

OVERCOMING THE "ETHICAL" IMPEDIMENT

When you flag the word "ethics" in connection with fund development, people switch off. It's an immutable and sad fact. We confuse ethics and ethical behavior with what is acceptable or possibly even polite.

But, ethics are not about making us and those around us feel comfortable. Ethics are the lodestar for our actions.

When we talk about ethics, we talk about the context for everything we do, professionally and personally. Ethics define us. How we apply them defines us in the eyes of the people around us. Ethics provide the framework in which we operate, think and behave.

The same starting point is true for our work. The primary driver for what we do is to get things done. To ensure impact. Not to feel good about

ourselves. The same is true for our donors. Feeling good is not their primary objective. Again, it's about the outcome. Making change.

And that is never truer than in health care. Our institutions fulfill a critical community need. They sit at the heart of a series of complex community relationships, critical not only to our health, but our well-being.

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Right now, it's easy to see hospitals as critical. We face a pandemic together and trust our hospitals and clinicians to help us weather this storm. We're zeroed in on pandemic and don't want to distract from that. So, we hear, again and



again, that this is not the time to fundraise. This is not the time to approach donors. It's "unethical."

Wrong.

Community health needs have not gone away because of COVID-19. The elderly and vulnerable face greater challenges, not lesser ones. Patients with chronic conditions, cancer sufferers, those in need of rehabilitation, community regeneration—all need as much, and in some cases more, support than ever before.

Donors have not ceased to care. They expect partnership from us now, as always. Drawing back from those partnerships should not be an option. Ethically, our only choice is to reach out and work with donors to ensure we continue to have impact on our communities.

The donors' perspective should be considered, and their voices should be heard:

- "We're interested in making social investments..."
- "We're in it for the long term and accept there will be highs and lows."
- "We're looking for partners to help us affect changes."

These are not voices that will be daunted by challenge. They represent partners who expect to be engaged and who will provide their greatest support at times of greatest need. It is

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a response to how the core values of the individual align with the organization with which they partner.

Partnerships result from hard work. Building relationships. Building trust. Based on shared values and shared successes.

It takes hard work to get to that point. It inevitably demands acceptance that, when stakes are high, so are the risks.

So, reach out. We have to engage donors with short term

needs but, far more importantly, remain focused on long term impact.

We're increasingly vulnerable to "outrage" in the public domain. Fundraising at times like these feels like a high-risk activity. Rational debate, ethical behavior, a sense of obligation to something broader than ourselves, all seem to be marginalized. The reality is that a far higher risk attaches to drawing back than to moving forward.

Ethical behavior requires us to work to meet the needs of our institutions, our communities and those who invest in them.

Ethical behavior is seldom comfortable, nor should it be. It's about doing what's right, not what's expedient.

Donors, above all others, will recognize that and value it. Reach out. Join hands. Make it happen.

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