allowed the Endowment and its grantees to mobilize grassroots support for health care expansion.

The Endowment’s #Health4All campaign has helped change the narrative about undocumented Californians.

By designing a hashtag campaign, #Health4All has been able to include the voices of those directly impacted by issues related to residency status and health care, and has created a platform for undocumented individuals to lend their voice to a public discourse about what it means to be an undocumented resident. Through this strong social media movement, individuals have begun to step forward and “come out” as undocumented. These actions have contributed to a dialogue that is working to change the perception of undocumented individuals by bringing a human element to a political issue.

Additionally, the reach of the Endowment’s communications and messaging strategy allows it to situate the issue of undocumented status into outlets that reach a wide audience, such as television. By including the issue of undocumented status into a television show storyline (where a character is fearful of accessing medical services out of fear of deportation), the Endowment not only brought a human element to the issue, but is also helping normalize conversations concerning immigration, residency status, and health.

The Endowment’s influence, funding, and connections to media partners and networks allow it to shape and influence a communications strategy in a manner that many advocacy organizations do not have the resources to achieve. One grantee noted, “They are able to do things like getting an episode of a TV show that addresses the situation for undocumented and uninsured people. I think doing things like that is really a significant factor in achieving cultural change.”

The #Health4All media campaign created a strong visual identity and positive surround sound.

While the Endowment is not involved in lobbying particular pieces of legislation, the #Health4All media campaign has provided positive surround sound around the issue of expanding health care coverage for undocumented residents. By creating a context in which the contributions and lived experiences of undocumented residents are made known, the media campaign is building a favorable backdrop against which necessary conversations about the rights of undocumented residents can take place.

In addition to generating positive surround sound, the Endowment has created a strong visual identity with #Health4All media and outreach materials. These

“The communications of the public advocacy campaign was huge…part of that is normalizing the conversation…and providing a more human perspective on an issue…the Endowment’s campaign was really effective in doing that, in changing the tenor of the conversation.”

-Policy Maker
Distinguishing Contributions of #Health4All

materials, such as billboards and t-shirts, are not only easily recognizable as part of the #Health4All campaign, but also allow for organizations to mobilize constituencies and visually demonstrate support for the issue. One grantee shared his experience with how powerful visual displays of support can be: “…one of the things that has really stood out to me...is when we went into the legislative hearings around the early Senator Lara [sponsored bills] and three-fourths of the people in the room were wearing those black #Health4All t-shirts. That’s something legislators cannot ignore. It’s more effective than getting up for a few minutes and saying ‘me too.’”

While the #Health4All campaign is able to rely on a strong visual identity and media presence to garner and demonstrate support, the message of “health for all” has not been as well-received in more conservative regions and counties of California. Some counties, such as San Diego and Orange, have experienced resistance to adopting an advocacy agenda that focuses on expanding health care to include coverage for undocumented residents. While not all areas of these counties are in opposition to the goal of providing health for all residents (as noted in the Spotlight on Perspectives of the Private and Philanthropic Sectors), a modified or tailored version of the campaign may be more successful in conservative-leaning regions. As one interviewee explained, “In those communities that are more conservative – the #Health4All messaging may not be the right one. In the south we have San Diego, Orange County, Riverside, and they are a lot more conservative when you compare them to LA or Alameda and so the messaging needs to be better nuanced and fit for those particular areas.”

Network Building

It is important to distinguish the Endowment’s #Health4All communications campaign from the political campaign co-led by Health Access and the California Immigrant Policy Center (CIPC). That political campaign, Health for All², is focused on policy development, legislative advocacy, and working to adapt state funding formulas to provide coverage for uninsured residents. While the Endowment’s communications campaign benefits the political campaign, the Endowment’s efforts are distinct from those of Health Access and CIPC. The Endowment, however, has served as a key player in building and supporting a strong network of activists, organizers, local organizations, researchers and policy makers to move forward the goals of #Health4All.

The Health for All campaign includes a unique combination of policy areas and the partners the Endowment funds play a central role in its success.

Interviewees explained that the broader Health for All political campaign encompasses an intersection of several key policy issues and areas including immigration, health policy reform, and access to health care. The Endowment’s financial and human resources allow it to collaborate with and fund the necessary and diverse range of grantees that represent the issue areas at play as well as the range of organizations and institutions required for the success of this campaign (e.g., National Immigration Law Center, Center for the Study of Immigration Integration at University of Southern California, Health Access Foundation). The Endowment serves as a convener and provides organizations that offer support and content expertise in immigration and health-related fields access to both the media and political campaigns focused on expanding access to health care to undocumented residents. One advocate explained that the Endowment is “doing a good job [at convening and funding organizations that can organize/convene] and

² The name Health for All and Health4All are used interchangeably by Health Access and CIPC.

- Stakeholder
Distinguishing Contributions of #Health4All

the number one way that they do that is to fund the groups that can do that coalition work.”

In addition to being multi-faceted, Health for All seeks change at a variety of levels—including legislative, budget, state, and county-level change—as well as shifts in public perception and opinions. This requires partnering with individuals and organizations that are not only able to provide policy and fiscal analysis expertise, but are also effective grassroots organizers. The Endowment leverages its financial and human capital to fund organizations that contribute unique knowledge and skill sets that are necessary for advancing the campaign. The organizations that the Endowment supports, and that legislators may work with, are necessary figures in the Health for All campaign3. One policy maker explained, “The groups that we work closely with... visit members in their district offices and they bring local people from the community. That’s different than me as a staffer going to talk to a staffer in another office... [It’s] effective to an extent, but it’s not the same as meeting local people who are voters... who come in and advocate... the work of those groups, that is supported by the Endowment, is really important.”

While the Endowment is able to fund a diverse range of grantees that represent the various policy areas that are included in the Health For All political campaign, and has convened organizations to promote information and resource sharing, there are currently no formal channels or systems in place that allow for regular information sharing and learning among the various levels of organizations involved with Health For All efforts. These include the Endowment’s grantees, BHC sites, community-based organizations, and community members. By establishing a mechanism for regular information and resource sharing, the Endowment would help ensure that state-level and local-level partners are able to benefit from the unique perspectives and knowledge each partner possesses.

The success of the Health for All Kids Act demonstrates the potential for policy impact when media and communications are combined with grassroots organizing.

The Endowment’s #Health4All communications campaign helped established a network of individuals that were prepared to advocate and mobilize support for the Health for All Kids Act. When Senator Lara began to work on Senate Bill 10, he and his team were able to utilize an existing infrastructure of constituents and community members who were participating in the #Health4All communications campaign. As described by an individual working in Senator Lara’s office, “When we started to work on [SB 10] with healthcare advocates and immigration rights advocates, and people from the healthcare world, as well as doctors and hospitals, this was not a new conversation... a lot of that groundwork had already been done by the Endowment and by groups that are supported by the Endowment.”

Additionally, the positive surround sound the #Health4AllKids media campaign generated helped create the conditions for conversations about expanding health care coverage to undocumented children to take place. Interviewees also noted that part of the success of the #Health4AllKids campaign was due to the fact that it is easier to garner positive public and political support for providing health care to children than adults.

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3 It is important to note that the Endowment does not distribute or award funds that support lobbying or voting efforts.
Spotlight on California’s Policy Landscape

While tactical strategies like advocacy and organizing, issue analysis and research, and communications and partnerships are important to promote broad policy change efforts, so too is the nature of the policy landscape itself. Policy change concepts, such as “policy windows,” hold that issues receive serious attention when “streams” converge during windows of opportunity.\(^4\) Below we describe these streams and other key factors that have created a favorable environment for health access policy change efforts in California.

California’s improved fiscal outlook creates an opportunity to discuss healthcare expansion to undocumented Californians

According to the Legislative Analyst’s Office, “California’s state budget is better prepared for an economic downturn than it has been at any point decades.”\(^6\) California continues to build its fiscal reserves, having deposited $1.3 billion into its rainy day fund in the most recent 2016-17 budget,\(^7\) and additional surpluses and large reserves are possible if the economy continues to grow in the short-term.\(^8\) The favorable fiscal outlook lies in stark contrast to California’s budget woes of the recent past. Five years ago (2011-12) California’s General Fund expenditures totaled $86.4 billion compared to $122.5 billion in 2016-17, an increase of $36 billion (Exhibit 2).

Some interview participants noted that California’s improved fiscal situation provides an opportunity to expand healthcare access, including for undocumented Californians. One advocate reported the difficulty of “talking about expansions when you’re talking about cuts,” a characteristic that marked California’s state budget for several years during the past decade, but is no longer the case.

<table>
<thead>
<tr>
<th>Fiscal Year</th>
<th>$ in Millions</th>
</tr>
</thead>
<tbody>
<tr>
<td>2006-07</td>
<td>$101,413.0</td>
</tr>
<tr>
<td>2007-08</td>
<td>$102,985.7</td>
</tr>
<tr>
<td>2008-09</td>
<td>$90,940.4</td>
</tr>
<tr>
<td>2009-10</td>
<td>$87,236.7</td>
</tr>
<tr>
<td>2010-11</td>
<td>$91,549.1</td>
</tr>
<tr>
<td>2011-12</td>
<td>$86,403.5</td>
</tr>
<tr>
<td>2012-13</td>
<td>$96,562.1</td>
</tr>
<tr>
<td>2013-14</td>
<td>$100,005.2</td>
</tr>
<tr>
<td>2014-15</td>
<td>$113,005.2</td>
</tr>
<tr>
<td>2015-16</td>
<td>$115,570.7</td>
</tr>
<tr>
<td>2016-17</td>
<td>$122,468.3</td>
</tr>
</tbody>
</table>

Despite the more favorable outlook, some key informants are concerned that policymakers, including Governor Jerry Brown, are focused on “leaving a legacy of fiscal health” and making modest expansions in state services to prepare against a possible economic downturn. Some advocates are fighting hard to restore cuts made during the Great Recession. According to one grantee, advocates pushed hard for the state to relax Medi-Cal eligibility requirements, including property limitations, which were viewed as “a huge deterrent for families enrolling in Medi-Cal, particularly for Latino families.”

There is widespread agreement that the improved fiscal outlook creates an opportunity that aligns with more favorable public opinion and political realities in California (described below). One of the Endowment’s staff members described this interplay by noting, “You have to have public opinion, you have to have the right politics behind it…and then you have to have the fiscal resources to deal with it. And that’s true if you’re doing [health] access work on a county by county basis or statewide.”

Procedural changes now allow California’s state legislature to pass budgets with a simple majority

In 2010, California voters passed Proposition 25, the Majority Vote for the Legislature to Pass the Budget Act, which eliminated the two-thirds requirement to pass the state budget while preserving a supermajority vote to raise taxes.\(^9\) Proposition 25 made it easier for the Legislature to send a state budget bill to the Governor because the current composition of each house allows members of the majority political party (i.e., Democrats) to approve a budget bill without the support of the minority party (i.e., Republicans).\(^10\)

Some interview participants posit that passage of Proposition 25 discouraged Republicans, who are likelier to oppose immigrant-friendly policies, to use the budget approval process as leverage for their legislative priorities. One grantee noted that Republicans could not “have a veto over [legislation] covering undocumented children, which...they might have [had prior to Proposition 25].” As an example, in 2006, then Speaker Fabian Núñez outlined a health plan to cover all children, including the undocumented; yet, the plan “was taken out in budget negotiations with Republicans,” according to one advocate. Since passage of Proposition 25, a number of immigrant-friendly policies have passed (as described below), including SB-4, which is the Health for All Kids Act.

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\(^4\) Pathways for Change: 10 Theories to Inform Advocacy and Policy Change Efforts, Center for Evaluation Innovation and ORS Impact

\(^5\) Source: State of California, Department of Finance, Historical Data Budget Expenditures, July 2016

\(^6\) http://www.lao.ca.gov/Publications/Detail/3305

\(^7\) Ibid ii

\(^8\) Ibid ii

\(^9\) https://ballotpedia.org/California_Proposition_25,_Majority_Vote_for_Legislature_to_Pass_the_Budget_(2010)

extending health coverage to California’s undocumented children.

The Affordable Care Act (ACA) created a platform to potentially extend coverage to all

While the ACA provides lawfully present immigrants with the same access and requirements for affordable coverage as U.S.-born citizens, the same is not true for undocumented immigrants.11 Although the ACA has extended health coverage to millions of people, the legislation does not provide undocumented immigrants with any federal coverage. According to the Kaiser Family Foundation, “as of the end of 2015, the number of uninsured nonelderly Americans stood at 28.5 million, a decrease of nearly 13 million since 2013.” Under ACA, undocumented immigrants may not purchase health insurance in state or federal exchanges but are eligible for emergency care or may seek nonemergency health services at community health centers or safety-net hospitals.12

Some interview participants argued that it is politically difficult to extend coverage to the undocumented when citizens and lawfully present immigrants do not have access to affordable health coverage. One grantee captured the sentiment by noting, “Why would you extend coverage to the undocumented when citizens can’t get access to the same thing? Now that citizens can get access...there’s more opportunity to be equitable.” Indeed, some state lawmakers are building on the momentum afforded by ACA and advancing legislation that would allow undocumented immigrants to buy insurance through Covered California, California’s health insurance exchange. In June 2016, Governor Jerry Brown signed SB 10, which allows the state to formally ask the federal government for a waiver to allow undocumented immigrants to buy insurance through Covered California13, 14.

While this report was being finalized, Donald Trump was elected President of the United States. Based on President-elect Trump’s campaign promises and Congressional Republicans’ repeated attempts to repeal ACA since it passed in 2010, many experts predict officials to pursue health policy changes15 (e.g., elimination of subsidies to purchase insurance, elimination of programs to provide Medicaid coverage to those in poverty) that could increase the number of uninsured Americans. In the short-term, funders, grantees, advocates, policymakers, and the public should expect uncertainty about durability of the ACA given President-elect Trump’s public commitment to a full repeal of the legislation.

An increasing number of immigrant-friendly policies reflect California’s distinct preferences

While many experts agree about the politically charged nature of national immigration conversations, California’s approach to issues about undocumented immigrants is markedly different. Democratic and Republican strategists agree that “the undocumented are not going anywhere.”16 Although more recent legislation has focused on extending health benefits and rights to the undocumented, other legislative policies in the areas of education, protection from federal immigration enforcement, and immigrant integration have recently been passed. Listed below are a few examples.

<table>
<thead>
<tr>
<th>Legislative Policies</th>
<th>Description</th>
<th>Year Passed</th>
</tr>
</thead>
<tbody>
<tr>
<td>AB 540: Nonresident Tuition Exemption</td>
<td>Allows certain students who attended high school in California for three or more years and earned a high school diploma (or equivalent) to be exempt from paying nonresident tuition at California public universities</td>
<td>2001</td>
</tr>
<tr>
<td>AB 60: Driver’s License</td>
<td>Allows undocumented immigrants to apply for a California driver’s license</td>
<td>2013</td>
</tr>
<tr>
<td>AB 1081: Trust Act</td>
<td>Limits the state’s cooperation with federal immigration authorities to screen and hold detained immigrants for specified crimes</td>
<td>2013</td>
</tr>
<tr>
<td>SB 432: Removes “Alien” from Labor Code</td>
<td>Removes the term “alien” from California’s labor code</td>
<td>2015</td>
</tr>
</tbody>
</table>

Public opinion in California largely aligns with the state’s trend toward more immigrant-friendly policies. As an example, a recent USC Dornsife/Los Angeles Times statewide poll found that about three-fourths of voters believed immigrants who are already here should be allowed to stay, and 65% said such immigrants should be allowed to apply for U.S. citizenship. Only 16% said that they should be required to leave the country.17 Some interview respondents noted that the anti-immigrant sentiment around the country has stimulated a pro-immigrant backlash here. One staff member agreed and added, “California has always carried forward how different we are from the rest of the county, that we pride ourselves in being different. As states have gotten more restrictive in the way they’ve worked on immigrant issues it has stimulated a different narrative in California.”

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11 http://www.nilc.org/issues/health-care/immigrantshcr/
12 https://www.nilc.org/issues/health-care/immigrantshcr/
13 https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=2015201605B10
Notable Achievements of the #Health4All Campaign

In the first two years of its implementation, the Endowment’s #Health4All campaign has helped shape and change the narrative around health care access for undocumented Californians in a number of ways. In this section we identify three key emerging achievements of the campaign:

Fostering an inclusive narrative
Providing valuable tools and resources
Contributing to a favorable policy landscape

Fostering an inclusive narrative

The #Health4All campaign has fostered a narrative that is inclusive of diverse perspectives.

Through a strong communications platform and clear messaging, #Health4All has helped foster a narrative that is inclusive of diverse voices—including those directly impacted by this issue—and supports the long-term nature of this work. In the previous section we outlined the Endowment’s communications platform as a distinguishing contribution to this work. Grantees and other stakeholders noted that by creating a hashtag campaign, generating a clear message, and providing accessible communications platforms, the Endowment has developed a campaign in which many individuals (including undocumented Californians) take part in dialogues about expanding health care access. One stakeholder noted, “The campaign...takes complex issues around health coverage and health policy, and by translating that into hashtags, makes these issues more accessible to thousands of people who would not have taken part through a more conventional approach.” The Endowment’s approach, including its hashtag campaign, enabled #Health4All to reach the undocumented and make sure their voices are part of the conversation. As a result, #Health4All has fostered a network of individuals willing to step forward and lend their voices for this cause. One stakeholder noted that by shining a light on the stories of undocumented Californians, healthcare access for undocumented immigrants has become a more universal concern; at times, even for those opposed to expanding rights for the undocumented.

The Endowment has also funded and partnered with a broad group of formal and informal institutions and organizations including advocates and organizers, policy makers, community-based organizations, Building Healthy Community sites, and communications establishments (such as TV networks and newspapers). Engaging such groups has created an echo chamber in which the #Health4All message can be sustained over time. In particular, stakeholders appreciate the broad and deep approach the Endowment has taken with engaging communications establishments. For example, the Endowment is able to influence storylines on prime time TV to include stories about immigrant experiences. At the same time,
Notable Achievements of the #Health4All Campaign

the Endowment has partnered with local media outlets that serve specific populations (e.g., La Opinión), to expand their voice and provide ongoing information, as noted earlier in this report.

Lastly, stakeholders recognize the Endowment as a leader in health care funding and its position on health care access is clear and bold. Interviewees spoke about the Endowment’s long-term commitment to supporting partners and coalitions working to expand access to affordable, quality health care. They also noted that through the #Health4All campaign, the Endowment clearly communicates its position and invites diverse voices to take part in the dialogue.

Providing valuable tools and resources

Through #Health4All the Endowment provided its partners with valuable tools and resources.

A key component of the #Health4All campaign is funding local organizations and coalitions working to expand affordable, quality care through research, advocacy, organizing and communications. In particular, stakeholders noted that funding original research provides advocates, policy makers, and others with data to support policy change efforts. An example is the “Unauthorized and Uninsured” Building Healthy Communities fact sheets developed by USC’s Center for the Study of Immigrant Integration (CSII). Advocates in particular reported the importance of academic work to showcase rigorous research that can be used with policymakers. Having this data available bolsters the Campaign’s efforts. While partners are largely satisfied with efforts to support original research on this topic, there are some who want more, including more research inquiries (e.g., cost/benefit analyses) and refreshing research completed 10-15 years ago (see Recommendations).

In addition, the Endowment’s communications tools and resources represent a unique contribution and are highly valued by the Endowment’s partners. Investing in communications is not a resource that advocates are used to, but it is something that they highly value. Most grantees noted they have limited to no communications or advertising budgets, so having a shared approach and message across the state has been of great benefit. The Campaign’s communication tools and resources continue to contribute to a positive surround sound by providing a shared message and branding for any advocate to utilize.

Contributing to a favorable policy landscape

#Health4All has helped shape the policy landscape and has benefited from favorable policy windows.

As noted in the “Spotlight on California’s Policy Landscape” section, there have been a number of changes that created favorable opportunities to further the efforts of expanding health care access and coverage. The Endowment has contributed to and taken advantage of that landscape in a number of ways. The Endowment has funded partners who focus on expanding the county safety net. By supporting partners at the local level and providing funds for local organization and mobilization, the Endowment has made a clear impact in many counties. As of May 2016, many more counties are serving undocumented Californians outside of the emergency room than they were before the implementation of ACA.
Notable Achievements of the #Health4All Campaign

The Endowment and its partners are also seizing on the favorable policy window. Over the past years, there have been some important policy achievements in the Health for All environment. Examples include the passage of Health for All Kids, recent legislation to seek a waiver to allow undocumented immigrants to buy coverage through Covered California, and some movement toward a statewide solution (e.g. SB 1418, which sought to expand Medi-Cal to adults regardless of immigration status).

Stakeholders noted that #Health4All’s multi-modal approach, its focus on legislative and budget policy, policy research and fiscal analysis, grassroots organizing, and public hearts and minds is paying off. As one respondent noted, “The Endowment should take pride over the victories attained. It’s an example of how investments may have taken a while [to achieve impact]. The policy window needed to open up.”
Spotlight on the Perspectives of the Private and Philanthropic Sectors

Wanting to understand the perspectives of key leaders, including those who may be in opposition to expanding health care coverage to undocumented Californians, the evaluation team conducted a series of interviews with individuals from private and philanthropic sectors across three counties: Orange, San Diego, and Imperial. These interviews were designed to provide additional context about the economic and political landscapes in counties where more work is needed to expand the health care safety net, and where the #Health4All campaign message may not be as well-received in comparison to other California counties. Orange, San Diego, and Imperial counties were selected in particular as they encompass conservative-leaning regions, and are counties where additional efforts are needed to help change the narrative about the undocumented. The emergent findings presented below reflect an initial exploration into understanding factors that influence the attitudes and perceptions of audiences that may be outside of the current focus of the #Health4All media and communications campaign. Due to the small number of interviews conducted, the perspectives shared may not be representative of the larger community context.¹⁸

Understanding the Political Climate of Three Southern California Counties and How Immigration Issues Are Connected to Philanthropic and Community-Based Efforts

Interview respondents shared information about their local community and county contexts and factors that shape attitudes and perceptions toward undocumented residents.

Orange County: Interviewees noted that Orange County has a strong "history of exclusivity" that has contributed to a "general sense of fear and reluctance" among residents to acknowledge undocumented residents living within the County. This exclusivity and unwillingness to recognize a subset of the County’s population makes it difficult to garner support for expanding health care services to the undocumented population.

Although a climate of exclusivity may pervade the region, the work of the Santa Ana Building Health Communities (BHC) site is helping shift attitudes toward acknowledging and helping the County’s undocumented population. One interview respondent lauded the work of the Santa Ana BHC site, particularly the leadership provided by the California Community Foundation, as providing "an incredible foundation" for work centered on expanding health care access to the undocumented population residing in Orange County. The Santa Ana BHC work has "spurred [a] conversation" about the undocumented population within Orange County and how best to serve them.

Beyond Santa Ana BHC other organizations are working to advance the health and wellbeing of vulnerable communities. That includes directly or indirectly working on issues pertaining to the undocumented population. For example, the work of Orange County Community Foundation (OCCF) is directly focused on health care expansion efforts. The upcoming launch of their Immigration Initiative (with funding provided by The California Endowment) will focus on #Health4AllKids efforts as well as establishing an Immigration Center that will provide education, outreach, and legal services for undocumented immigrants. The OCCF is hoping that the work of their Immigration Initiative, in addition to the strong foundation provided by the work being done with the Santa Ana Building Health Communities site, will help change the narrative of the undocumented experience within Orange County.

To achieve wide-ranging support, including from business leaders and other key influencers, the work of Orange County United Way has a broad focus that may in turn support undocumented children. Orange County United Way’s 10-year strategic plan focuses on four pillars of work: health, education, income, and housing, with the goal of ensuring that the next generation of Orange County residents have the opportunity to be "happy, healthy, [and] productive [members] of tomorrow’s workforce." As explained by the interview respondents, "we're not overt about our support of immigrants; [instead] we are focusing on key issues that affect all children,” which may benefit children regardless of documentation status.

San Diego and Imperial Counties: Similar to Orange County, San Diego and Imperial Counties have historically been categorized as conservative. Interview respondents described the contrasting political climates within the regions. While the city of San Diego is typically less conservative than the surrounding areas, having a Republican Mayor and a conservative Board of Supervisors makes it difficult to advance issues focused on expanding services for undocumented residents. Additionally, while

¹⁸ Seven telephone interviews with a total of eight participants were conducted with individuals from the following organizations: United Way of Imperial County, Californians for Population Stabilization, Orange County United Way, Orange County Community Foundation, The San Diego Foundation, Imperial Valley Community Foundation and the San Diego and Imperial Counties Labor Council.
many residents within the city of San Diego are less inclined to “buy the rhetoric” that immigrants are taking away jobs from U.S. citizens, residents outside of the city are much more receptive to that argument.

One respondent noted that while San Diego does not have a county hospital, there is a robust network of clinics and health centers that provide primary care services to the undocumented population. Due to this existing infrastructure, the respondent observed that, among health care centers and providers, there is less concern about whether or not undocumented residents should receive services and more concern about how to receive reimbursement for the services the health centers provide. The respondent also noted that health care expansion efforts within San Diego are currently focused on providing access to non-primary care services for undocumented residents.

The evaluation team engaged two organizations that promote positive social change in the southernmost reaches of the state to gather their perspectives. The San Diego Foundation and the San Diego and Imperial Counties Labor Council both focus on improving the lives and well-being of undocumented residents, but do not have a particular emphasis on health care expansion. The San Diego Foundation focuses on improving the educational attainment and workforce opportunities for undocumented residents, noting that economic and workforce development issues are more of an interest among funders, and more amenable to community members.

Opposition Perspectives: The two interview respondents that shared perspectives that were not supportive of greater health care access for undocumented residents expressed concerns that providing health care will “incentivize more illegal immigration” to California. They also expressed skepticism with the argument that “it’s cheaper for Californians if illegal immigrants have healthcare than it would be if they were forced to go to the [Emergency Room] for treatment.” They perceived that this rationale was based on speculation, not on data. Lastly, both respondents discussed the perceived cost to taxpayers for providing health care access to undocumented immigrants and felt that legislation to provide benefits to undocumented immigrants need to be a ballot issue.

The driving principal of the San Diego and Imperial Counties Labor Council is to “lift up all working people so that they and their families can lead healthy, decent, quality lives.” Recognizing that many of the Labor Council members include undocumented residents and their families, this vision naturally extends to improving the lives of the undocumented population. The interview participant explained that the Labor Council holds the perspective that when undocumented residents, “work in the shadows, they are susceptible to exploitation, wage theft, and workplace abuses,” all of which are issues the Labor Council works to prevent.
Moving Forward

As noted throughout the report, the Endowment’s #Health4All campaign has made significant impacts and provided unique tools and resources to partners and communities seeking to expand affordable, quality health care access to the more than one million undocumented Californians left out of the ACA. #Health4All has also provided a foundation for long-term, local, and statewide efforts to continue. Much has been learned through this campaign, and this section offers key considerations for the Endowment as #Health4All enters its third year of implementation.

Considerations

1. Build focused and targeted partnerships in conservative-leaning counties.

While partnerships have been established across the state, there may be untapped opportunities to partner with local philanthropic and private sector organizations in more conservative-leaning counties such as Orange, Imperial and San Diego. Local philanthropic organizations may be well-positioned to promote health care expansion efforts because of their strong connection to local wealth and key influencers and deep understanding of local issues and causes that community members care about. Finding ways to partner with such organizations can support efforts to change the narrative around health care access at the county level. Local partnerships can also build upon the work of BHC sites, where appropriate.

2. Consider how messaging can be tailored to local contexts

The #Health4All messaging clearly states the Endowment’s bold position. However, key stakeholders noted that this messaging may not always be well received in certain communities. It is important for the Endowment to consider the possible tradeoffs between the current broad campaign and more focused messaging targeted to specific localities. While the broad campaign has helped lift up voices and mobilize communities, more targeted messaging may support local policy changes.

For example, one key way to tailor messaging is to develop communication materials for philanthropic organizations to outreach to their donors. Having a “packaged campaign” that community foundations can share with their networks and donors would help expand the Endowment’s messaging to a population of “influential movers and shakers” who may be willing to financially support organizations that provide services for undocumented and immigrant populations.

In addition, messaging and framing about how providing health care to undocumented immigrants makes sense from a business and economic perspective both resonates and is effective with the private sector. By continuing and expanding funding for research that is able to present a strong cost-benefit analysis for providing health care to undocumented populations, philanthropic and private sectors can use this information to garner support among their donors and partners.
Endowment staff, grantees and stakeholders frequently discussed the key factors that need to be in alignment for policy wins to occur (i.e., public perception, political will, and fiscal resources), but acknowledged that systematic tracking of these factors is not in place. The Endowment should focus evaluation efforts to develop a system to track “tipping points” related to shifts in public perception, political will, and fiscal resources.

While grantees and partners expressed a desire to share and learn across local and statewide efforts, there currently are no formal channels in place to systematically share information and learning. While partners in close proximity to one another may meet and share information informally, local-level and statewide partners could better understand the multiple components of the work if there were spaces dedicated to learning and collaboration. Recognizing that regular statewide #Health4All convenings may not be feasible, it would be valuable to consider alternative methods and approaches to encourage sharing of lessons learned as well as provide the space to celebrate wins and successes. Additionally, providing the space for reflecting and learning may also help facilitate discussions and strategies for delivering the #Health4All message in more conservative regions and explore how the Endowment’s other work can be leveraged in order to advance the campaign.

Endowment staff and grantees often noted the contributions youth have made to the #Health4All campaign, but the evaluation has not yet focused on exploring the impacts of youth engagement. We recommend the Endowment focus evaluation efforts on understanding and documenting youth engagement in #Health4All in order to learn more about how it has contributed to organizing and movement-building. In particular, it will be important to explore how trends in technology and social media use among youth may influence the platforms which #Health4All utilizes.

Several grantees spoke to the need for additional research that provides necessary data to accurately respond to arguments opposing the expansion of healthcare coverage to all California residents. Interview respondents identified three key areas where research is needed:

- The notion of providing health care access for all is perceived as costing too much money and that the State cannot afford to support such an effort. Research is needed to explore the fiscal impact of providing healthcare coverage for undocumented Californians.

- A common argument against extending access to healthcare coverage is that it will incentivize more people to immigrate to California. An interviewee noted the best response to that argument is a paper written by Dr. Steven Wallace at the UCLA Center for Health Policy Research (2006). That research is now ten years old and needs to be updated.

- The National Immigration Law Center (NILC) seeks to reverse the exclusion of Deferred Action for Childhood Arrivals (DACA) recipients from the ACA. In order to pursue this, NILC needs information about how much that would cost. Currently, there is no strong data that demonstrates that it is more cost-effective to provide people with health coverage than to provide care via emergency services.