Seeing is believing
Greenhalgh, Caroline; Montgomery, Paul

DOI:
10.1002/nvsm.1809

License:
Creative Commons: Attribution (CC BY)

Citation for published version (Harvard):

Link to publication on Research at Birmingham portal

General rights
Unless a licence is specified above, all rights (including copyright and moral rights) in this document are retained by the authors and/or the copyright holders. The express permission of the copyright holder must be obtained for any use of this material other than for purposes permitted by law.

•Users may freely distribute the URL that is used to identify this publication.
•Users may download and/or print one copy of the publication from the University of Birmingham research portal for the purpose of private study or non-commercial research.
•User may use extracts from the document in line with the concept of ‘fair dealing’ under the Copyright, Designs and Patents Act 1988 (?)
•Users may not further distribute the material nor use it for the purposes of commercial gain.

Where a licence is displayed above, please note the terms and conditions of the licence govern your use of this document.

When citing, please reference the published version.

Take down policy
While the University of Birmingham exercises care and attention in making items available there are rare occasions when an item has been uploaded in error or has been deemed to be commercially or otherwise sensitive.

If you believe that this is the case for this document, please contact UBIRA@lists.bham.ac.uk providing details and we will remove access to the work immediately and investigate.
Seeing is believing: A qualitative study examining how high and ultra-high-net-worth donors utilise evidence to inform their giving and the barriers to and facilitators of the use of evidence

Caroline Greenhalgh | Paul Montgomery

School of Social Policy, University of Birmingham, Birmingham, UK

Correspondence
Caroline Greenhalgh, School of Social Policy, University of Birmingham, Edgbaston, Birmingham B15 2TT, UK.
Email: c.a.greenhalgh@pgr.bham.ac.uk

Abstract
Whilst there is growing recognition across the non-profit literature, that the giving of resources ought to be informed by rigorous evidence, few studies to date have examined how high and ultra-high-net-worth donors use evidence to inform their philanthropy, the type and quality of the evidence they utilise, and how they measure the performance of the charities they support. The primary objective of this study was to examine whether and how philanthropists employ evidence to inform their decision-making. We employed in-depth qualitative research methods to elicit the perspectives of philanthropists on how they engaged with evidence and, in so doing, filled a gap in the data. We found barriers to utilising evidence included challenges in accessing evidence, difficulties in assessing the quality and appropriateness of evidence and insufficient resources to capture evidence. Facilitators of evidence use included: making evidence more accessible and enhanced access to professional philanthropy advice and advisors. Despite growing awareness of the importance of evidence, few donors employed sound evidence-based models of philanthropy.

KEYWORDS
barriers, evidence, facilitators, philanthropy

Practitioner Points

What is currently known about the subject matter?
- Philanthropists increasingly seek to assess the impact of their funding.
- To date, there is little to indicate that many philanthropists are utilising evidence to inform their philanthropy.

What our paper adds to this
- This study elicits the perspectives of philanthropists as to how they engage with evidence.
- Barriers include difficulties accessing and assessing the quality and appropriateness of evidence and insufficient resources to capture evidence.
- Facilitators include making evidence more accessible and enhanced access to philanthropy advice.
Despite growing awareness of the importance of evidence, few donors employed sound evidence-based models of philanthropy.

The implications of our study findings for practitioners

- Non-profits rarely generate the type of evidence that potential donors seek.
- Non-profits should be transparent in how they evaluate their impact and be willing to share both what has and has not worked.
- Evidence allows us to understand whether a programme is effective and helps non-profits and donors to be more accountable.

1 | INTRODUCTION

The Coutts Million Pound Donor Report 2017 disclosed that the level of giving by High-Net-Worth Individuals (HNWIs) and Ultra-High-Net-Worth Individuals (UHNWIs) in the UK was growing and that ‘major philanthropy’ was ‘on the rise’ (Coutts, 2017, p. 1). This was borne out in 2021, when in response to the pandemic, donations by UHNWIs in the UK rose to £4305 billion, an increase of 36.1% on 2020 figures (The Sunday Times/CAF, 2022, p. 2). Globally, UHNWIs accounted for more than 25% of the funding awarded in response to the Covid-19 pandemic (Gulliver-Garcia et al., 2021, p. 5). An UHNWI is defined as someone with a net worth of $30m+, and a HNWI as an individual with a net worth of $5m–$30m (Green et al., 2020, p. 2).

The growth of significant philanthropy and the aspirations underpinning it, did not originate in the UK. In 1889, the American philanthropist Andrew Carnegie questioned ‘... the proper mode of administering wealth after the laws upon which civilisation is founded, have thrown it into the hands of a few’ (Carnegie, 1889, p. 6). Carnegie explicated a vision of philanthropy in which the beneficiaries of great wealth would dispose of it in such a manner that it would act as a ‘more potent force for the good elevation of our race than if it had been distributed in small sums to the people themselves’. (Carnegie, 1889, p. 10). Carnegie sought to tackle the root causes of poverty rather than to merely alleviate the symptoms of poverty. Carnegie’s essay the ‘Gospel of Wealth’ (Carnegie, 1889) has been referred to as ‘the intellectual charger of modern philanthropy’ (Walker, 2015, para. 6).

In 2010, Bill and Melinda Gates founded ‘The Giving Pledge’, inviting the ultra-wealthy to give away at least half their wealth, enabling them to become ‘powerful social actors engaged in the business of world making’ (Harvey et al., 2011, p. 424). Like Carnegie, they believed philanthropy could ‘address some of the world’s biggest challenges’ (The Giving Pledge, 2010). This focus on addressing and finding solutions to complex societal challenges has led to ‘calls for philanthropy to be reinvented and recast’ (Haydon et al., 2021, p. 353) and an intensified interest in ‘strategic-philanthropy’ (Sandfort, 2008) in which donors pursue ‘clearly defined goals’ and utilise ‘evidence-based strategies’ to achieve their objectives (Brest, 2012, p. 42).

Several studies confirm that philanthropists increasingly seek to assess the impact of their giving, to ensure that their money is making a difference (Aleman & Roumani, 2018; Bishop & Green, 2015; Stannard-Stockton, 2010). Evaluating impact requires philanthropists to understand the difference their funding makes and the change it will ultimately generate, necessitating a comparison between what would have occurred in the absence of the programme (the counterfactual) and what did occur, which calls for rigorous evidence. However, there is little to indicate that many philanthropists are utilising evidence to inform their philanthropy (Kassatly, 2018; Stannard-Stockton, 2010). Indeed, ‘it is widely agreed that most people ... do not base their giving on any significant level of evidence’ (Stannard-Stockton, 2010) and that very few donors implement ‘goal-oriented, evidence-based strategies’. (2012 p. 42), leading us to theorise that philanthropists struggle to engage with high-quality and appropriate evidence.

Furthermore, research has revealed a disparity between the resources donors sought and what was available to them (Aleman & Roumani, 2018), leading some to theorise that rigorous and appropriate evidence is not readily available or easily accessible (Greenhalgh & Montgomery, 2020). To date, little research has been conducted into if and how philanthropists use evidence to inform their philanthropy or how they measure the performance of the non-profits they support. Moreover, ‘systematic data’ enabling us to measure the ‘evidence on the ... performance of philanthropy’ are ‘scarce...’ (von Shnurbein & Neumar, 2021, p. 186) and challenges in gaining access to elite donors means that there is a lack of substantive theoretical research examining the motives, experiences, and opinions of elite donors (Breeze, 2021).

This study seeks to fill a gap in the data by eliciting the perspectives of philanthropists on how they engage with the evidence. We sought to answer the following research questions:

1. To what extent do philanthropists seek out evidence before donating to a non-profit?
2. What are the barriers to evidence use by philanthropists?
3. What are the facilitators of evidence use by philanthropists?

Based on our review of the extant literature, we hypothesise that whether and how philanthropists utilise evidence will vary according to what is available to them, their ability to distinguish between different qualities of evidence, which evidence they perceive to be the most useful, their mindset and possibly their biographies and idiosyncratic preferences (Greenhalgh & Montgomery, 2020). We further
hypothesise that many philanthropists will rely on the endorsement of their friends and peers as a proxy for rigorous evidence and that a donor’s decision to make a gift to a charity may also be influenced by their social networks (Chapman et al., 2019; Scharf & Smith, 2016).

We begin by explaining how we conceptualise philanthropy before discussing why evidence matters, what we mean by it and the challenges of accessing high-quality evidence. We then explain our methodology and the data analysis employed; our findings are described in the fourth section, and in the fifth section, we elucidate those findings. The paper concludes with recommendations for future research and implications for charity managers.

2 | THE MEANING OF PHILANTHROPY

Philanthropy is a contested concept. Much of the confusion surrounding how it is conceptualised arises from ‘attempts to contain within it a diversity of human phenomena that resist generalisation and categorisation’ (Payton, 1987, p. 1). For this study, we utilise Phillips and Jung’s construct of philanthropy, which is understood as ‘the use of private resources ... for public purposes’ (Phillips & Jung, 2016, p. 7).

2.1 | Why does evidence matter?

It has long been understood in medicine that evidence of what works is vital and should underpin all new interventions if only to ensure the avoidance of harm. This logic has only sometimes been applied to philanthropy with the consequence that not only have some philanthropists avoided the use of private resources ... for public purposes’ (Phillips & Jung, 2016, p. 7).

2.2 | What is evidence?

The definition of evidence is contested. Challenges in understanding its meaning are exacerbated because the meaning of evidence and the standard of proof—by which we mean ‘the level of certainty and the degree of evidence necessary to establish proof...’ (Merriam-Webster, 2011) - varies across different settings and research questions. Cairney defines evidence as: ‘an argument or assertion backed up by information’ (Cairney, 2016, p. 3), which may comprise a literature review, a stakeholder consultation, a randomised controlled trial (RCT) or a meta-analysis.

What we mean by ‘rigorous evidence’ is also disputed, particularly considering the different types and weight of evidence in the social sciences (Davies, 2000, p. 366). Rigour may be ‘best thought of in terms of the quality of the research process. ...: transparency ... validity or credibility... reliability or dependability, comparativeness, and reflexivity’ (Given, 2008, p. 43). EBM is usually underpinned by a hierarchy of evidence (below), which positions RCTs and systematic reviews at the top of the pyramid and ‘expert’ opinion at the bottom (Greenhalgh, 2010; Figure 1).

This hierarchy of evidence has been criticised for being overly simplistic, as whether the evidence is relevant will depend on the question and nature of the problem (Murad et al., 2016). Furthermore, such hierarchical approaches may overlook context and neglect the ‘relevant world views of legitimate stakeholders’ (Saltelli, 2017, p. 62), whilst simple, evidence-based approaches may fail to consider ‘what works for whom’ and ‘in what circumstances?’ (Pawson & Tilley, 1997, p. 144). An RCT might offer the most appropriate evidence for questions about effectiveness, but a ‘qualitative study may be better placed to answer what and why something works’ (Greenhalgh, 2017, p. 2). The appropriate evidence type will thus be determined by the nature and scale of the intervention and its context. For example, programmes embedded in ‘social systems ... can be understood only through examination of the social rules and institutions within which they are embedded...’

![FIGURE 1](A Hierarchy of evidence adapted from Murad et al. (2016).)
Hence, evaluators must ‘search for the causal mechanisms that lead to program outcomes, but with the critical caveat that those mechanisms are likely to be context specific’ (Pawson & Tilley, 1997, p. 405). Sackett et al. (1996) described EBM as a confluence of best research evidence, practitioner skills, and user preferences (see Figure 2).

Similarly, EBPh draws on the best available information from three different sources of evidence incorporating: (i) academic research or scientific evidence, (ii) field experience, (iii) informed opinion (Rosqueta, 2014, p. 1). The convergence of the three domains is where the decisional nexus lies (see Figure 3).

2.3 Challenges in accessing evidence

A systematic review identified three main barriers to philanthropists using evidence: (1) inadequate knowledge transfer and difficulties accessing evidence, (2) challenges in understanding the evidence, and (3) insufficient resources (Greenhalgh & Montgomery, 2020). The data may not exist in the first instance, or a lack of infrastructure for knowledge transfer across the third sector may hinder data sharing. Second, data collection is complex, and ‘the outcomes that charities are trying to affect are so varied’ with little ‘room for standardisation on metrics’ (Kassatly, 2018, para. 7). Third, non-profits need sufficient resources (including the capacity, time, and skills) to collect, analyse and synthesise the evidence, necessitating investment. A lack of such resources may lead non-profits to focus on easier-to-measure outputs, which are ‘less explicit about change achieved than outcomes’ (Kassatly, 2018, para. 7).

3 METHODOLOGY

We sought to elicit the perspectives of HNWI and UHNWI donors on how they engaged with the evidence. We wished to examine if and how they utilised evidence, their perception of what constitutes evidence and any other factors that might have impacted their decision to donate.

We adopted the perspective of social constructivists, holding the view that ‘reality is socially, culturally and historically constructed’ (Bloomberg & Volpe, 2008, p. 12). We employed in-depth qualitative research methods designed to ‘generate knowledge grounded in human experience’ (Nowell et al., 2017, p. 1). We sought to understand participants’ giving strategies and approaches, the factors influencing their decisions, and the mechanisms they employed to measure the success of their giving. Such an understanding was of great importance given the need to elucidate participants’ perspectives and the under-researched nature of the area.

We utilised semi-structured interviews as the primary form of data collection. The interviews were based on a topic guide (Appendix A) containing a series of open-ended questions, which were ‘purposed to generate richer data’ (Vasileiou et al., 2018, p. 2). Our questions emerged from our examination of the extant literature. Interviews were systematically recorded and transcribed using transcription software, enabling meticulous analysis and the retention of the language and phrases used. We employed thematic analysis as such analysis ‘can produce trustworthy and insightful findings’ (Braun & Clarke, 2006 cited in Nowell et al., 2017, p. 2), enabling us to compare and contrast the experiences and viewpoints of a range of participants.

3.1 Sampling strategy

As we sought to elicit the perspectives of elite HNWI and UHNWI donors, the sample was of necessity both purposive, in which participants were chosen ‘by virtue of their capacity to provide richly-textured information, relevant to the phenomenon under investigation’ and small ‘to support the depth of case-oriented analysis that is fundamental to this mode of inquiry’ (Vasileiou et al., 2018, p. 1). Four participants qualified as HNWIs, and 13 as UHNWIs. Participants were initially recruited from a sample frame compiled from The Coutts Million Pound Donor List and the Sunday Times Giving List comprising HNWIs and UHNWIs. Inclusion in the Sunday Times Giving List depends upon inclusion in the Sunday Times Rich List and consequently may miss significant donors. The Coutts Million Pound Donor List (last published in 2017) identifies charitable donations of £1 million-plus made by UK donors in the previous year. Both lists miss philanthropists who give anonymously.

Having identified donors from the sample frame, we employed a mixture of convenience, snowball, and purposive sampling. It was convenience in style because one of the researchers was known to several participants, having sat on boards with six participants in the initial sample. Subsequently, snowball sampling was used in which initial participants introduced and endorsed the researcher to others (who met the selection criteria) in their networks. We purposively sampled from within the population to ensure that donors employing various giving strategies and different sizes of donations were captured. Recent studies have demonstrated ‘the greater efficiency of
purposive sampling compared to random sampling in qualitative studies. Indeed, purposive sampling enabled us to select ‘information-rich cases’ (van Rijnsoever, 2017, p. 2).

We considered our sample (comprising 17 philanthropists) sufficient for this study as it was relatively homogenous, aligned to our research objectives and was sufficient to reach data saturation, meaning the ‘point at which no new codes or concepts emerge’ (van Rijnsoever, 2017, p. 1). Some deem data saturation, which ‘requires a researcher to collect data from informants to the point that no further information can possibly be collected’. (Mwita, 2022, p. 414) to be a ‘guarantee of qualitative rigour’ (Saunders et al., 2018, p. 1893), and in our study, data saturation was reached at the point at which no new information was derived from additional interviews.

3.2 | Elite interviewing

We define elite philanthropy as ‘voluntary giving at scale by wealthy individuals, couples and families’ (Maclean et al., 2021, p. 330). Our participants were wealthy individuals with influence within their social networks (Harvey, 2015). Interviewing elites presents different methodological challenges to interviewing non-elites (Mikeca, 2012). Procuring access may be difficult, and yet everything ‘depends on … getting access to your subject’ (Goldstein, 2002, p. 669) and obtaining reliable data requires researchers to ‘establish a rapport with respondents...’ (Goldstein, 2002, p. 669). Interviews were conducted between February 2019 and April 2020 and were usually of one-hour duration. Most were conducted in person at a venue the participants chose; however, during the Covid-19 lockdown, five interviews were conducted over Zoom.

Ethical approval was obtained from The University of Birmingham Humanities & Social Sciences Ethical Review Committee (ERN_18-1290) on 23 January 2019. As most participants were deemed ‘elite’, particular consideration was given to ensuring confidentiality and anonymity throughout the study. Participants were informed of the purpose of the research, and written consent was obtained before interviews began. All participants were offered the opportunity to read the transcripts of their interviews and informed that they could withdraw from the study before publication. Participants’ identities were kept confidential, and all data were stored securely.

3.3 | Data analysis

We utilised thematic analysis, enabling an inductive ‘data-driven’ approach (Boyatzis, 1998), allowing for rich, sensitive, and insightful data exploration, which was necessary because the primary aim of the research was exploratory and descriptive. We employed Braun & Clarke’s ‘reflexive thematic analysis’, which they first delineated in 2006 (Braun & Clarke, 2006) but which they expanded upon in 2021 (Braun & Clarke, 2021). Although Braun & Clarke were keen to avoid rigidity, they recommended a six-stage approach to data analysis, including: ‘(1) data familiarisation and writing familiarisation notes; (2) systematic data coding; (3) generating initial themes from coded and collated data; (4) developing and reviewing themes; (5) refining, defining and naming themes and (6) writing the report’ (Braun & Clarke, 2021, p. 331). We used an inductive approach to our data analysis which was a ‘situated, interpretative, reflexive process’.
(Braun & Clarke, 2021, p. 334), and we took a ‘semantic approach’ to identify key themes (Braun & Clarke, 2006, p. 84).

We warranted the reliability of our data analysis by recording each interview and through accurate transcription of those interviews. The full transcripts of the interviews were analysed using NVivo 12. The second author coded 20% of the interviews to ensure the reliability of the coding decisions; some minor modifications were made following this feedback. We ensured the validity of our data analysis by ensuring that the results were credible and authentic and that the participants’ voices were accurately represented (Cresswell & Miller, 2000).

4 | FINDINGS

In this paper, we examined the responses of 17 respondents, each of whom qualified as a major donor. A major donor is someone who makes a gift ‘that has a significant impact on the work of a fundraising organisation’ (Fundraising, 2020, para. 1). There is no such definition of what qualifies as a major gift, ‘for some it may mean a gift of $10,000, for others a gift of $10 million’ (Eberhardt & Madden, 2017, p. 4). Table 1 (below) presents the characteristics of the 17 respondents who qualified as major donors, as examined in the study.

Three key themes emerged from the data, which reflected how the participants engaged with and understood the evidence and the barriers to and facilitators of evidence use. Table 2 (below) displays the three key themes and the seven sub-themes that emerged from the data, illustrating how the participants engaged with and understood the evidence, as well as the barriers to and facilitators of evidence use.

<table>
<thead>
<tr>
<th>Participant No</th>
<th>Gender</th>
<th>Age</th>
<th>Nationality</th>
<th>Education</th>
<th>Net worth millions</th>
<th>Profession</th>
</tr>
</thead>
<tbody>
<tr>
<td>001</td>
<td>Male</td>
<td>50–60</td>
<td>American</td>
<td>Graduate</td>
<td>£50–£99</td>
<td>Finance</td>
</tr>
<tr>
<td>002</td>
<td>Male</td>
<td>50–60</td>
<td>British</td>
<td>Graduate</td>
<td>£100+</td>
<td>Family office</td>
</tr>
<tr>
<td>003</td>
<td>Female</td>
<td>50–60</td>
<td>American</td>
<td>Graduate</td>
<td>Not disclosed</td>
<td>Journalist</td>
</tr>
<tr>
<td>004</td>
<td>Female</td>
<td>50–60</td>
<td>British</td>
<td>Graduate</td>
<td>£50–£99</td>
<td>Family office</td>
</tr>
<tr>
<td>005</td>
<td>Female</td>
<td>50–60</td>
<td>Canadian</td>
<td>Graduate</td>
<td>£10–£29</td>
<td>Not disclosed</td>
</tr>
<tr>
<td>006</td>
<td>Male</td>
<td>60+</td>
<td>American</td>
<td>Graduate</td>
<td>£100+</td>
<td>Entrepreneur</td>
</tr>
<tr>
<td>007</td>
<td>Male</td>
<td>70+</td>
<td>British</td>
<td>Graduate</td>
<td>£50–£99</td>
<td>Investor</td>
</tr>
<tr>
<td>008</td>
<td>Male</td>
<td>70+</td>
<td>British</td>
<td>Graduate</td>
<td>£100+</td>
<td>Banker</td>
</tr>
<tr>
<td>009</td>
<td>Female</td>
<td>50–60</td>
<td>British</td>
<td>Graduate</td>
<td>Not disclosed</td>
<td>Medicine/BioTech</td>
</tr>
<tr>
<td>010</td>
<td>Male</td>
<td>60+</td>
<td>British</td>
<td>Graduate</td>
<td>Not disclosed</td>
<td>Accountant</td>
</tr>
<tr>
<td>011</td>
<td>Male</td>
<td>60+</td>
<td>British</td>
<td>Graduate</td>
<td>£50–£99</td>
<td>Entrepreneur</td>
</tr>
<tr>
<td>012</td>
<td>Male</td>
<td>60+</td>
<td>British</td>
<td>Graduate</td>
<td>£100+</td>
<td>Private equity</td>
</tr>
<tr>
<td>013</td>
<td>Male</td>
<td>80+</td>
<td>British</td>
<td>Graduate</td>
<td>£50–£99</td>
<td>Businessman/Investor</td>
</tr>
<tr>
<td>014</td>
<td>Female</td>
<td>50–60</td>
<td>British</td>
<td>Graduate</td>
<td>£100+</td>
<td>Family office</td>
</tr>
<tr>
<td>015</td>
<td>Male</td>
<td>50–60</td>
<td>American</td>
<td>Graduate</td>
<td>£30–£49</td>
<td>Management consultant</td>
</tr>
<tr>
<td>016</td>
<td>Male</td>
<td>40–50</td>
<td>British</td>
<td>Graduate</td>
<td>£30–£49</td>
<td>Investor</td>
</tr>
<tr>
<td>017</td>
<td>Female</td>
<td>50–60</td>
<td>Canadian</td>
<td>Graduate</td>
<td>£30–£49</td>
<td>NED</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Themes</th>
<th>Understanding and engaging with evidence</th>
<th>Barriers to utilising evidence</th>
<th>Facilitators of evidence</th>
</tr>
</thead>
<tbody>
<tr>
<td>Conceptions of evidence</td>
<td>A lack of evidence or data</td>
<td>More accessible to donors</td>
<td></td>
</tr>
<tr>
<td>Rigorous Evidence</td>
<td>Insufficient skills and time</td>
<td>Synthesised information</td>
<td></td>
</tr>
<tr>
<td>A lack of evidence synthesis</td>
<td>Transparency</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Insufficient knowledge transfer</td>
<td>Enhanced access to professional philanthropy advice and advisors.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>A lack of transparency and poor reporting practices</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

5 | UNDERSTANDING AND ENGAGING WITH EVIDENCE

5.1 | Conceptions of evidence

Conceptions about what counted as evidence were wide-ranging: not all donors required high-quality evidence: ‘...if it feels good, if it looks good, you take a leap of faith... you don’t have to have hard evidence to see things doing good’. (016). Eight respondents referred to using ‘their gut’ or applying a ‘smell’ or ‘sniff’ test: ‘... if they don’t meet
your scratch and sniff test, you don't do it’. (001). One conflated their judgement with evidence, ‘due diligence is, I can judge the person like that, just accept that, hurrah. Do I know the detail? No’. (008).

Another cautioned that whilst ‘evidence sometimes leads you to what has happened. It may not lead you to what might happen...’ (010), and one referred to the importance of obtaining clarity on ‘what one knows, what ... you think you know and what you don't know and making certain that we're not confusing what we think we know and calling it what we know’. (006).

Trust in an individual closely connected to the charity frequently served as a proxy for evidence: ‘Somewhere, I met a researcher, enough to be really intrigued and I took a total leap in the dark after ...’ (001). Fifteen respondents sought and relied upon the judgement and endorsements of trusted friends and colleagues. ‘I trust Harry. ... He rang up and goes I gather you're doing an environmental piece. I sit on the board of xxx I think it's really, really good. That was almost good enough for us’. (002).

Seven respondents sought to make site visits as, in their view, such visits provided ‘the best evidence you're going to get’. (005).

5.2 | Hard evidence of impact

A majority of respondents sought ‘hard’ evidence of their impact, namely, data that was both visible and could be substantiated (Tellings, 2017, p. 584), such as annual reports and impact reports. Fifteen respondents wanted to understand the ‘impact’ of the programme they had been invited to fund, asking what were ‘the most impactful interventions?’ and ‘which have the highest need of more funding?’ (015). There was consensus that impact meant outcomes (the difference that will be made) rather than outputs (the services or goods that will be delivered). One donor reflected that charities themselves often confute the two.

One respondent framed impact in a monetary sense as a return on their investment: ‘we ... got US $12 of impact for every US$1 that we put in’ . (002). Three respondents focused on the extent and scale of impact that could be achieved. One (001) sought a systemic change to achieve impact at scale, ‘If I do 10 million malaria vaccines at $2 apiece ... then I can reasonably be sure that I save 10 million lives. For that same US$20 million, you could put up a human rights program ... and all of a sudden, you'll not just get the malaria program but the entire health system ... and you'll get better roads and better schools... Why are you wasting your money on the symptoms instead of the cause of the disease?’ One described themselves as being ‘cause-agnostic’. I ‘just think about how capital is allocated ... why does it work the way it works and how could it work better?’ (015). Six employed business models to inform their charitable funding and determine impact, asking: ‘how much was it costing to supply a service? ... What benefit were they getting?’ (016). One highlighted the importance of ensuring the data’s quality and integrity and understanding the charity’s perception of ‘what success looked like ... which I find most non-profits don't know...’ (006).

Most respondents acknowledged that measuring impact was difficult and that working out what to measure and how, was costly, resource-intensive, and time-consuming. ‘How do we price due process ... or gay marriage?’ (Rhode & Packel, 2009, p. 33). There was also recognition that some charities struggle to measure and communicate impact because it may be ‘ten years before you know whether you’ve really turned a young person from someone who is potentially very dangerous to a successful adult contributing to society’. (010). This respondent recognised the need for ‘proxy measures’ to capture longer-term impacts. Another (006) pointed out the risk that biases in data collection could distort the findings. Two respondents recognised that donors were often unaware of a problem’s multifaceted nature and sometimes caused difficulties by asking for data that served no purpose (004 and 006).

6 | BARRIERS TO THE USE OF EVIDENCE

Respondents cited multiple challenges encountered in accessing evidence:

1. A lack of evidence or data
2. Insufficient skills and time
3. A lack of evidence synthesis
4. Insufficient knowledge transfer and
5. A lack of transparency and poor reporting practices.

6.1 | A lack of evidence or data

Most donors identified a lack of accessible evidence as a significant barrier: ‘there is not enough evidence, and you can’t do evidence-based giving if there is no evidence...’ (014). ‘I use actual data way less than I would like to... Because it’s not there or not shared’ (015). The same respondent highlighted the gaps between ‘what researchers wanted to research and what practitioners needed to know’. Another referred to ‘data devoid environments’ (010), and another to a ‘lag on census data in a poor neighbourhood’. (006).

6.2 | Insufficient skills and time

Nine respondents highlighted a need for more resources such as funding, staffing, and time, as a challenge to gathering evidence. One commented that charities were ‘underfunded and ... understaffed ...’ adding that ‘they don't have the systems in place to interact, to monitor work, so there is no data’ (009). Another hypothesised that charities do not have the resources to do more than count heads (004). Several respondents perceived insufficient time as a barrier to evidence gathering both on the part of the donors and charities; one remarked that charity staff struggle ‘... because their time is spread thin ...’ (006). Three respondents said that insufficient skills were a barrier to producing evidence. One observed that charity personnel
lacked the skills to utilise their data and were ‘swimming in a sea of data without any insight’ (009). Skills gaps included a lack of numeracy and a ‘lack of statistical understanding’ on the part of a lot of people who are making the decisions about these sorts of things’ (010). Skills gaps were perceived to be more likely when staff had no prior experience of working in the commercial world: ‘I think this is inevitably a skill set gap, because ... a large percentage of people that operate within the charitable sector have never worked for the for-profit sector in their lives’ (009). Another respondent observed that ‘... research is difficult and should be done by people who are experts in social science research ...’ (014). However, one respondent opined that without apparent measures of success, such as profit margins or share price, assessing the impact of an intervention or service delivered by a non-profit was difficult (010).

6.3 | A lack of evidence synthesis

Two respondents identified a need for quality syntheses of information; one commented that information is ‘not synthesised; it’s overwhelming’ (015) and that they struggled to ‘... understand cohort studies and case-control studies’ (003). Three respondents talked of being overwhelmed by too much information: ‘There is not awareness because there’s too much information out there’ (015). Another wryly acknowledged that reading endless reports and requests for support was not how they chose to spend their time (005).

6.4 | Insufficient knowledge transfer

Four respondents reflected that difficulties in accessing evidence were exacerbated because of a lack of mechanisms for knowledge sharing, meaning that donors often had ‘no idea what else was already going on’ (006).

6.5 | A lack of transparency and poor reporting practices

A lack of transparency was identified as a problem when engaging with evidence, partly because charities were ‘scared stiff of being open’ (007). One respondent commented that it could be challenging to persuade grantees to report trials with negative results even though they could contribute valuable knowledge (012), adding that such challenges were amplified in the health sector because negative results were rarely reported. Another commented that the quality of reporting from many charities needed to be more detailed, was frequently generic and ‘didn’t cover what we need to know’. In part because charities did not ‘have the experience or the skill to know... to do it and to know what we want to know’. (013). Poor reporting or a failure to report created a barrier to accessing evidence and was exacerbated because of publication bias, whereby journals favour publishing ‘studies that show significant results’ (Ross et al., 2019, p. 187).

Four respondents posited that donors created barriers to evidence use, with one referring to ‘ignorant donors’ (006). One donor sought to impose their agenda upon charities they fund: ‘What we’ll try to do is ... to change things’ but acknowledged that this could lead to the ‘donors preferred course of action being pursued when better alternatives might be available’. (007).

These findings aligned with those of a scoping review which concluded that barriers to knowledge use by Third Sector Organisations included: resource constraints, organisational culture and insufficient time and skills to access scholarly research and insufficient relevance (Hardwick et al., 2015).

7 | FACILITATORS OF THE USE OF EVIDENCE

Each donor identified factors that facilitated their use of evidence, many of which were reciprocal factors of barriers to using evidence.

7.1 | More accessible evidence

Thirteen respondents identified better knowledge transfer and more accessible and relevant information as ways to facilitate the uptake of evidence. Several sought to fund mechanisms for knowledge sharing or made knowledge sharing a criterion for donating. Examples of investment in knowledge transfer included the respondent, who, having identified ‘data devoid environments’, created a free-to-use ‘database of xxx research on education because it’s very hard to find evidence’. (010).

7.2 | Synthesised information

Several respondents observed that better-curated information would facilitate their use of evidence. ‘It’s just much better if there is a very good interpreter of all that, whose actual profession is to really look at those things and understand them and be able to evaluate them’. (003).

7.3 | Transparency

Nine respondents cited transparency in reporting as a necessary mechanism for facilitating better evidence use. One sought to encourage charities to share good and bad outcomes with them: ‘If something is not working and you think that and there are good reasons for it, then please come and tell us and explain it... ’ (014). Another commented that transparency takes ‘friction out of the system’ (015).

7.4 | Access to professional advice/advisors

Two donors employed professional advisors to facilitate their giving and their use of evidence. However, not all donors were enamoured
with philanthropy advisors, and one was critical of philanthropists ‘outsourcing’ their philanthropy rather than taking responsibility for it. ‘I’ve got all sorts of bugbears about high-net-worth family philanthropists … outsourcing their philanthropy to other advisors…. Outsourcing all the things … that should engage you about giving money away…’ (O16). The same respondent expressed concerns that philanthropy consultants can create a barrier between the donor and the beneficiary, adding that ‘their attitude drives me slightly bonkers’.

8 | DISCUSSION

Our findings suggest that donors recognised that giving resources ought to be informed by evidence (Aleman & Roumani, 2018; Bishop & Green, 2008; Stannard-Stockton, 2010) as it was ‘extremely important [to show] that you are backing something that is solving a problem’. (O05). Indeed, evidence of a programme’s effectiveness was deemed vital to ensure that it had the impact sought and to safeguard against unintentional harm. Our findings echoed those of a scientific study by Karlan and Wood which observed that major donors were ‘more likely to give and more likely to give more’ (Karlan & Wood, 2017, p. 1) when receiving positive information regarding the charity’s effectiveness. Indeed, 15 participants sought to comprehend the ‘impact’ of the initiative that their funds were supporting or being solicited for, with more than half requesting annual or impact reports to enhance their understanding of the charity’s impact. Nevertheless, despite their intentions, our findings also disclosed that many participants were confused by what evidence was and what it meant, many did not know what the sources of evidence were, how it was gathered or even why it was evidence. These findings may help to elucidate the conclusions of an earlier study which found that whilst donors said that they cared ‘about non-profit performance, very few actively...’ donated ‘to the highest performing non-profits’ and which concluded that a gap existed between what HNWDs said they wanted, ‘more evidence’ and what they did in practice, namely, fail ‘to consult evidence’. (Neighor et al., 2010, Slide 10).

Accordingly, half of our respondents relied on their gut or what they referred to as a ‘smell test’ as a substitute for evidence. Furthermore, almost all participants sought the endorsement of a friend or colleague either as a proxy measure of evidence or for reassurance, echoing Bagwell et al. findings that family, friends and colleagues are the most common information source for HNWDs (Bagwell et al., 2013, p. 33). These findings support our hypothesis that a donor’s social networks influence charitable giving and conform to social identity theory which ‘addresses the ways that social identities affect people’s attitudes and behaviours...’ (Leaper, 2011, p. 362). Social identity theory has important implications for fundraising because donors who feel a loyalty to and affinity for the person soliciting their donation are more likely to make a gift as ‘success in the peer-to-peer fundraising context is influenced more by champion than by the charity’ (Chapman et al., 2019, p. 573). Our results also corroborated those of Chapman et al. (2019) as several respondents disclosed that they frequently donated out of loyalty to the person soliciting the funds.

One respondent remarked that much fundraising was underpinned by reciprocity which concurs with the view that elite philanthropy ‘is rarely a “pure gift” motivated solely by altruism…. Reciprocity in some guise is the norm...’ (Maclean et al., 2021, p. 334). These results also confirm Breeze’s assertion that donors employ ‘heuristics’ to facilitate their decision-making, which often comprises reliance on ‘third-party endorsement’ and frequently encompass ‘influential ... figures, and ties of loyalty’ (Breeze, 2010, p. 26).

Respondents who sought to utilise evidence experienced numerous barriers to doing so, with more than half citing ‘difficulties in accessing evidence’ as an obstacle, confirming our assertion that philanthropists struggle to engage with the evidence. Specific challenges experienced by respondents included: poor reporting practices and an unwillingness to share adverse outcomes and failures, which made utilising evidence troublesome. Even though ‘the wisdom of learning from failure is incontrovertible’ and that reasons for failure may include those of ‘thoughtful experimentation’ (Edmondson, 2011, p. 1). Moreover, sharing failures can contribute valuable knowledge to the whole of the sector, meaning that ‘people ... know something they didn't know before, and it will change what they do going forward’ (Ford Reedy, 2018, para 2). One respondent believed that a reluctance to share poor results was aggravated by a highly competitive funding environment that encouraged researchers to only submit positive results for publication (O12). The same respondent agreed with Ferguson and Heene’s (2012) observation that publication bias—in which journals seek to ‘avoid publishing null results’ (Ferguson & Heene, 2012, p. 555)—could, in the case of clinical trials ‘have major consequences for the health of millions’ (Ferguson & Heene, 2012, p. 149).

Whilst most respondents sought evidence of impact, one of the challenges they faced in accessing such information was that few charities could demonstrate their impact because impact evaluation was expensive and required investment in training and skills. These results confirmed those of a scoping review which concluded that barriers to knowledge use by Third Sector Organisations included: resource constraints, organisational culture and insufficient time and skills to access scholarly research (Hardwick et al., 2015). It is posited that underinvestment in skills and training would remain a problem whilst charity boards and management continued to shy away from investing in research and training in monitoring and evaluation because of concerns about how their cost ratios would be perceived (Framjee, 2016). For, even though core costs borne by a non-profit are both inescapable and vital, many donors remain unwilling to fund such costs (known as overhead aversion) and may seek ‘to avoid the charity that uses a portion of the donated money as overhead costs’ (Yoo et al., 2022, p. 1). This aligns with Greenhalgh and Montgomery’s finding that ‘the cost of obtaining the relevant evidence’ is a barrier to evidence use (Greenhalgh & Montgomery, 2020, p. 8). However, an absence of investment in relevant skills leads many charities to mistakenly measure their outputs (e.g., children seen) rather than their outcomes (children helped).

Half of the respondents cited challenges in understanding the evidence as a barrier to engaging with it, with several observing that there was too much information. This finding supported previous
research in which donors talked of being ‘bombarded’ by requests for support from charities (Breeze, 2013). Paradoxically, other donors commented on an absence of evidence. It is possible that both statements are correct, namely that there is a vast amount of information being produced by charities and forwarded to donors; however, data without insight or critical analysis does not amount to usable evidence. Several donors reinforced this point by commenting on the need for high-quality synthesised evidence to address these points. However, producing such evidence is a costly and skilful endeavour requiring investment.

Most respondents employed additional mechanisms to facilitate their use of evidence, with many seeking an endorsement from a peer as a proxy for evidence. Even those who sought rigorous evidence before deciding whether to fund a charity usually only did so after receiving or seeking the endorsement of a peer. We theorise that by employing evidence in this way, namely, only after being introduced to a charity by a peer, donors may miss the opportunity to fund the best and most effective charities. Moreover, we posit that reliance on the endorsement of a peer could result in a large proportion of funding becoming concentrated in the hands of a few favoured organisations, as those charities with significant and high-value networks inevitably ‘attract more funding than they otherwise would, while those charities with weaker connections will suffer...’ (Meer, 2009, p. 1).

Three respondents relied upon philanthropy advice services to expedite their giving and use of evidence. A systematic review revealed that the number of philanthropic advisors in the UK had expanded considerably since 2000 with the aim of ‘helping philanthropists [to] give their money away well’ (Greenhalgh & Montgomery, 2020, p. 27). However, unlike in the USA, where philanthropy advisors can seek designation as a Chartered Advisor in Philanthropy, there is, to date, no such formal accreditation scheme for philanthropy advisors in the UK.

Several respondents posited that donors created barriers to evidence use, with multiple participants identifying ‘ego’ as a problem confirming Chapman et al. assertion that ‘donors may give for egotistic reasons (seeking to enhance their reputation or be praised)’ (Chapman et al., 2020, p. 1278). We suggest non-profits may feel obliged to ‘pander’ to their HNWIDs, which may lead to reporting bias or searching out evidence to support donors’ perceptions or wishes. The growth of Donor Advised Funds (DAFs), which enable donors to make grants anonymously—2020 saw contributions of £610 million to UK DAFS, equal to 5.4% of total individual giving in the UK—(Dovey, 2021) could be a counter to these concerns. However, DAFs are not free from controversy and have been criticised, including for concerns about funds being warehoused and a lack of transparency and accountability.

We found that whether respondents utilised evidence, varied according to what was readily available to them, their ability to distinguish between different qualities of evidence, which evidence they perceived to be the most useful and their individual preferences, reflecting Breeze’s conclusions that donors are driven by their ‘own inclinations and preferences...’ (Breeze, 2011). This last point accords with Cairney’s belief that psychology will always impact decision-making and that it would be naïve to assume that decisions are made purely based on scientific evidence (Cairney, 2016).

9 | REFLECTIVE STATEMENT

The lead researcher and interviewer is a white, middle-class, middle-aged, cisgender, straight, non-disabled, state school-educated post-graduate female with 20 years plus board-level experience in non-profits. She has worked as a Director of Development in charge of major donors and has extensive experience working with and stewarding philanthropists. Her experience in the non-profit sector informs her belief in the importance of evidence for measuring the impact of non-profits. The second author is a male academic who focused on the ‘what works’ policy agenda and supervised this PhD project.

10 | LIMITATIONS OF THE STUDY

Our sample was both small and relatively homogenous; all 17 participants were aged 45+, and all were graduates. This sample was in line with other data on donors, such as the Million Pound Donor List and The Sunday Times Giving List. The sample was appropriate for the rationale of this empirical study, as it was relatively homogenous and aligned to our research objectives and was sufficient to reach data saturation. Moreover, it was of sufficient size to enable us to derive a ‘new and richly textured understanding’ of the phenomenon under study and not so large as to impede the ‘deep, case-oriented analysis’ that we sought (Vasileiou et al., 2018, p. 2). Nevertheless, it is hypothesised that younger donors are likely to place more emphasis upon the need to demonstrate impact and accountability as they increasingly embrace ‘a “donor as investor” view of themselves’ (Fyffe, 2016, para. 1) and as such this study may perhaps not reflect their views.

Snowball sampling is a technique that relies upon existing subjects to provide referrals to recruit participants for a research study. Snowball sampling is a valuable tool for sampling from difficult-to-access populations such as the elites we examined (Ritchie et al., 2014) and hence was our primary sampling method. However, our use of snowball sampling introduced several limitations which impacted the validity of our study. Selection bias was a limitation because participants’ selection depended on ‘the subjective choices of the respondents first accessed’. As such, snowball sampling was ‘likely to be biased towards the inclusion of individuals with interrelationships’ and consequently to have over-emphasised ‘cohesiveness in social networks’ (Atkinson & Flint, 2001, p. 2).

Another limitation of our study was that (in response to the pandemic) a mixture of in-person and online interviews was employed, which might not be ideal. However, analysis of the data found no systematic differences in the findings. We were pleased by how well zoom worked as a medium, and the participants reported that they liked the convenience of zoom. A further limitation was the risk of
social desirability impacting the participants’ responses. We sought to minimise this risk by ensuring the anonymity of all participants. We concluded that as many participants were remarkably candid in their responses, not always answering questions in a way that showed them in the best light, this risk was minimised.

11 | CONCLUSION

The findings of this study support the conclusions of a systematic review published in 2020 (Greenhalgh & Montgomery, 2020), which identified a growing awareness that philanthropy should be informed by high-quality evidence. All the philanthropists in this study said they utilised evidence in some form to inform their philanthropy.

EBPh is premised upon utilising ‘science and evaluation to identify effective programs’ (Easterling & Main, 2016), suggesting that donors should seek to make rational decisions and depend upon logic. Like EBM, which seeks to triangulate the best available evidence with clinical expertise and patient values (Sackett et al., 1996), EBPh integrates the best available information from three sources or circles of evidence. However, whereas ‘in medicine, problem identification and diagnosis is relatively uncontested’, philanthropists have the added difficulty that the nature, causes, and solutions of particular problems may be contested, and therefore, they may have to contend with ‘multiple framings of policy problems’ (Oliver & Pearce, 2017, p. 2).

The findings of this study reveal that despite the emergence of new models of philanthropy (many of which are informed by the commercial expertise of the donors), very few donors employed entirely rational evidence-based models of philanthropy; instead, they relied on a hybrid model in which they relied on their instincts and sought out peer endorsement before engaging with the evidence. By employing evidence only after being introduced to a charity by a peer, donors may miss the opportunity to fund the best and most effective charities. Funding can also become polarised around non-profits with extensive social networks. Consequently, funds may not be deployed to their best effect.

We found barriers to utilising evidence included challenges in accessing evidence, difficulties understanding what evidence is in its different forms and insufficient resources to capture evidence. Facilitators of evidence use included making evidence more accessible to donors and enhanced access to professional philanthropy advice and advisors.

For EBPh to become mainstream, there needs to be considerable investment in the generation of high-quality, accessible evidence and the creation of infrastructures to ensure the knowledge transfer of that evidence. To succeed in scaling solutions to social problems, we need to facilitate access to and sharing of open data, which enables ‘scientific collaboration, enriches research and advances analytical capacity to inform decisions’ (Huston et al., 2019, para 1). We recommend drawing on the examples of several foundations (such as 360 Giving), which have initiated data sharing across open platforms to improve access to data for the social sector and grant-makers. EBPh requires us to learn lessons from failure. Sharing what has not worked or did not work as expected, contributes knowledge and can prevent others from making the same mistakes. Moreover, ‘learning from failure contributes to high-quality implementation, strategic innovation and improved governance and transparency’ (McQueen, 2022).

Investment is needed in publishing aggregated data on specific topics, including critical appraisal and synthesis of the existing evidence. Evidence gaps should be identified, and future research directed towards addressing those gaps. Philanthropy infrastructure organisations and big funders such as the Big Lottery are well placed and should be encouraged to invest in such platforms. Indeed, the Big Lottery encourages grantees to spend 10% of their grant on evaluation. The authors propose that such an approach should be standardised and that all donors should be encouraged to stipulate an appropriate amount to be spent on evaluation, which will generate more evidence and, in so doing, help to restore trust to a sector that is coming under increasing public scrutiny’ (Ainsworth, 2020).

Enhanced access to professional advisors should be facilitated. To ensure that the quality of advice offered is of the best quality, we recommend the introduction of some form of professional standards and accreditation for philanthropy advisors, to certify competence in areas including ethics and governance; monitoring and evaluation of impact and effectiveness, appraising and interpreting evidence and an understanding of the multiple donor vehicles such as donor advised funds. It is further recommended that philanthropists are encouraged to fund charity overheads.

In conclusion, high-quality evidence should inform philanthropists’ funding decisions to improve the impact and effectiveness of their giving. Rigorous evidence will also benefit non-profits as it will enable them to understand what does (and does not work) and to make better decisions, allowing them to fulfil their mission and meet their objectives. Specialist transdisciplinary research centres that can assist with these aims would be a valuable addition to the current academic landscape.

12 | RECOMMENDATIONS FOR FUTURE RESEARCH

The findings of this research suggest that the extent to which trust and relationships underpin the decision-making process of donors is not insignificant and hence would be a suitable subject for future research.

Our study disclosed that respondents felt that few non-profits had sufficient skills to monitor and evaluate the impact of their funding. Research into skills gaps in non-profits and the reasons for those skills gaps could prove a valuable topic for further study.

This study also revealed a perception that the use of evidence varies across the generations. This paper may set up further work by examining how the picture changes over the generations.

A further topic for research would be to investigate the growth in and impact of Donor Advised Funds, which have been criticised for warehousing funds and their lack of transparency (Flannery & Collins, 2022).
12.1 Implications for managers of non-profits

Non-profits rarely generate the type of evidence that potential donors seek. Managers of non-profits should seek to be transparent in how they measure and evaluate their impact and be willing to share disappointing outcomes and what has worked. Evidence allows us to understand whether a programme is effective and can help non-profits and donors to be more accountable.

ACKNOWLEDGEMENTS
The authors thank Wiley Editing Services for their manuscript formatting.

CONFLICT OF INTEREST STATEMENT
The authors declare no conflicts of interest.

DATA AVAILABILITY STATEMENT
The data that support the findings of this study are available on request from the corresponding author. The data are not publicly available due to privacy or ethical restrictions.

ORCID
Caroline Greenhalgh https://orcid.org/0000-0002-0096-1050
Paul Montgomery https://orcid.org/0000-0001-8008-1370

REFERENCES
APPENDIX A: INTERVIEW TOPIC GUIDE FOR PARTICIPANTS (DONORS)

A. Background/context
   1. Age
   2. Gender
   3. Education
   4. How long have you been a philanthropist?

B. How and when do philanthropists use evidence to inform their philanthropic practices?
   8. How do you select which causes to support?
   9. How and when do you use evidence?
   10. Do you consider any of the following?
       • The nature of an extent of the problems/issues (scale)?
       • What others are already doing about those issues (neglectedness)?
       • The extent to which the problem is solvable (tractability)
   11. What do you think are barriers to your use of evidence?
   12. What facilitates your use of evidence?
   13. Have you ever received any professional philanthropy advice?
   14. Are you a member of any giving circles/networks?
   15. Do you have any concerns about the use of evidence?

C. Trust and relationships
   16. To what extent does ‘trust’ underpin your decision to support an organisation?
   17. How do you define trust?
   18. Have you withdrawn funding in an organisation because your trust has been weakened?

D. Meaning of evidence
   19. What do you understand by ‘evidence’?
   20. Do you distinguish between ‘evidence’, ‘knowledge’, and ‘research’?

E. How do philanthropists find, consume, and understand evidence?
   21. How do you find and consume evidence?
   22. What criteria do you use to determine the quality of evidence?

F. Knowledge for the charities
   23. What do you think that charities ought to know before rolling out interventions?