

Your New Health Philanthropy Brand

“What would an ideal health philanthropy brand or foundation brand look like? How would you like to be talked about?”



If marketing guru Marty Neumeier is right about branding being nothing more than “a person’s gut feeling about your organization,” or as he also states, “Your brand is not what you say it is; it’s what they say it is,”¹ then how would *they* (your donors, community, clinicians and others) describe your current foundation brand?

Chances are that question just made you a little uncomfortable. Too often we welcome the assumption that the hospital or system brand is by default also our foundation brand. But in truth...it isn’t. Yes, your foundation’s reputation is impacted by your hospital’s reputation, and you probably have a style guide that mirrors your hospital’s. If so, you likely also have hospital brand watchdogs who excel in their jobs. However, it’s important to realize your foundation portrays and should provide a different ‘gut feeling’ than your hospital. Your value proposition is very different. Your donors aren’t exchanging their money for health services. They’re exchanging their gift for an experience.

What would an ideal health philanthropy brand or foundation brand look like? How would you like to be talked about? If you could magically embed this gut feeling in someone else, what would you want it to feel like?

Let's imagine this is what others are saying about you through these descriptions:

- **VISIONARY** – *“The foundation looks beyond immediate needs, they look into the most powerful ways to use my gift in shaping big, bold, transformative ideas...ideas that will impact the future of my community.”*
- **INSPIRED** – *“The foundation is made up of brilliant and energized individuals. These are people and ideas that help me believe in what we can accomplish and provide the next generation, together.”*
- **RELENTLESS** – *“They pursue just causes with such clear focus and determination. There is a resiliency or permanence to what is being accomplished.”*
- **INCLUSIVE** – *“The foundation is different. They don't show up to get something, they show up to give something. I feel connected to others in my community. I feel connected to something bigger than myself.”*
- **IMPACTFUL** – *“Locally, there is no greater impact a gift can make. They are fearless storytellers that overcome complex, comprehensive, multi-generational issues for the benefit of the organization and community at large.”*

These all sounds pretty good, right? These statements describe an organization that believes in and practices something revealed in the book *Finite and Infinite Games*.² Published in 1986, James Carse first introduced the concept of finite versus infinite games. Finite games have a beginning, middle and end. They are played for the purpose of winning—think sports. Infinite games however are played for the purpose of continuing to play, to support an ideal that will outlive you, to provide for the next generation.



“ Organizations who embrace the infinite game change the narrative.”

In philanthropy, these differences can be illustrated by finite projects such as renovations, new equipment or technology—projects that have a beginning, middle and end—with a period of relevance and a purpose of *saving* lives. Compare this with infinite projects, such as health equity initiatives, exercise, nutrition and mental health programs that require indefinite contribution and ongoing new players—with the added purpose of *changing* lives. Organizations who embrace the infinite game change the narrative. They change what is possible. They represent the new health philanthropy brand.

The infinite approach also offers something to health care foundations that isn't possible with finite projects alone—namely, younger donors who are looking for social injustices to champion. The infinite game approach can also attract businesses and other local partners who now have community health initiatives they bring value to supporting. This new paradigm in health care has become the combined business of everyone. Inclusion is not simply lip service, but is embedded in the projects you select, the people you partner with and the communication priorities you pursue in reshaping how foundations think and spend their marketing dollars.

About the Author: [Michael Beall](#) is a Principal Consultant and Communications Practice Leader with Accordant. You can reach him at Mike@AccordantHealth.com and connect with him on [LinkedIn](#).

¹ Marty Neumeier, *The Brand Gap*, New Riders, 2005.

² James Carse, *Finite and Infinite Games*, Free Press, 1986.