

A HISTORY OF THE RONALD McDONALD HOUSE OF INDIANA, 1980-2004

Christopher S. Mize

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Philip V. Scarpino, Ph.D., Chair

Anita A. Morgan, Ph.D.

Master's Thesis
Committee

John R. Dichtl, Ph.D.

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PREFACE

On October 18, 1982, the Ronald McDonald House of Indiana (RMHI) opened near downtown Indianapolis. Located within walking distance of Riley Children's Hospital, the new nonprofit began serving the families of sick children receiving treatment at the hospital. For the next thirty years, the RMHI continued to meet the needs of those families by expanding and evolving into a professional nonprofit institution. Rightfully proud of that history, the Director of the RMHI, Beth Johnson, commissioned a written report of the founding, expansion, and development of the RMHI. This thesis is the result of that commission. Johnson formed a partnership with Dr. Philip Scarpino, Director of the Public History program, at Indiana University Purdue University at Indianapolis (IUPUI). Dr. Scarpino created a paid internship and placed me in that internship position and hired me as the intern.

The original agreement called for researching and writing a forty-to fifty-page history of the RMHI based on primary sources largely housed in the RMHI and research-based oral history interviews. Sources were scattered among twenty boxes stored in a small attic in the RMHI. I evaluated the contents of those boxes, identified useful documents, and organized them into four boxes. I also drew from the files of Beth Johnson, including minutes and summaries from the board of director meetings starting after 1990, and conducted oral history interviews with key actors in the founding and expansion of the RMHI. I spent a majority of the internship collecting and organizing written sources and carrying out the interviews. Given the circumstances, Dr. Scarpino,

Beth Johnson, and I agreed to change the goal of the project from creating a short history to writing a full-length thesis.

This thesis serves two principal purposes: First, it provides a comprehensive history of the RMHI written at the request of Beth Johnson and the RMHI board of directors. Second, it fulfills the requirements for my master's thesis in IUPUI's Public History program. In addition to providing a historical account of the genesis and growth of the RMHI, from its inception in 1979 to its expansion into Riley Hospital for children in 2004, this thesis also addresses several important historical themes. Most importantly, the history of the RMHI serves as a case study of the emergence and development of a small, modern nonprofit.¹ Nonprofits of the same size as the RMHI and other similar benevolent organizations often follow analogous developmental trajectories.

In the late 1970s, a small group of passionate individuals came together to build the RMHI. Their hard work and devotion to their creation sustained the institution throughout the 1980s. Starting in 1990 those individuals could no longer maintain the same high level of involvement and began a gradual process of professionalization with the hiring of the Beth Johnson. This process allowed them to step back from the day-to-day operations of the House. A similar pattern can be found in the history of other nonprofit institutions. A passionate individual or group creates a benevolent organization to address a specific need and then remains heavily invested in all aspects of its operation for period of years. The founders then gradually begin turning over the management of the institution to nonprofit professionals such as community organizers, grant writers, and

¹ Beth Johnson, Interview with Christopher Mize, author, Indianapolis, IN. July 23, 2009. Hereafter cited as Johnson interview with Mize.

experienced directors. The transition ensures the survival of the nonprofit as the passion and involvement of the organization's creators begins to wane, whether due age, death, or other circumstances, and allows the institution to continue fulfilling its mission.

At the same time, this thesis provides a case study of a successful example of corporate philanthropy. McDonald's initial involvement in what eventually became the RMH happened almost accidentally, but by the late 1970s, the corporation had thrown its full weight behind the concept. McDonald's consistent backing helped various groups found RMHs across the country. The McDonald's corporation has maintained a complex but beneficial relationship with the RMH program throughout its thirty-eight year history. The support from McDonald's provided the nascent RMH concept a network of resources as it began spreading across the country. Collection boxes, special promotions, and other fundraisers carried out by local McDonald's franchisees (individual restaurant owners) made major contributions to sponsoring, and operating RMHs. Their support allowed the House's to serve the families of sick children. Altruism undoubtedly motivated McDonald's franchisees, but at the same time positive publicity generated by their relationship with the Houses enhanced the public image of McDonald's restaurants and helped generate business.

The relationship turned into a true "win, win" for the company and the families the RMHs served. Marketing specialists have spent years creating a family-friendly brand for the McDonald's corporation. They portrayed the McDonald's restaurants as a destination for families, and spent many millions on advertising to present that image to the public through all forms of media. The cost of that advertising over the years certainly

dwarfs the amount the McDonald's corporation and employees donated to RMHs. Yet, the hundreds of Homes providing support for families with seriously ill children bearing the name of Ronald McDonald may have done more to build the family-friendly brand of the company in the mind of the public than the thousands of commercials McDonald's has bought throughout its history. A close examination of the history of the RMHI reveals how corporate philanthropy can be altruistic and profit-motivated, and often results in benefits for both the community and the company.

The story of the RMHI also touches on three other historical themes interconnected in the institutional history of the organization; The local history of Indianapolis, the history of medical technology, and the history of philanthropy in America. The RMHI remains an important institution in the city of Indianapolis and partners with Riley Hospital for Children - one of the most important and prestigious children's hospitals in the country. Milestones in the history of the RMHI coincide with major developments in the history of Indianapolis and Riley Hospital. In addition, advances in medical technology directly contributed to the creation of the RMH program and the development of the RMHI. New and improved treatments for serious childhood illnesses, such as leukemia and other cancers, involved lengthy hospital stays for the young patients. This created the need the RMHs addressed by providing a place for the families of those patients to stay away from the stressful and uncomfortable confines of the hospital. The RMHI continued to react to advances in medical technology throughout its history. For example, In 1985 Riley Hospital for Children opened a new Bone Marrow Transplant unit, and the RMHI responded by including isolation apartments for transplant

patients and their families in the 1989 expansion. Finally, this thesis provides a case study of a modern nonprofit that was directly affected by long-term trends in the history of American Philanthropy. For example, the professionalization of the philanthropic realm that led to the creation of professionally staffed nonprofits like the RMHI has a much longer history beginning shortly after the Civil War with emergence of “scientific philanthropy.”² The history of the RMHI reveals how some of these trends culminated in the creation of the modern nonprofit sector, and points towards possible developments in the future of philanthropy in America.

This thesis examines the history of the RMHI, one Ronald McDonald House in what has become a world-wide network of diverse institutions that share the same mission. The common mission connects these RMHs even though they operate independently and craft their institutions to cater to the different needs of their home cities and partner hospitals. The idea of providing a home for families to stay while a seriously ill child recuperated in the hospital first emerged in Philadelphia, Pennsylvania, in the mid-1970s when the first RMH opened in that city in 1974. The second House opened on the north-side of Chicago in 1977, after which the concept spread rapidly to other cities. When the RMHI began operating in Indianapolis in 1982, around 32 other cities contained RMHs.³ In 1985 the first European RMH opened in Amsterdam in the

² Judith Sealander. “Curing Evils at Their Source: The Arrival of Scientific Giving.” In *Charity, Philanthropy, and Civility in American History*, Eds. Lawrence J. Friedman and Mark D. McGarvie, (New York: Cambridge University Press 2004)

³ Karen Campbell, mother of child with Leukemia, long term Our House, Inc. board of directors member, and former board Vice President and President. First Interview with Christopher Mize, author, Indianapolis, IN, March 3, 2009. This interview and all subsequent interviews cited will be deposited with the Ronald McDonald House of Indiana and the Indiana University Purdue University Special Collections and Archives. This interview was took place after Dr. Scarpino conducted an initial interview on the same day. Hereafter referred to as Campbell first interview with Mize.

Netherlands. One year later in 1986 the 100th House opened in Long Island, New York. In 1989 the RMHI became the largest Ronald McDonald House in the world when its board finished the construction of a new wing. Other Houses, such as the RMH in Houston, eventually surpassed the RMHI in size as the concept continued to spread during the 1990s.⁴ In 1994, 164 RMHs operated in 12 different countries, and in the summer of 2008, 260 Houses served the families of sick children in 31 countries around the world.⁵ This thesis tells the history of the RMHI, one of the premier RMHs in the country, and how hard work and determination of its founders led to the creation of a haven for the families of gravely-ill children undergoing treatment at Riley Hospital. The RMHI continues to find inspiration in the original idea of providing a home-away-from-home for those families as it and the hundreds of other RMHs across the world continue to fulfill their crucial mission.

⁴ Johnson interview with Mize.

⁵ Loma Linda Ronald McDonald House, *Frequently Asked Questions*. Ronald McDonald House Charities of Southern California, Loma Linda, CA. <http://www.llrmh.org/faqs.html> (accessed April 2, 2012). Ronald McDonald House Charities, *Our History*, <http://rmhc.org/who-we-are/our-history/> Ronald McDonald House Charities, Oak Brook, IL. (accessed April 2, 2012).

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Chapter 1: The Genesis of the Ronald McDonald House Concept

On October 18, 1982, the Ronald McDonald House of Indiana (RMHI) opened near downtown Indianapolis on the campus of Indiana University Purdue University at Indianapolis (IUPUI), located within walking distance of the prestigious Riley Children's Hospital. The Ronald McDonald House (RMH) concept represented an almost perfect intersection between philanthropy and families in need. Creating the RMHI offered the opportunity for individuals, corporations, and benevolent organizations to come together and build a "home-away-from-home" for the families of sick children.⁶ When the RMH idea arrived in Indianapolis in the late 1970s, a group of collaborators representing the McDonald's corporation and restaurant owners, Riley Hospital, IUPUI, and the Indianapolis community banded together to make it a reality. On October 18, 1982, after nearly three years planning, fundraising, and construction, the RMHI's advocates and their supporters celebrated the successful opening of Indiana's only RMH. After this momentous occasion, the RMHI's board of directors and their community and corporate partners worked throughout the 1980s and 1990s to sustain, operate, and expand the home they created for the families of seriously ill children receiving treatment at Riley.

When she recalled her part in the creation of the RMHI, Brenda Duncan, currently a Marketing Director at McDonald's worldwide headquarters in Chicago, stated unequivocally that "being involved in founding, building, and oversight of the Indianapolis Ronald McDonald House is one of the most meaningful and phenomenal

⁶ Karen Campbell, first interview with Christopher Mize, author, Indianapolis, IN, March 3, 2009. Hereafter cited as Campbell first interview with Mize.

things I've done in my life.”⁷ Karen Campbell, another founding board member, felt that she “was just in the right place at the right time” to become involved with an “extraordinary group of people” who built Indiana’s first RMH.⁸ That “extraordinary” group of people contained representatives from McDonald’s, Riley Hospital, and IUPUI. It included Brenda Duncan, Jim Props, and Gerry Cassidy from McDonald’s; Dr. Stephen Beering and Dr. Chuck Richmond from Riley; and James Forslund, Karen Campbell, and Judy Monnier from the Indianapolis community. The members of RMHI’s founding board of directors described the creation of the home as “serendipitous,” believing that fate in some way brought together a group of passionate, motivated individuals in Indianapolis, Indiana, at the end of the 1970s.⁹

RMHI’s dedication in 1982 represented one part of a larger RMH movement that began in 1974 when the first “Ronald House” opened in Philadelphia. Advances in medical treatment combined with multiple historic trends in American philanthropy paved the way for a nonprofit like the RMH concept. Advances in medical care, especially in the treatment of childhood cancers like leukemia, greatly increased the survival rate for seriously ill children, but often required long-term, in-patient treatment. Advocates in Philadelphia began planning the first RMH in response to these medical

⁷ Brenda Duncan, Marketing Manager at McDonald’s Central Indiana Regional Office at the time of RMHI’s opening, and future board of directors member. Interview with Christopher Mize, author, Indianapolis, IN, June 25, 2009. Hereafter referred to as Duncan interview with Mize.

⁸ Karen Campbell, Second interview with Christopher Mize, author, Indianapolis. IN. March 25, 2009. Hereafter referred to as Campbell second interview with Mize.

⁹ Duncan interview with Mize; Campbell first interview with Mize; Jim Props, McDonald’s owner/operator, former board President, and board of directors member. Interview with Christopher Mize, author, Indianapolis, IN, July 6, 2009; Judy Monnier, former board President and Vice President and long term board member, interview with Christopher Mize, author, Indianapolis, IN, April 13, 2009. Hereafter referred to Props interview with Mize and Monnier interview with Mize.

advances and the need for long-term care.¹⁰ Many key actors in the founding of the first RMH in Philadelphia as well as the RMHI had children who suffered from leukemia. The survival rates for this form of childhood cancer improved nearly 13 percent during the late 1970s and 1980s. In fact, the 5-year survival rates for all childhood cancers combined increased from 58.1 in 1975-1977 to 66.9 percent in 1981-1983.¹¹ The founding of the first 20 RMHs across the country, beginning with the Philadelphia RMH in 1974, coincided with this period of rapid medical advancements, long hospital stays, and greater survival rates.

The medical advances in the treatment of childhood leukemia revolved around the development of “multiagent chemotherapy,” which doctors at St. Jude Children’s Research Hospital began investigating during the 1960s.¹² They developed several new drugs and used them in different combinations to create effective treatments. During the 1970s and 80s, when the first RMHs opened, the introduction of “presymptomatic therapy for central nervous system leukemia” and “alternative combinations and timings of chemotherapy combining multiple agents” significantly improved the survival rates for childhood leukemia.¹³ From 1970 to 1980, these treatments led to dramatic increases, nearly twenty percent, in the survival rate for both “Acute Lymphoblastic Leukemia” and

¹⁰ The diagnosis of invasive cancer increased slightly since 1975, from 11.5 cases per 100,000 children in 1975 to 14.8 per 100,000 children in 2004. L.A.G Ries., D. Melbert, M. Krapcho, A. Mariotto, B.A. Miller, E.J. Feuer, L. Clegg, M.J. Horner, N. Howlander, M.P. Eisner, M. Reichman, B.K. Edwards eds. *SEER Cancer Statistics Review, 1975-2004*. National Cancer Institute. Bethesda, MD, http://seer.cancer.gov/csr/1975_2004/, based on November 2006 SEER data submission, posted to the SEER web site, 2007. (accessed July 21, 2011): Table XXVIII, p. 2.

¹¹ Ibid.; Table XXVIII, 8.

¹² John Kersey, “Fifty Years of the Studies of Biology and Therapy of Childhood Leukemia,” *The Journal of the American Society of Hematology* 90 (Dec.1, 1997): 4233.<http://bloodjournal.hematologylibrary.org/> (accessed July 21, 2011).

¹³ Kersey, 4243.

“Acute Myelocytic Leukemia.”¹⁴ In addition, successful trials during the 1970s and 1980s of bone and blood marrow transplants combined with intensive chemotherapy improved these rates even further.¹⁵

Life saving procedures, such as multiagent chemotherapy, involved extended and expensive hospital stays that left the young patients’ families stranded for weeks on end in hospital lobbies or expensive hotels. The first RMH arose in Philadelphia due to the experience of one such family. When doctors diagnosed Fred and Fran Hill’s daughter, Kimberly, with “acute lymphatic leukemia” they also informed her parents that she, in all likelihood, had less than one year to live.¹⁶ Fred, a linebacker for the Philadelphia Eagles, felt the disbelief and horror that always comes with such a diagnosis, even before enduring the months of stress and worry as Kimberly underwent treatment at Children’s Hospital of Philadelphia. The Hills, like so many families at the time, spent weeks camped out at the hospital, waiting in uncomfortable lounges and sterile rooms. Their discomfort compounded the challenges of an already terrible situation, and the Hills witnessed many other parents experiencing similar circumstances.¹⁷ The life saving treatments developed in the 1970s were only available at specialty hospitals, like Children’s Hospital of Philadelphia and Indianapolis’s Riley Hospital for Children, that served large geographic areas. Families traveled long distances to reach these hospitals

¹⁴ Kersey, 4244.

¹⁵ Ibid.

¹⁶ John G. Hubbell, “The Houses that Love Builds,” *Reader’s Digest* (Reprinted from June 1981), 1.

¹⁷ Hubbell, 1.

and either accrued expensive hotel bills or spent day and night by their child's bedside, sometimes catching a few hours sleep in a hospital lounge.¹⁸

Like other parents, Fred and Fran Hill rarely left Kimberly's side as she suffered through the chemotherapy treatments for her leukemia, and experienced the incredible stresses that situation puts on a family. At the same time, however, Fred Hill's status as a Philadelphia Eagle linebacker gave him access to individuals who could help publicize and raise money for the battle against childhood cancers like leukemia. Hill approached his team for help and the wives of Eagles players responded by organizing a fashion show that raised \$10,000 for cancer research.¹⁹ Hill wanted to do more and spoke with the head of pediatric oncology at the Children's Hospital of Philadelphia, Dr. Audrey Evans, asking how he and his team could increase their involvement. This meeting led to the formation of the "Eagles Fly for Leukemia" organization. Under the supervision of the Eagle's general manager, Jim Murray, this group raised \$125,000, which funded the construction of a new wing for the Children's Hospital of Philadelphia now known as the "Philadelphia Eagles Oncology Center."²⁰

After successfully funding the new wing, Dr. Evans next suggested to Hill and Murray that the Eagle's raise enough money to build a "home-away-from-home" for children undergoing treatment at her hospital.²¹ Having cared for hundreds of children

¹⁸ Duncan interview Mize, Campbell first interview with Mize.

¹⁹ Hubbell, 2.

²⁰ Ibid., 3.

²¹ RMHI Information Packet. Ronald McDonald House of Indiana. Ronald McDonald House Archives, Indianapolis, IN. (This paper cites documents the author gathered from twenty unlabeled boxes located in the attic and main office of the RMHI. The author, Christopher Mize, condensed relevant material into four boxes, which the RMHI allowed him to use as part of long-term loan. Those boxes will return to the RMHI at the conclusion of this thesis. Material from these boxes hereafter cited as Records Boxes RMHI).

like Kimberly Hill, Dr. Evans recognized the need for a sanctuary for the parents of her patients. They needed a place to rest close enough to the hospital that they could easily travel between it and their recuperating children.²² Jim Murray loved the idea of building such an institution and used the connections he formed as the Eagles General Manager and head of the “Eagles Fly for Leukemia” organization to raise money and awareness for the nascent project. Murray contacted an acquaintance, Don Tuckerman, who worked as an advertising executive in McDonald’s Philadelphia regional office. He explained the project, and Tuckerman agreed to enlist the support of McDonald’s restaurants in Philadelphia to raise enough money to buy and refurbish a house near the Children’s Hospital of Philadelphia. Together, Murray and Tuckerman persuaded McDonald’s franchise owners to participate in the promotion they had created as fundraiser. Starting in the early 1970s, McDonald’s restaurants offered the special “Shamrock Shake” for a limited time to celebrate the March holiday St. Patrick’s Day. In 1974, Philadelphia-area franchisees agreed to donate all the shake sales to the cause, and Murray provided the Eagle’s star quarterback, Roman Gabriel, for the promotion’s commercials. That one-week Shamrock Shake promotion raised \$35,000 for the cause. In return for McDonald’s enthusiastic support, Murray also agreed to Tuckerman’s one request to name the house after McDonald’s child friendly mascot, Ronald McDonald.²³

Dr. Evans had already chosen a four-story, seven-bedroom house near her hospital for the future site of the Philadelphia RMH, and the shake promotion netted almost enough to purchase the house outright. The project, however, needed more money to pay

²² Hubbell, 3.

²³ Ibid., 4.

for the extensive renovations the former boarding house for students required. Dr. Evans reached out to John Canuso, a New Jersey land developer whose own daughter had just been diagnosed with leukemia. Canuso led a group of friends who spent about \$150,000 of their own money to completely gut and renovate the home.²⁴ Through the passionate efforts of Fred Hill, Dr. Audrey Evans, Jim Murray, the Philadelphia Eagle's, John Canuso, and many others, the first Ronald McDonald House opened on October 15, 1974. By Christmas of that year, seven families with severely ill children were staying in the House.²⁵

McDonald's decision to support the project proved instrumental to the success of what became the RMH of Philadelphia, and the continued support from both corporate headquarters and local franchisees played a vital role in the concept's expansion throughout its history. It is important to distinguish among McDonald's corporate employees, those who work in the company's corporate headquarters in Chicago and in various regional offices across the country, and McDonald's franchisees, who receive licenses from McDonald's corporate headquarters to own and operate a McDonald's restaurant. Every new RMH required the firm backing of both the main branches, the corporate employees and the restaurant franchisees, of the McDonald's corporation. McDonald's corporate approves franchise applications, trains potential operators, and monitors individual restaurant quality within the McDonald's chain. If any franchisee does not meet the company's standards, McDonald's corporate can immediately revoke its license. The regional offices hold the final approval for any licenses within their

²⁴ Ibid.

²⁵ Ibid.

geographic area and help disseminate information from McDonald's headquarters on best practices and appropriate standards to restaurants throughout the system. In addition, McDonald's regional offices coordinate with public relations firms and operators to create marketing campaigns for their market and have final approval for any licenses within their region.²⁶

After receiving their license and training from corporate, McDonald's franchisees oversee the day-to-day operation of their individual restaurants. Owners set the hours, wages, and prices for their franchise, though these tend to remain standardized. Most operators consider it advantageous to keep restaurants similar so customers know what to expect when they walk into any McDonald's restaurant across the country. The operators also organize themselves into cooperatives based on the restaurant's media market. The company usually defines a "media market" based upon television signal strength, so for example the Fort Wayne and South Bend co-ops in Indiana include all restaurants serving individuals who fall within the ranges of those city's television stations. These co-ops determine what media campaigns to run in their market, and more importantly for development of the RMH concept, they determine what charitable causes to champion as part of an overall public relations plan. All such plans are developed in cooperation with the regional office responsible for their media market. The regional office usually works closely with McDonald's central office in Chicago and a local marketing agency to create a media or marketing proposal, which they present to the co-op. The co-op's franchisee members then vote to approve or reject that plan. The co-ops use the same process when

²⁶ Duncan interview with Mize; Props interview with Mize.

they decide to participate in a charitable project that involves the entire market region.²⁷

In the case of the first RMH, Don Tuckerman needed the approval and cooperation of the franchisees within the Philadelphia region to support the planned House.

Tuckerman's request to name the Philadelphia institution after Ronald McDonald continued a long-standing McDonald's corporate practice of engaging in philanthropic activities for both altruistic and profit motives. The company's corporate culture explicitly approved of and encouraged their franchisees and regional offices to participate in philanthropic endeavors within their communities. Starting in the 1950s, McDonald's used charitable opportunities to improve their communities and simultaneously to generate positive press. Fred Turner, a McDonald's corporate executive responsible for creating standards for performance and quality for all franchisees, openly admitted that profit initially motivated his company's early corporate philanthropy. After Ray Kroc hired him in 1957, Turner recalled McDonald's became involved in corporate giving "for very selfish reasons," because "it was an inexpensive, imaginative way of getting your name before the public and building a reputation to offset the image of selling fifteen-cent hamburgers. It was probably ninety-nine-percent commercial."²⁸

Cooper, Burns, and Golin, the public relations firm for McDonald's corporate headquarters, sent press kits to restaurant franchisees full of advice on how to use philanthropy and local charity to gain free publicity. These press kits recommended owner/operators engage in charitable acts like donating money from hamburger sales to pay for new band uniforms for nearby schools. The materials suggested that not only

²⁷ Ibid.

²⁸ John F. Love, *McDonald's: Behind the Arches* (Toronto: Bantam Books, 1986), 212.

would the donation raise good will in the community, it would also cause the students from the school to encourage their parents to frequent the restaurant. As a “drive-in chain looking to appeal to a family market and seeking respectability in an industry burdened with a questionable reputation, the community involvement from local operators produced the type of image-boosting publicity that McDonald’s needed.” Their strategy went beyond both philanthropy and basic advertising because it provided publicity rooted in charitable acts, and boosted sales without the costs associated with traditional marketing campaigns.²⁹

As the idea spread through McDonald’s decentralized franchise system, however, the “corporate marketing strategy” transformed into a “grassroots movement.” Restaurant operators began independently promoting their stores and developing relationships within their communities through charitable deeds done on the local level. Franchise-generated philanthropy became an “epidemic” that spread quickly through the McDonald’s system. McDonald’s corporate stopped sending out press kits filled with ideas for charitable giving, and instead acted as a “clearinghouse for community relations ideas developed - and proved successful - by local operators.”³⁰ Engaging with the community through charity became part of McDonald’s corporate culture. While “local operators” initiated most “of McDonald’s community work...without pressure from the company,” most restaurant operators treated “community relations” as an essential, unspoken part of

²⁹ Love, 212.

³⁰ Love, 213.

owning a McDonald's franchise. They viewed this engagement as a classic win-win situation where both the community and McDonald's benefitted greatly.³¹

This attitude towards corporate philanthropy continued growing throughout the 1970s, and by the mid-1980s, McDonald's corporate executive Fred Turner estimated that the "charitable contribution" of the "McDonald's System—company and franchised operators" exceeded "\$50 million annually, or about 4 percent of estimated pretax profits of the system."³² Therefore, when Jim Murray, the Philadelphia Eagles General Manager, approached Don Tuckerman, a marketing executive at McDonald's Philadelphia Regional Office, with the RMH concept, Tuckerman committed to the project quickly and with little reservations. The Philadelphia franchisees continued the McDonald's tradition of engaging in philanthropy by agreeing to support the project. Most importantly, McDonald's corporate office in Illinois fulfilled its "clearinghouse" role, and began disseminating the idea throughout the company's extensive network. The concept spread first from Philadelphia to Chicago. Dr. Edward Baum, a physician at Children's Memorial Hospital of Chicago, and the parents of some of his young cancer patients, worked with McDonald's representatives to create a facility modeled after the first RMH in Philadelphia.³³ After buying an old nunnery from the Archdiocese of Chicago, a group of dedicated volunteers renovated and furnished the Chicago RMH, which opened in

³¹ Ibid.

³² Ibid.

³³ RMHI Information Packet, Records Boxes RMHI, 5.

1977.³⁴ The Chicago RMH's founders included Karen Campbell who three years later played a crucial role in the planning and opening RMHI.

After the successful opening of the Chicago House in 1977, McDonald's headquarters created an office devoted to bringing RMHs to other markets. As soon as McDonald's employees in those markets, such as Brenda Duncan in McDonald's Central Indiana Regional Office, learned about RMHs in Philadelphia and Chicago they and the franchisees they worked with wanted one of their own.³⁵ New groups from various cities, usually made up of both community representatives and local McDonald's employees, approached McDonald's corporate about bringing a RMH to their community. The central office would then send a team to perform a "feasibility" study that focused on answering four main questions: did the city need a RMH; second, would the group have a hospital that would enthusiastically partner with the House; third, did the House have the support of the region's McDonald's corporate office and McDonald's franchisees; fourth, and perhaps most importantly, would the community support the project?³⁶ As the RMH movement picked up speed, McDonald's sponsored a nonprofit, Children's Oncology Services, that acted as a "clearinghouse," disseminating best practices and strategies to Houses across the country.³⁷

³⁴ Karen Campbell, interview by Philip Scarpino and Christopher Mize, March 3, 2011, Indianapolis, IN. Dr. Scarpino conducted forty-five minutes of Karen Campbell's first interview to train the author, Christopher Mize, on proper oral history techniques. Hereafter cited as Campbell interview with Dr. Scarpino and Mize. Christopher Mize conducted the rest of the first interview alone, which is cited as Campbell first interview with Mize.

³⁵ Duncan interview with Mize; Campbell second interview with Mize.

³⁶ Ibid.

³⁷ Duncan interview with Mize.

Long term trends in the history of philanthropic practices in the United States provided the foundation for the creation of the RMH concept as part of the overall rapid expansion of the American nonprofit sector in the 1970s. The most significant historic trend, the birth of “scientific philanthropy,” came shortly after the Civil War. Scientific philanthropists used targeted charity to solve specific social, environmental, or civic problems.³⁸ The emergence of multimillionaire-funded foundations in the first two decades of the twentieth century, such as the Carnegie and Rockefeller foundations, continued the development of scientific philanthropy. These foundations pursued “cures” for social ills and funded the development of a nascent nonprofit sector, under the guidance of “philanthropic professionals” such as sociologists, grant supervisors, social workers, and full-time managers of benevolent organizations. The scientific philanthropists who tried to eradicate poverty, illiteracy, or poor public health created a legacy of using targeted giving to alleviate a specific societal need.³⁹ Like their philanthropic predecessors, the creators of the RMH mission addressed a specific need through focused philanthropy. They sought to reduce the stresses placed on the families of sick children by providing a secure sanctuary where they could rest and recuperate.

Another important historic trend that contributed to the emergence of the RMH concept was the gradual transformation of the nascent nonprofit realm of charities, foundations, and benevolent organizations into the modern “nonprofit sector,” particularly in the fifty years following the Second World War. The concept of a

³⁸ Judith Sealander. “Curing Evils at Their Source: The Arrival of Scientific Giving.” In *Charity, Philanthropy, and Civility in American History*, Eds. Lawrence J. Friedman and Mark D. McGarvie, (New York: Cambridge University Press 2004), 220.

³⁹ Robert H. Bremner, *American Philanthropy* (University of Chicago Press, 1960), 162.

“nonprofit” charity or organization existed before World War II, as the tax privileges that allowed groups to claim this designation were written into the Internal Revenue Code in 1917. Before World War II, however, only a handful of the tens of thousands of qualified “charitable trusts, voluntary associations, eleemosynary corporations, religious bodies, and other entities” claimed the nonprofit designation. At the time, low individual and corporate tax rates and the fact that “few Americans earned enough to be subject to income taxation” provided little incentive for any benevolent organization “to register for exempt status.”⁴⁰

The institution in 1942 of a “universal personal income tax” and “steeply progressive tax rates for individuals and corporations” sparked a dramatic increase in the number of registered nonprofits in America.⁴¹ The new income tax motivated charities with corporate charters to become nonprofit entities in order to receive tax deductible donations. The progressive income tax provided the incentive for wealthy individuals and large corporations to make tax deductible donations to philanthropies and foundations with nonprofit status. These donations reduced the tax burdens of both individuals and businesses, making philanthropic activities more attractive than ever to America’s wealthy upper class.⁴² The new regulations and the donations they encouraged caused the number of registered nonprofits to increase from “about 12,000 in 1940 and 50,000 in 1950.” By the 1960s “more than 300,000 charitable tax-exempt entities” had registered.

⁴⁰ Peter D. Hall, “The Welfare State and the Careers of Public and Private Institutions Since 1945” in *Charity, Philanthropy, and Civility in American History* Eds. Lawrence J. Friedman and Mark D. McGarvie (New York: Cambridge University Press, 2004), 364.

⁴¹ Hall, 364.

⁴² Ibid.

That number doubled during the 1970s, the period when RMHs began opening across the country. Now, at the beginning of the new millennium, “nearly a million and a half” nonprofit organizations have registered with the Internal Revenue Service.⁴³

As the number of nonprofits grew, the federal government instituted policies and procedures to manage the new “welfare state” that developed during the Great Depression and WWII. Unlike the more “centralized bureaucracies” that emerged in war-ravaged Europe, America created a different welfare state that “centralized certain activities (e.g., revenue gathering and policy-making) and decentralized others (e.g. implementation of social welfare and educational programs) to state, local, and private sector actors.” America’s more decentralized welfare state created a complex system that “produced new kinds of political relationships in which nonprofit organizations came to play increasingly important roles.”⁴⁴ The traditional understanding of what constituted a philanthropy or charity began to blur as advocacy-oriented nonprofit entities proliferated after the war. National mass membership organizations with the “501 (c)(3) status,” (registered nonprofit status) like the Audobon Society, the Sierra Club, and the American Association of Retired Persons, promoted issues and causes traditionally championed by passionate individuals and trade associations.⁴⁵ These new types of nonprofits paved the way for the RMH program and allowed the Houses in Philadelphia, Chicago, and eventually Indianapolis to easily gain 501 (c)(3) status as they joined the ever-expanding modern nonprofit sector.

⁴³ Hall, 363-364.

⁴⁴ Ibid., 369.

⁴⁵ Ibid., 370.

Corporate philanthropy, or the charitable actions and donations of massive for-profit businesses and institutions, grew alongside the nonprofit sector as the laws and regulations loosened and made corporate giving easier. Before 1950, legal questions about the “distinct issue of whether or not the managers of corporations may donate money belonging not to them personally but to shareholders” severely restricted the growth of corporate philanthropy.⁴⁶ In several court cases brought by shareholders against private businesses, the courts sided with the shareholders ruling that “corporate giving could not be wholly philanthropic.”⁴⁷ In one example, *Old Mission Portland Cement Co. v. Helvering*, the court ruled that the company could not count a donation to a local Community Chest as a business expense because it did not directly benefit their employees. The court rejected the company’s argument that raising the good will of the community would benefit their business, making their donation a legitimate business expense. The ruling placed corporate philanthropy on shaky legal ground. Therefore, before 1950, most corporate philanthropy directly benefited their employees with charitable acts such as housing projects, education programs, and small donations for company employees.⁴⁸

After 1952, the definition of what legally “benefitted a business” began to expand, increasing company’s charitable options by protecting them from shareholder lawsuits. In the case of *A.P. Smith Manufacturing Company v. Barlow*, a landmark case for corporate philanthropy, the New Jersey Supreme Court ruled that a law passed in the state allowing

⁴⁶ Jerome L. Himmelstein, *Looking Good & Doing Good: Corporate Philanthropy and Corporate Power* (Bloomington: Indiana University Press, 1997), 15-16.

⁴⁷ Himmelstein, 18.

⁴⁸ *Ibid.*

businesses to donate directly to educational institutions applied retroactively to all corporations in the state. More importantly, this case “articulated a justification for corporate philanthropy broad enough to encompass all corporate support of higher education, no matter how remote from the specific interests of the individual donor.”⁴⁹ In other words, the courts had begun to accept the argument that corporate philanthropy that benefitted the community in broad fashion also benefitted the corporation, meaning corporate philanthropy did not run contrary to interests of a company’s shareholders. Overall, corporate giving exploded from 1950 to the 1970s, growing “dramatically from \$252 million in 1950 to \$482 million in 1960 to about \$1 billion per year in the early 1970s, hitting about \$6 billion per year in the late 1980s.”⁵⁰

The RMH of Philadelphia relied on McDonald’s corporate philanthropy as it emerged into the expanding nonprofit sector in 1974, and it began fulfilling its focused mission of providing shelter and comfort to families of sick children undergoing treatment at the Children’s Hospital of Philadelphia. Court decisions that legalized corporate philanthropic acts that improved a company’s public image encouraged a nonprofit sector where public, private, and nonprofit organizations were regularly intermeshed. This allowed founders of RMHs to partner legally with McDonald’s corporation to make their vision a reality. For its part, by the 1970s McDonald’s was already encouraging its employees and franchisees to aggressively pursue charitable opportunities. In that context, the RMH concept provided an almost perfect blend of community service, good work, positive publicity, and an enhanced brand image.

⁴⁹ Ibid., 21.

⁵⁰ Ibid., 22.

What started in Philadelphia in 1974 as a simple way to support parents whose children were undergoing long-term cancer treatments, spread rapidly. By 1979, ten RMHs had opened near hospitals in cities across the country. The willingness of the McDonald's corporation to support the concept for reasons both altruistic and profit-driven protected the new RMHs as they competed for funds within a rapidly expanding and increasingly complex nonprofit sector. The RMH concept, because of its compelling mission to provide a "home-away-from-home" for the families of sick children, inspired individuals like Jim Murray and Karen Campbell to dedicate themselves to the House's mission. Individuals wanting to make a tax deductible donation to a worthy cause often chose a RMH because it provided them a unique opportunity to support seriously ill children and their families as they lived through a terrifying experience with which almost anyone could empathize. Brenda Duncan and her co-workers in the McDonald's Central Indiana Office wanted to bring a RMH to Indianapolis, and began building support and recruiting passionate individuals attracted to the House's mission in 1979. These early RMHI advocates spent the next three years building an institution that provided (and continues to provide) a safe space, a respite, a sanctuary, and a home for the families of seriously ill children.

Chapter 2: The Founding of the Ronald McDonald House of Indiana, 1979-1982

The RMH concept gained momentum in Indianapolis not long after the second House opened on the north-side of Chicago in 1977. The desire to build a RMH in the city began in McDonald's Central Indiana Regional Office, where Brenda Duncan, the office's Marketing Manager, recalled employees wanting to bring the concept to Indianapolis when they learned of its success in Philadelphia. Duncan's office saw building a House in the city as an obvious choice because of Riley Children's Hospital.⁵¹ As Duncan explained, Riley was "one of the premiere children's hospitals in the U.S., and of course, the major children's hospital in the state of Indiana." Furthermore, patients and their families often traveled great distances to receive specialized treatments available only at Riley, which created "a need to house families of seriously ill children who have to have extended stays." Duncan and her colleagues believed that the McDonald's franchisees in their region (which included all the major markets in Indiana as well as Louisville and Lexington, Kentucky, and Nashville, Tennessee) would financially support the building of a House. They based this belief on conversations with local McDonald's owner/operator Gerald Cassidy, who enthusiastically supported the idea of building a RMH near Riley Hospital. Like the McDonald's employees who supported RMHs in other states, the desire to improve their communities and to generate positive press for McDonald's restaurants in Indiana motivated the employees of the Central Indiana Office. For example, Brenda Duncan knew building a RMH in Indianapolis would be a significant public relations coup for her office. She also knew

⁵¹ Duncan interview with Mize.

that families with children undergoing treatment at Riley needed an affordable and comfortable to place to rest and recuperate.⁵²

In late 1979, Brenda Duncan, her colleagues at the McDonald's regional office, and Gerald Cassidy reached out to two other groups that played critical roles in the founding of every RMH. RMHs required the support of a hospital that understood and accepted the RMH concept. A RMH could never succeed without a hospital acting as a willing partner because the House would not have access to the individuals who required its services. RMHs also depended on the support of the communities in which they were located. Most of a RMH's monetary support and all of its volunteer workers came from local sources - not from McDonald's as the name might suggest. After a RMH's founding, community support became even more important because a House needed strong, local backing to continue growing and operating.⁵³ In addition, all RMHs must have the full backing of the McDonald's franchise owners, regional office employees, and corporate officials within the market where the House is located. Advocates of RMHs called these three groups - a partner hospital, local McDonald's franchisees and corporate employees, and the community - the "crucial triangle" or the "three legged stool." No RMH could succeed without the enthusiastic support of all three.⁵⁴

Duncan, Cassidy, and their allies started with the Riley side of the "crucial triangle," and approached doctors at the hospital in late 1979 with the idea of building a

⁵² Ibid.

⁵³ Ibid.; Mize first interview with Campbell.

⁵⁴ Mize interview with Duncan.

RMH in Indianapolis.⁵⁵ The first meeting on October 4, 1979, between representatives from McDonald's and Riley did not unfold as Duncan and the other RMH advocates hoped. Riley's representatives included the IU Medical School Dean, Dr. Stephen Beering; the Physician-in-Chief of Riley, Dr. Horace Green; the Medical Director of Indiana University/Purdue University at Indianapolis (IUPUI), Dr. George Lukemeyer; and a physician from Riley's Hematology department, Dr. Robert Baehner. These doctors described to Duncan, Cassidy, and other representatives from the McDonald's Central Indiana office, a planned expansion at Riley that would add one hundred beds to the institution. They proposed that McDonald's fund a "Ronald McDonald wing, or Pavilion" that could become "part of their existing Parent Care Program," instead of building a new structure separate from the hospital.⁵⁶ The Riley representatives believed that "doctors and patients would both feel more secure if it [the RMH] were a part of the existing building." Dr. Beering recalled first learning of the RMH concept through Judy Monnier, who later became deeply involved in the planning and construction of the RMHI. Dr. Beering remembered being impressed by the idea of creating a "home-away-from-home" for the families of sick children.⁵⁷ During the first meeting with the representatives from McDonald's, however, it became clear Dr. Beering had concerns about the feasibility of building a RMH near Riley, which was part of the larger IU Medical Center. He worried

⁵⁵ Ibid.

⁵⁶ Conference Report on Ronald McDonald House Meeting, October 4, 1979, taken from Brenda Duncan's personal files, copied and mailed to the author. Documents will be deposited at the RMHI at the conclusion of the project. Hereafter cited as Duncan Personal Files. Indianapolis, IN: 1-2.

⁵⁷ Dr. Stephen C. Beering, Dean of the Indiana University School of Medicine and the Director of the Indiana University Medical Center (which included Riley hospital) at the time of the RMHI's opening. He also became one of the original board members of the new House. Interview with Christopher Mize, author, Indianapolis, IN, May 29, 2009. Hereafter cited as Dr. Beering interview with Mize.

specifically about finding a site for the RMHI within walking distance of the hospital because IUPUI, which came into existence as a campus of Indiana University in 1969, owned all of the structures and property surrounding Riley and the IU Medical Center.⁵⁸

Riley's proposal that McDonald's help expand Riley ran contrary to the pattern established by Philadelphia, Chicago, and several other RMHs that opened before 1979. Bud Jones, a McDonald's representative, attempted to persuade Riley's representatives by explaining the RMH concept in greater detail. He told the doctors "that the average stay for parents and siblings in a Ronald House was 2-1/2 days; the houses, all but one, are free standing houses; that they average 8 bedrooms with most houses being within walking distance from the hospital." Jones also stressed that parents utilizing the house would pay next to nothing for their stay, and that no one was turned away due to an inability to cover the minimal cost.⁵⁹ Riley's doctors, however, maintained that they would rather have McDonald's become involved with their hospital through a sponsorship of the new wing. The Riley representatives wanted to expand the hospital, which caused them to be hesitant about backing a project that needed a new structure disconnected from the main building.

Both parties left the October 4, 1979, meeting disappointed, but neither group completely rejected the possibility of working together in the future. The McDonald's representatives remained determined to build a RMH in Indianapolis and considered undertaking "a feasibility study on establishing a Ronald House in connection with

⁵⁸ Conference Report on Ronald McDonald House Meeting, October 4, 1979, Duncan's Personal Files, Indianapolis, IN: 1-2.

⁵⁹ Ibid.

Methodist Hospital's Children's Pavilion."⁶⁰ The RMH's advocates, however, saw this action as an unfortunate compromise and "expressed disappointment in the possibility of not being able to work with Riley Hospital."⁶¹ Their ideal vision for the RMHI remained a freestanding structure partnered with Riley, because of the hospital's "fine reputation" and its ability to "draw patients from throughout the state."⁶² Fortunately, the doctors at Riley reconsidered their decision and became staunch supporters of building a RMH in association with their hospital within months after their initial meeting with the McDonald's representatives. The doctor's minds changed so quickly that Dr. Beering later could not recall ever hesitating to support proposed partnership between Riley and the future RMHI.⁶³

While it remains unclear exactly what triggered this rapid shift in attitude, it appears Dr. Green and Dr. Beering became more enthusiastic about the project after traveling to see the Philadelphia RMH in late 1979 and because of support for the idea received from individuals within the communities Riley served.⁶⁴ One such community member, Mrs. Glassburn of Goshen, Indiana, sent a letter to IU's Director of Hospitals, describing how she had just lived for four and half weeks in Riley's uncomfortable "IC lounge" while her daughter received emergency treatment. She believed that having a place like a RMH to wash her clothes, shave her legs, or spend the night while her daughter underwent treatment "would have been wonderful." Furthermore, she knew

⁶⁰ Ibid.

⁶¹ Ibid.

⁶² Ibid.

⁶³ Dr. Beering interview with Mize.

⁶⁴ Ibid.

families in her predicament could not “afford to pay \$27.00” to stay at the only hotel near the IUPUI campus. She concluded by saying, “I hope that I will never again have to spend any time at Riley, but if I do, I know I would be more comfortable knowing that I had a place to call home while in Indianapolis with my child.”⁶⁵

Dr. Beering became one of the RMHI’s staunchest and most important supporters in the years leading up to the Home’s opening in 1982.⁶⁶ Dr. Beering came to believe the RMH concept meshed nicely with Riley’s mission of treating the whole family, and he rallied support for the project within the hospital.⁶⁷ Eventually, Riley’s doctors, nurses, and other staff members enthusiastically supported the RMHI project, and the hospital became the firm partner that the Home’s early advocates originally sought. Dr. Beering and Dr. Horace Green, as well as other doctors at Riley including the administrator of Riley Hospital, Dr. Charles Richmond, and the head of neonatal care, Dr. Richard Schreiner, began working closely with the McDonald’s representatives to start planning Indiana’s first RMH.⁶⁸

Having secured the backing of key individuals at Riley Hospital, the RMHI’s early advocates decided to incorporate officially as a nonprofit entity and to form a board of directors to plan, build, and eventually operate the Home. Dr. Morris Green, from the Pediatrics Department at Riley, suggested the name “Our House” for the new nonprofit, based on the poem “Little Orphant [sic] Annie.” The poem, by the famous Hoosier writer

⁶⁵ Mrs. Dolores Glassburn to Roger Hunt, Director of Hospitals, Indiana University Hospitals, November 5, 1979, Duncan Personal Files, Indianapolis, IN.

⁶⁶ Dr. Beering interview with Mize.

⁶⁷ Duncan interview with Mize.

⁶⁸ Duncan interview with Mize; Dr. Beering interview with Mize.

James Whitcomb Riley (the hospital's namesake), tells the story of an orphan girl who comes "to our house to stay."⁶⁹ The rest of the group approved, and formed the nonprofit "Our House, Inc." in late 1979.⁷⁰ The group made sure that the new board represented all sides of the "crucial triangle" by including representatives from McDonald's, Riley Hospital, and the greater Indiana community. The first Our House Board included James F. Forslund as the President, Karen L. Campbell as Vice President, Dr. Charles Richmond as Secretary, Gerald J. Cassidy as Treasurer, Dr. Steven C. Beering, Brenda K. Duncan, and Gordon K. Durnil.⁷¹ Although not members of the first board, community representative Judy Monnier and McDonald's franchisee Jim Props joined the board soon after its formation and played vital roles in the RMHI's founding.

Each of these founding fathers and mothers connected the board to a particular "side" of the "crucial triangle" and provided a firm foundation for the board's future endeavors. Our House, Inc.'s founders understood the important role community support, within Indianapolis and around rest of the state, would play in the founding and successful operation of the future RMHI. They placed community representatives in key leadership positions on the board. The first president of the Our House, Inc. board of directors, James Forslund, had deep connections in both Indianapolis and Riley Hospital for Children. Years before becoming involved with the RMHI, James and his wife Sherry founded the Riley Cancer Research Foundation in honor of their daughter who had succumbed to cancer while undergoing treatment at Riley. Together, James Forslund and

⁶⁹ Dr. Morris Green to Brenda Duncan, July 18, 1980, Duncan Personal Files, Indianapolis, IN.

⁷⁰ Duncan interview with Mize; Campbell second interview with Mize.

⁷¹ RMHI Information Packet, Records Boxes RMHI, Indianapolis, IN.

his wife brought to the board their wealth of experience gained working in Indiana's nonprofit sector and their connections to donors who had previously given to the Riley Cancer Research Foundation.⁷²

The group appointed Karen Campbell as the Vice President of the Our House, Inc. board of directors because of the practical knowledge she gained as one of the founders of the Chicago RMH. More importantly, they knew her experience battling alongside her young son he fought cancer had left her with a fierce commitment to the RMH concept. Campbell gained that experience during her son's battle against cancer. On March 14, 1975, doctors at Children's Memorial Hospital in Chicago diagnosed her son, Kevin, with childhood leukemia four days before his second birthday.⁷³ After his diagnosis, the doctors gave Kevin less than a fifty-fifty chance of survival but advised Campbell that he "met certain guidelines" and qualified for "a brand new treatment that had been just released as a protocol." Kevin was the first child to undergo the treatment in United States. The doctors guessed it might allow him to "survive three years" when better treatments might be available. Karen decided to make "the biggest gamble you can make, [and] gambled my kid's life on what they were talking about and we signed away our life." The hospital flew in the experimental drugs from France, and Kevin managed to overcome allergic reactions and radiation and went into remission within the first month. He then suffered through "daily chemo for five years and he had tons of radiation to the brain," which left him with "a learning disability and short term memory loss and some

⁷² Karen Campbell. "Our House, Inc. Ronald McDonald House Project Overview," Records Boxes RMHI, Indianapolis, IN.

⁷³ Campbell interview with Dr. Scarpino and Mize.

deep tendon loss and some reflex loss.” The leukemia never returned, and Kevin now has three college degrees and jokes the only negative consequence he experienced was becoming “a six foot normal man” instead of a “seven foot genius.”⁷⁴

When Karen Campbell approved using the new treatment in 1975, she had no way of knowing the outcome of her “gamble.” During the first weeks of his treatment, Kevin spent three days a week at the hospital and “was extremely sick” the days between.⁷⁵ Campbell spent those weeks traveling back and forth between her family’s home in East Chicago, Indiana, Children’s Memorial in downtown Chicago, and a friend’s house near the hospital. Each day Kevin endured cancer treatments that included radiation, spinal taps, and the experimental drug treatments. The first night Kevin spent in Children’s Memorial, Campbell sat down in a straight chair next to where Kevin slept and “leaned forward against the metal crib apparently and fell asleep.” She has a vivid memory of “being gently pulled back” as “the father from across the room put a pillow on my forehead and then put me forward so I had something soft to lean against.”⁷⁶ Campbell lived in similar discomfort for weeks, sometimes catching a nap at her friend’s house in between sitting by Kevin and caring for her other infant son, Scott. Campbell “couldn’t separate” from Kevin, and the stresses of the situation resulted in complete exhaustion.⁷⁷ She understood how the absence of an institution like the RMH forced undue stress on parents, as the everyday responsibilities of life and the desire to comfort their sick child

⁷⁴ Ibid.

⁷⁵ Ibid.

⁷⁶ Ibid.

⁷⁷ Ibid.

pulled them in opposite directions. This understanding fueled her passion to ease the burdens placed on families of sick children and motivated her to establish RMHs first in Chicago and next in Indianapolis.

Karen Campbell gained the practical knowledge of how to plan and open a RMH after becoming involved with the founding of the Chicago House. Dr. Edward Baum, one of the doctors working at Children's Memorial, approached the parents in Karen's "Friday clinic group" that gathered in the hospital while their children underwent treatment. Dr. Baum shared with the group what he learned about the new Philadelphia RMH and explained its mission to Campbell and the other members of her group. Campbell remembered having the "very selfish" thought, "Oh, I could use that," when Dr. Baum first explained the RMH concept to her. Dr. Baum persuaded Campbell and a few others to help him bring a RMH to Chicago, and she began working with Baum shortly after his presentation to her group. Karen supervised the practical aspects of fundraising and planning for the Chicago RMH including determining the number of plates, linens, and beds the house needed; raising money from community groups; and cold calling vendors to obtain in-kind donations such as mattresses from Serta.⁷⁸

After the Chicago RMH opened in 1979, Campbell remained on its board of directors, meaning she spent more than a year building and operating Chicago's first House. During that time, Campbell joined the RMH's National Advisory Board, which later became the International Advisory Board after RMHs opened in other countries. The advisory board assembled to share information and best practices for opening and

⁷⁸ Ibid.

operating RMHs.⁷⁹ In retrospect, Karen looked at her involvement with the Chicago RMH as a way of taking “something good...out of a bad situation.”⁸⁰ That “good” ensured that she arrived in Indianapolis with a wealth of practical experience and connections that proved essential in the planning, founding, and operating of the RMHI. She became one the most important and influential members of Our House, Inc.’s board, and its other members relied on Karen to handle many of the “practical” aspects of building the RMHI.

Judy Monnier and Gordon Durnil rounded out the community’s representation on the original Our House, Inc. board. Judy Monnier first heard about the RMH concept through her membership in Alpha Delta Pi sorority, which she remained deeply involved in after her graduation from Duke University. Alpha Delta Pi made RMH its national charity in the late 1970s, which meant sorority members across the country raised money on behalf of the RMHs being built in various cities. Monnier “fell in love” with the RMH mission while fundraising for it with her sorority and wanted to build a House in Indianapolis. Like Brenda Duncan and the other regional McDonald’s employees, Monnier believed the presence of Riley Hospital made the city the perfect site for a new RMH. Monnier contacted both the Central Indiana McDonald’s office and Riley before the Our House, Inc. nonprofit officially formed in late 1979 to find out if they planned to build a RMH. After its formation, the board remembered Monnier’s early inquires and enlisted her to help Karen Campbell raise support within the Indianapolis community.

⁷⁹ Nancy Link Karpowicz to Dick Nell, Caldwell Van Riper RMHI Project Coordinator, September 30, 1983, Records Boxes RMHI, Indianapolis, IN.

⁸⁰ Campbell interview with Dr. Scarpino and Mize.

Monnier drew upon her prior fundraising experience with Alpha Delta Pi sorority while working on behalf the RMHI. She also recruited and supervised the House's volunteers during its construction and first few years of operation.⁸¹

Gordon Durnil, the final "community" representative on the Our House, Inc. board of directors, brought with him a plethora of connections within Indianapolis and across the state of Indiana. At the time he joined the board, Durnil chaired the Indiana Republican Party and his brother served as a state legislator. He first learned of the project through his friendship with the Forslunds and his support of the Riley Cancer Research Foundation. As a long-time political operative, Durnil was an experienced fundraiser, and he understood how to organize and run campaigns at the grassroots level. Durnil imparted to the other Our House, Inc. board members the importance of building a broad foundation of grassroots support and used his connections to help form that network. Durnil drew upon his status and position within the Indiana Republican Party to "open doors" for the board, giving other members of the board access to influential community members. Durnil also provided the RMHI with a massive mailing list he had compiled as a political fundraiser. His experience, especially with grassroots fundraising, proved to be an invaluable asset for the RMHI as it developed.⁸²

McDonald's corporate and franchisees had significant representation on the Our House, Inc. board, through Brenda Duncan, Gerald Cassidy, and Jim Props. Duncan represented the corporate branch of McDonald's on the board. She started working for

⁸¹ Judy Monnier, member of the first Our House, Inc. Board of directors, and future President and Vice President. Interview by Christopher Mize, author, Indianapolis, IN, April 13, 2009. Hereafter cited as Monnier interview with Mize.

⁸² Campbell first interview with Mize.

McDonald's in Indianapolis at the Central Indiana Regional Office in 1976, just as the RMH concept began gaining momentum in Philadelphia and Chicago. As news of the new RMHs spread through the McDonald's network, Duncan became one of the first advocates for bringing a House to Indianapolis. After joining Our House, Inc., Duncan became a direct link between McDonald's corporate headquarters and the board. While McDonald's corporate did not donate as much money as Indiana's franchisees, Duncan's office provided crucial logistical support for the project and shared RMH "best practices" that came through the McDonald's "clearinghouse." In addition, Duncan worked with her office's public relations firm, Caldwell-Van Riper (CVR), to craft the RMHI's public relations campaign.⁸³

Gerald Cassidy and Jim Props represented McDonald's Indiana franchisees, and both men brought invaluable business savvy to the board. Together they managed the majority of the RMHI finances as it developed and for a couple of years after it opened.⁸⁴ Cassidy wanted a RMH in Indiana as soon as he learned about the Philadelphia RMH, and he began campaigning on behalf of the project with Brenda Duncan in the late 1970s. Since Gerald Cassidy lived an hour north of Indianapolis in Tipton, Indiana, he decided to bring Jim Props, an Indianapolis-area McDonald's franchise owner, onto the board to help him manage the nonprofit's finances. Jim Props had an extensive business background that allowed him to manage most of the House's finances as it developed.

⁸³ Duncan interview with Mize.

⁸⁴ Campbell first interview with Mize; RMHI Newsletter, "Our House" Christmas 1986, RMHI Newsletter Folder, Records Boxes RMHI, Indianapolis, IN. The author collected all the RMHI newsletters from 15-20 boxes to a folder he labeled, RMHI Newsletters. Hereafter all RMHI Newsletters in said folder will be cited RMHI Newsletter, "Newsletter title (which changed several times)" then the season, date, and year when available.

Together, Props and Cassidy advised the board about larger financial and business decisions and worked with Brenda Duncan to shore up support for the RMH project with their fellow McDonald's owners in Indiana.⁸⁵

Doctors Stephen Beering and Charles Richmond represented the Riley side of the triangle on the Our House, Inc. board of directors. Dr. Richmond, the Associate Director of Indiana University Hospitals and an administrator at Riley, acted as the primary liaison between Riley and the board and later outlined the first protocol for admitting families to the RMHI.⁸⁶ Dr. Beering used his influence to build support for the project within Riley, IUPUI, and Indiana University (IU). After his initial hesitation, Dr. Beering came to believe that the RMH's mission of providing a home-away-from-home for the families of sick children meshed perfectly with the "philosophy of caring" that permeated Riley. He understood that the "whole idea of having the family supported while the patient was" at Riley, "was really part and parcel of taking care of the whole patient and not just of an illness." This philosophy of taking care of the "whole patient" existed at Riley before McDonald's representatives met with the hospital's doctors in 1979. Dr. Beering thought its existence allowed "all the doctors and nurses" to see the "benefit" of the RMH concept and "how it fit into the philosophy of caring that we've always had here [at Riley]."⁸⁷ As Dean of the IU School of Medicine and the Director of the IU Medical Center (which included Riley), Dr. Beering had extensive influence within Riley and

⁸⁵ Brenda Duncan interview with Mize; Campbell interview with Dr. Scarpino and Mize; Props interview with Mize.

⁸⁶ Campbell first interview with Mize.

⁸⁷ Dr. Stephen C. Beering, interviewed by Chris Mize, Indianapolis, IN, May 29, 2009.

IUPUI. For the project to succeed, these two institutions absolutely had to support Our House, Inc., and the board relied on Dr. Beering to win that support.

The newly formed Our House, Inc. board of directors began planning the future RMHI in early 1980 and faced four main challenges during the House's two-year construction phase. First, the board had to find and purchase a location for the House, a difficult task due to the scarcity of real estate available near Riley. Second, the board needed to raise enough money to fund the House's construction and initial operation. The board estimated that they needed around 1.6 million dollars to build the RMHI.⁸⁸ Third, the board had to oversee the House's design and construction, a relatively unprecedented prospect as most RMHs at that time opened in refurbished, preexisting homes and buildings. Finally, the board needed to staff the RMHI after its opening with qualified and dedicated volunteers. For the most part, the board tackled these challenges simultaneously throughout the two years it took to plan and build the RMHI. Board members divided the work among themselves by either consciously assigning specific tasks to an individual or organically addressing a problem as it arose based upon whose talents and connections could best overcome each challenge.

The board needed to secure a site for the future RMHI before they could begin serious planning and fundraising for the building's construction. A few unsolicited donations trickled in to Our House, Inc. before they found a site. Karen Campbell and the rest of the board realized that acquiring a physical piece of property would lend

⁸⁸ Our House, Inc., "36 Month Budget and Fund Raising Plan," Records Boxes RMHI, Indianapolis, IN.

credibility to their fundraising requests and encourage potential donors.⁸⁹ The board had two requirements for the RMHI's future site. First, their partner hospital, Riley, had to be within a short walk, and second, the property had to be large enough to contain a building of the size envisioned.⁹⁰ Campbell, Duncan, and other members placed heavy emphasis on the proximity requirement because they realized it meant the “difference between a 45-minute drive and a five-minute walk” for anxiety-ridden parents who were far from home.⁹¹

Early in 1980, before the board settled on constructing a new building, Brenda Duncan started the board's search for a suitable site by looking for an existing building or home near Riley to renovate into a RMH. Duncan worked with real estate professionals that her office normally used to find locations for new McDonald's franchises. Their efforts, however, yielded no results as Duncan and her team could not locate any suitable buildings. The board then decided to construct a new building, and Duncan shifted to looking for a parcel of land of the appropriate size and proximity to Riley. Duncan's efforts again proved fruitless because dense urban neighborhoods and IUPUI's campus surrounded Riley's location in near downtown Indianapolis.⁹² Finally growing desperate to find a piece of property, Karen Campbell remembered spending an afternoon driving around with Brenda Duncan as they scoured the area surrounding the hospital. They

⁸⁹ Letter from Karen Campbell to Dr. Beering, January 29, 1981, Records Boxes RMHI, Indianapolis, IN; Campbell first interview with Mize.

⁹⁰ Duncan interview with Mize; Campbell first interview with Mize.

⁹¹ Campbell first interview with Mize.

⁹² Duncan interview with Mize.

found nothing and realized the project needed a donation of land from either Riley Hospital or IUPUI to ensure that the House met their proximity and size requirements.⁹³

Dr. Beering advised the board that Riley had no property to spare for the House, which prompted the board to turn to IUPUI to find out if the university owned an appropriate site. At first, obtaining a parcel from the school seemed daunting because of its dense bureaucracy and complex organization. IUPUI operated as a satellite campus of Indiana University (IU), meaning the board would need the cooperation of administrators in both Indianapolis and Bloomington. The RMH project required the support of individuals like Glen W. Irwin, the Chancellor of IUPUI and Vice President of Indiana University located in Indianapolis, and John W. Ryan, the President of Indiana University located in Bloomington. In addition, those individuals had to win approval of various committees at IUPUI and IU, such as IUPUI's Coordinating Committee and the Trustees of Indiana University. The Our House, Inc. board relied on Dr. Beering to navigate the complexities of IUPUI and IU, and he wielded the influence he had as the Dean of the IU Medical School to facilitate a land deal between IUPUI and Our House, Inc.⁹⁴

To win the support of the administrators of IUPUI and IU, Dr. Beering made three key arguments. First, he pointed out how well the RMH concept fit with the philosophy at Riley. Second, he emphasized how it would financially and mentally benefit patients. Third, he argued that a RMH would add to the prestige of both IU and IUPUI with little or no cost to either university. In a letter to the "Officers and Trustees of Indiana University" dated October 31, 1980, Dr. Beering described the three benefits the

⁹³ Ibid.

⁹⁴ Beering interview with Mize.

proposed project would bring to the hospital and school. Dr. Beering explained how the Our House board sought “to lease approximately one acre of land” near the “Indiana University Medical Center [which includes Riley Hospital]” to house a facility containing “approximately 20 bedrooms and support facilities.” In the letter Dr. Beering made it clear that McDonald’s and other donors, and not the university, would shoulder the costs of building the RMH. He also promised that any architect Our House, Inc. hired would “work closely” with Ed Barnes, the man responsible for overseeing new construction on campus, to ensure the RMHI matched the physical character of IUPUI’s campus. Dr. Beering believed the “advantages” of having RMH on campus included “the provision of additional low-cost guest housing (\$5 to \$8 per night), the expansion of our parent-care capability at the Riley Hospital and the reduction of health care costs for families with children who have complicated and chronic illnesses such as cancer.”⁹⁵

Dr. Beering’s efforts proved successful far quicker than anyone on the Our House, Inc., board expected. He easily convinced Dr. Glen Irwin, the Chancellor of IUPUI and Vice President of IU, that a RMH would have a positive impact on the University. Luckily, Dr. Irwin was a former Dean of the IU Medical School and Director of the IU Medical Center, which provided him an understanding of the need for an institution like the RMH. Dr. Irwin “was totally supportive of anything that could be done to help better serve the hospital,” making the RMH “an easy sell” for Dr. Beering. After learning about

⁹⁵ Dr. Stephen Beering to Officers and Trustees of Indiana University, October 31, 1980, Office of the Chancellor Collection, Ruth Lilly Special Collections and Archives, IUPUI University Library, Box #250, Folder 1980-1884, Indianapolis, IN.

the project, Dr. Irwin “said sure we’ll help you with that” meaning the board had “administrative support at the highest level” of IUPUI.⁹⁶

Dr. Irwin also advocated for the RMHI within IU’s administration. In a letter written on behalf of the Our House, Inc. board from Dr. Irwin to IUPUI’s Coordinating Committee, Irwin hoped “the administration” would “endorse” the RMH project as long as the “University’s interests” were “properly handled.”⁹⁷ Dr. Beering quickly convinced the administrators at IUPUI and IU to support the project, and in December 1980, Dr. Irwin announced to the Indianapolis community that the university had “completed negotiations with Our House, Inc., a nonprofit corporation, for the construction of a Ronald McDonald House, a special lodging facility for children and parents who come to Riley Hospital for Children.”⁹⁸

Members of Our House, Inc.’s original board of directors believed Dr. Beering’s support allowed them to build the RMHI in only two years. They described his efforts with a certain amount disbelief and awe. Karen Campbell thought Dr. Beering, “opened doors” for the project that would have otherwise remained closed.⁹⁹ Judy Monnier described how Dr. Beering handled “all the inside stuff” with the university and hospital because he “had all the power,” which enabled the board to cut through the layers of

⁹⁶ Beering interview with Mize.

⁹⁷ Dr. Glen W. Irwin, Chancellor of IUPUI and Vice President of IU, to Members of the Coordinating Committee, October 16, 1980, Office of the Chancellor Collection, Ruth Lilly Special Collections and Archives, IUPUI University Library, Box #250, Folder 1980-1884, Indianapolis, IN.

⁹⁸ “Irwin Letter,” open letter to 850 Indianapolis community leaders, from IU Vice President and IUPUI Chancellor Glen W. Irwin, December 1980, 1982-83 Box.

⁹⁹ Campbell second interview with Mize.

bureaucracy in Indianapolis at IUPUI and in Bloomington at IU.¹⁰⁰ Dr. Beering, however, described his own involvement far less dramatically. He believed his position as the Director of the IU Medical Center and as Dean of the Medical School allowed him to pull “all of these strings together in one spot.” His responsibilities made him the natural focal point for anyone who wanted to build a RMH near Riley. After Brenda Duncan, Gerald Cassidy, Karen Campbell, and the House’s other early advocates convinced him of the concept’s value, they simply “didn’t have to sell anybody else on it.” Dr. Beering accepted the idea because it had “already been done in other places,” it “was easy” for him “to point to what a benefit [the RMH] was in Chicago and Philadelphia” after he became “an advocate for this new approach to child care, and family care.”¹⁰¹

Our House, Inc. and IUPUI officially signed a lease agreement in early 1981, and on June 6, 1981, the IU Board of Trustees approved the lease on a parcel of land near Riley at 1235 West Michigan Street in Indianapolis. The trustees entered into a low-cost, twenty-five year lease with Our House, Inc. and also agreed to pay for the future House’s “steam and electricity.”¹⁰² IUPUI’s decision to enter into the lease and pay for some of RMHI’s utilities committed the university to a long-term relationship with Our House, Inc. and its board. Dr. Beering facilitated this crucial partnership, and IUPUI continued to support the RMHI throughout its existence. Dr. Beering’s early success with Dr. Glen Irwin and the board’s confidence in Dr. Beering’s ability to win IUPUI’s support prompted the board to publicly announce on December 5, 1980, their intention to build a

¹⁰⁰ Monnier interview with Mize.

¹⁰¹ Dr. Beering interview with Mize.

¹⁰² CVR Press Release, June 6, 1981, Office of the Chancellor Collection, Ruth Lilly Special Collections and Archives, IUPUI University Library, Box #250, Folder 1980-1884, Indianapolis, IN.

RMH on land provided by IUPUI, months before the trustees officially approved the lease.¹⁰³

After making the decision to construct a new building, the Our House, Inc. board had to work on designing the future RMHI. The design process began with what Karen Campbell described as a “talking through,” where the board members had a general discussion about what kind of spaces and rooms the RMHI needed and what they wanted those spaces to look like.¹⁰⁴ During the discussion the board relied heavily on Campbell’s practical knowledge. She presented ideas about the most efficient and economical ways to create a high quality “home away from home” based on her experience founding the Chicago RMH.¹⁰⁵

The board also used information sheets that the “National Advisory Board of Children's Oncology Services, Inc.” (COS) compiled during the construction of previous RMHs to guide the discussion. In 1977, after the successful opening of the Chicago RMH “proved that the [RMH] concept would work in various areas,” COS formed with support from McDonald’s to help spread the concept across the country. The nonprofit organization provided material and logistical support for “local volunteer groups” that wanted to open a RMH in their city.¹⁰⁶ They provided practical advice like using inexpensive twin beds, as opposed to more expensive double or queen sized beds, that

¹⁰³ Transcript of News Conference held on December 5, 1980, Remarks by Dr. Stephen C. Beering, Office of the Chancellor Collection, Ruth Lilly Special Collections and Archives, IUPUI University Library, Box #250, Folder 1980-1884, Indianapolis, IN: 1.

¹⁰⁴ Campbell interview with Mize.

¹⁰⁵ Duncan interview with Mize; Props interview with Mize.

¹⁰⁶ Children’s Oncology Services, Inc., “Background: The Ronald McDonald House Concept,” Office of the Chancellor Collection, Ruth Lilly Special Collections and Archives, IUPUI University Library, Box #250, Folder 1980-1884, Indianapolis, IN: 2.

suppliers would be more willing to donate. It also suggested future RMHs include several spaces where “people could gather and talk,” kitchens and laundry areas designed to serve more than one family at a time, adequate office space for the house manager and volunteers, and many other useful “considerations.”¹⁰⁷ The board of directors took these considerations to heart while discussing how to design the proper environment for the families they planned to serve.¹⁰⁸

The board wanted the House’s environment to encourage its residents to form bonds of mutual support in a comfortable and secure environment. During the discussion, Dr. Beering emphasized that the “first consideration was comfort for the family” followed by features that would encourage the families “to gather together,” but would also allow them “privacy” when needed. He believed the private spaces would facilitate recuperation, while the public spaces would allow families to build networks of mutual support. Dr. Beering thought of the possible death of a child as a “terrible specter for the family to confront,” which made forming a “support group” with parents “who have some experience with the healing process” a critical part of helping families endure such a horrible situation.¹⁰⁹ The rest of the board agreed broadly with Dr. Beering’s ideas of what the House design should provide emotionally and Karen Campbell’s practical suggestions. Together the board members made decisions about the future House’s specifications based upon their own experience.¹¹⁰

¹⁰⁷ “Some Considerations in Developing Ronald McDonald Houses,” Office of the Chancellor Collection, Ruth Lilly Special Collections and Archives, IUPUI University Library, Box #250, Folder 1980-1884, Indianapolis, IN.

¹⁰⁸ Campbell first interview with Mize.

¹⁰⁹ Dr. Beering interview with Mize.

¹¹⁰ Ibid.; Campbell first interview with Mize.

As the design phase progressed, the board of directors turned to Dave Brandt, a construction expert whom Brenda Duncan introduced to the rest of the board. Brandt supervised the construction of twenty-seven restaurants for the McDonald's Central Indiana office and happily provided the board with advice relating to design feasibility, material costs, and other practical construction questions.¹¹¹ The board's reliance on Brandt continued to grow because of his professionalism and enthusiasm for the project, and eventually the board hired his company, Construction Management Service Inc., to supervise the House's construction.¹¹²

After the board and advisors like Brandt broadly outlined the design of the future RMH, the board hired the Indianapolis architecture firm, Archonics, to provide "the architectural, structural, and interior design services for the proposed Ronald McDonald House."¹¹³ Archonics agreed to donate the cost of their "overhead and profit," meaning Our House, Inc. received the firm's design services for around thirty-five percent of their "normal market value." Just like the McDonald's corporation, a desire to improve their community and to generate positive press for their company motivated Archonics's decision to make such a large in-kind donation. The architecture firm wanted "the project to represent a high quality of architectural design" because they were professionals. They also realized the building would "receive a good deal of community-wide publicity" and

¹¹¹ RMHI Newsletter, "From Our House to Your House," Summer 1981, Volume 1, No. 2, Records Boxes RMHI, Indianapolis, IN.

¹¹² "Our House Telethon Broadcast," June 19, 1982, Records Boxes RMHI, Indianapolis, IN.

¹¹³ James T. Kinele, VP of Archonics to David J. Hursh, Construction Engineer McDonald's Corporation, August 25, 1980, Office of the Chancellor Collection, Ruth Lilly Special Collections and Archives, IUPUI University Library, Box #250, Folder 1980-1884, Indianapolis, IN: 2.

become a physical advertisement for the firm.¹¹⁴ Archonics also agreed to work with representatives from IUPUI to ensure the House's exterior matched and blended with the other buildings on the university's campus.¹¹⁵

When Archonics began designing the RMHI, the Our House, Inc.'s board of directors emphasized their desire to create a practical, yet home-like atmosphere full of therapeutic spaces that promoted healing. They wanted the firm's design to "promote group interaction" by arranging "various spaces" that encouraged "people to meet one another to discuss the mutual feelings and problems." They intended the facility to exude "home-like" feelings of "comfort, warmth, and a relaxed atmosphere." Archonics wanted the building to "be more than a transient, residential facility or glorified motel," and to help them achieve their goal they enlisted the help of an environmental psychologist, Dr. Robert Bechtel. Dr. Bechtel helped Archonics determine "what the human response would be to certain spatial concepts," how to arrange the spaces of the house, and what features to include so those spaces could "be better and more effectively used."¹¹⁶

Using Dr. Bechtel's advice as well as input from the board, Archonics' homey design for the RMHI encouraged families to interact, while simultaneously providing them private spaces to recuperate. The firm placed twenty-four bedrooms on the second floor of the building, away from the busy common areas. The first floor included two recreation rooms, a dining area, two kitchens, a library, and the House's "centerpiece," a "two-story great room with a wall of windows, large fireplace, and beamed ceiling." The

¹¹⁴ Ibid.

¹¹⁵ Campbell first interview with Mize.

¹¹⁶ Archonics Design Outline, May 28, 1981. Records Boxes RMHI, Indianapolis, IN: 2.

private bedrooms opened onto a spacious, interior balcony and walkway where guests could watch other families interacting on the first floor. The design also routed traffic through the House “so that residents have to go through the periphery of activities to reach their rooms.” The balcony encircling the first floor and the traffic flow encouraged guests to interact while still providing a private bedroom space.¹¹⁷

The board and Archonics created a “home-like atmosphere” for the RMHI by using “natural materials,” such as wood and brick “and warm colors.” The building’s layout, the interior decorations, and the exterior facade combined to give the RMHI a domestic impression. The exposed beams and the fireplace in the RMHI’s central great room gave visitors the feeling of being in a big living room rather than a hotel lobby. The building’s brick exterior blended with the general architecture of IUPUI, but also gave the RMHI design a home-like appearance. The design avoided the boxy, industrial look, and the building’s profile instead closely resembled a super-sized house rather than a small hotel. Board members like Dr. Beering understood that interaction between families with sick children allowed them to form bonds of mutual support crucial to their mental health. The design of the RMHI encouraged but did not force families to form those therapeutic bonds, all within a comfortable environment that made families feel like they were staying in a large, warm home rather than a business.¹¹⁸

The Our House, Inc. board finalized the design in the spring of 1981, after which they devoted all of their attention to fundraising and construction. The board began

¹¹⁷ Archonics Design Outline, May 28, 1981. Records Boxes RMHI, IN: 1.; RMHI Newsletter, “From Our House to Your House,” Summer 1981, Volume 1, No. 2, Records Boxes RMHI, Indianapolis, IN.

¹¹⁸ RMHI Newsletter, “From Our House to Your House,” Summer 1981, Volume 1, No. 2, RMHI Archives, Indianapolis, IN.

publicly raising money after announcing their intent to build a RMH in Indianapolis on December 5, 1980, but their efforts intensified during the spring and summer of 1981. They initially estimated the need to raise 1.9 million dollars to construct the House, and, acting on the advice of Jim Props and Gerald Cassidy, the board set the ambitious goal of raising the entire amount before opening the House. This would allow the House to open debt free and devote all the income raised after the opening to the guests they served. It also allowed the board to avoid taking out any long-term loans during the House's planning and construction.¹¹⁹

Before beginning the public phase of their fundraising campaign, however, the Our House, Inc. board of directors privately secured substantial financial commitment from McDonald's franchisees. Board members Brenda Duncan, Jim Props, and Gerald Cassidy secured a \$610,000 pledge from Indiana McDonald's franchisees by traveling across the state to convince franchisees to support the project. McDonald's corporate enthusiastically supported the RMH concept on a national level, but their backing did not guarantee local McDonald's operators would support a RMH opening in their media market. Co-op members could approve or reject any marketing or philanthropic endeavor in their region. In the late 1970s, before the widespread use of cable television in Indiana, every operator belonged to a co-op made up of franchises within their markets. McDonald's defined markets by television signal strength. So, for example, every restaurant within the range of South Bend's television stations belonged to the South Bend co-op. The Indiana co-ops that Duncan and her colleagues needed to convince

¹¹⁹ Props interview with Mize.

included South Bend, Fort Wayne, Evansville, Indianapolis, and Terre Haute. These co-ops met monthly to discuss issues that affected their particular region. These meetings usually focused on marketing campaigns and public relations plans put together by a McDonald's corporate representative, like Brenda Duncan, and a local marketing firm, like CVR. Co-op members voted to approve or disapprove these marketing plans. As Brenda Duncan explained, as long as the plan fell "within the framework of the McDonald's system" as McDonald's corporate defined it, operator co-ops largely determined the public relations plan in their region.¹²⁰ Co-ops treated charitable and philanthropic plans that involved all operators within a region as part of their marketing efforts.

The size and scope of the RMHI project required cooperation from operators throughout the state, meaning the co-ops had to vote to approve the project through their sometimes "messy" democratic process at meetings.¹²¹ Jim Props and Brenda Duncan both remember easily gaining the approval of co-op after co-op. By 1980 the entire McDonald's network knew how successful the RMH concept had become in other cities, and co-ops across the country started clamoring for their own RMH. They often petitioned McDonald's corporate to perform feasibility studies in their regions. Therefore, most co-ops saw building a RMH in their region as a marketing coup, allowing them to generate massive amounts of good publicity for their businesses while simultaneously helping the families of seriously ill children. This meant Props, Duncan, and Cassidy enjoyed the luxury of presenting the co-ops with something they already wanted. Like

¹²⁰ Duncan interview with Mize.

¹²¹ Ibid.; Props interview with Mize.

McDonald's owner/operators in Philadelphia and Chicago, Indiana's franchisees knew the RMHI represented a classic "win-win" situation. It gave them the opportunity to participate in one easy-to-understand, philanthropic project that simultaneously gave back to their communities and generated great publicity for their restaurants. Duncan, Cassidy, and Props secured the unanimous support of every co-op in the state early in the project's development. The franchisees' private commitment to raise \$610,000 over three years provided a strong foundation for the public phase of the fundraising campaign, and their strong backing gave the board confidence that the RMHI would open on schedule in the summer of 1983.¹²²

A comprehensive and ongoing public relations campaign also helped lay the foundation for the public phase of Our House, Inc.'s fundraising efforts. The public relations campaign raised awareness of the RMHI project before and after the December 5 announcement. The campaign's chief architects, Brenda Duncan and Nancy Link, had extensive marketing experience they brought to bear on behalf of the RMHI. Duncan served as the marketing coordinator for the McDonald's Central Indiana Regional Office.¹²³ Link worked for the marketing firm Caldwell Van Riper (CVR), a company Duncan had previously engaged while orchestrating ad campaigns on behalf of McDonald's franchisees in central Indiana. Duncan connected the Our House, Inc. board with CVR, and the company eventually made Link the statewide coordinator for the

¹²² Ibid.; Press Release, "Indiana Will Have a Ronald McDonald House," Records Boxes RMHI, Indianapolis, IN; Our House, Inc., "36 Month Budget and Fund Raising Plan." Records Boxes RMHI, Indianapolis, IN.

¹²³ Duncan interview with Mize.

entire RMHI project.¹²⁴ Duncan, Link, and the rest of the board worked together to create a public relations strategy that complemented and promoted all aspects of the board's long-term fundraising plan. The public would not donate to a project it knew nothing about, so the board made publicizing the RMH "story" one its highest priorities.¹²⁵

The campaign Duncan and Link organized worked "all angles" during the RMHI's planning and construction to keep the House's "story" in the public eye. Duncan and Link implemented a "standard public relations" plan that ranged from informational flyers, RMH buttons, and tray liners in McDonald's restaurants to newspaper articles, radio spots, television commercials, and direct mail. Although RMHs had opened in several cities before 1980, the concept remained fairly new and largely unknown in the communities the future RMHI would serve. The campaign, therefore, focused on educating the public about the RMH mission and its success in other cities. It emphasized the critical need a hospital like Riley created, the family-centered nature of the RMH's mission, and the vital role the community played in the successful construction of other Houses.¹²⁶ Nearly every single piece of material CVR and the board distributed described the future RMHI as a "home away from home" or its planned "home-like" atmosphere,

¹²⁴ Duncan interview with Mize; Nany I. Link to Mr. Chuck Snelling, CVR statewide coordinator, March 10, 1981. Records Boxes RMHI, Indianapolis, IN.

¹²⁵ Duncan interview with Mize; Campbell second interview with Mize.

¹²⁶ Duncan interview with Mize.

and emphasized how the domestic environment would be therapeutic for the families and sick children the House would serve.¹²⁷

The public relations campaign often borrowed material from Children's Oncology Services (COS), the same group that provided Our House, Inc. with information on how to found and design a RMH. During the late 1970s, as RMHs began opening across the country, COS disseminated information packets on the RMH concept and its mission to interested persons and groups. Karen Campbell, who relied on COS materials while building the Chicago RMH, along with Brenda Duncan, connected Our House, Inc.'s public relations effort to the resources COS provided. One COS information packet created by Golon/Harris Communications, Inc., a marketing firm that worked with McDonald's corporate headquarters in Chicago, described the RMH concept in detail as "a home away from home" for "the families of children being treated for cancer, leukemia and other serious illnesses." It portrayed the Houses as spaces that allowed parents to provide the "emotional support and understanding" to their ailing children, while avoiding expensive hotel bills or sleeping "any place they can find at a hospital, such as a sofa or chair in the waiting room or corridor."¹²⁸ The packet also emphasized the importance of community support. It explained that McDonald's assisted with the construction through donations and by volunteering "expertise" in areas "such as

¹²⁷ RMHI Press Release, Dec. 5, 1980. I Office of the Chancellor Collection, Ruth Lilly Special Collections and Archives, IUPUI University Library, Box #250, Folder 1980-1884, Indianapolis, IN: 1; RMHI Press Release, June 6, 1981. Office of the Chancellor Collection, Ruth Lilly Special Collections and Archives, IUPUI University Library, Box #250, Folder 1980-1884, Indianapolis, IN; "Construction Begins on Ronald McDonald House in Cooperation with Riley Children's Hospital," *The Evening World* September, 29, 1981; "Ronald House to Offer Haven" *Indianapolis News*, Feb. 10, 1982.

¹²⁸ Children's Oncology Services, Inc., "Background: The Ronald McDonald House Concept," Office of the Chancellor Collection, Ruth Lilly Special Collections and Archives, IUPUI University Library, Box #250, Folder 1980-1884, Indianapolis, IN: 1, 2.

construction, finance, real estate, marketing, communications, and management,” but the corporation did not manage, run, or provide the majority of monetary support for any RMH.¹²⁹

The information packets Duncan and CVR produced and distributed throughout the RMHI’s two-year fundraising campaign drew upon COS material and adopted it to the local situation. In common with the COS packet, general information “fact sheets” and packets generated by Duncan and Link described the future RMHI as a “home away from home” for the parents and families of seriously ill children.¹³⁰ Unlike the COS packet, the material they produced explained how a RMH would benefit Indianapolis and the rest of the state because they wanted to appeal directly to donors within Indiana. They focused on the RMHI’s partnership with Riley, using the hospital’s prestige to strengthen their fundraising efforts. One Our House, Inc. “fact sheet” described Riley as “Indiana’s only children’s hospital” and “among the largest and most respected in the country.” As such, the hospital treated “more than 6,000 in-patients and thousands more as out-patients a year.”¹³¹ A separate information packet broke down those thousands of patients by location, saying Riley received “4,000 from central Indiana; about 5000 from the Fort Wayne area; about 300 from the South Bend area; about 400 from the Terre Haute area

¹²⁹ Ibid., 3.

¹³⁰ “Indiana’s Ronald McDonald House, A Project of Our House, Inc.” Records Boxes RMHI, Indianapolis, IN: 1; “Fact Sheet: Indiana’s Ronald McDonald House, Operated by Our House, Inc.” Records Boxes RMHI, Indianapolis, IN: 1.

¹³¹ “Fact Sheet: Indiana’s Ronald McDonald House, Operated by Our House, Inc.” Records Boxes RMHI, Indianapolis, IN, 1.

and about 300 from Evansville area” with hundreds more coming from outside the state.¹³²

Duncan and the board used these statistics to demonstrate that Riley served the entire state, which meant that the future House would be the RMH of *Indiana* not just Indianapolis. This tactic made it easier to build support the across state, as Hoosiers far from Indianapolis learned how RMHI would benefit their communities. Furthermore, the packets connected the project to Riley’s well established respectability. This allowed donors to feel confident about giving money, goods, or services to the project because the hospital’s prestige legitimized the Our House, Inc. board’s efforts.

When some confusion emerged among the public about what kind of services the RMH would provide to the children and their families, the publicity plan of Duncan and Link began focusing on the services the RMHI would provide ill children and their families.¹³³ The information packets they published clarified the relationship between Riley and RMHI, explaining that the children would not receive medical treatment at the RMH. They described how children undergoing repeated or extended treatment at Riley might live in the House for short periods, but its primary function would be serving their families while the child stayed and received treatment at Riley.¹³⁴

Duncan and Link created a family-friendly brand for the RMHI by constantly repeating the “home away from home” theme throughout the public relations campaign. Donors to the project thought of the future RMHI as a second home for the families of

¹³² Ibid.

¹³³ Campbell second interview with Mize.

¹³⁴ Ibid., 2; Duncan interview with Mize.

sick children, a sanctuary where parents, children, and siblings could rest, clean up, and eat together away from the stressful environment inside Riley hospital. Individuals hearing about the RMHI and its mission for the first time could easily imagine the unthinkable happening to their own family and how a RMH could make the situation a little less terrible. They identified with the RMHI's message that sick children required "more than good medical attention." They also needed "the emotional support and understanding of their parents, brothers, and sisters." Duncan and Link used personal testimonies to back up these claims, citing parents who escaped "the I.Vs." and stress of the hospital find "relief" in the home-like setting of a RMH.¹³⁵ The brand they created appealed directly to potential donors since any parent could empathize with the ordeal that brought families to the RMHI. The efforts of Duncan and Link, and of individuals like them working on behalf of RMHs across the country, created an indelible link in the minds of the public between the RMHI and RMH concept and the well being and seriously ill children and their families.

All of themes that made up the Our House, Inc. brand permeated the board's first official press conference on December 5, 1980. Riley hosted the event and Dr. Stephen Beering made the announcement, which described the board's intent to establish "a home-way-from-home for families with children with complex diseases being cared for at Riley Hospital."¹³⁶ The press conference emphasized the need for a RMH in Indianapolis, the future RMHI's connection to the prestigious Riley Hospital for

¹³⁵ "Fact Sheet: Indiana's Ronald McDonald House, Operated by Our House, Inc." Records Boxes RMHI, Indianapolis, IN.

¹³⁶ Transcript of News Conference held on December 5, 1980, Remarks by Dr. Stephen C. Beering, Office of the Chancellor Collection, Ruth Lilly Special Collections and Archives, IUPUI University Library, Box #250, Folder 1980-1884, Indianapolis, IN: 1.

Children, and the family-friendly nature of the RMH mission.¹³⁷ Duncan and Link focused on and constantly reiterated these three themes throughout the public relations campaign that continued to support the board's fundraising endeavors throughout the House's two year building process.

Following the December 5, 1980, press conference that officially began the public phase of the fundraising campaign, the board's efforts to raise money from community sources gained considerable momentum. The accelerated, public phase of the board's fundraising efforts built upon the significant financial commitments the board secured before the December 5, announcement. Along with the \$610,000 commitment from Indiana McDonald's franchisees, two area foundations had already pledged \$140,000 in grants, with a majority of the total coming from the Lilly Endowment.¹³⁸ In addition, McDonald's founder Ray Kroc, as he did for every burgeoning RMH across the country, donated \$25,000 in seed money to the RMHI. These substantial pledges combined with the public relations efforts of Duncan and Link meant that the soon to begin public phase of the Our House, Inc. fundraising campaign was well-positioned for success.

The board of directors outlined a comprehensive strategy to reach the estimated 1.9 million dollar goal in a "36 Month Budget and Fund Raising Plan" before the December 5, press conference. The 1.9 million dollar target included 1.6 million to pay for the cost of the building and an additional \$300,000 to operate the House after its opening. The plan focused on reaching that goal by obtaining funds from three key

¹³⁷ Ibid.; Press Release, "Indiana Will Have a Ronald McDonald House," Records Boxes RMHI, Indianapolis, IN.

¹³⁸ Our House, Inc., "36 Month Budget and Fund Raising Plan." Records Boxes RMHI, Indianapolis, IN; Robert A. Johnson to Gordon K. Durnil, Executive Vice President, Lilly Endowment, Inc. December 31, 1980.

sources that included in-kind donations, McDonald's franchisees, and community sources. Based on the experience of groups building previous RMHs the board projected in-kind donations to account "approximately one third" of the building's 1.6 million dollar price tag or a little more than \$500,000. This meant the board needed to raise about 1.4 million dollars in actual cash contributions. The board expected the \$610,000 McDonald's franchisees committed to come from a variety of fundraisers such as product promotions, canister collections, coupons, and joint projects with community groups such as bake sales and car washes.

The "36 Month Budget and Fund Raising Plan" projected raising the remaining \$790,000 from diverse sources within Indianapolis and communities across state by using multiple, interconnected strategies. These strategies included applying for grants from local foundations, building a "finance committee," implementing a direct mail campaign, and organizing numerous small, fundraising events. The board expected to obtain another \$60,000 in grants to complement the \$140,000 they had already received.¹³⁹ The finance committee the board envisioned would consist of one hundred "prominent members of the various communities...representing business, labor, the professions and other occupations."¹⁴⁰ Each member of the committee would be expected to raise \$2,000 a year from 1981 to 1983 within their local communities, and even with only a "40% performance rate" the board counted on the committee to net \$240,000 by 1983. They planned to use direct mail to bring in at least \$50,000 a year for a total of \$150,000, and

¹³⁹ Our House, Inc., "36 Month Budget and Fund Raising Plan." Records Boxes RMHI, Indianapolis, IN; Robert A. Johnson to Gordon K. Durnil, Executive Vice President, Lilly Endowment, Inc. December 31, 198.

¹⁴⁰ Our House, Inc., "36 Month Budget and Fund Raising Plan." Records Boxes RMHI, Indianapolis, IN.

then raise another \$200,000 through a variety of fundraising events and small promotions for a total of \$790,000.¹⁴¹ While it remains unclear if the board's finance committee met expectations, the rest of the board's fundraising efforts proved so successful that they managed to open the RMHI in two years instead of three.¹⁴²

The board worked collaboratively when raising money and awareness for the RMHI, but board members also tended to focus on building support within their side of the "crucial triangle" that included McDonald's, Riley Hospital, and the community. For example, Dr. Beering convinced IUPUI to give the board a site and low cost lease, while Brenda Duncan, Gerald Cassidy, and Jim Props secured commitments from McDonald's owner operators. When the board began raising money and recruiting volunteers within the community, they relied heavily on the effort and connections of Karen Campbell, Judy Monnier, and Gordon Durnil. Karen and Judy acted as the RMHI's foot soldiers, traveling throughout Indiana to raise awareness, money, and volunteers for the project. If they were the soldiers, then Gordon Durnil was their commanding officer. He proved "instrumental" in organizing the board's "community wide fundraising" efforts, taught them the importance of "grassroots" fundraising and the "value of direct mail and the repeat ten to twenty-five dollar donor."¹⁴³ In addition, as the Republican Chairman for Indiana, Durnil used his extensive connections to introduce Karen and Judy to individuals and organizations they would not have had been able to access on their own. As Karen

¹⁴¹ Ibid.

¹⁴² The finance committee is mentioned in several of the board's initial planning documents, but subsequent fundraising reports failed to mention the success or failure of the finance committee. It's probable that the board recruited some members for the finance committee, but it was not as successful as they originally hoped.

¹⁴³ Campbell first interview with Mize.

put it, “I did the legwork, but [Gordon] taught me how and what to do, and he opened the doors.”¹⁴⁴ Together, Karen and Judy handled the “every day stuff” as they built support within Indianapolis and the rest of the state.¹⁴⁵ Our House, Inc.’s original contact number rang to a number the board had set up in Karen’s kitchen. She answered hundreds of calls and inquiries and determined with Monnier how to involve people who called to volunteer or directed inquiries to the appropriate board member.¹⁴⁶ Campbell and Monnier also coordinated the RMHI’s early community fundraising efforts from their kitchens.¹⁴⁷

During the first six months of 1981, Judy Monnier and Karen Campbell generated support for the RMHI within the community by speaking before charitable, religious, and fraternal organizations in Indianapolis and eventually across the rest of state. They talked to Kiwanis Clubs, Rotary Clubs, Tri Kappa Chapters, the Elks, the Eagles, Girl Scouts, and anyone “who’d listen” to them speak about the RMH concept and the RMHI they wanted to build next to Riley.¹⁴⁸ Campbell and Monnier decided early in the project’s development that “there was no place we wouldn’t go, there was no group we wouldn’t share the stories with.”¹⁴⁹ They spoke before crowds of any size, and often did not know what to expect until they arrived at the engagement. For example, Monnier remembered one event where she believed she would be speaking in another “smokey back room” to a

¹⁴⁴ Ibid.

¹⁴⁵ Monnier interview with Mize.

¹⁴⁶ Campbell first interview with Mize.

¹⁴⁷ Monnier interview with Mize; Campbell first interview with Mize.

¹⁴⁸ Ibid.

¹⁴⁹ Campbell interview with Mize.

group of ten, and instead found a crowd of two hundred waiting to hear about the “Ronald House.”¹⁵⁰

As Campbell and Monnier grew more experienced, their presentations started following a particular pattern. First, they presented a slide show and video that provided a brief overview of the RMH concept and featured pictures of patients at Riley. After the presentation, Karen or Judy stood up and told their personal story of how and why they became involved with the RMHI project. Karen focused on her son, Kevin, and his terrifying bout with leukemia in Chicago. She explained how she traveled over one hundred miles to get treatment for her son, and about the long nights spent sleeping on uncomfortable hospital couches and chairs. Judy, on the other hand, relied more on the slide show, since she did not have a personal story as intense as Karen’s. She did, however, talk about taking in friends whose children needed treatment at Riley, and the burden an extended stay away from home placed on the families of sick children.¹⁵¹

These speaking engagements steadily built support for the RMHI project, and sometimes yielded immediate benefits beyond Karen and Judy’s expectations. For example, Karen recalled traveling to address the United Auto Workers, Local 662 in Anderson, Indiana, at the request of a mother and union member whose child had received treatment at Riley. The meeting began with a moment of silence in memory of Walter Reuther, and afterwards Karen told the local of her friendship with Reuther’s nephew John and his mother before telling her son Kevin’s story. Anderson Local 662 wanted to help immediately and agreed to sell RMH buttons at their factory gates, after

¹⁵⁰ Monnier interview with Mize.

¹⁵¹ Ibid.

they made sure a Canadian shop (which did not have to be unionized) produced the buttons. UAW Local 662 out of Anderson, Indiana, ended up raising \$5,000 by selling buttons on behalf of the RMHI.¹⁵²

The efforts of Campbell, Monnier, and Gordon Durnil steadily yielded results: By the spring of 1981, the Our House, Inc. board had already raised \$175,000 in cash donations.¹⁵³ Karen, Judy, and other board members believed the RMHI's mission to provide care for families with sick children appealed emotionally to any parent who heard a presentation about the future House. They believed "people could identify with being away from home with a sick child" and empathized with the "pretty universal" feelings of worry and stress that accompanied any serious childhood illness.¹⁵⁴ After learning about the mission, audience members often became eager to contribute money, in-kind donations, time, or contacts. As Judy explained, "if we didn't get as much money, we may have gotten contacts." They used the accumulating contacts to build relationships between the House and the various groups they spoke to, and those organizations would then "fundraise for us."¹⁵⁵ Those contacts also provided in-kind donations of supplies, building materials, or appliances. Judy recalls going to one speaking engagement looking for cash and getting "a piano" instead.¹⁵⁶

¹⁵² Campbell first interview with Mize.

¹⁵³ RMHI Newsletter, "From Our House to Your House," Summer 1981, Volume 1, No. 2, Records Boxes RMHI, Indianapolis, IN.

¹⁵⁴ Monnier interview with Mize.

¹⁵⁵ Ibid.

¹⁵⁶ Ibid.

By the spring of 1981, under the advice of Jim Props, the board decided to shift focus and started planning a major McDonald's fundraiser. Props later called the spring and early summer of 1981 a "turning point" for the Indiana co-ops, as their excitement about the project grew as plans for the RMHI became more concrete. Props explained, "the House had progressed to the stage where the plans for construction were basically finalized, and the agreement had been reached with [IU] university for the long-term tenure of the House," and the main problem facing the project "was a funding issue at that point."¹⁵⁷ Props believed the board could build on that growing excitement to emphasize and augment their fundraising efforts in spring and early summer of 1981 so they could begin construction. According to Props, the building's \$1.6 million price tag was "considerably higher" than other RMHs being built in the late 1970s and early 1980s.¹⁵⁸ The high price caused the board to approach the building's construction phase with a certain amount of caution. They wanted to raise at least half of the estimated \$1.6 million total before they broke ground on the RMHI's new building.¹⁵⁹

As the board turned its attention to a McDonald's fundraiser and excitement grew among franchise owners, Gerald Cassidy suggested the board adapt a promotion that he created to increase sales in his own restaurants. His idea led directly to the fabulously successful "Hamburger Day" in August 1981. Cassidy had sold hamburgers for the discounted price of 25 cents, which led to increased sales and repeat business at his

¹⁵⁷ Props interview with Mize.

¹⁵⁸ Ibid.

¹⁵⁹ Our House, Inc., 36 Month Budget and Fund Raising Plan, Records Boxes RMHI, Indianapolis, IN.

franchises.¹⁶⁰ The board knew that similar promotions featuring discounted or special products, such as the famous Shamrock Shake promotion that helped build the Philadelphia RMH, had successfully raised money for RMHs in other cities.¹⁶¹ The board decided to host a “25 cents Hamburger Day” where McDonald’s would offer customers as many burgers as they could eat for a quarter each. The board’s hamburger promotion differed from previous discount fundraisers in two key ways. First, every quarter collected from the hamburger sales would go directly to Our House, Inc. rather than just a portion, which had been the norm in other cities. Second, and most significantly, the board planned to make the fundraiser a statewide event including every McDonald’s co-op in Indiana. Previous promotions occurred within a single McDonald’s market, usually the one that hosted the future RMH and did not require multiple markets to cooperate.¹⁶²

Our House, Inc. first had to gain the approval of all the McDonald’s co-ops to proceed with the statewide fundraiser. In the spring of 1981, Brenda Duncan, Jim Props, and Gerald Cassidy took to the road again, traveling to South Bend, Fort Wayne, Evansville, Indianapolis, and Terre Haute “and got everybody to agree” to the 25 cent hamburger idea.¹⁶³ Both Duncan and Props described it as an “easy” process, despite the fact that the fundraiser “was the first effort of its kind” because marketing co-ops in Indiana “didn’t work together on anything else.” They both believed the operators “transcended their own self-interest” to participate in a “money losing proposition” of

¹⁶⁰ Campbell first interview with Mize.

¹⁶¹ Props interview with Mize; Duncan interview with Mize.

¹⁶² Ibid.

¹⁶³ Duncan interview with Mize.

selling hamburgers for a quarter and donating the profits, in their entirety, to the project because of the appeal of the RMH concept.¹⁶⁴

Soon after Props and Duncan convinced Indiana's five co-ops to approve the promotion they and the board started planning a "25 cents Hamburger Day" to take place August 2, 1981.¹⁶⁵ They recognized marketing would play a crucial role in the successful fundraiser, and started advertising the August 2 event in as many venues as possible. The board relied on the McDonald's co-ops, the logistical ability of McDonald's Central Indiana Regional office, and the marketing skills of CVR as the event began to take shape. The McDonald's co-ops not only agreed to take a huge loss selling discount hamburgers, but they also agreed to pay for advertisements to publicize the event. Together, Duncan and CVR marketed Hamburger Day on television and radio and in newspapers. All the ads promoting the event highlighted the 25 cents price, which was about a 50 percent discount, and emphasized how the money would support the future RMHI. The ads also reiterated the family-friendly mission of the RMH. For example, one Hamburger Day television commercial featured families receiving their food while an announcer explained the event and encouraged people to "bring in the whole family" to take advantage of "a special 25 cents hamburger price on a special day."¹⁶⁶ While the co-ops provided both the material support and advertising, Duncan and the McDonald's Central Indiana Office contributed their logistical experience. In the weeks leading to August 2, Duncan and the McDonald's central office coordinated with McDonald's food

¹⁶⁴ Ibid.

¹⁶⁵ RMHI Newsletter, "From Our House to Your House Newsletter," Summer 1981 Vol. 1, No. 2., Records Boxes RMHI, Indianapolis, IN; Props interview with Mize.

¹⁶⁶ As produced, script for McDonald's commercial, Duncan personal files.

suppliers to make sure each market in the state would have buns and meat to handle the expected demand. The board also planned to use Duncan's office as "command central" during the promotion. From there, board members and McDonald's employees could "man the phones" to troubleshoot any problems as they arose.¹⁶⁷

The board of directors planned smaller fundraising events to occur simultaneously with the Hamburger Day promotion, bringing another side of the "crucial triangle" into the "Hamburger Day" event. First, the board wanted to place community volunteers in every participating McDonald's to solicit additional donations and relied on Judy Monnier to recruit and organize those volunteers. Monnier started by reaching out to people she knew from her previous fundraising experience, asking them to work the event and to help her recruit additional volunteers. Next, she began cold-calling Methodist churches in "any town there was a McDonald's" because she shared their faith and believed she could find "philanthropic" individuals to staff the event. She called "hundreds" of churches, usually speaking with either a pastor or secretary and "asked if they had a couple people who I could talk to that would volunteer to go to the McDonald's on Hamburger Day and collect donations."¹⁶⁸ The church then referred her to one of the "active" members of their parish, or sometimes pointed her towards an individual or organization in the community, who then became Judy's contact in that area.¹⁶⁹

¹⁶⁷ Duncan interview with Mize; Campbell interview with Mize.

¹⁶⁸ Monnier interview with Mize.

¹⁶⁹ Ibid.

Monnier then worked with Nancy Link and CVR to staff every McDonald's with well-informed volunteers for Hamburger Day. They began by placing each recruit on the nonprofit's growing mailing list and sent them all information packets on the RMH concept, updates on the Hamburger Day fundraiser, and progress reports on the RMHI's development.¹⁷⁰ Monnier and Link organized Hamburger Day recruits by appointing "market coordinators and store-level team captains" in each of the five McDonald's markets in Indiana.¹⁷¹ The market coordinators reported directly back to Nancy Link at CVR, informing her of any "local public relations opportunities" that arose as August 2 drew closer. The coordinators and store captains worked together and with Link and Monnier to recruit and place volunteers in each McDonald's restaurant within their market. The store captains created a shift schedule for the volunteers at the McDonald's they supervised and often helped plan small fundraisers. The store captain also coordinated with their store's owner/operator to make sure their fundraising station or planned activities did not interfere with the expected 2,000 customers per store.¹⁷²

Judy Monnier, Nancy Link, and the market coordinators ensured that on August 2 volunteers soliciting additional donations staffed "almost all the stores" in Indiana.¹⁷³ Link and Monnier provided every market coordinator with buttons, information flyers, volunteer t-shirts, and RMHI badges that the coordinators distributed to their store captains on the day of the fundraiser. The "more than 750" volunteers staffing the

¹⁷⁰ Nancy Link, Memorandum to Ronald McDonald House Volunteers for 25 cents Hamburger Day, July 15, 1981, Records Boxes RMHI, Indianapolis, IN.

¹⁷¹ Ibid.; Monnier interview with Mize.

¹⁷² Ibid., 1, 5.

¹⁷³ Monnier interview with Mize.

restaurants distributed the flyers and solicited additional donations by selling the RMH buttons for \$1 each and asking customers to drop spare change in a donation container.¹⁷⁴ The volunteers also hosted ancillary fundraising activities that ranged from parking lot car washes to small bake sales, and thereby supplemented the much larger Hamburger Day fundraiser.¹⁷⁵ After months of careful planning, on August 2, 1981, well-trained and informed volunteers staffed the 144 McDonald's participating in the Hamburger Day fundraiser across the state of Indiana.¹⁷⁶

The Our House, Inc. board of directors hoped Hamburger Day would raise enough money and awareness to allow them to break ground on the RMHI's construction. The board expected Hamburger Day to raise about \$200,000 from hamburger sales and estimated that the ancillary volunteer-led activities might bring in another \$50,000. As with all of their fundraising strategies, the board emphasized raising awareness nearly as much as they did raising money. They wanted the Hamburger Day's advertising campaign and the informative flyers that volunteers distributed to expand the general support for the RMHI project within local communities and to increase the mailing list and the House's volunteer base.¹⁷⁷

On August 2, 1981, 144 McDonald's restaurants across Indiana began selling hamburgers for a quarter each at 10:30 am. Most of the owner/operators worked "in their

¹⁷⁴ Link, Nancy, Memorandum to Ronald McDonald House Volunteers for 25 cents Hamburger Day, July 15, 1981, Records Boxes RMHI, Indianapolis, IN.

¹⁷⁵ RMHI Newsletter, "From Our House to Your House," summer 1981, Vol. 1, No. 2, Records Boxes RMHI, Indianapolis, IN.

¹⁷⁶ "25 cents Hamburger Day, August 2, 1981, Analysis of Results," Duncan Personal Files, Indianapolis, IN.

¹⁷⁷ Props interview with Mize.

stores that day” and coordinated with McDonald’s Central Indiana Office, which acted as “command central” for the entire fundraiser.¹⁷⁸ Karen Campbell later compared her experience that day to “invading a country,” as she found herself in the middle of a “logistical nightmare and miracle.”¹⁷⁹ Brenda Duncan called the promotion “wild,” and a unique “phenomenon in the whole history of McDonald’s.”¹⁸⁰ Jim Props worked in his restaurant during the entire promotion, and in his typically understated fashion, described it as “one of the more interesting days of my life.”¹⁸¹

Immediately after Hamburger Day began, the organizers of the event realized the fundraiser would exceed all their expectations. The Our House, Inc. board of directors, McDonald’s franchisees and corporate, and Judy’s volunteers had “geared up for a big day,” but recognized they had completely underestimated “how big it was going to be.”¹⁸² Props understood, “soon after 10:30 when we began selling the hamburgers that we were in deep trouble.” The co-ops around the state “had chosen not to put a limit on the number of hamburgers people could purchase,” and customers began “buying hamburgers in increments of ten, twenty, fifty, and occasionally a hundred.” The problem became exacerbated as hundreds of customers began pouring into the restaurants after church services let out, most of them purchasing hamburgers in multiples of ten.¹⁸³

¹⁷⁸ Duncan interview with Mize, Campbell first interview with Mize.

¹⁷⁹ Campbell first interview with Mize.

¹⁸⁰ Duncan interview with Mize.

¹⁸¹ Props interview with Mize.

¹⁸² Ibid.

¹⁸³ Ibid.

Demand quickly depleted the supplies on hand in restaurants around the state, all of which had increased their stock of food beyond the norm in preparation for August 2. The owner/operators in the stores turned to “command central” for support. Karen Campbell, along with Brenda Duncan and several other McDonald employees, operated the phones. Campbell remembered a typical call from one swamped operator. He pleaded: “I have five registers. I have ten deep at each register, they’re outside the door in the parking lot in line, and I have opened my last case of meat. What do I do?” The McDonald’s corporate staffer glibly replied “Are there any cows outside?” before scrambling to find more meat for that store.¹⁸⁴ The supply of hamburgers dwindled in restaurants across the state to the point where Duncan and her McDonald’s team had to start “dispatching trucks where they needed extra product.”¹⁸⁵ They also opened McDonald’s bakeries on an “emergency basis,” producing buns so rapidly they arrived hot at the restaurants.¹⁸⁶ “Command central” managed to keep the stores supplied, although a few operators emptied their local supermarkets of buns and meat and one restaurant grill “went up in flames.”¹⁸⁷

Hamburger Day surpassed all expectations and became a fabulously successful fundraising venture. The board estimated Hamburger Day would net \$200,000 for the RMHI, which meant they projected selling around 800,000 burgers. Instead Indiana McDonald’s restaurants more than doubled that amount and sold 1,668,671 hamburgers.

¹⁸⁴ Campbell first interview Mize.

¹⁸⁵ Duncan interview with Mize.

¹⁸⁶ Props interview with Mize; Campbell interview with Mize.

¹⁸⁷ Campbell first interview with Mize.

Including additional money raised from ancillary promotions other than the discounted hamburgers, McDonald's raised an astonishing \$455,958.51 during Hamburger Day.¹⁸⁸ The average McDonald's sold 10,000 hamburgers with the highest total coming from the First Street McDonald's in Evansville, which sold 16,232 hamburgers and raised \$4,058.10.¹⁸⁹ The volunteers who sold buttons, washed cars, and solicited donations at various restaurants earned an additional \$31,588, making the grand total for the event an unprecedented \$487,546.51.¹⁹⁰ In one day, the McDonald's operators came within \$120,000 of raising their entire \$610,000 commitment. In addition, the promotion turned into a huge public relations coup. During the event volunteers passed out flyers and spoke with thousands of customers, and afterwards CVR issued press releases detailing the massive numbers the event produced. News stories in multiple media outlets led to new levels of public exposure for the RMHI when Hamburger Day garnered national attention.¹⁹¹ Most importantly, the nearly \$500,000 provided the financial foundation the board hoped to secure and enabled them to immediately begin planning for a "fall ground break [sic]" with the hope of having "the house under a roof by winter."¹⁹²

The construction phase officially began with a "corner stone laying ceremony" held on September 16, 1981. At the groundbreaking, "young patients from James

¹⁸⁸ Brenda Duncan to Mike Donahue, Promotion Development at McDonald's Headquarters in Oak Brook, IL, "Report on 25 cents Hamburger Day," Dec. 7, 1981, Duncan Personal Files, Indianapolis, IN; 25 cents Hamburger Day Analysis of Results, Aug. 2, 1981, Duncan Personal Files, Indianapolis, IN. In addition to the discount hamburgers, some McDonald's printed coupons offering additional special deals, such as discounted sodas with the purchase of a hamburger. These brought extra money at several McDonald's around the state.

¹⁸⁹ Ibid.

¹⁹⁰ 25 cents Hamburger Day Analysis of Results, Aug. 2, 1981, Duncan Personal Files, Indianapolis, IN.

¹⁹¹ Ibid.

¹⁹² CVR Press Release Release, August 4th, 1981. Duncan Personal Files, Indianapolis, IN.

Whitcomb Riley Hospital” and their doctors laid the cornerstone, with each child contributing an item to a time capsule encased inside.¹⁹³ The board expected to complete the RMHI’s construction a year later in the summer of 1982, and after the massive success of Hamburger Day, they still planned to open the House debt free. To make these expectations a reality the board still needed to supervise a major construction project, recruit volunteers to staff the House after its opening, and raise an additional 1.1 million dollars in in-kind and cash donations. As of the groundbreaking, Our House, Inc. had collected nearly half of the 1.6 million dollars needed to construct the RMHI. The board still needed to raise around \$800,000 to pay for the House, plus an additional \$300,000 beyond the cost of the building to ensure the RMHI had operating capital to sustain the House after its opening. The RMHI project had been “adopted” by the Builders Association of Greater Indianapolis, and had already received \$385,000 in materials and labor from contractors affiliated with the professional association. The board felt comfortable counting on at least \$400,000 of the remaining cost of the House to come from in-kind donations, which meant they needed around \$700,000 in cash donations.¹⁹⁴

Since Hamburger Day brought in nearly all of McDonald’s fundraising commitment, the majority of the remaining funds needed to come from the community. Having raised \$175,000 from community sources by the spring of 1981, after the groundbreaking the board needed to raise approximately \$500,000 from the community

¹⁹³ “Construction Begins on Ronald McDonald House in Cooperation with Riley Children’s Hospital,” *The Evening World*, September 29, 1981.

¹⁹⁴ Campbell second interview with Mize; Props interview with Mize; RMHI Newsletter, “From Our House to Your House,” Winter 1981, Volume 1, No. 3, Records Boxes RMHI, Our House, Inc.; “36 Month Budget and Fund Raising Plan,” Records Boxes RMHI, Indianapolis, IN.

to ensure the success of the project.¹⁹⁵ To bring in these funds, Campbell, Monnier, and Durnil refocused their efforts on speaking engagements, direct mail campaigns, and small events. Community volunteers as well as the board organized the smaller events. Beyond the incredible financial success of August 2, 1981, that allowed construction to begin, Hamburger Day left Our House, Inc. with a network of volunteers in communities across Indiana. Monnier placed the market coordinators, store captains, and volunteers she recruited for Hamburger Day on the RMHI's mailing list. After August 2 came and went, the fundraiser's volunteers continued to receive materials from the RMHI, including the Our House, Inc. newsletter that Duncan and CVR started sending out early in 1981. These newsletters kept the volunteers informed of additional fundraising and volunteer opportunities as they arose. Many individuals, who participated in Hamburger Day, continued to work on behalf of the RMHI within their communities. The individuals Monnier recruited became the foundation for a statewide network of volunteers who supported the RMHI throughout its construction, opening, and beyond.¹⁹⁶

In the fall of 1981, the board focused on expanding and maintaining the House's support network as they renewed their focus on community fundraising efforts.¹⁹⁷ The "Speakers Bureau" played a key part in these efforts. The volunteer members of the Speakers Bureau gave presentations in communities across the state of Indiana. Campbell and Monnier recruited the Bureau's first volunteer speakers at presentations they gave in

¹⁹⁵ RMHI Newsletter, "From Our House to Your House," Summer 1981, Volume 1, No. 2, Records Boxes RMHI, Indianapolis, IN; RMHI Newsletter, "From Our House to Your House," Winter 1981, Volume 1, No. 3, Records Boxes RMHI.

¹⁹⁶ Monnier interview with Mize; RMHI Newsletter, "From Our House to Your House," Summer 1981, Volume 1, No. 2. RMHI Records Boxes, Indianapolis, IN.

¹⁹⁷ Monnier interview Mize; Campbell first interview with Mize.

early 1981. Audience members often approached Campbell and Monnier to tell of their own experiences with serious childhood illness. Occasionally, these individuals were willing to share their personal stories on behalf of the RMHI. Cheri Forslund, the wife of James Forslund and the Speaker's Bureau chairperson, worked with Campbell and Monnier to train these new speakers by educating them in depth on the RMH concept and the RMHI project. They also provided the speakers a RMHI slide show and script Monnier created in cooperation with Caldwell Van Riper. The slideshow focused on the same themes as the project's public relations campaign. It explained the RMH concept in detail and the need it addressed, and also stressed the RMHI's partnership with Riley and how the future House would serve the entire state of Indiana.¹⁹⁸

After providing them with all the training and materials they needed, Forslund or Monnier used Speakers Bureau volunteers "the next time [the RMHI] needed a speech" near the volunteer's community.¹⁹⁹ These speakers brought in money, in-kind donations, and additional volunteers. Campbell and Monnier utilized the "each one reach one" strategy, which meant they expected every new volunteer to recruit at least one additional volunteer. This technique allowed the Speakers Bureau to expand rapidly, and by May 1982 the Speakers Bureau had fifty-eight different presenters in seventeen towns and cities across Indiana ranging from Fort Wayne in the North to Evansville in the South. From May 1981 to May 1982, those speakers gave formal presentations to fifty-one separate groups including five builders associations, several Bible Schools, and many

¹⁹⁸ Ibid.; Caldwell Van Riper, Slide Show Script Draft #2, November 21, 1980, Records Boxes RMHI, Indianapolis, IN.

¹⁹⁹ Monnier interview with Mize.

benevolent organizations such as Kiwanis and Rotary clubs.²⁰⁰ The Speakers Bureau volunteers became the foundation for the support network that sustained the RMHI throughout its construction and after its opening.²⁰¹

Direct mail campaigns became the second main strategy the Our House, Inc., board utilized to expand and maintain the network of grassroots support. The board relied on this strategy throughout the RMHI's planning and construction. As the House's statewide network expanded in the summer and fall of 1981, the direct mail campaigns became even more important because they kept volunteers updated and encouraged donors to give repeatedly as the project progressed. Gordon Durnil provided the board with a base mailing list he developed as chairman of the Indiana Republican Party. The board built on this foundation by adding each volunteer recruited for Hamburger Day, the Speakers Bureau, or other activities that supported the RMHI to the ever growing mailing list.²⁰²

Individuals on the RMHI's mailing list received mailers that ranged from the Our House Newsletter, that kept the House's supporters constantly updated on the project's progression, to letters or flyers that directly solicited recipients for donations to the RMHI project. Direct mailings enabled the board to keep supporters from communities far from Indianapolis emotionally invested and excited about the House's construction. More importantly, the board included a self-addressed return envelope in every piece of mail sent to make it easy for individuals to send RMHI donations. These constant updates

²⁰⁰ RMHI Newsletter, "Our House News," Vol. 1, No. 2, May, 1982, Records Boxes RMHI.

²⁰¹ Monnier interview with Mize; Campbell interview with Mize.

²⁰² Ibid.

encouraged people to become repeat donors to the project, an effective strategy as donors who gave five to twenty-five dollars every few months became a key source of support during RMHI's construction and after it opened.²⁰³

The renewed focus on community fundraising and the expansion of the RMHI's support network increased the number of small donations from communities throughout the state. Jim Props, the Our House, Inc. board's assistant treasure at the time, remembers receiving "literally hundreds of small contributions" a month "in increments of five, ten, twenty dollars."²⁰⁴ After August 2, 1982, the fundraising efforts of Campbell and Monnier that led to the expansion of the Speakers Bureau and growth of the RMHI mailing list proved incredibly successful. By March 30, 1982, six months before the RMHI's grand opening, fifty-three percent of the House's donors had given less than fifty dollars, with a majority of those totaling under ten dollars.²⁰⁵ Despite the hundreds of donations the board found itself falling short of its fundraising goals. Unfortunately, starting in 1980, just as the Our House, Inc. nonprofit formed, the American economy entered a deep recession driven by to a combination of high inflation and unemployment.²⁰⁶ The recession depressed the number of grassroots donations and the average amount of each donation, meaning Our House, Inc. needed to work harder to reach their fundraising goal from the community.

²⁰³ Campbell first interview with Mize; Monnier interview with Mize.

²⁰⁴ Props interview with Mize.

²⁰⁵ Caldwell Van Riper, Conference Report on the Telethon, March, 30 1982, Records Boxes RMHI, Archives, Indianapolis, IN.

²⁰⁶ Carl W. Biven *Jimmy Carter's Economy: Policy in an Age of Limits*. (Chapel Hill, NC: University of North Carolina Press, 2002).

In addition, cost overruns in the winter of 1982 forced the board to revise the total price of the RMHI from 1.6 million to close to 1.9 million.²⁰⁷ While the board originally expected to raise 1.9 million total, they wanted \$300,000 of that total to go towards operating the RMHI after it opened. The revision meant the board needed an additional \$300,000 in construction costs, which raised the total amount to open the House with some operating capital to just over \$2,000,000. McDonald's franchisees agreed to continue raising some additional money beyond their original \$610,000 commitment, and by the end of September 1982, one month before the House's opening, the franchisees had donated more than \$750,000 to the project.²⁰⁸ The board elected to raise a majority of the remaining funds through another large fundraiser like Hamburger Day. The board decided to make this major fundraiser a community-focused event, rather than a McDonald's-based promotion. While the RMHI received a large quantity of donations from all over Indiana, the relatively small amount of each donation resulted in a lower total. This combined with cost overruns meant the board needed an additional \$300,000 to \$400,000 to meet their original goal of raising half of the total cost of the RMHI from community sources.²⁰⁹

Drawing on her prior experience in Chicago, Karen Campbell suggested Our House, Inc. plan and host a telethon. During the construction of Chicago's RMH, Karen

²⁰⁷ Caldwell Van Riper, Conference Report on the Telethon, March, 30 1982, Records Boxes RMHI, Indianapolis, IN.

²⁰⁸ Karen Campbell to Doyne U. Crum, September 21, 1982, Records Boxes RMHI, Indianapolis, IN.

²⁰⁹ Campbell first interview with Mize. The sources do not provide exact totals for how much the board raised from what sources in the community. A majority of sources consist of scattered correspondence and the RMHI newsletters. There are no extant fundraising updates with specific totals and dates the author could find in the Records boxes in the RMHI archive.

helped organize a mini-telethon that took place during the halftime of a Bears/Eagles NFL game. The Our House Board, however, decided to plan a full-length telethon that would allow them to reach out to the communities across Indiana at an unprecedented level.²¹⁰ In the winter of 1982, a number of conditions led the board to believe the timing seemed perfect for an Our House Telethon. First, the NFL planned to add to expansion teams to the league, and political leaders from the Indiana state and city governments formed the “Indiana NFL Committee” to try to bring a team to Indianapolis. This meant “a concerted push” was “on to capture the dollars, prestige and excitement that a team will bring.”²¹¹ Karen served with Jim Murray on RMH’s National Advisory Board, and she believed this connection and the NFL’s support of RMHs in cities like Philadelphia and Chicago would allow the board to convince the NFL to play a major role in their telethon. The board knew any telethon featuring NFL players would tap into the excitement about Indianapolis possibly getting an NFL team, meaning political and business leaders would flock to support “a project like the Ronald House that is close to the heart of the NFL.”²¹²

Planning for the Our House Telethon began in February 1982, and by early March the telethon already had “good help available from Channel 13, the Indianapolis Chamber of Commerce, a large group of Our House volunteers, organizations that [were] eager to work for the House, City government,” officials as well as additional staff at CVR.²¹³ The

²¹⁰ Ibid.

²¹¹ Ruth Banta, CVR, to Jim Forslund, Our House, Inc. board president, February 5, 1982, Records Boxes RMHI, Indianapolis, IN.

²¹² Ibid.

²¹³ Ibid.

board appointed CVR employee Nancy Link the “Telethon Coordinator,” and placed her in charge of coordinating the variety of groups and individuals who needed to collaborate to make the telethon a success. Link and the board originally planned for a two-day, ten-hour-per-day telethon featuring numerous ABC television stars, NFL players, and interviews with RMH and Riley representatives. In addition to the two, ten-hour broadcasts, the board also decided to host a large charity dinner that would kick off the telethon and recognize individuals and businesses who made larger donations to the RMHI. Still hoping to open the House in the summer of 1982, the board set the challenging goal of hosting the dinner and airing the telethon on March 27 and 28, 1982, less than two months after planning began in February of that year.²¹⁴

Hoping to expedite the process, Nancy Link and the board created multiple subcommittees, each responsible for planning a certain aspect of the telethon while reporting back to Link. Two Channel 13 employees, William Marchiniak and Jim Mathis, agreed to produce and direct the telethon, and promised to recruit television personalities from the ABC network to help host the program. Other “telethon committees” included a finance committee that tracked the event’s cost, a “special gifts” committee that pursued large corporate or individuals donors willing to present their donation on air, a Riley committee that coordinated with the hospital to find doctors and nurses willing to be interviewed, an “away locations” committee that set up “remote” locations for telethon outside of Channel 13’s studios, and an NFL committee that worked with Jim Murray to recruit pro-football players to appear at the telethon. Judy Monnier managed the

²¹⁴ CVR, Conference Report on the Telethon, Feb. 8, 1982, Records Boxes RMHI, Indianapolis, IN.

volunteer committee that staffed the banquet, answered phones at the telethon, and organized small fundraising events that occurred simultaneously with the telethon. In total, seventeen people, both members and nonmembers of the board, worked on different aspects of telethon's planning and reported directly back to Nancy Link.²¹⁵

As the March 27 and 28 deadlines neared, the board realized their event would prove far larger and more complex than the mini-telethon Karen Campbell planned in Chicago. It became clear to Nancy Link that these complexities made the March dates unrealistic, and she convinced the Our House, Inc. board to delay the broadcast.

According to a letter by Dr. Chuck Richmond, a member of the board and member of the Riley telethon committee, during the first week of March Nancy Link persuaded the board to reschedule the telethon. Link cited the delays due to slow response from representatives of Channel 13 and other "extenuating" circumstances. Some board members believed "the expedient thing from any number of vantage points would have been to move ahead on the original dates for this event," but Link told them any telethon held so quickly would not satisfy her "scrupulous commitment to the high quality effort that the development of the Ronald McDonald House represents overall."²¹⁶ Despite the misgivings of some, the board decided in early March to delay the banquet and telethon to June 19 and 20 and decided to shorten the time it ran from two 10-hour segments to one 8-hour broadcast to make the telethon easier to organize and air.

²¹⁵ CVR, Conference Report on the Telethon, March, 30 1982, Records Boxes RMHI, Indianapolis, IN.

²¹⁶ Dr. Chuck Richmond, Assistant Director of Indiana University Hospitals to Nancy Link, CVR, March 16, 1982, Records Boxes RMHI, Indianapolis, IN.

The board set ambitious fundraising goals for the telethon when they decided to delay the broadcast from March to June of 1982. Planners wanted the telethon to raise enough money to completely furnish the house and provide it with operating capital for the first few months after it opened. On March 30, 1982, the board estimated that they needed to net a profit of about \$323,000 from the telethon. Organizers projected expenses of approximately \$177,000 to rent the Channel 13 studio, build the telethon set, hire celebrities, and cover other miscellaneous expenses. Therefore, they hoped to raise about \$500,000 total from the telethon and related events, which would enable them to open the RMHI in the summer 1982 fully furnished and debt free. Their “conservative” estimate of income totaled about \$462,000, with \$300,000 coming from corporate and special gifts, \$40,000 from telethon pledges, \$50,000 from McDonald’s synchronized promotions, \$50,000 from outside organization activities, \$12,500 from shopping mall events, and \$10,000 from the VIP banquet before telethon.²¹⁷

From March through June of 1982, Nancy Link worked tirelessly alongside the various committees to put together the “high quality” Our House Telethon she envisioned. As the pressure and intensity of the planning built, Nancy confessed in a letter to Dr. Chuck Richmond, a doctor at Riley and board member, that her “commitment to the Ronald McDonald House [had] surpassed a professional level,” and she would “do anything in my power to see those doors open as soon as possible.”²¹⁸ This passion permeated the event’s planning process as the committees rushed to pull all pieces of the

²¹⁷ CVR, Telethon Conference Report, March 30, 1982, Records Boxes RMHI, Indianapolis, IN.

²¹⁸ Nancy Link, CVR to Dr. Chuck Richmond, Assistant Director of Indiana University Hospitals, March 18, 1982, RMHI Archives, Indianapolis, IN.

telethon together before June 20. Dr. Richmond attempted, with the help of Channel 13 and CVR, to film interviews of Riley doctors, nurses, and employees to play during the telethon. Yet, as the event grew closer and time constraints limited the number of interviews he could conduct, Dr. Richmond recruited Riley representatives to give live interviews during the telethon instead. Under the guidance of Brenda Duncan, Karen Campbell, and Judy Monnier, McDonald's operators and volunteer groups arranged events and promotions to occur concurrently with the broadcast. Cheri Forslund, the long-time supporter of the RMHI project and wife of board president James Forslund, set up "away sites" at malls in the greater Indianapolis area featuring entertainment and family friendly activities. Mrs. Forslund and the board wanted the sites to encourage shoppers to stop and donate money as well as to provide a feature for the telethon broadcast.²¹⁹

Channel 13 representatives, CVR, and members of the entertainment committee worked to secure ABC celebrities and other entertainers for the telethon. The entertainers ranged from the community members like the Indianapolis Youth Symphony to famous television celebrities such as the "three oldest Waltons," Judy Norton-Taylor, Mary Beth McDonough, and Jon Walmsley, from the popular television show *The Waltons*. They also recruited the actor Ed Moreno, who played officer Joe Coffey on the police drama *Hillstreet Blues*, as well as Sarah Purcell, who hosted a show about inspiring, funny, or weird Americans entitled *Real People*. Moreno and Purcell ended up co-hosting the event with the entertainment committee's most significant acquisition, the famous signer and

²¹⁹ Ibid.

entertainer Bobby Vinton who agreed to emcee the entire event.²²⁰ The well-known “Polish Prince” became famous during the 1960s and 70s, when the singer generated thirty top-forty songs, including popular tunes such as “Blue Velvet” and “Mr. Lonely.” In the mid-1970s, Vinton signed a new Recording contract with ABC Records, which put him on Channel 13’s radar when they searched for celebrities who could generate interest in the telethon. Vinton’s star power certainly brought attention to the telethon and the RMHI project, and board members like Karen Campbell later recalled their amazement and disbelief when they found out that he had agreed to co-host their telethon.²²¹

The NFL committee also succeeded in getting football stars to commit to the banquet and telethon mainly through Campbell’s connection to Philadelphia Eagles general manager Jim Murray. Their efforts brought NFL stars such as the Cincinnati Bengals quarterback and league MVP, Ken Anderson, and the future NFL Hall of Fame member and then All-Pro offensive linemen from the St. Louis Cardinals, Dan Dierdorf, to Indianapolis for the June 19 banquet. Other NFL players present at both the banquet and telethon included John Spagnola, Reggie Wilkes, and Dennis Harrison from the Philadelphia Eagles; Curtis Green and Carl Allen from the St. Louis Cardinals; and Terry Schmidt from the Chicago Bears.²²² Campbell and Murray established a great relationship serving together on the RMH National Advisory Board, and Karen used their relationship to speed the process of securing players for the telethon. The board never doubted its ability to engage the NFL because of the league’s previous support for RMH

²²⁰ CVR, Telethon Conference Report, May 22, 1982, Records Boxes RMHI, Indianapolis, IN.

²²¹ Campbell first interview with Mize.

²²² “NFL Scores for Indiana’s Sick Children,” *Indianapolis Recorder*, July 3, 1982, Clippings File, Records Boxes RMHI, Indianapolis, IN.

in other cities. The initial involvement of Jim Murray, Fred Hill, the Eagles, and the Bears in both the Philadelphia and Chicago Houses led to a deeper commitment on behalf of the NFL. By the summer of 1982, thirty-two cities contained finished RMHs with another thirty under construction, and the NFL supported nearly every House - especially if the city hosted an NFL franchise.²²³

The board wanted the telethon to raise money while simultaneously educating the public on how the RMHI would work with Riley to serve families across Indiana. They planned for the telethon to reiterate the themes of the Our House, Inc.'s partnership with Riley, how RMHI's mission would benefit families, and how the House would serve the entire state. Dr. Richmond also wanted the telethon interviewees to emphasize that the money raised would not only help put the finishing touches on the RMHI, but would also provide "working capital" after it opened. Dr. Richmond and other board members thought it "important to not leave the impression" that the telethon represented a "culmination of our fund raising efforts." Richmond pointed out to Nancy Link that the telethon "may be the first time many will have heard from us, it will by no means be the last." He feared leaving the "impression" that the telethon was the RMHI's last major fundraiser, and a failure to emphasize the need for continuing support could make the whole "enterprise actually a very costly one over the long run."²²⁴ Nancy and CVR heeded his advice. All interviewees spoke of the telethon as a beginning for the RMHI rather than a final, climatic event. They hoped to use the telethon to raise the awareness

²²³ Campbell first interview with Mize.

²²⁴ Dr. Charles Richmond, Assistant Director of Indiana University Hospitals to Nancy Link, CVR, March 16, 1982, RMHI Archives, Indianapolis, IN.

of the House to new heights and to enlarge its pool of small, repeat donors who would support the House for years rather than just one time.²²⁵

The board also used the telethon as a vehicle to attract additional major donations from the greater Indianapolis community. Andrew Paine, president of Indiana National Bank, chaired the banquet committee, and he worked closely with “special gifts chairman” Joseph D. Barnette Jr., the president of American Fletcher National Bank, and the “corporate gifts” chairman Fred. C. Tucker Jr., president of F.C. Tucker Realtors. Together they attempted to tap into the Indiana business community to arrange for large donations to be presented at the June 19, banquet and during the telethon broadcast. Less than a month before the telethon, however, the team had obtained only \$10,000 in corporate pledges - a total that fell far short of the board’s initial \$300,000 goal.²²⁶ While no comprehensive list of the telethon’s corporate donors exists, the small total with less than a month to go indicated that the corporate and special gifts proved harder to secure in a bad economy than the board had projected. The disappointing “haul” in corporate gifts eventually contributed to a net cash return on the telethon that failed to meet the board’s original goal. Even so, the board did successfully capitalize on the public relations impact of the major gifts they did secure by having many of them strategically announced during the telethon broadcast

The Telethon opened on June 19, 1982, with a large charity banquet featuring speakers from the Our House Board and Riley Hospital, NFL players who spoke and

²²⁵ Campbell first interview with Mize; Monnier interview with Mize.

²²⁶ Conference Report, May 22, 1982 CVR RMHI Newsletter, “?????????” Vol. 1, No. 2, May 1982. Records Boxes RMHI, Indianapolis, IN; CVR, Conference Report, May 22, 1982. Records Boxes RMHI, Indianapolis, IN. In the Spring of 1982 Our House, Inc. was holding a contest to name their newsletter, which is why its titled “?????????”.

signed autographs, and keynote speaker, Jim Murray. Nancy Link and Andy Payne secured the Indiana Convention Center's largest event space, the 500 Ballroom, to host the expected crowd. Tickets to the event cost \$50 per person. Individuals or corporations could also contribute \$500 for a dinner for two or \$1,000 for an eight-person table. The more expensive tickets included a VIP reception, where attendees could meet and mingle with the NFL players.²²⁷ During the banquet, Jim Murray spoke about the NFL's involvement with the RMHs across the country, and the importance of having an organization like a RMH to support families with sick children.²²⁸ While it remains unclear exactly how much money the event raised, around 300 "Our House supporters" attended the reception and the presence of the NFL players certainly boosted attendance at the banquet.²²⁹ As Karen Campbell later explained, with no NFL team yet in Indianapolis and ESPN still in the distant future, a NFL star's attendance was "rare. . .really special and really cool."²³⁰

Bobby Vinton kicked off the eight-hour telethon the next morning at 10 a.m., before Moreno and Purcell introduced a series of videos explaining the RMH concept, the history of the NFL's involvement with the project, and a brief introduction to Riley Hospital and the Indiana University Medical Center by Dr. Beering.²³¹ The NFL film featured testimonials from players like Eagles linebacker Fred Hill, whose daughter's

²²⁷ Telethon Banquet Invitation, Records Boxes RMHI, Indianapolis, IN.

²²⁸ Julia Inman, "Purcell and Vinton to Team for Telethon," *Indianapolis Star*, May 26, 1982, Clippings File Records Boxes RMHI.

²²⁹ RMHI Newsletter, "?????????" Vol. 1, No. 3, August, 1982.

²³⁰ Campbell interview with Mize.

²³¹ "Our House Telethon Broadcast," June 19, 1982, Records Boxes RMHI, Indianapolis, IN.

illness in Philadelphia led to the first RMH in 1974, and Bengals quarterback Ken Anderson, as well as NFL executives like Jim Murray. After the introductory films, the telethon shifted to short, live interviews with breaks for performances by Vinton and presentations of donations from a variety of businesses and benevolent organizations. The interviews featured members of the Our House, Inc. board as well as representatives from other RMHs, Riley Hospital, and the NFL.²³²

A majority of the interviews featured the doctors, nurses, and patients from Riley whom Dr. Richmond arranged to speak on behalf of the hospital. Doctors Beering and Richmond saw the telethon as an opportunity to educate the public not only about the RMHI's mission but also about the services Riley provided to communities throughout Indiana. A majority of the telethon's interviews presented medical professionals from different departments at Riley who spoke about their responsibilities. These medical professionals also described what a boon the RMHI would be for the families of their patients.²³³ The board again used the prestige of Riley hospital to legitimize the RMHI and its mission during the telethon. The stream of medical professionals testifying how the RMHI would improve the lives of their patients and their families added to the House's already powerful message of providing "a home away from home" for the families of sick children.²³⁴ In addition, explaining how Riley treated patients from all over Indiana emphasized that the future RMHI would serve families from communities across the state.

²³² Ibid.

²³³ Ibid.

²³⁴ RMHI Newsletter, "?????????" Vol. 1, No. 3, August, 1982, Records Boxes RMHI, Indianapolis, IN; "Our House Telethon Broadcast," June 19, 1982, Records Boxes RMHI, Indianapolis, IN.

The remaining interviews featured families who had used RMHs in other cities, Our House, Inc., board members, volunteers at remote events, and community and business leaders involved in the project. The families described how RMHs provided much-needed aid during the most stressful and difficult periods of their lives. Board members and community leaders spoke about their involvement with the project, the building's current status, and focused on how the RMHI would benefit communities outside of Indianapolis as well. The broadcast also "did remote" interviews from concurrent events that Judy Monnier and Cheri Forslund had organized at malls and other locations in the greater Indianapolis area.²³⁵ At these events, local benevolent groups offered family friendly activities such as face painting and musical performances to entice shoppers to give money to the RMHI. In one memorable stunt, Judy Monnier's husband drove a costumed Darth Vader and a film crew to different locations where the Star Wars villain promoted RMHI's cause and solicited donations.²³⁶

Towards the end of the telethon, community and business leaders presented large donations that, in some case, the telethon's planning committees had secured in the weeks leading up to the telethon and, in other cases, volunteers had raised at special events occurring before or during the broadcast. The following few examples show the breadth of volunteer and business involvement. Mitch Daniels, Indiana's future governor, presented a \$1,000 check from Dow Chemical, Girl Scout Troop 373 raised \$131.17 by selling homemade magnets, and Alpha Delta Pi (the philanthropic sorority to which Judy Monnier belonged) donated \$1,100 that brought their donation total for the whole project

²³⁵ Monnier interview with Mize.

²³⁶ Ibid.

up to \$5,000.²³⁷ Cosco, Inc., of Columbus, Indiana, donated more than \$2,000 worth of juvenile products such as strollers, play-yards, high-chairs, booster seats, and bed rails to help prepare the nearly completed RMHI for its young guests.²³⁸ As Monnier later explained, these interviews also allowed the board to “recognize” the efforts of the volunteers and community leaders who had donated time, money, and materials to the RMHI.²³⁹

The telethon successfully mixed short documentaries, interviews conducted by television celebrities, off site events, and Bobby Vinton’s entertaining song and dance numbers to create a well-paced, educational broadcast. The phone banks fielded 4,000 calls in 8 hours, and, while most callers pledged small amounts, the volume of calls indicated that the telethon successfully expanded the public’s awareness of RMHI while raising money for the project.²⁴⁰ Ultimately, “\$204,401 was raised by events centered around the eight-hour telethon June 20th and benefit dinner held June 19th,” just over half of the board’s internal goal of \$400,000.²⁴¹ The telethon, however, included overhead costs like renting a convention center ballroom, catering the banquet, paying celebrities’ fees, and handling broadcast’s production and other telethon-related expenses that came

²³⁷ “Our House Telethon Broadcast,” June 19, 1982, Records Boxes RMHI, Indianapolis, IN.

²³⁸ “McDonald House Gets Cosco Gift,” *Columbus Republic*, June 21, 1982, Clippings File, Records Boxes, RMHI.

²³⁹ Monnier interview with Mize.

²⁴⁰ Karen Campbell to Mrs. Jan Ploughe, Board Vice President, August 6, 1982. Records Boxes RMHI, Indianapolis, IN.

²⁴¹ RMHI Newsletter, “?????????” Vol. 1, No. 3, August, 1982, Records Boxes RMHI, Indianapolis IN. Conference Report, May 22, 1982.

to a total of \$101,120.35. After subtracting these costs, the telethon netted the board a profit of \$103,280.65.²⁴²

The Our House, Inc.'s only other major fundraising event, the 25 cents Hamburger Day promotion, brought in \$455,958.51 in donations, which caused the board to set an overly optimistic fundraising goal for the telethon.²⁴³ Unlike the telethon, which had high overhead costs that significantly reduced the event's net gain, the generosity of McDonald's franchisees and corporate employees meant Hamburger Day required little initial investment from Our House, Inc. McDonald's franchisees paid for the buns and meat, while the Central Indiana Regional Office provided all the advertisements and logistical support for the event. The board, therefore, may have underestimated how much the telethon's costs would undercut its net fundraising potential.²⁴⁴

The decision to reduce the length of the telethon and the continuing poor economic climate brought on by high interest rates and high unemployment contributed to the smaller than expected totals. Organizing a two-day, twenty-to twenty-four hour telethon proved too complex for Nancy Link and the board and they opted to reduce the length of the broadcast. The shorter telethon did not have as much money-raising potential, but in the end Link and the board produced a far more polished and professional event than if they had rushed to air the two-day March broadcast as they

²⁴² Report to Our House, Inc. Board from Nancy Link on Telethon, July 29, 1982, Records Boxes RMHI, Indianapolis, IN.

²⁴³ Brenda Duncan to Mike Donahue, Promotion Development at McDonald's Headquarters in Oak Brook, IL, "Report on 25 cents Hamburger Day," Dec. 7, 1981, Duncan Personal Files, Indianapolis, IN; 25 cents Hamburger Day Analysis of Results, Aug. 2, 1981, Duncan Personal Files, Indianapolis, IN.

²⁴⁴ Report to Our House, Inc. Board from Nancy Link on Telethon, July 29, 1982, Records Boxes RMHI, Indianapolis, IN.

originally planned. No indication exists that Our House, Inc. board of directors revised their initial fundraising goal after shortening the telethon. The shortened time, however, certainly contributed to a smaller than expected fundraising total. Nevertheless, the Our House Telethon raised \$204,401 and netted the project \$103,280.65, a significant amount of money a majority of which came from grassroots sources within the Indianapolis community.²⁴⁵

More importantly, the telethon garnered a tremendous amount of publicity that led to additional donations in the months following the event. Newspapers in Indiana and a few other states ran stories about the telethon, all of which explained the RMHI mission and publicized its connection to the prominent Riley Hospital. A few days after the broadcast, Karen Campbell remembered walking into the post office to pick up the first wave of telethon donations only to have a postal worker ask, “How big a car do you have?” She picked up three “enormous mail sacks” that initial trip, and Karen, Judy, and Jim spent a week at Karen’s dining room table opening letters. In those first three mail sacks, the project received almost \$40,000 in small donations averaging \$5.00.²⁴⁶ While the totals remained small, the immense volume of donations that poured into the RMHI after the broadcast reflected the public’s growing awareness of the project, and, as Dr. Richmond hoped, the telethon helped expand the network that would continue to support the RMHI after its grand opening.

Despite its success as a public relations event, the telethon’s “mildly disappointing” totals caused the board to push the tentative grand opening from summer

²⁴⁵ Ibid.

²⁴⁶ Campbell first interview with Mize.

to the fall of 1982.²⁴⁷ RMHI's community fundraising strategies continued to bring in money, but the poor economic climate depressed the amount and number of those donations. Fundraising challenges forced the board to settle on opening in October 1982, and as the new date neared, the board feared they might fail to reach the goal of opening debt free. Jim Props recalled, as "the opening of the house" approached, the board's fundraising goal became "a moving target" when unexpected expenses caused the price of the House to continually increase. As the date loomed closer, Props and the rest of the board found themselves "still short of our target" because "by the time the house opened in October of 1982 the actual cost [of the building] was about 1.8 million dollars," around \$200,000 more than their original estimate.²⁴⁸

Jim Props and Gerald Cassidy helped offset some of these cost overruns by using their financial prowess to generate extra money for the project. Fortunately for Our House, Inc., the bad economy had a silver lining as rising inflation caused Federal Reserve Chairman, Paul Volker, to increase short-term interest rates to unusually high levels. Props and Cassidy, who other board members described as "great business minds" and "financial geniuses," placed money in "a short term investment" that at one point "was paying [the board] almost 16% interest."²⁴⁹ The "additional funding" this investment provided alleviated some of the impact of the cost overruns, the poor economy, and the telethon's failure to meet its funding goals. Nevertheless, despite Hamburger Day's record totals, the statewide volunteer support network Campbell and

²⁴⁷ Props interview with Mize.

²⁴⁸ Ibid.; The 1.8 million dollar total Jim Props mentions here does not include the additional \$300,000 the Our House, Inc. wanted to have on hand to operate the RMHI in the first few months after its opening.

²⁴⁹ Campbell first interview by Mize; Props interview with Mize.

Monnier built, and the financial acumen of Props and Cassidy, it became clear to the board that they would need to either abandon their goal of opening debt free by taking out a commercial loan or delay the House's grand opening. Salvation in the form of a fully funded, on-time opening came when Props arranged an \$80,000 loan from an anonymous individual "who was familiar with the House, and wanted to help out."²⁵⁰ Props and the unknown benefactor created a simple, one-page document that stated if RMHI paid off the loan as quickly as possible by the end of 1982 then no interest would accrue on the loan. The board repaid the loan within sixty days after opening, but more importantly the loan's generous terms allowed the House to open, as planned, free of any official debt and with enough operating capital to immediately begin serving the public.²⁵¹

The multi-day Grand Opening lasted from "Thursday, October 14, through Sunday October 17, 1982," and included a series of events, parties, and dinners for everyone who made the RMHI a reality. The four-day extravaganza kicked off with a two-hour-long invitation only "opening ceremony" on the morning of the fourteenth. That night, the RMHI hosted a party for the House's volunteers and their families. On Friday and Saturday, the RMHI had an open-house, offering "tours and refreshments" to the general public. The Our House Board also thanked the corporate donors and major supporters of the project featuring a "Major Donors Party" on Saturday evening, while a "McDonald's Corporation Party" occurred on the following evening.²⁵²

²⁵⁰ Props interview with Mize.

²⁵¹ Ibid.

²⁵² RMHI Newsletter, "Our House News," Vol. 1, No. 4 October, 1982, RMHI Archives, Indianapolis, IN. The RMHI newsletter did not include a list of who attended the major donors party, and no such list appears within the Records Boxes at the RMHI.

Brenda Duncan described the Grand Opening as “a very special day” for the entire Our House board and the multitude of supporters that they had gained within the McDonald’s network, at Riley, and in communities throughout Indiana. After two-plus years of struggle, and with funding uncertainties in the weeks before, the opening became “a real celebration.” For Duncan and the rest of the original board, the feeling of accomplishment “was incredible.”²⁵³ The Our House newsletter described the opening as follows:

IT IS A MIRACLE! Everyone in Indiana should be proud of the effort, time, money, and LOVE it has taken to build our Ronald House. Our House, Inc. volunteers and residents of Indiana are participants in one of the most successful fund-raising campaigns for ANY Ronald McDonald House. . . We saw the NEED, we saw the CHALLENGE, and we are accomplishing our GOAL. Be PROUD, Indiana, we know how to take care of our own!”²⁵⁴

Indeed, the RMHI officially began taking care of its own on Monday, October 18, 1982. Several families of sick children stayed in the Home that first night, and more families filled the entire House by the end of the week. The instant demand vindicated the necessity of the service the House provided, but it also brought a new set of challenges as the board shifted from funding and building the House to its operation and management.

²⁵³ Brenda Duncan, interviewed by author, Indianapolis, IN, June 25, 2009.

²⁵⁴ RMHI Newsletter, “?????????” Vol. 1, No. 3, August, 1982, RMHI Archives, Indianapolis, IN.

Chapter 3: The Expansion and Professionalization of the RMHI: 1982-2004

The RMHI went through three distinct periods of development after it opened in October 1982. From 1982 to roughly 1985, the Our House, Inc., board focused on learning how to operate their nonprofit effectively and maintaining and expanding the network of volunteers and donors they built during the RMHI's planning and construction. From 1985 to 1989, the RMHI went through a period of expansion as the board members and their supporters planned and built a new wing to handle the high demand the House faced after it opened. When the addition opened in 1989, the RMHI became, for a time, the largest RMH in the world. Starting after the expansion and lasting throughout the 1990s, the RMHI experienced a long evolutionary process as the board, the staff, and nearly every aspect of the House transitioned to a more professional model. A larger board of directors shifted its focus, the nonprofit changed names from Our House, Inc., to the Ronald McDonald House of Indiana, new nonprofit professionals joined the House, and the larger board and new staff improved the House's policies and procedures.²⁵⁵ By 2004, the RMHI had developed into a professional and well-organized nonprofit that easily built a new RMH room within Riley hospital, when compared to the 1982 opening and 1989 expansion.

The Our House, Inc., board of directors spent the first few years after the opening in 1982 learning how to operate their newborn nonprofit. Before the House's opening, the board decided to follow the lead of most other RMHs by utilizing a "house mother"

²⁵⁵ In 1996 the nonprofit Our House, Inc. changed its name to the Ronald McDonald House of Indiana. Before the name change, the Our House, Inc. board of directors operated the Ronald McDonald House of Indiana. Throughout its history, the board called the building either the Indiana Ronald McDonald House or the Ronald McDonald House of Indiana. The building name remained the same, but the official name of the nonprofit operating the House changed.

system. Also known as a “house manager,” a house mother lived in the RMH in a specially designed apartment area that usually included a kitchen, bathroom, and other amenities of a regular apartment.²⁵⁶ During the day, the house mother oversaw the practical operations of the RMH. She managed the House’s volunteers and its day-to-day functions, such as keeping the building and rooms clean, stocking the communal kitchens, and registering the House’s guests. Basically, a house mother lived in the RMH and did everything within her power to ensure it ran smoothly while fulfilling the needs of its guests.²⁵⁷

In the months leading up to the opening, the board hired and trained Lona Damron to be the House’s first house manager. The board found Damron through their network of contacts at Riley and IUPUI, where she worked for a number of years in the offices of the Dean of the School of Medicine, Dr. Stephen Beering.²⁵⁸ Clearly, the board wanted to find someone they could entrust with an institution in which they had invested time, emotion, and personal hands-on attention.²⁵⁹ Lona received extensive training before RMHI’s opening, even traveling with Karen Campbell and James Forslund to Chicago to a McDonald’s sponsored RMH “convention.” These conventions fostered communications between the RMHs that continued to open throughout the 1980s. They encouraged board members, staff, and volunteers from disparate Houses to share

²⁵⁶ Campbell second interview with Mize.

²⁵⁷ Ibid.

²⁵⁸ RMHI Newsletter, “Our House News,” Vol. 1, No. 4, October 1982, Record Boxes RMHI, Indianapolis, IN. The sources do not mention a specific date when Lona Damron was hired. According to the above newsletter, she had already been working with the Our House, Inc. board for a few weeks before the RMHI’s opening.

²⁵⁹ Ibid.

information and best practices.²⁶⁰ In Chicago, Lona received house mother training and learned “firsthand just what a Ronald House [was] all about.”²⁶¹ Since the board hired Lona before the House’s opening, she also spent “many hours” in “meetings with the Board of Directors and various committees” as RMHI neared completion.²⁶²

Attending these meetings helped Damron understand all aspects of the RMHI’s operation, from checking in guests to the House’s financial operation. Damron needed this knowledge to handle the wide variety of problems, from cleaning up spills to defusing domestic disputes, that arose during a normal day running a RMH. As Judy Monnier later put it, Lona “managed the House and managed the guests” and dealt with “whatever walked in the door.”²⁶³ Along with the everyday practicalities, Damron personally felt she had an additional responsibility to her “guests” emotional well-being. Monnier later described the “resident manager” and the “in-house volunteers” whom she managed as having two related, yet distinct, responsibilities. First, they provided rooms that addressed “the physical comforts and concerns of the parents.” Second, Damron and her volunteers tried to eliminate “worries parents have about where to stay while their child is in the hospital. . .at a cost that won’t bankrupt the family finances.” These efforts, combined with their positive attitude and treatment of the RMHI’s guests, created a

²⁶⁰ Props interview with Mize.

²⁶¹ RMHI Newsletter, “Our House News,” Vol. 1, No. 4 October 1982, Record Boxes RMHI, Indianapolis, IN.

²⁶² Ibid.

²⁶³ Monnier interview with Mize.

“comfortable home-away-from-home” atmosphere that amplified the House’s therapeutic value for the families of sick children.²⁶⁴

During the House’s early years Lona oversaw the day-to-day running of the RMHI, while the board of directors set policy for the House and managed its administrative operations. Particularly in the first few months board members gave Lona “a lot of support.” They worked not only to establish the House’s first policies and procedures, but also to help Damron with the practical aspects of the House’s operation. Karen Campbell remembered cleaning the large building alongside Damron before they hired a cleaning service.²⁶⁵ As Campbell explained, she and other members had gotten “used to being down” at the House because they had invested so much time building it, and that proved “a hard habit to break.”²⁶⁶ After the RMHI opened, the board had to learn to refocus their attention on spheres of activity, such as planning and policy, which were appropriate uses of their time and talent. Some board members found it difficult to step back and not interfere in the day-to-day responsibilities of staff and volunteers. It quickly became apparent that Damron had enough responsibility simply checking in guests and keeping the House running smoothly. This meant the board continued to oversee most of the House’s finances, fundraising to keep the House operating, and recruiting volunteers to support Damron and run the building.

Board members took responsibility for these tasks based upon their experience and talents. Jim Props, for example, went from assistant treasurer to treasurer when he

²⁶⁴ Ibid.

²⁶⁵ Props interview with Mize; Campbell second interview with Mize.

²⁶⁶ Campbell second interview with Mize.

replaced Gerry Cassidy, who decided to resign after the House opened because he lived far from Indianapolis. Props managed all the House's finances for the first few years of its existence. As one of his first acts as treasurer, Props filed all the necessary paperwork to qualify the RMHI as tax-exempt, 501 (c)(3) nonprofit organization. He then created the House's first annual operational budget of around \$350,000, with most of the funds going to maintain a facility considerably larger than the average RMH of the period. As Jim put it, the House "was a world class building when it was built," and the board wanted to "maintain it as such."²⁶⁷

The large budget drove home the importance of continued fundraising as it became apparent to the board that it would be extremely difficult for the House to become self-sufficient. While they never expected the small, optional fee charged to every family staying at the House to completely pay for its operation, they did not anticipate the extent to which Our House, Inc., would continue to rely on fundraising to maintain their "world class" building. As the RMHI's first treasurer, Props simply tried to help the nonprofit "accumulate as much money as we could."²⁶⁸

To accumulate that money, Karen Campbell and Judy Monnier continued the fundraising efforts that they spearheaded during the RMHI's planning and construction. Immediately after the House's opening, support from large donors, such as McDonald's statewide franchisees, declined sharply. Most McDonald's stores still placed a small donation box for the RMHI on their counters. Yet, support from major events, like 25 cents Hamburger Day or the telethon, naturally disappeared after the House opened since

²⁶⁷ Props interview with Mize.

²⁶⁸ Ibid.

Our House, Inc., no longer needed big events to pay for the building's high construction cost. This decline forced Campbell and Monnier to rely more heavily on the "grassroots fundraising" they had cultivated during the RMHI's construction, and they began building on that foundation to increase the number of small, repeat donations.²⁶⁹ To accomplish this goal, they expanded two of their most successful grassroots strategies - direct mail and the Speaker's Bureau.²⁷⁰

After the opening, Karen, Judy, and the board expanded the direct mail campaigns they began during the RMHI's construction. They continued to send out solicitations for donations, press releases, and newsletters to their ever-growing mailing list. The importance of the RMHI newsletter increased, and it became more comprehensive as the House developed throughout the mid-1980s. Every few months, the newsletter, which changed names several times, provided two to three pages on the status of the House, upcoming events, and information on how to volunteer and donate. They contained personal stories from RMH staff, volunteers, and guests that emphasized the importance of the RMH mission and how the Indiana House served its community. These stories kept those on the mailing list connected and emotionally invested in the House, which inspired them to continue donating their time and money to Our House, Inc. Every RMHI mailer gave its recipient an opportunity to give to the House because all the newsletters, information packets, and direct mail materials the board sent out included a return envelope with directions on how to give.²⁷¹

²⁶⁹ Campbell second interview with Mize.

²⁷⁰ Ibid.; Monnier interview with Mize.

²⁷¹ Ibid.; RMHI Newsletters, Summer 1981 - Autumn 1996, Record Boxes RMHI, Indianapolis, IN.

Campbell and Monnier together with volunteers focused on expanding the Speakers Bureau because of the positive results it yielded during the House's planning and construction. The successful fundraising strategy exploited the symbiotic relationship between raising public awareness and raising money. The more people knew about the RMHI, the more donations the House received, and the Speakers Bureau simultaneously publicized the House's mission, recruited additional volunteers, and solicited both in-kind and cash donations. After the House's completion, Judy and Karen refined the standard presentation that they previously developed and updated the Speakers Bureau training. All of its volunteers followed a formula designed to give the presentation the biggest impact possible. Refinements included on-going updating of the presentation's video and slide show components to include construction and completion, families using the House, and additional developments, such as small fundraising events. After the introductory video and slideshow, speakers shared their stories, answered questions, and provided information on how to donate or volunteer.²⁷²

According to Karen Campbell and Judy Monnier, the Speakers Bureau became a vital part of the RMHI's success in its early years. What began as Karen Campbell or Judy Monnier traveling long hours to speak to "anyone who would listen" before construction began on the RMHI, evolved into a network of individuals in communities across Indiana.²⁷³ After the opening, those speakers recruited more volunteers, who either joined the Speakers Bureau or planned small fundraising events in their communities or

²⁷² Monnier interview with Mize, Campbell second interview with Mize.

²⁷³ Ibid.; RMHI Newsletter, "Our House News," Vol. 2. No. 4, May, 1983.

did both. These volunteers recruited more volunteers who recruited more, until RMHI sat at the heart of a self-perpetuating, statewide web of support.

Starting in the summer of 1986, Karen and Judy oversaw another major development in the RMHI's statewide network in the midst of the board of director's aggressive campaign to fund the addition.²⁷⁴ By 1986 the RMHI had a large network of individuals working on behalf of Our House, Inc. in communities across the state of Indiana. Volunteers who became involved with the House through the Speakers Bureau, working during Hamburger Day, or by hosting small fundraising events near their homes started forming benevolent groups devoted specifically to aiding the RMHI. Under the guidance of Campbell and Monnier, these volunteers began forming "Friends of the Indiana Ronald McDonald House" chapters in cities across Indiana. The members of these "Friends Chapters" continued performing the same fundraising activities, as they had before the chapters formed, but the new organizations also acted as a first contact for groups and individuals interested in helping the RMHI. The Friends Chapter either assisted these parties directly or in the case of larger organizations, like Rotary Clubs or small businesses, put them in contact with Lona Damron who provided them with information on what the RMHI needed or how to raise funds for the House.²⁷⁵

The Friends Chapters helped vacation Bible schools, churches, Elks, and other fraternal groups to organize car washes, bake sales, and other events on behalf of the RMHI. Between 1986 and 1989, the Friends Chapters worked with other like-minded benevolent organizations to raise thousands of dollars for the House, and their

²⁷⁴ Ibid.; RMHI Newsletter, "Our House," summer 1986, Record Boxes RMHI, Indianapolis, IN.

²⁷⁵ Campbell Second interview with Mize, Monnier interview with Mize.

involvement proved crucial in the successful expansion in 1987. Built on a foundation of volunteers recruited into the Speakers Bureau, Hamburger Day, and smaller fundraising events, the Friends Chapters represented a new level of organization in the RMHI's fundraising network. The larger, better organized network strengthened the House's grassroots funding by facilitating small fundraisers and raising awareness throughout Indiana. These new donors joined Our House, Inc.'s mailing list, and the House's constant stream of direct mail kept them informed and connected to the House.

While Campbell and Monnier focused on expanding the House's statewide network of support through the Speakers Bureau, direct mail campaigns, and the creation of the Friends Chapters in 1986, they also planned fundraising events to raise awareness and money for the RMHI. The events planned at the RMHI were generally larger than the fundraisers outside groups, like the Friends Chapters, organized on behalf of the House, and usually occurred within the city limits of Indianapolis. For example, the RMHI hosted the "Run for Love" in the fall of 1983 and again in the summer of 1984. In 1984 between the five and ten kilometer races "approximately 800 runners competed" and paid, if the price from the 1983 fundraiser remained the same, between 8 and 10 dollars each.²⁷⁶ The runners also became part of the House's ever increasing direct mail list, and hopefully joined the pool of repeat donors that supported the RMHI throughout its history.

Together, the Speakers Bureau, the Friends Chapters, small fundraisers, and direct mail provided the backbone of the RMHI's community fundraising throughout the mid

²⁷⁶ RMHI Newsletter, "Our House News" June, 1984, Record Boxes RMHI, Indianapolis, IN. Ronald McDonald House, "Run For Love" Flyer, October 22, 1983, Record Boxes RMHI. The sources do not include an exact amount the annual "Run for Love" event raised.

1980s until the board stepped up their efforts in preparation for the 1989 expansion. Continued support from McDonald's franchisees also complemented community fundraising efforts. At the time, most McDonald's owners in the state of Indiana placed a small container in their stores where patrons could donate directly to the RMHI. These container donations became one of the primary sources of funding for the House. In addition, McDonald's franchisees continued to sell calendars, sponsor special events, and use discount promotions to fundraise on behalf of the RMHI. For example, in the first eight months of 1983, donations from various McDonald's sources totaled \$82,885.14. Container donations and other McDonald's fundraisers became a steady source of income for the RMHI throughout the 1980s.²⁷⁷

Fundraising efforts in the early 1980s by Campbell, Monnier, the other board members, and RMHI volunteers also attracted numerous in-kind donations from local and national sources. Within the first few months after the RMHI opened, the Our House, Inc., board of directors created a "Wishlist" of goods and materials the House needed. Lona Damron and the board constantly updated the Wishlist so volunteers staffing the front desk always had the information at their fingertips in case a vendor or individual called to ask how they could help the RMHI.²⁷⁸ The Wishlist also periodically went out to the entire RMHI mailing list, and individuals, groups, and business responded in great numbers, especially in central Indiana. Local vendors, such as Holder Mattress donated mattresses, while other businesses frequently contributed bed linens, kitchen items, food stuffs, household appliances, and many other things the RMHI needed. The concept

²⁷⁷ James Props to Brenda Duncan, September 21, 1983, Record Boxes RMHI, Indianapolis, IN.

²⁷⁸ Monnier interview with Mize.

proved so successful that it became a permanent part of the RMHI's fundraising strategy. The Wishlist kept local business, individuals, and the statewide volunteer network updated about the House's in-kind needs throughout its existence.²⁷⁹

The RMHI also received in-kind donations throughout the 1980s and 1990s from national and international companies like Scott Paper Company and CocaCola. These major companies became aware of the RMH concept through their business relationship with McDonald's restaurants. McDonald's central office in Chicago helped arrange the massive gifts, which were then distributed to RMHs across the country. CocaCola stocked, and continues to stock, vending machines with free CocaCola products in the RMHI and other Houses across the country. Throughout the 1980s, Scott Paper Company provided toilet paper, paper towels, and non-stationary paper products to every RMH at no cost. In-kind donations, from local and national sources, saved the RMHI massive amounts of money. With twenty-five, consistently filled rooms, the House used large quantities of toilet paper, paper towels, basic foodstuffs, and other household essentials. National and local in-kind donations came in on a continuous basis, allowing the RMHI to devote their scant cash resources to other needs such as maintaining the House, paying utility costs, and covering their growing payroll.²⁸⁰

Time that volunteers contributed to the RMHI became another form of in-kind donation that saved the House thousands in cleaning, administrative, and staffing costs.

For the first few months of the House's existence, Monnier handled all the volunteer

²⁷⁹ Ibid.; RMHI Newsletter, "Our House," December 1984, Record Boxes RMHII, RMHI Newsletter, "Our House," April 1985, Record Boxes RMHI. RMHI Newsletter, "Our House," spring 1986, Record Boxes RMHI.

²⁸⁰ Campbell second interview with Mize, RMHI Newsletter, "Our House News," spring 1986, Indianapolis, IN.

inquiries. Interested individuals called her home, and Monnier then coordinated with Lona Damron to see what the House needed and where they could place the volunteer.²⁸¹ Gradually, as the RMHI became more established, potential volunteers called the RMHI directly, and Damron became increasingly responsible for coordinating all the volunteers who worked directly in the House. She worked closely with Monnier, and eventually with the first unpaid, volunteer chair, Cookie Vargo, to organize the volunteers into shifts. Judy Monnier drew upon her connections in the community to establish a partnership with the Indianapolis Junior League organized around managing volunteers who wanted to help at the RMHI. The Junior League interviewed potential volunteers and registered those accepted for a roughly sixteen-hour training session that occurred over two Saturdays.²⁸² Handling the initial volunteer interviews and training fulfilled the Indianapolis Junior League's mission of promoting service in the city. Their involvement also represented an important in-kind donation for Our House, Inc., since the nonprofit did not have to pay a professional volunteer coordinator or trainer. The Junior League's training sessions covered basic topics: opening the office, answering phones, registering guests, and keeping personal information completely confidential. Their sessions also covered ways to handle the more challenging scenarios that could arise, including how to defuse potentially dangerous domestic situations involving fights and drunkenness.²⁸³

²⁸¹ Monnier interview with Mize.

²⁸² Ibid.; Interview, George and Marsha Gordon with author, Chris Mize, July 10, 2009. George and Marsha Gordon are both long-term volunteers at the RMHI. In addition, George Gordon joined the Our House, Inc., board in 1985, and later became board president. Hereafter cited as Gordons interview with Mize.

²⁸³ Gordons interview with Mize.

After the House's opening, only Lorna Damron worked full time at the RMHI, which meant she and the board relied almost entirely on volunteers trained by the Junior League to operate the House. This proved especially true during the weekend, when Damron took time off from the demanding responsibilities of running the RMHI. Starting on Friday night, one set of volunteers stayed in a small apartment at the House and worked a forty-eight hour shift, basically organizing and managing everything Damron did during the week. They answered phones, registered guests, looked after the facility, managed the other volunteers, and made themselves "available" to the guests.²⁸⁴ During the rest of the week, volunteers worked under the supervision of Damron in shifts, cleaning the House, helping the guests, performing basic facility maintenance, and doing whatever was needed to keep the House running smoothly.²⁸⁵ RMHI volunteers often became more deeply involved in the RMHI by joining committees, such as the Facilities Committee, which helped the board manage specific aspects of the House's operations. Occasionally, Our House, Inc., invited volunteers from these committees to join the board of directors. The volunteers they chose usually had a background or skill set the board believed would benefit the RMHI as it continued to evolve.²⁸⁶

Take, for example, the experience of George and Marsha Gordon, who began volunteering at the RMHI almost immediately after it opened in 1982. George, who worked for Eli Lilly as a facilities manager, and Marsha, who worked as an elementary school teacher in Lebanon, Indiana, learned about the RMHI project through their high-

²⁸⁴ Ibid.

²⁸⁵ Monnier interview with Mize.

²⁸⁶ Campbell second interview with Mize; Gordons interview with Mize; Monnier interview with Mize.

school-aged son. Their son, David, experienced firsthand the madness of Hamburger Day, working as a “burger flipper” at an Indianapolis McDonald’s. After surviving the event, he came home and described the large “crowds” that came into his restaurant that day. At the time, Marsha and George were looking for place to volunteer where they could help the broadest spectrum of people, and they thought the RMHI fit perfectly with their goals.²⁸⁷

The Gordons especially enjoyed working the weekend shifts during the RMHI’s early years because they could bring their son and daughter with them. They loved the chance to volunteer together as a family and remembered several other families taking advantage of the same opportunity. In addition, most of the House’s early volunteers considered working the weekend shift “to be a real feather in their cap,” meaning they felt proud that Damron and the board entrusted them with House’s welfare for the entire weekend.²⁸⁸ Due to its popularity, the Gordons and other volunteers could only work about one weekend per month.

New RMHI volunteers, like Marsha and George, sometimes experienced problems during their shifts that neither the board or the Junior League trainers had anticipated. Marsha Gordon described one experience not covered in her initial introduction to the RMHI, that led to a change in the volunteer training. While she worked the front desk a man came to the office searching for his family. Marsha invited him inside while she tried to reach the family, only to discover later that she was accidentally “harboring a fugitive.” It turned out that the family did not want to see the

²⁸⁷ Gordons interview with Mize.

²⁸⁸ Ibid.

man, and the police eventually arrested him at the House. Marsha never felt “in any danger,” but experiences like hers affected volunteer protocols and forced them to become more “aware,” wary, and professional when dealing with unknown families or visitors.²⁸⁹

Marsha and George Gordon joined different committees to increase their commitment to the RMHI. In many ways, they symbolize the unselfish dedication of the numerous volunteers whose contributions of time and energy allowed the RMHI to fulfill its service mission. George joined the “Facilities Committee,” which made decisions about the building’s needs, such as major repairs or which large appliances needed to be replaced or purchased.²⁹⁰ Marsha joined the committee responsible for volunteer recognition. She helped plan annual parties that acknowledged the individuals who volunteered at the RMHI through awards and a celebration banquet. This recognition highlighted volunteer contributions, thanked outstanding volunteers, and strengthened the loyalty of the pool of volunteers.²⁹¹

The Our House, Inc. board of directors realized almost instantly after opening the RMHI in 1982 that they needed to expand the building because it did not have enough rooms to meet current and projected demand. They did not immediately pursue this realization. Instead, the board “just tried to breathe” during the first year of the House’s existence. Over the next two years, as board members came to better understand the costs of operating and maintaining the RMHI, they focused on increasing number the of repeat

²⁸⁹ Ibid.

²⁹⁰ Ibid.

²⁹¹ Campbell second interview with Mize.

donors and volunteers supporting the House. Around the end of 1985, the Our House Board finally found themselves in a “position to take a look at what [the House] needs.” At this point, the board gradually shifted many of the day-to-day administrative duties they had directly managed since the RMHI’s opening to Lona Damron and RMHI’s pool of dedicated volunteers. Doing so allowed the board to explore whether they had enough support to undertake a new major, construction initiative.²⁹²

The Our House, Inc., board of directors first reached out to their contacts on each side the “crucial triangle,” McDonald’s, Riley, and the community that had supported the RMHI’s initial construction to find out if they would back another major project.²⁹³ After receiving positive responses, they felt comfortable exploring in earnest different possibilities for expanding the House. Karen Campbell remembered the board discussing the potential of a taking the RMHI in a new direction, such as funding a summer camp for sick or disabled children like RMHs in Chicago and California. The board, however, made the “big decision...to really stay true to our mission” of providing “a home away from home for families and children” receiving treatment at Riley hospital. After looking at the RMHI’s needs, they decided relieving the “pressure” of their waiting list would be the best way to stay true to their mission.²⁹⁴ Every night since its opening, the RMHI had an average of more than twenty families on its waiting list.²⁹⁵ The board settled on physically expanding the RMHI so the House could serve more families in need of a

²⁹² Ibid.

²⁹³ Ibid.

²⁹⁴ Ibid.

²⁹⁵ RMHI Newsletter, “Our House,” spring 1988, Record Boxes RMHI, Indianapolis, IN.

home-away-from-home. After making their decision, the board started planning the addition.²⁹⁶

As had been the case with the original planning and construction, key, dedicated and committed individuals in the right place at the right time helped move the expansion to completion. In 1985, the board of directors invited George Gordon to join them. Gordon's background in facilities management at Eli Lilly and devotion to the RMHI made him an attractive addition to the board. His practical knowledge of how to efficiently operate the RMHI gained through his volunteer work combined with his professional experience allowed him to play a vital role in planning the RMHI's next major expansion, which would open in 1989. Gordon remembered many discussions about the possibility of expanding the House; and, as that possibility became more of a reality, whether the board "was [in] a situation where we were getting in over our heads."²⁹⁷ The idea of surviving another grueling fundraising and planning experience completely "terrified" Karen Campbell, who nevertheless agreed that the RMHI had to expand to better fulfill its mission.²⁹⁸ Finally, Gerry Cassidy, a McDonald's owner/operator, original board member, and board president from 1984 to 1987, made a "significant" personal donation to encourage the board to begin building the RMHI expansion.²⁹⁹ Cassidy pledged \$1,000,000 to the project to be donated in three payments of \$333,000 in December of 1987, 1988, and 1989. Cassidy's remarkable commitment

²⁹⁶ Campbell second interview with Mize.

²⁹⁷ Gordons interview with Mize.

²⁹⁸ Campbell second interview with Mize.

²⁹⁹ RMHI Newsletters, Various Titles, from 1984-1987.

prompted the board to resume the frenetic pace required to successfully orchestrate a major nonprofit project.³⁰⁰

The planning, funding, and building of the RMHI's 1989 expansion took nearly four years to complete, and it grew directly out of the two needs that the board identified after its initial opening in 1982. First, the RMHI needed additional space that would make it possible to increase the number of families served; and second, the board wanted to add facilities that would meet the special medical needs of a growing number of patients receiving bone marrow transplants at Riley hospital. As with the genesis of the RMH concept, advances in the medical treatment of childhood illnesses created a new need for a specialized adaptation of the home-away-from-home provided by RMHI. Dr. E. Donnell Thomas performed the first successful bone marrow transplant in 1972 on a patient with the blood disorder aplastic anemia.³⁰¹ Since then bone marrow transplants have been used to treat leukemia, Hodgkin's disease, multiple myeloma, and other immune deficiency disorders.³⁰² Starting in the late 1980s, the treatment became more accessible when volunteers created the National Marrow Donor Program. This database helped connect patients with potential marrow donors, which increased the number of procedures being performed.³⁰³

³⁰⁰ Gordons interview with Mize. Ronald McDonald House Fund-Raising Projections 7/87-188, Record Boxes RMHI, Indianapolis, IN.

³⁰¹ Sujata Gupta, Johns Hopkins Medicine, "Human Stem Cells at Johns Hopkins: A Forty Year History," Johns Hopkins University, http://www.hopkinsmedicine.org/stem_cell_research/cell_therapy/human_stem_cells_johns_hopkins.html (accessed February 7, 2012).

³⁰² Bone Marrow Transplant Newsletter, "Bone Marrow Transplant," Columbia Presbyterian Medical Center: Herbert Irving Comprehensive Cancer Center, <http://www.cumc.columbia.edu/dept/medicine/bonemarrow/bmtinfo.html> (accessed February 7, 2012).

³⁰³ Sujata Gupta, Johns Hopkins Medicine, "Human Stem Cells at Johns Hopkins: A Forty Year History," Johns Hopkins University, http://www.hopkinsmedicine.org/stem_cell_research/cell_therapy/human_stem_cells_johns_hopkins.html (accessed February 7, 2012).

The growing volume of patients receiving bone marrow transplants throughout the 1980s prompted Riley hospital to build a Bone Marrow Transplant Unit in 1985, the same year Our House, Inc., began tentatively planning the expansion. The modern unit increased the number of children receiving transplants at the hospital, which created a new and expanding need the RMHI could address through the inclusion of special, isolation-type apartments.³⁰⁴ As Karen Campbell later explained, young patients in the 1980s “couldn’t just get a bone marrow transplant anywhere.” Children and their families traveled great distances to Riley for lifesaving transplants.³⁰⁵ Bone marrow transplants required long recovery periods. Patients and their families stayed an average of forty-five days in the RMHI after their procedures. Children receiving bone marrow transplants at Riley needed a place to live completely isolated from other patients, where they could recuperate for an extended period while also receiving frequent checkups.³⁰⁶

As they did with the RMHI’s original construction, the board of directors began by looking for a site for the expansion. Again, they had difficulty finding available real estate in the crowded urban environment that surrounded Riley and IUPUI. They briefly pursued the idea of refurbishing two wings of an old hospital on the IU Medical Center Campus directly across the street from the RMHI. The House’s supporters from the McDonald’s side of the triangle, however, “said no” because the remodeled wings would also cater to adults, which did not fit either the RMH concept or McDonald’s corporate

³⁰⁴ Thanksgiving Letter, from Gerry Cassidy, President and Lorna Damron House Manager to RMHI Mailing List, November 1985, Record Boxes RMHI, Indianapolis, IN.

³⁰⁵ Campbell second interview with Mize.

³⁰⁶ Ibid.

commitment to serving only children with their donations.³⁰⁷ The board knew a lack of support from McDonald's and its franchisees would doom their project. After searching for more options, they decided to add a new wing to RMHI, which ultimately included twenty new bedrooms and six special, isolation units.

The board reached out to representatives of IUPUI in the summer of 1985 to discuss whether the university might be willing to lease additional land to Our House, Inc. IUPUI's administration eagerly supported the expansion, recognizing that the House improved the reputation of both Riley hospital and the university. After consulting with officials at IU's main campus in Bloomington, the Vice President of IUPUI and Dean of the Medical School, Dr. Glen W. Irwin, Jr., sent a letter to the Our House, Inc. board saying that he was "delighted to learn that you are most interested in developing...an extension of the Ronald McDonald House on our [IUPUI's] campus." Dr. Irwin had already cleared the project with the "I.U. Foundation," and found no restrictions in the original donation that funded the construction of the Graduate Townhouses Apartments that surrounded the House. He approved "removing one or more units" of those buildings, which would allow the House "to expand southward from [its] present facility."³⁰⁸

Having obtained a firm real estate commitment from IUPUI and full backing from McDonald's and Riley, the Our House board moved onto designing, funding, and building the RMHI expansion. From the outset, the board wanted to continue the design

³⁰⁷ Campbell second interview with Mize.

³⁰⁸ Glen W. Irwin to Gerald J. Cassidy, Sept. 13, 1985, Office of the Chancellor Collection, Ruth Lilly Special Collections and Archives, IUPUI University Library, Box #250, Folder 1980-1884, Indianapolis, IN.

themes of the original house, which included bathrooms outside the rooms, communal kitchens, large gathering areas, and an overall “home-like” quality.³⁰⁹ The board relied on George Gordon and his facilities management experience to handle detailed planning for the expansion, and he met with a new architect, Randy Hearst, and the construction firm, Kettlehut, three times a week to finalize the plans for the new wing. George devoted considerable attention to the new isolation apartments, since he had to ensure they met the specific medical requirements of young transplant patients. He wanted the apartments to meet those requirements, while avoiding the sterile feel of hospital rooms by maintaining the RMHI’s comfortable, “home-like” atmosphere.³¹⁰

George Gordon and the rest of the board consulted with Riley and other RMHs in Dallas, Chicago, and Minneapolis which had recently included isolation units in their facilities to find out how they addressed the challenges of creating medically appropriate and comfortable living spaces for transplant patients. They discovered that transplant patients needed a “clean area” where they could avoid exposure to infections and other diseases. The RMHI’s isolated apartments offered this clean and protected space, while allowing patients to remain close enough to Riley to make the frequent visits transplant recovery required. Based on the information they gathered, the board decided to build “apartment” style rooms that contained a bathroom, kitchen, and television. Unlike the RMHI’s other guest rooms, the design of the isolation apartments did not encourage residents to intermingle with other guests. The inclusion of a kitchen, bathroom, and extra

³⁰⁹ Campbell second interview with Mize.

³¹⁰ Gordons interview with Mize

beds allowed an entire family to stay comfortably in an isolated apartment for an extended period.³¹¹

Other than specialized, isolation apartments, the only other deviations from the original design attempted to correct practical mistakes the board of directors made in the initial construction. Changes included configuring the layouts of communal kitchens so they “looked in” towards the common areas so parents could watch their children while preparing meals, adding more storage, and moving the RMHI’s entrance to make it more accessible.³¹² George Gordon continued to work with the architects and contractors throughout the planning and construction, often speaking on behalf of the board onsite as the expansion neared completion in 1989.

The board estimated that the expansion would cost about \$3.6 million. Although the Our House, Inc. board did not receive the entirety of Cassidy’s donation until December 1989, it became a crucial component of the new campaign’s silent phase.³¹³ The generous commitment reduced the amount the board needed to raise to \$2.6 million, which included \$100,000 to pay for fundraising expenses. The board had also “earmarked” \$300,000 from a surplus they generated in the first few years of the House’s existence. This left a total of \$2.3 million for the board to raise between 1986 and 1989. As they had done once before, McDonald’s franchisees and corporate representatives throughout Indiana agreed to contribute half of the \$2.3 million total. This left Our

³¹¹ Ibid.

³¹² Ibid.; Campbell interview with Mize.

³¹³ Memo on Fundraising Goals for Construction of Indiana Ronald McDonald House new Wing, to Diana Haugh and Jan Hoffman, Co-Chairpersons Our House, Inc. Fundraising Committee from Gerry Cassidy, President, Our House, Inc., Jan. 13, 1986, Record Boxes RMHI, Indianapolis, IN, Ronald McDonald House Fund-Raising Projections 7/87-188, Record Boxes RMHI, Indianapolis, IN.

House, Inc. with the fundraising goal of \$1,150,000 in cash and in-kind donations from community sources.³¹⁴

The board had committed to opening the original RMHI debt free, but faced the expansion with experience and confidence that its fundraising strategies had grown sophisticated enough to pay off any debt incurred during construction. The board directors decided to open a \$1,000,000 line of credit with Merchant's National Bank. The bank provided the credit interest free as an in-kind donation. This generous gift gave the board the ability to draw money as needed to pay for different phases of the addition's construction without incurring an additional cost from interest. The board made quarterly payments on the line of credit, which gave them plenty of time to raise money between installments.³¹⁵

The Our House, Inc., board of directors laid the groundwork for their fundraising efforts by orchestrating a public relations campaign to raise awareness of the expansion project. They planned to use the same tactics employed during RMHI's original construction, even as they enlisted the services of a new public relations firm, Laurence, Charles, Free, & Lawson. The firm produced a variety of updated marketing materials that ranged from a new, ten-minute slide show for the Speaker's Bureau to miscellaneous publicity brochures, pamphlets, and flyers. The board used the firm to disseminate human interest press releases about families who used the RMHI and to "coordinate media and develop materials for public relations events such as groundbreaking, major fundraisers,

³¹⁴ Ibid.

³¹⁵ Campbell second interview with Mize; Beth Johnson, the House Director for the RMHI from August 1, 1990, to the present date. Interviewed by author, Indianapolis, IN, July 23, 2009. Hereafter cited as Johnson interview with Mize.

and the grand opening.” The board had the firm produce a special-events packet for chapters of the Friends of the Indiana Ronald McDonald House filled with information on organizing small fundraising events on behalf of the House. These special packets included items such as press releases the Friends Chapters could disseminate to local media outlets and instructions on how to produce advertisements.³¹⁶

Compared to the original campaign, the board found it far easier to gain and hold the public’s attention promoting the expansion. The RMHI had already served hundreds of families, who then returned to their communities and educated their friends and neighbors about the House and its mission. Therefore, when the board began planning and building the expansion in 1985, they had less work to establish the RMHI’s brand as a home-away-from-home for families in need. The board also had an easier time getting stories about the RMHI in newspapers, on the radio, and on television. Even with its brief history, the RMHI had already produced numerous stories that contained detailed and tangible examples of how the RMHI served Indianapolis and other Indiana communities. The board disseminated these often moving human interest stories to the media in detailed press releases. These releases also included information about the RMHI’s mission, its history, the needs the expansion would address, information on upcoming events, and photos of the current building and board members.³¹⁷

³¹⁶ Karen Campbell VP, Board of Directors to John C. O’Neil, Jr. Laurence, Charles, Free & Lawson, IN. January 7, 1987, Record Boxes RMHI, Indianapolis, IN.; Karen Campbell, VP Board of Directors to Lisa Barnes, Laurence, Charles, Free & Lawson, October 27, 1987, Record Boxes RMHI, Indianapolis, IN.

³¹⁷ Campbell second interview with Mize. The following are a sample of the press releases and articles Our House, Inc. and its public relations firm released during the expansion’s planning and construction: “Indiana Ronald McDonald House,” *Labor News*, September 1987; News Release, “Strawberry Festival Luncheon Event,” April 14, 1987, Record Boxes RMHI, Indianapolis, IN; News Release, “Good Times, Great Cause: Indianapolis Auto Show,” December 8, 1987; Fact Sheet Included with 1987 Cars Show Press Release, “Indiana Ronald McDonald House,” Record Boxes RMHI, Indianapolis, IN; “Buy-a-Brick for Christmas,” *Indianapolis Star*, December 6, 1987.

The fundraising strategies the board used during the expansion descended directly from their campaign efforts during the RMHI's original construction in the early 1980s. According to Karen Campbell, only a "little more" organization separated the fundraising done between 1986 and 1989 from the board's previous efforts. As they did throughout the House's history, the board targeted grassroots donors through large and small "giving opportunities," direct mail campaigns, and events organized by their statewide volunteer network.³¹⁸ The board also planned to apply for grants from several major foundations, and expected at least \$350,000 to come from those nonprofit institutions.³¹⁹ Better organization of these strategies allowed the board to keep the RMHI running while they raised funds for the expansion.

"Buy a Brick/Be a Brick" and room sponsorship campaigns provided a range of giving opportunities and reflected the increased level of organization and experience. The "Buy a Brick/Be a Brick" campaign encouraged small donations by selling each of the theoretical "79,000" bricks going into the expansion for \$10 apiece. Each donor received a "thank you note with a certificate for free French Fries at McDonald's." The coupon provided instant recognition for the donors before they joined the support network the Our House, Inc. board had steadily built since the RMHI's inception.³²⁰ The "Buy-a-Brick" campaign proved incredibly successful and the final list of individuals, businesses,

³¹⁸ Campbell second interview with Mize; Monnier interview with Mize.

³¹⁹ "RMHI Fund Raising Projections 7/87 - 1/88," Record Boxes RMHI, Indianapolis, IN.

³²⁰ RMHI Newsletter, "Our House," Winter 1987, Record Boxes RMHI, Indianapolis, IN; Flyer, "Buy a Brick and Help Us Expand," Record Boxes RMHI, Indianapolis, IN.

and groups that bought anywhere from 1 to 50 bricks each ended up 30 pages long and had between 35 and 100 names per page.³²¹

The board also created prices for spaces within the planned addition. The board set the price for the expansion's larger gathering areas at around \$20,000, but Karen recalled deliberately establishing the price of \$3,500, for the twenty regular bedrooms in the new wing. The board wanted to keep sponsorship costs for the bedrooms in the expansion "within the price range of an individual or small group," and gave interested parties an entire year to raise the money after they committed to funding a bedroom.³²²

The decision to establish their "buy-a-room" prices within reach of a majority of their supporters and giving them a year to raise the money separated the RMHI from other RMHs. Other RMHs priced their bedrooms around \$25,000, meaning they chose to pursue large donors such as major corporations, foundations, or wealthy individuals.³²³

The board's choice to lower their room prices paid immediate dividends when groups and individuals already connected to the House through their statewide network committed to "buying" a bedroom in the new wing.

Several Indiana communities took advantage of the board's pricing decision by committing to buy a room in honor of an individual who stayed in the original House.

The small town of Cambridge City rallied around a young girl who stayed at the RMHI while undergoing treatment at Riley for a brain tumor. She "wanted to raise enough

³²¹ "Buy-a-Brick" Binder, a multiple page list of everyone who "bought a brick" with no quantified totals, Record Boxes RMHI, Indianapolis, IN.

³²² Campbell second interview with Mize. Finance Committee, "Indiana Ronald McDonald House Sponsorship Opportunities," July 15, 1986, Record Boxes RMHI, Indianapolis, IN.

³²³ Campbell second interview with Mize.

money to buy the first room in the south wing,” and with the support of her community she succeeded by paying for a room and dedicating it to her struggle. She sat in that bedroom, but later lost “her fight” with her disease.³²⁴ Peg Lowry had spent time at the RMHI in 1984 when her son Alex underwent emergency treatment for a malignant tumor that threatened to completely block his windpipe. Lowry made it her personal mission to make sure the residents of Jennings County donated enough money to buy a bedroom in the RMHI’s expansion. She worried that residents of the county “might not respond to something that seemed far” from their community. Lowry found supporters by calling twenty-one families she knew had also stayed at the RMHI, as well every one of the seventy-eight churches in her county. Together, Lowry and her group solicited donations around the county, organized several fundraising potlucks, and succeeded in buying a bedroom on behalf the residents of Jennings County.³²⁵

The low prices of the buy-a-room campaign and the “Buy-a-Brick” promotion demonstrated that the Our House, Inc.’s board remained committed to the strategy Gordon Durnil first articulated in the construction phase of the original House. The board continued to believe that attracting large numbers of individuals to make repeated small donations to the RMHI provided more long-term security than finding wealthy individuals or businesses willing to make substantial, one-time donations.³²⁶ These repeat donors invested emotionally as well as financially in the RMHI. The board strengthened

³²⁴ Ibid.

³²⁵ RMHI Clippings File, September, 24, 1989, Record Boxes RMHI, Indianapolis, IN.

³²⁶ Campbell second interview with Mize; Monnier interview with Mize.

that emotional attachment through their direct mail campaigns and created long term relationships that sustained the House throughout its history.

The board's direct mail campaigns during the expansion also benefitted from a greater level of organization, when the board hired the Ferris Mailing Company to draft mailers targeting specific groups of individuals. The direct mail campaign sent 8,500 letters to medical professionals, 4,100 to financial professionals, 6,500 to Indiana businesses with 50 or more employees, 2,700 to accountants and stock brokers, 7,100 to past RMH donors, and another 44,000 from the mailing list that Gordon Durnil had provided during the RMHI's first fundraising campaign. These letters varied slightly in tone based upon which audience they targeted, but focused on the same themes when asking for donations. The letters explained how the RMHI had been operating at full capacity, with a waiting list, since its opening in 1982. They described how the \$3.6 million dollar wing would include 20 bedrooms and 6 transplant apartments. Finally, the letters emphasized how the expansion would improve the RMHI's ability fulfill its role as a home-away-from-home for the families of sick children.³²⁷ The direct mail campaign became a key source of funding for the RMHI expansion. It brought in \$72,320 by December 1986, and the board anticipated raising similar amounts from the direct mailings in the next two years.³²⁸

The board expected to raise around \$350,000 of Our House, Inc.'s \$1.15 million community fundraising goal through grants from various nonprofit foundations. By the

³²⁷ Memo from Janene Pifer, Senior Planner Ferris Mailing Company, to Diana Haugh, Associate Director of Nursing at Riley, "Direct Mail Campaign Report," Feb.. 18, 1987, Record Boxes RMHI.

³²⁸ RMHI, Fund Raising Projections 7/87 - 1/88, Record Boxes RMHI, Indianapolis, IN.

summer of 1987, the board had already secured one major grant from the Indianapolis based Lilly Foundation. The grant totaled \$150,000, to be paid out in two installments of \$75,000 in the summer of 1987 and winter of 1988. The board had also received a significant grant of \$100,000 from the Central Indiana Chapter of the Ronald McDonald Children's Charities (RMCC) foundation. (The board elected not to count this grant towards their goal of raising \$350,000 through grants from foundations because of RMCC's close ties to the McDonald's corporation.) The family of Ray Kroc, the founder of the McDonald's restaurant chain, created the RMCC after his death in 1984. They wanted to honor Kroc's memory by creating a foundation that focused on helping "young people by awarding grants to organizations whose programs benefit children in the areas of health care and medical research; education and the arts; and civic and social service."³²⁹ Since its founding in 1984, RMCC grew until it had fundraising chapters in nearly every state. It became another avenue for McDonald's franchisees to put money back into their communities through grants that supported projects other than RMHs.³³⁰

At the time of the RMHI's expansion, RMCC had five Indiana chapters raising money across the state. From their inception in the mid-1980s, the Indiana Chapters of the RMCC, and especially the Central Indiana RMCC Chapter, maintained an excellent relationship with the Our House, Inc. board of directors. While the RMCC chapters did not raise money or donate funds solely to RMHs, throughout the mid-1980s the foundation supported the RMHI through grants to fund special events or pay for a

³²⁹ RMHI Newsletter, "The Home with a Heart," fall 1994, Record Boxes RMHI, Indianapolis, IN.

³³⁰ Johnson interview with Mize.

specific infrastructure improvement.³³¹ The Central Indiana RMCC, in particular, continued to support the RMHI throughout the expansion and into the early 1990s.³³²

The remainder of the board's community fundraising came from two sources: The Speakers Bureau and special events hosted by Chapters of the Friends of Indiana Ronald McDonald House along with other benevolent groups and trade organizations. The Speaker's Bureau used its tried and true formula to bring in money, in-kind donations, and volunteers as it had throughout the House's existence. The founding of the Friends Chapters in 1986 boosted the number of special events hosted on behalf of the RMHI during the expansion. While the exact total these groups raised for the expansion remains unclear, the Friends Chapters certainly organized a number of successful events across the state.³³³ The Fort Wayne Friends Chapter, for example, organized multiple events within Fort Wayne schools, that ranged from food sales to PTO-sponsored dances. These small fundraisers within the Fort Wayne school system raised \$10,136.26 for the RMHI.³³⁴ McDonald's franchise owner Peter Wojtowicz, acting as a volunteer, orchestrated the "Ronald McDonald House Golf Classic" in the summers of 1987 and 1988, the second of which raised \$25,000 .³³⁵ Finally, the Indiana Auto Trade Association donated \$26,414.21, which represented half of the net proceeds from the 1987

³³¹ Ibid.

³³² RMHI, Fund Raising Projections 7/87 - 1/88, Record Boxes RMHI, Indianapolis, IN.

³³³ The decentralized nature of this fundraising strategy contributed to lack of precise information on the totals these small organizations contributed.

³³⁴ Friends of the Indiana Ronald McDonald House, Chapter 1, "Fort Wayne Community Schools PTA Council 1988-89 Fundraising Report," April 25, 1989, Record Boxes RMHI, Indianapolis, IN.

³³⁵ Diana Haugh to Peter Wojtowicz, RMHI Volunteer, June 1, 1988, Record Boxes RMHI, Indianapolis, IN. Bruce Casselman, Club Manager the Country Club of Indianapolis to Peter Wojtowicz, McDonald's Corporation, June 3, 1986, Record Boxes RMHI, Indianapolis, IN. Though a McDonald's owner, the money Wojtowicz raised went towards the community fundraising goals of the board.

Indianapolis Auto Show, with plans to do so again in 1988.³³⁶ Along with the money, these events also raised awareness of the RMHI's expansion and kept the House and its mission in the public eye, which in turn brought in more donations and volunteers as the project progressed.

McDonald's franchise owners in Indiana used discount promotions and direct solicitation in their restaurants to raise their \$1.15 million commitment. They offered special discounts such as the "Bacon Double Cheeseburger Promotion." This promotion lasted for several weeks in the summer of 1986 and offered customers a "\$1.49 double helping" that would "help double the size of the Indiana Ronald McDonald House." For every bacon double cheeseburger purchased McDonald's donated 35 cents to the expansion, 10 cents more per burger than McDonald's donated on Hamburger Day in 1981. In addition, every one of the brochures that advertised the discounted cheeseburgers included an envelope addressed to the RMHI with directions on how to donate directly to the House.³³⁷ Nearly all the McDonald's in Indiana also placed specially made RMHI containers in their stores near their cashiers, who encouraged customers to donate spare change to the House. While the franchisee's fundraisers for the expansion did not match the wonderful chaos of the August 2, 1982, "Hamburger Day," the promotions for the expansion proved equally successful. The Bacon Double Cheeseburger discount and a "Happy Pails" promotion netted \$551,200 in the summer and winter of 1986. The "canister promotion," also called the "Penny Promotion,"

³³⁶ Judy Monnier, President board of directors, to Bill Baas, Indianapolis Auto Trade Association, February 12, 1988. Record Boxes RMHI, Indianapolis, IN.

³³⁷ McDonald's, Double Bacon Cheeseburger Promotion Flyer, summer 1986, Record Boxes RMHI, Indianapolis, IN.

collected another \$50,000 during the same period and continued to bring in donations throughout the period of construction.³³⁸ Hardwork paid off, and the franchisees attained their \$1.15 million goal toward the funding of the expansion.³³⁹

With donations steadily coming in and construction nearing completion, the board worried that the new, larger RMHI might feel like a “huge hotel” instead of a “home away from home.”³⁴⁰ The design of the original wing used architectural features such as large common rooms to create a domestic atmosphere for the RMHI. The board decided to continue this domestic design theme by adding “personal touches” to the decorations of the expanded RMHI. The board worked with Kittles, a large, Indianapolis-area furniture store, that made two in-kind donations to the expansion by providing professional decorators and used furnishings for the expansion. The decorators from Kittles commissioned one of the expansion’s best remembered “personal touches” when they enlisted Amish women to sew twenty-six quilts to hang above the bed in every new room. Months before the expansion’s opening, the decorators provided “kits” of building-code appropriate cloth scraps to Amish quilters and several other small quilting clubs. The finished quilts arrived weeks after every room had been painted and furnished, and Karen Campbell thought the way each unique quilt seemed to fit into a certain bedroom

³³⁸ Memo to Indiana Owner/Operators, Operations Managers, Store Managers from Gerry Cassidy, Owner/Operator Indianapolis Region and Our House, Inc. board member, Nov. 4, 1986, Record Boxes RMHI, Indianapolis, IN.

³³⁹ Campbell second interview with Mize; Sue Nigh to Lisa Barnes, Laurence, Charles, Free & Lawson, May 22, 1989.

³⁴⁰ Campbel second interview with Mize.

was another example of the “serendipity” that benefited the RMHI throughout its existence.³⁴¹

The expanded RMHI opened on October 2, 1989, and at the time the “Indiana House” officially became “the largest of the 125 Ronald McDonald Houses in world.” The improved House featured the twenty-four original rooms in the north wing, as well as twenty bedrooms and six specialized isolation apartments in the new south wing.³⁴² Our House, Inc., successfully planned, funded, and built the largest RMH in the world in about three years because they had the firm support from all three sides of the “crucial triangle.” McDonald’s put its considerable financial and organizational power behind the expansion as soon as the board decided to stay within the company’s stated focus of helping children. Riley eagerly supported the expansion from its inception, because the doctors recognized the need for additional accommodations and because the board agreed to include isolation apartments for transplant patients. Finally, Indianapolis and communities around the state rallied behind the project. They responded to the more sophisticated fundraising and public relations strategies the board utilized to strengthen and expand the RMHI’s grassroots support. Building the new wing, which cost 3.6 million, challenged the board, but they never doubted their ability to complete the project.

³⁴¹ Ibid.; RMHI Clippings File, September, 24, 1989, RMHI Archive, Indianapolis, IN.

³⁴² RMHI Newsletter, “Our House,” summer 1989, Record Boxes RMHI, Indianapolis, IN.

The Our House, Inc., board believed a successful conclusion seemed only a matter of time rather than a question of feasibility.³⁴³

As the opening date for the expansion neared, the Our House, Inc., board hired a new House Manager, Mary Anne Schaefer, to replace Lona Damron.³⁴⁴ Damron left voluntarily as the larger RMHI neared completion and changed from the smaller “mom and pop” institution she had become accustomed to operating.³⁴⁵ The new House Manger, Mary Anne Schaefer, had worked for four years as the director of facilities at the Beech Grove Benedictine Center and moved to the RMHI shortly before the expansion opened. Schaefer approached her new job with a commitment anchored in a “strong religious faith and the feeling that the job is a special ministry.”³⁴⁶ Deeply personal reasons motivated Schafer and Damron before her, which helped both women deal with the inherent challenge in the “House Mother” style of management. The job required an intense level of involvement because the House Manger lived in her work place. They spent nearly twenty-four hours a day, several days a week living, working, and sleeping in the House. The constant responsibility could lead to burnout unless House Managers

³⁴³ Our House, Inc./RMHI Board of Directors Meeting Minutes, November 13, 1989, Record Boxes RMHI, Indianapolis, IN; The author consolidated board of director’s minutes from several separate boxes stored at the RMHI into one box. He organized the minutes chronologically and placed them in folders by year, and all records will be deposited at the RMHI at the conclusion of this project. So, for example, all the board minutes from 1990 are in a folder labeled “Board Minutes, 1990.” The nonprofit changed names from Our House, Inc. to Ronald McDonald House of Indiana in 1996. In order to avoid confusion, these records will hereafter be cited as “Board Minutes, Month, Date, Year.”

³⁴⁴ Before the expansion, the board used the term House Mother and House Manger interchangeably. In the latter part of the 1980s, the documents use the term House Manger more often, but Damron and Schaefer still managed the RMHI in the “House Mother” style. This style of management meant the House Manager or Mother lived in the House, managed the volunteers, performed administrative duties, and dealt with problems as they arose. For clarity, this paper will hereafter use the term House Manager.

³⁴⁵ Gordons interview with Mize.

³⁴⁶ RMHI Newsletter, “Our House,” Summer 1989, Record Boxes RMHI, Indianapolis, IN.

had strong personal motivation that kept them dedicated to the House's mission. The size of the expanded RMHI placed even more pressure on the House Managers and helps explain why the board wanted to hire someone with Schafer's background and level of personal commitment.³⁴⁷

Schafer's first months as the RMHI's House Manager proved extremely difficult, and the challenges of managing the largest RMH in the world forced the board to hire new staff and reorganize the volunteers in an attempt to cope with its new problems. In the first few months after the RMHI's expansion, the RMHI employed three staff other than Schafer including the Night Manager, Vonda Tyler, the Fundraising Coordinator, Vivian Gill, and part-time administrative assistant, Sue Nigh. Vivian Gill and Sue Nigh both came from the RMHI's large volunteer pool. Gill had assisted Damron and the board with the organization of special events and volunteers before becoming the House's Fundraising Coordinator. Sue Nigh volunteered at the RMHI since its opening in 1982, and often helped with the House's incoming and outgoing mail.³⁴⁸ Nigh began working as a part time administrative assistant in the mid-1980s, a position that became increasingly important at the RMHI expansion neared completion. Vonda Tyler stayed in an apartment at the House at night, and was "on call" to deal any problem that arose overnight.³⁴⁹

After the expansion, the character of the RMHI began to change as the board, staff, and volunteers of the House struggled to operate the larger facility. George Gordon described the original twenty-four room House as a "family business" that a single person

³⁴⁷ Ibid.

³⁴⁸ RMHI Newsletters; Monnier interview with Mize.

³⁴⁹ Monnier interview with Mize.

ran with little assistance, but “as the business starts to grow and the problems start to grow” the small business has to “expand out and get more people involved.”³⁵⁰ As the RMHI moved out of the “family business” stage, the board recruited more volunteers to help operate the House. Tasks like cleaning, serving food, or running the front desk continued to be performed primarily by volunteers, but their “focal point” changed dramatically. Instead of reporting mainly to Damron and then Schaefer, the larger pool of volunteers reported to the team of four nonprofit professionals who operated the bigger RMHI.³⁵¹

Volunteers noticed a change in the character of the RMHI that came along with increased size and the addition of new leadership. As George and Marsha Gordon described it, after the 1989 expansion the “feel” of the House went from “personal” to “professional.” Marsha Gordon felt the “hominess” of the volunteer experience declined after the expansion, because the RMHI’s new size forced the board to “run it more as a business.”³⁵² The board increased the number of volunteers and organized them into new “shift structures,” which diminished the amount of volunteer interaction and bonding that had occurred before the expansion. The volunteers changed from a small, close knit “family” that operated the original House to a larger, more decentralized and less connected group following the expansion.³⁵³ Before the expansion, Lorna Damron personally knew and socialized with every volunteer, but the new staff did not interact

³⁵⁰ Gordons interview with Mize.

³⁵¹ Campbell second interview with Mize.

³⁵² Gordons interview with Mize.

³⁵³ Ibid.

with the volunteers nearly as much. The RMHI's larger size and more businesslike atmosphere combined with the increase in volunteers did make the volunteer experience feel slightly more impersonal. This change, however, did not diminish the passion volunteers felt for the RMHI's mission, and they continued striving to ensure the RMHI still felt like a "home-away-from home" for its guests.³⁵⁴

In addition to the challenges of running the bigger RMHI, the staff and the board dealt with several unexpected catastrophes within the first year after the expansion. In late November, subfreezing temperatures caused a transformer just outside the RMHI to explode. The building lost both electricity and heat; temperatures within the House dropped to near 40 degrees. The RMHI staff turned to IUPUI and its chancellor Gerald Bepko for help and the university agreed to house "thirty or more families" in the University Place Hotel and provide food from the Medical Campus's cafeteria free of charge.³⁵⁵ Karen Campbell later described how the RMHI families "had a very nice time" at the hotel. Every room contained a television with cable and a bathroom, and the hotel staff went out of its way to make the families comfortable - even warming baby bottles for their unexpected guests. Nevertheless, when they returned to the RMHI on December 23, Campbell overheard one family comment "at least we're home for Christmas." Campbell believed that statement provided validation of all the effort the board had devoted to maintaining the RMHI's homey atmosphere. Their guests wanted to be "home" for Christmas. Unfortunately, the guests did not get to enjoy Christmas at the

³⁵⁴ Ibid.; Campbell second interview with Mize; Johnson interview with Mize.

³⁵⁵ Campbell second interview with Mize; RMHI Newsletter, "Our House," Winter 1990, Record Boxes RMHI, Indianapolis, IN. While the files of Gerald Bepko did not confirm this story, articles in the winter 1990 RMHI Newsletter corroborated the recollections of Karen Campbell.

House. A few days after the transformer exploded, pipes in the connection between the old and new wing froze and burst because contractors failed to insulate them. The broken pipes flooded the great room on the first floor on the new wing. Luckily, the water was not contaminated, so emergency responders from IUPUI and RMHI volunteers managed to dry out the room in about two weeks.³⁵⁶

At the time of the disasters, Mary Anne Schaefer was already struggling to manage the expanded RMHI. The transformer explosion and frozen pipes occurring in quick succession exacerbated those problems and the board became increasingly dissatisfied with Schaefer's performance between the expansion's opening in September 1989 and the summer of 1990.³⁵⁷ Before the expansion, Lorna Damron "pretty much coordinated everything," spending an "unbelievable" amount of time managing the volunteers, serving the guests, and doing whatever was needed to keep the House operating. Damron's efforts "made [the RMHI] a home." After the expansion, the House's massive size overwhelmed Schaefer, and made it impossible for her to maintain the same level of involvement as her predecessor.³⁵⁸ She found it difficult to manage the complex business aspects, such as day-to-day accounting and resource management, while maintaining the deep level of personal involvement the "House Mother" system required.³⁵⁹

³⁵⁶ Ibid.

³⁵⁷ Monnier interview with Mize.

³⁵⁸ Gordons interview with Mize.

³⁵⁹ Ibid.

In 1990, the Our House, Inc. board of directors, led by Jim Props and Karen Campbell, began planning major changes in RMHI's staffing and operation. The board always felt proud of the RMHI and their accomplishments, and this feeling intensified after their hard work led to the successful expansion. The RMHI's status as the largest RMH in the world and its continued partnership with the prestigious Riley Hospital caused the board to believe that their House had become one of the premier RMHs in the country. While they thought the "House Mother" system had been "very successful" from the House's opening to the 1989 expansion, as the staff of the RMHI continued to struggle the board decided the RMHI was failing to reach its full potential.³⁶⁰ Together, Jim Props and Karen Campbell convinced the rest of the board to abandon "the house mother concept," and hire a "real professional manager." They wanted an experienced nonprofit professional who could handle the challenges of the larger more businesslike RMHI, and elevate the House to the next level.³⁶¹

In the February 1990 Mary Anne Schaefer resigned and the board decided to divide her former job into two separate positions: a House Director to oversee all the operations of the RMHI and a Resident Manager to take over a majority of the interpersonal and administrative duties of the old House Manager. Dividing the House Manager's duties addressed two needs the board had identified following the opening and expansion of the RMHI.³⁶² First, the House Director no longer had a room at the RMHI, which encouraged the individual to have a life outside of the RMHI. They hoped this

³⁶⁰ Ibid.; Campbell second interview with Mize.

³⁶¹ Ibid.

³⁶² Personnel Committee Report, 1991 Annual Meeting, Record Boxes RMHI, Indianapolis, IN.

would reduce the emotional burnout House Managers often experienced when working and living in a RMH twenty-four hours a day. The constant presence of House Managers like Damron often led to complicating personal relationships with guests and volunteers that distracted them from their other responsibilities. Second, the board expected the new director to handle all the House's business aspects, allowing the board to focus more on setting broader policies and procedures. The new Resident Manager position resembled the older "House Mother" model. The Resident Manger focused on maintaining the home-like atmosphere of the RMHI by supervising the House's volunteers and by meeting the needs of guests by dealing with immediate, practical problems as they arose.³⁶³

Our House, Inc. hired Beth Johnson to be the RMHI's first House Director in the summer of 1990 and expected her to guide the House as it came to grips with its new size. Johnson had an extensive background in nonprofit management that began at Purdue University, where she received a Community Development degree with an emphasis on Human Services Management.³⁶⁴ After graduation, Beth worked for the City of Indianapolis as a Program Monitor for the Division of Employment and Training. There she oversaw programs that provided job training for economically disadvantage residents before moving onto to several other positions working for the city.³⁶⁵ Johnson left her employment with the city to work for the Indianapolis Private Industry Council, where she again managed programs to help disadvantaged individuals acquire job

³⁶³ Ibid.

³⁶⁴ Johnson interview with Mize.

³⁶⁵ Ibid.

training and employment. She eventually became the Vice President of Operations of the organization. In 1990, Johnson began searching for new position in a smaller nonprofit. She later explained that she wanted to be where she could come in closer contact with individuals the organization served. That contact “feeds” her emotionally and fuels her desire to work in the nonprofit realm. The new House Director position did not have as much contact with RMHI guests as the responsibilities of the original House Manager. Nevertheless, as the RMHI House Director Johnson would have increased opportunities to interact with the House’s guests.³⁶⁶

Beth Johnson also found the House Director position appealing for another more personal reason. She felt an immediate “connection” to the RMHI after learning about the House’s mission. Her brother, who was born with Cerebral Palsy, started his life as a “Riley baby” and underwent multiple surgeries for his condition during the 1960s. She felt lucky because her family lived close enough to Riley that her mother’s absences during her brother’s treatments did not become a horrible inconvenience. Johnson still immediately recognized the intrinsic value of the RMH mission. She knew from the experience of her own family that a child’s illness took “a lot of time and energy and attention” and could completely drain a family both financially and emotionally. The RMH mission “resonated” with Beth because she understood how a safe, caring, and easily accessible environment could mitigate the physical and emotional stress of dealing with a childhood illness. After contacting the Our House, Inc. board, Johnson went through the interview process primarily with Karen Campbell and Jim Props. The board

³⁶⁶ Ibid.; Campbell second interview with Mize.

decided to hire Johnson because of her years of experience and her background managing the business aspects of a nonprofit.³⁶⁷

Johnson started work at the RMHI on August 1, 1990, and spent the first few weeks speaking with families in the House, visiting other RMHs in Louisville and Chicago, and generally immersing herself into “what the RMH was” and how it operated.³⁶⁸ At first, Johnson found the relationship between the volunteers and the RMHI the hardest aspect of the RMHI to understand and manage. She had never worked with a nonprofit before where volunteers were responsible for a majority of the practical operations of the organization. Johnson wanted to ensure the evolving RMHI and its staff could “operate how they needed to operate” while relying so heavily on volunteers. Beth soon discovered the amazing dedication and reliability of the RMHI volunteers, which mitigated her fears about remaining so dependent on them. She then shifted her focus primarily to policy and big picture operations of the RMHI. As Johnson described it, “Our volunteers run the RMH - I am just kinda there to make sure things go the way they should go.”³⁶⁹

Adding to the challenges of Johnson’s new position was the fact that shortly before her arrival the board decided to take on new debt and renovate the original north wing. The Our House, Inc., board finished paying off the debt they incurred building the 1989 expansion by February 1990. Two months later, the board borrowed \$235,000 from

³⁶⁷ Ibid.

³⁶⁸ Johnson interview with Mize.

³⁶⁹ Ibid.

the same line of credit at Merchant's National Bank to refurbish the north wing.³⁷⁰ The board thought the original wing should match the quality of the newly built addition, and decided to take out the loan so the renovation process could begin immediately. This would ensure the immense new RMHI started operating at full capacity as soon as possible.³⁷¹ Johnson and Vivian Gill, the Fundraising Coordinator, relied on special events, direct mail campaigns, and donations from outside groups, such as McDonald's and the RMCC, to pay down the debt. For example, in 1991 the board raised \$37,000 at the annual Golf Tournament, \$22,827 from the Love Coupon direct mail campaign, and received \$76,531 from McDonald's canister donations and the RMCC.³⁷² The well-practiced Our House, Inc., board and staff raised enough funds to complete the north wing renovations in 1991 and pay off all the House's debt by the end of 1992.³⁷³

After getting the House's debt situation under control, Johnson began gently pushing the board to work on modernizing the RMHI's operating practices. She recommended expanding its board of directors and updating its business practices, information systems, capital assets, and staff.³⁷⁴ Johnson and the board focused on improving the practices and organization of the Our House, Inc., board of directors to make it more efficient and effective at creating long-term goals and setting policy for the RMHI. Johnson and the board of directors began this process in 1991, by participating in

³⁷⁰ Our House, Inc. Line of Credit: Table, 1992 Annual Meeting, Record Boxes RMHI, Indianapolis, IN.

³⁷¹ Board Minutes, May 13, 1990.

³⁷² 1991 Fund Raising Gross Receipts Summary, 1992 Annual Meeting, Record Boxes RMHI, Indianapolis, IN.

³⁷³ Board Minutes, April 13, 1992.

³⁷⁴ Johnson interview with Mize; Campbell second interview with Mize.

the first of two board retreats at the McDonald's campus in Oak Brook, Illinois.³⁷⁵ Key members of Our House, Inc., board of directors and RMHI staff attended both of these strategic planning retreats at "Hamburger U," as George Gordon called it. Together with Johnson they set long term-goals for the RMHI and made plans to achieve them.³⁷⁶

The Our House, Inc., board also wanted to expand its membership by bringing in additional representatives from the Indianapolis community. They hoped an expanded board would bring fresh talent and ideas and wanted to focus on attracting professionals, such as accountants or lawyers, whose job experience would benefit the RMHI. They also hoped to augment and improve the House's support network by inviting important community members to join the board.³⁷⁷ For example, at the end of 1991 the Nominating Committee recommended Bruce Burking, the Vice President of Human Resource Development of the Indianapolis Network for Employment and Training because "skills in training and staff development" could help the volunteer program. The committee also recommended Neal Shoger, a certified public accountant, and Greg Jamison, the Vice President of Business Operations for the Indianapolis Pacers, as well as two other well connected professionals to join the board.³⁷⁸

The first board retreat in 1991 focused on reorganizing the board to make it more efficient and effective. Since the RMHI's inception in the late 1970s, the "full board was involved in everything" related to the House and its operation. The board's complete

³⁷⁵ Board Minutes, Jan. 27, 1991.

³⁷⁶ Gordon interview with Mize.

³⁷⁷ Ibid.

³⁷⁸ New Nominees to the Board of Directors of Our House, Inc., Annual Meeting 1992, Record Boxes RMHI, Indianapolis, IN.

immersion in the day-to-day operations of the House worked well for the first decade of its existence, but the expansion made it impossible for the board to remain as deeply involved. They decided to restructure and “came out of that very first retreat with a board structure that included key committees.” These “key committees” oversaw vital facets of the RMHI operation including finance, investment, volunteers, fundraising, and capital assets.³⁷⁹ The committees reported to the full board, which in turn voted to approve or deny the decisions or ideas the specialized committees suggested. This revised structure allowed the board to direct policy and other “big picture” issues, while leaving the implementation of those policies to Beth Johnson, the Resident Manger, the rest of the staff, and the House’s volunteers.

The board formed the Investment Committee at the first retreat, a “key committee” that proved crucial to the RMHI development throughout the 1990s. This committee managed the RMHI’s investment portfolio, which remained small at the time it formed 1991. The board of directors wanted their investments to cover a portion of the RMHI’s operating costs, with the remainder going into two reserve funds. The “capital replacement fund” would cover major, unexpected repair costs, and an operating reserve fund that the board could tap in case of a bad fundraising year or a downturn in the economy. To meet these goals, the Investment Committee began implementing a conservative, low-risk investment plan using small amounts of extra funds left over after particularly good fundraising years. Eventually the investments that constituted the “capital replacement fund” became the foundation for what became known as the “Board

³⁷⁹ Johnson interview with Mize; Board Minutes, Jan. 27, 1991; Board Minutes, Dec. 9, 1991; Board Minutes April 13, 1992.

Designated Fund.” This renamed fund remained small until the board expanded their investment portfolio in 1993.³⁸⁰

The board of directors also returned from the first retreat at “Hamburger U” committed to updating the House’s technology, and gradually hiring more staff members as Beth and circumstances convinced them of their necessity. Beth started in 1990 with two full-time staff members, the Fundraising Coordinator, Vivian Gill, and the Resident Manager, Vonda Tyler, (who previously worked as the House’s Night Manager), and the part-time administrative assistant Sue Nigh. Tyler managed the practical operation of the House and worked in the front office during the day before retreating at night to a two-room apartment within the RMHI where she remained on call. Sue Nigh resigned in November 1990, and the board decided to make the position full-time and hired Sharon McLean to replace Nigh.³⁸¹

Before bringing in additional professionals, Johnson under the board’s direction focused on improving the House’s infrastructure, technology, and best practices during the first five years of her tenure. Johnson wanted to “put resources” into updating the RMHI organization and began with practical building improvements. For example, she supervised the remodeling of the House’s basement to create more storage space and installing a new phone system.³⁸² She and the board also improved the House’s record-keeping abilities by investing in new computer technology, including some “Accounts Payable, General Ledger and Financial Reporting programs” that made it simpler to track

³⁸⁰ Annual Meeting Minutes 1991, Record Boxes RMHI, Indianapolis, IN.

³⁸¹ Board Minutes, May 13, 1990.

³⁸² Johnson interview with Mize.

the House's finances.³⁸³ Modernizing the RMHI's accounts aided the newly formed finance committee, under the leadership of board member Don Gatlin, to begin the process of improving the House's financial practices. His committee took information the House's new systems gathered, and presented the board with a clear, comprehensive, and understandable portrait of the RMHI's finances.

In the summer of 1992, Gatlin and his committee determined, after adjusting for all the in-kind donations and services the RMHI received from volunteers, "it cost approximately \$320,000 [annually] to operate the house."³⁸⁴ With clarity on the annual operating expenses, Johnson and board started formulating detailed, long-term plans. For the first time, they allocated money for specific budget items and included the projected cost of any project they wanted to tackle during that budget year. The greater level of detail provided the board of directors and Johnson with a fundraising goal each year; the board knew exactly how much they needed to raise to cover the House's expenses.³⁸⁵ The new budget maintained a level of flexibility for unforeseen expenses, and included detailed projections that reflected the commitment of Johnson and the board to improving the House's organization and long range planning.

Implementing the budgetary strategy required the board and Beth Johnson to face two challenges: Develop new sources of funding to complement their established grassroots network and address a potentially serious set of issues related to a change in organization of Ronald McDonald Children's Charities and the nonprofit's Indiana

³⁸³ Board Minutes, Jan. 25, 1993.

³⁸⁴ Board Minutes, July 13, 1992.

³⁸⁵ Proposed Budget, 1993 Annual Meeting, Record Boxes RMHI, Indianapolis, IN.

Chapters. The RMHI's fundraising relationship with its traditional McDonald's partners grew more complex as RMH's throughout the country received additional support from the Kroc family, and the RMCC Foundation underwent a significant reorganization. Indiana's RMCC Chapters, and especially the Central Indiana RMCC Chapter, had maintained an excellent relationship with Our House, Inc. After contributing \$100,000 to the 1989 expansion, the RMCC and its Indiana Chapters remained a steady source of funds during early 90s. The organization repeatedly gave grants to the RMHI for specific events or improvements throughout the House's history. Even while appreciating the RMCC's generosity, the Our House, Inc. board struggled to make clear to the public that the RMHI was not the sole beneficiary of RMCC grants. The board constantly reiterated this point in its ongoing battle against the misperception that the House received a majority of its funding from McDonald's. The beneficial relationship between the House and the RMCC became even more complex when the RMCC decided to reorganize itself and its chapters under the name Ronald McDonald House Children's Charities.³⁸⁶

One of the first indications of the shifting relationship between the RMHI and RMCC came in 1993 when the collection boxes in McDonald's restaurants began collecting on behalf of the RMCC instead of for RMHs across the country. The board worried about the possible cost of the shift, which they estimated could total around \$62,000 a year in lost funds. They decided to become "proactive" about maintaining a good relationship with the RMCC, while simultaneously working to clarify the limits of that relationship to the public.³⁸⁷ A few months later the House's newsletter included an

³⁸⁶ Campbell second interview with Mize; Johnson Interview with Mize.

³⁸⁷ Board Minutes, May 10, 1993.

article titled “RMH & RMCC...What’s the Connection?” that explained, while both organizations had the similar mission of helping children, they remained completely separate entities.³⁸⁸ The confusion and the concern over losing fundraising dollars to the RMCC continued in 1994, as the board found it “increasingly difficult to raise money” as “the loss of the McDonald’s canister money” started to show in their declining donation totals.³⁸⁹ This forced the RMHI to pursue new sources of funding, but, as they did, the House’s relationship to the RMCC changed yet again.

In the summer of 1995 the RMCC announced its intent “to dissolve” as an organization to form a new charity “called Ronald McDonald Children’s Charities and Ronald McDonald Houses.” Under the proposed plan, every RMH would remain an independent nonprofit entity by retaining its own 501 (c)(3) status, but the boards of directors for the various RMCC chapters and the RMHs in their areas would merge to form one board that managed both nonprofits. The original proposal would dissolve the RMCC as of January 1, 1996. The organization’s former chapters would then receive new licenses from a new central office. The reorganized nonprofits would raise money for and help manage RMHs in their areas. They would also distribute any extra money they raised through grants to other child-focused nonprofit organizations.³⁹⁰ The RMHs could refuse to join, but they would then lose their license from the RMH central office in Chicago - meaning they could no longer use the Ronald McDonald name.

³⁸⁸ RMHI Newsletter, “The Home with a Heart,” fall 1994, Record Boxes RMHI, Indianapolis, IN.

³⁸⁹ Board Minutes, Jan. 23, 1995.

³⁹⁰ Board Minutes, Aug. 14, 1995; Johnson interview with Mize.

The Our House, Inc., board of directors found numerous problems with the original merger idea. Beth Johnson and the board thought the merger made sense for some RMHs. Where some states had only one RMH and one RMCC, a merger of their boards and finances seemed “to make sense.”³⁹¹ Indiana, however, contained five separate RMCC Chapters, and that, combined with RMHI’s independent character, created a number of concerns that the RMCC’s original proposal did not address to the Our House, Inc., board’s satisfaction. Most of these concerns stemmed from the failure of the original proposal to address “many fund raising issues...from the national level down to the local level.”³⁹² The board was particularly concerned with how their community partners would react to the radical shift in the RMHI’s mission when they started distributing grants to other nonprofit organizations. The board had additional questions that included the following: How would the boards combine? How much money would the merged groups reserve for the RMH, and how much would be given out in grants? Could the RMHI remain “a local charity” rooted strongly in the community since they considered RMCC a “national movement” with a much broader focus?³⁹³

In sum, the “main sticking points” centered on how the board members from the RMCC’s five original Indiana chapters would integrate with Our House, Inc.’s board to form a new nonprofit. The Our House, Inc. board, was concerned that the merger would dilute the House’s mission of providing a sanctuary from the families of sick children.³⁹⁴

³⁹¹Johnson interview with Mize.

³⁹² Board Minutes, Aug. 14, 1995.

³⁹³ Ibid.

³⁹⁴ Board Minutes, March 11, 1996.

In particular, the implications of adding grant distribution to the RMHI's mission worried the House's board. The proposed plan might force the board to revise the RMHI's mission statement and begin the arduous process of creating new 501 (c)(3) to maintain their nonprofit status. In addition, most board members disliked the idea of "providing funds for existing organizations with whom [they were] competing on a day-to-day basis for fund raising dollars."³⁹⁵ The Our House, Inc. board sent Dr. Charles Richmond, the longtime board member, and a few other envoys to meet with RMCC representatives and discover how the reorganization would affect operation of the RMHI. The group then worked to formulate a plan that would allow the board to continue operating the RMHI according to its original mission.³⁹⁶

The Our House, Inc., board of directors strongly disapproved of the possible dilution of the RMHI's mission. In 1989 the board chose to expand the RMHI's facilities to increase the number of guests they served, and, unlike other RMHs, consciously avoided spending resources on programs not focused on providing housing. The board did not want external circumstances to force a change in the character of their nonprofit. While they could reject the final arrangement if they chose, the loss of their RMH license would have been devastating for the RMHI because it would have lost the vital support of McDonald's side of the crucial triangle. The concerns of the Our House, Inc., board and Beth Johnson, however, never devolved into panic because they believed the excellent relationship they had maintained with the RMCC Chapters in Indiana would allow them

³⁹⁵ Board Minutes, Sept. 11, 1995.

³⁹⁶ Ibid.

to reach a mutually beneficial resolution.³⁹⁷ The RMCC and board did reach that agreement in May 1996, five months after the RMCC officially dissolved and reformed as the Ronald McDonald House Charities (RMHC) in January.

In the spring of 1996, the RMHC Indiana and the board entered into a new relationship, where, instead of an outright merger, the RMHI became “affiliated” with the newly reorganized nonprofit. The RMHC Indiana and the RMHI remained two distinct organizations, each with its own board of directors. The five original RMCC chapters merged, and its new board of directors consisted of “seven members” with “one from each of the five” chapters and “two representatives from the Ronald McDonald House” of Indiana.³⁹⁸ The new agreement preserved the RMHI’s independence and guaranteed that the House received “25% of all funds raised by the [Indiana] RMHC Chapters.” In addition, the House could still “apply for additional funds to finance special projects,” and both could participate in joint fundraising initiatives “to fund joint projects such as Ronald Rooms.”³⁹⁹ The RMHI breathed a sigh of relief after the RMHC passed their articles of incorporation and the reorganization finalized.

As part of the reorganization, Our House, Inc., nonprofit changed its name to the Ronald McDonald House of Indiana. While the board referred to their building as either Ronald McDonald House of Indiana or the Indiana Ronald McDonald House throughout its history, the official name of the nonprofit remained Our House, Inc. When the board applied for a license from the new central office of the RMHC they decided to use the

³⁹⁷ Johnson interview with Mize.

³⁹⁸ Board Minutes, May 13, 1996.

³⁹⁹ Ibid.

name Ronald McDonald House of Indiana. They felt the name change would clarify the relationship between the board and the House. The officially renamed RMHI nonprofit received a new license, which allowed them to continue using the Ronald McDonald name. The RMHI board of directors remained independent and their nonprofit continued to focus exclusively on providing housing for the families of sick children at Riley.⁴⁰⁰

As the RMCC reorganized into the RMHC and the Our House, Inc., board resolved the details of their new relationship, the board also started seeking new sources of funding to complement their well-established grassroots network. Anticipating the restructuring of the RMCC, McDonald's donation containers switched from collecting for RMHs to RMCC in 1993. This switch resulted in a notable loss in funds for the RMHI. This short fall combined with an overall dip in donations forced the board to search for new fundraising opportunities brought on by the poor economy of the early 1990s. The board chose to pursue substantial bequests and to strengthen their small investment portfolio to make up for the decline in donations. These two sources often complemented each other when large bequests allowed the board to expand and improve their investment portfolio. In fact, a major bequest combined with a substantial, one-time donation prompted the board's finance committee to begin expanding Our House, Inc.'s small investment portfolio. These gifts allowed the board to expand the revenue their investments generated just as they began to feel the loss of the McDonald's canister donations.

⁴⁰⁰ Johnson interview with Mize; Campbell second interview with Mize.

The first gift came in March 1993 from Ray Kroc's widow, Joan Kroc, who donated 10,000 common shares of McDonald's stock valued at \$516,000 to every RMH in the country as part of her family's continuing commitment to the RMH concept.⁴⁰¹ Mrs. Kroc's gifts came with restrictions that limited use of earnings to operating expenses. This donation became the RMHI's Endowment Fund, a restricted fund that the board of directors only used to cover operating expenses valued at \$526,250 at the end of 1993.⁴⁰² The restrictions came as part of the gift because Mrs. Kroc wanted the shares to keep the RMHs running, rather than have the dividends devoted to new projects. Mrs. Kroc's donation left the Investment Committee with two different endowments to manage - the restricted Joan Kroc endowment and the smaller "Board Designated Fund" formerly known as the Capital Replacement Fund.⁴⁰³

After Mrs. Kroc's major donation in 1993, the Investment Committee focused on increasing the restriction-free Board Designated Fund, which the board could use for anything it felt benefitted the RMHI. The Board Designated Fund received a boost in the spring of 1994, when the "Rosenberry Estate" bequeathed \$200,788 to the RMHI.⁴⁰⁴ The board deposited the entire donation into the Board Designated Fund along with any surplus money brought in through the House's other fundraising efforts. By the end of

⁴⁰¹ Investment Policy Statement for Ronald McDonald House, 2000 Annual Meeting, Record Boxes RMHI, Indianapolis, IN., Board Minutes, March 8, 1993.

⁴⁰² Balance Sheet, 1994 Annual Meeting, December 31, 1993, Record Boxes RMHI, Indianapolis IN.

⁴⁰³ Johnson interview with Mize.

⁴⁰⁴ Board Minutes, March 14, 1994. Statement of Cash Flows for the Months and Years Ending, December 31, 1995 and 1994, 1996 Annual Meeting, Record Boxes RMHI, Indianapolis, IN.

1994, The Board Designated Fund had increased from \$100,000 in 1993 to \$538,317.⁴⁰⁵ In 1995 the Investment Committee diversified their portfolio, while the board continued to deposit any extra monies into The Board Designated Fund, which by the end of the year had grown to \$1,414,374.⁴⁰⁶

At this point, the Investment Committee recommended hiring professionals to oversee the investments of the RMHI.⁴⁰⁷ The committee met with six separate banks and one investment firm and decided to transfer \$1,000,000 to the locally owned People's Bank because of its "unique program using Renaissance investment managers located in Chicago."⁴⁰⁸ The Investment Committee also deposited \$500,000 with the National Bank of Detroit, which would "manage our [the RMHI's] fixed income portfolio." The Investment Committee chose these banks because both understood and accepted Our House, Inc.'s conservative approach to investing. While employing investment managers cost the RMHI about \$10,000 dollars a year, the board approved the expense in the belief that it would improve their investment portfolio and forge new connections with financial professionals that could lead to greater fundraising opportunities.⁴⁰⁹ Between 1995 and 1999 the RMHI received \$794,000 in bequests, all of which the board invested.⁴¹⁰ The Investment Committee and the professionals they worked with used the bequest money to

⁴⁰⁵ Board Minutes, Sept. 12, 1994. Indiana Ronald McDonald House: Balance Sheet, 1995 Annual Meeting, December 31, 1994, Record Boxes RMHI, Indianapolis, IN.

⁴⁰⁶ Indiana Ronald McDonald House: Balance Sheet, December 31, 1995, 1996 Annual Meeting, Record Boxes RMHI, Indianapolis, IN.

⁴⁰⁷ Board Minutes, Jan., 22, 1996.

⁴⁰⁸ Ibid.

⁴⁰⁹ Ibid.

⁴¹⁰ Investment Policy Statement for Ronald McDonald House, 2000 Annual Meeting, Record Boxes RMHI, Indianapolis, IN.

continue growing the Board Designated Fund and by December 1998 it totaled \$2,631,801.⁴¹¹

While the Investment Committee endeavored to create more financial security for the RMHI by improving the House's investments, the RMHI's board and staff continued working to expand the House's grassroots fundraising network. Throughout the 1990s, the RMHI continued to rely on small- and medium-sized donations collected through speaking engagements, direct mail, and special events. Starting in 1991, Beth Johnson and Vivian Gill, the House's Fundraising Coordinator, worked closely with the newly formed Fundraising Committee to plan and execute community fundraising strategies. The board members on the committee outlined broad ideas with input from both Johnson and Gill, and then left it up to the staff to execute those plans and make their ideas reality.⁴¹²

After paying the debt that the board had accrued during the north wing's refurbishing in late 1991, Johnson, Gill, and the Fundraising Committee focused on perfecting their traditional grassroots strategies and paid particular attention to improving the RMHI's fundraising events.⁴¹³ Johnson believed that special events improved the House's long-term sustainability because they generated awareness as well as money. Although the costs to the RMHI made special events far less efficient than other strategies like direct mail, the "friendraising" benefits of special events outweighed the costs and time of planning them. The events generated "friends" who became volunteers

⁴¹¹ Ronald McDonald House Board of Directors Financial Summary 1998, Record Boxes RMHI, Indianapolis, IN; 1999 Annual Meeting, Record Boxes RMHI, Indianapolis, IN.

⁴¹² Johnson interview with Mize.

⁴¹³ Ibid.

and repeat donors, which led to sustained relationships and long-term benefits for the RMHI.⁴¹⁴

Starting in 1992, Johnson and Gill began expanding the number of smaller special events the RMHI regularly hosted and improving their overall quality. The amount of money and friends these events generated steadily increased throughout the 1990s, as Johnson and the board continued to refine and perfect these fundraisers. For example, the RMHI Golf Outing, which the RMH supporter, Pete Wojtowicz, first organized in 1988 to raise money for the expansion, grew into the Annual Golf Tournament. In 1993, the Golf Outing brought in a respectable \$9,825 dollars in net profit for the RMHI.⁴¹⁵ In 1994, it raised \$36,000 and almost \$40,000 dollars two years later.⁴¹⁶ By 1999, the Golf Tournament had become one of the RMHI's most important fundraisers. It netted nearly \$60,000 and, more importantly, had done so much "friendraising" that the number of participants maxed out the capacity of the Highland Gold and Country Club golf course.⁴¹⁷ The RMHI staff and board planned numerous smaller events throughout the 1990s like the annual "garage sale," which in 1994 raised \$2,724.10, where the RMHI sold donated items to the public.⁴¹⁸ Other small fundraisers included Oscar Night parties, ice cream socials, Victorian tea parties brought in amounts ranging from hundreds to

⁴¹⁴ Ibid.

⁴¹⁵ Board Minutes, Sept 13, 1993

⁴¹⁶ Board Minutes, Sept. 12, 1994; Board Minutes, Aug 12, 1996.

⁴¹⁷ Board Minutes, May 10, 1999.

⁴¹⁸ Annual Meeting 1995, Record Boxes RMHI, Indianapolis, IN.

several thousand dollars. No matter what was planned, all the events shared the same goals of increasing friends and raising money for the RMHI.⁴¹⁹

As they had throughout the House's history, sympathetic organizations and the occasional individual continued to plan and pay for fundraisers on behalf of the RMHI throughout the 1990s. Those events became a favorite fundraising technique of Beth Johnson and the rest of the board because they cost the RMHI almost no money and brought in thousands of dollars for the House every year.⁴²⁰ For example, in 1995, the statewide benevolent organization, the Fraternal Order of the Eagles, contributed the staggering sum of \$97,397 to the RMHI. The organization became involved with the RMHI during its original construction and periodically made the House its charity of the year, meaning the Fraternal Order of Eagles raised money on the House's behalf for an entire year.⁴²¹ Benevolent groups from RMHI's network of support also made large and small in-kind donations that saved the House thousands of dollars during the 1990s. In 1993 alone, RMHI's list of repeat, in-kind donors included Sigma Phi Gamma, which frequently cleaned the ovens and refrigerators; the Master Gardeners who contributed free landscaping; the Association of Media Educators who maintained the House's small library; and the Broad Ripple Pie Company and Nathan's Cafeteria, which contributed food.⁴²²

⁴¹⁹ Annual Meeting 1994, Record Boxes RMHI; RMHI Newsletter, "The Home with a Heart," Winter 1995/96, Record Boxes RMHI, Indianapolis, IN; RMHI Newsletter, "The Home with a Heart," fall 1994, Record Boxes RMHI, Indianapolis, IN.

⁴²⁰ Johnson interview with Mize.

⁴²¹ Board Minutes, Sept. 11, 1995. The sources only record the total amount the Fraternal Order of Eagles donated, not how the money was raised or spent.

⁴²² Board Minutes, Jan. 25, 1993.

In 1995, the Our House, Inc., board “borrowed” and implemented a new fundraiser that grew into one of the most recognizable strategies employed by RMHs across the country. In 1994, Beth reported to the board that the RMH in Minneapolis, Minnesota, had raised nearly \$200,000 over 6 years by selling aluminum pop tabs from soda cans collected on their behalf by area schools and within McDonald’s restaurants.⁴²³ Initially, some board members treated the feasibility of the pop tab idea with great skepticism because recyclers buy scrap aluminum by the metric ton, meaning the volunteers would need to collect millions of pop tabs to raise any significant amount of money for the RMHI.⁴²⁴ Nevertheless, the success of Minneapolis RMH inspired the board to create a Pop Tab Committee to plan their own pop tab campaigns in Indiana.⁴²⁵ At first, the Pop Tab Committee focused on placing collection boxes in McDonald’s restaurants and succeeded in getting almost every franchise in Indiana, and two in Kentucky, to place the pop tab collection containers in their stores. The committee also convinced Reggie Miller, the famous Indiana Pacer basketball player, to contribute a thirty-second radio spot to promote the campaign’s launch. In addition, Coco-Cola, a frequent national contributor and close McDonald’s partner, paid for the initial printing of the pop tab collection boxes, defraying some of program’s cost to the House, making it more profitable in the long run.⁴²⁶

⁴²³ Board Minutes, Sept. 12, 1994

⁴²⁴ Johnson interview with Mize.

⁴²⁵ Board Minutes, March 13, 1995.

⁴²⁶ Ibid.

The RMHI board members who initially found the idea of collecting millions of pop tabs amusing were pleasantly surprised by the success of the “first phase” of campaign. In under six months, the containers placed in McDonald’s and a few participating schools collected nearly 12 million pop tabs. Those 12 million pop tabs weighed almost 4 tons, and if placed end to end would stretch nearly 190 miles.⁴²⁷ While it required an immense volume of pop tabs to raise a significant amount of money, the Pop Tab Committee believed the campaign’s “friendraising” potential remained untapped. They decided to expand the program in hopes of involving more “grassroots” sources during the campaign’s “second phase.”⁴²⁸ The board wanted to involve schools, small groups, offices, and businesses in collecting the tabs thereby bringing them into the RMHI network.⁴²⁹ The board focused especially on getting the collection program into Indiana schools. To accomplish this goal, they developed an educational curriculum designed to demonstrate what a million or a billion “looked like.” The curriculum included a pop tab information packet that the RMHI provided to make implementing of a collection program as easy as possible.⁴³⁰ The “second phase” of the pop tab proved successful as RMHI staff members and the Pop Tab committee convinced schools, businesses, and other grassroots organizations to begin challenges aimed at collecting a million pop tabs for the House.⁴³¹

⁴²⁷ Ronald McDonald House Charities of Kentuckiana, “Collect-a-Million Club, School Program Administrative & Curriculum Guide,” Ronald McDonald House Charities, 2010. (PDF downloaded from www.rmhlouisville.org accessed February 7, 2012).

⁴²⁸ Board Minutes, July 24, 1995.

⁴²⁹ Johnson interview with Mize.

⁴³⁰ Ibid.

⁴³¹ Ibid.

The pop tab fundraiser continued to grow throughout the late 1990s, as the numbers of tabs collected and amount of money raised steadily increased every year. In 1995 and 1996, the first two years of the program, the board raised \$4,000 through tab sales, but by the end of 1997 income had increased to \$40,000 from over 75 million pop tabs.⁴³² In the summer of 1999, the Pop Tab Committee announced to the rest of the board that the “program” had raised \$100,000 since its beginning five years earlier by selling 250 million pop tabs equaling 83 metric tons various schools, businesses, benevolent groups, and volunteers collected and donated.⁴³³

The pop tab campaign became one of Our House, Inc.’s most successful fundraisers largely because of the incredible amount of awareness it generated for the RMHI. The first three years of pop tab collections earned \$40,000 for the RMHI, while the 1996 Annual Golf Tournament netted the same amount in one day.⁴³⁴ While other fundraisers generated more revenue for the House, none could match the pop tab campaign’s “friendraising.” The “omnipresent” collection containers in McDonald’s restaurants, schools, business, and even homes kept the RMHI and its mission before the public.⁴³⁵ As Beth Johnson, Karen Campbell, and Judy Monnier repeatedly pointed out, maintaining public awareness of the RMHI and its mission remained one of the most challenging and important aspects of raising funds for the House.⁴³⁶ In the pop tab

⁴³² Board Minutes, Aug. 12, 1996; Board Minutes, Nov. 10, 1997.

⁴³³ Board Minutes, May 10, 1999. Ronald McDonald House Charities of Kentuckiana, “Collect-a-Million Club, School Program Administrative & Curriculum Guide,” Ronald McDonald House Charities, 2010. (PDF downloaded from www.rmhlouisville.org accessed February 7, 2012).

⁴³⁴ Board Minutes, Nov. 10, 1997; Board Minutes, Aug. 12, 1996.

⁴³⁵ Johnson interview with Mize; Campbell second interview with Mize; Monnier with Mize.

⁴³⁶ Ibid.

campaign, Johnson and the board found a public relations and “friendraising” juggernaut that continues to publicize the RMHI and its crucial mission.

During the first five years of Johnson’s tenure at the House (1990-1995), Johnson, her staff, and the board focused their efforts on improving the RMHI’s infrastructure and business practices as well as tapping new sources of funding. In the mid-1990s, Johnson began the lengthy process of increasing the number of professional staff working at the RMHI.⁴³⁷ As Johnson later recalled, the process for bringing in new staff occurred “very painfully” as the board rightfully remained “as conservative as possible” when making decisions about how to spend the organization’s money.⁴³⁸ Working primarily with Jim Props, Karen Campbell, George Gordon, and Judy Monnier, Johnson convinced the board by focusing on how hiring staff or implementing new policies would positively affect the House. She concentrated on how decisions would improve the nonprofit’s ability to fulfill its “mission,” and how they were “going to impact the sustainability of the program.” Usually Johnson and the board waited until they had the funding in hand and a specific need to fill before they hired a new employee. Throughout the 1990s, as the effectiveness and the income from fundraising steadily improved, Johnson convinced the board to hire more nonprofit professionals such as community organizers, grant writers, volunteer coordinators, and financial professionals.⁴³⁹ By early 2012, the RMHI employed thirteen staff members including a business manager, a director of development, a development assistant, a special events

⁴³⁷ Ibid.

⁴³⁸ Johnson interview with Mize.

⁴³⁹ Ibid.

manager, a communication and marketing manager, an annual giving and grants manager, an operations director, two guest services managers, a night supervisor, and a volunteer resources manager.⁴⁴⁰

The additional staff aided the RMHI's transformation from operating like a "mom and pop shop" into a model that more closely resembled a stable and sustainable small business.⁴⁴¹ When the RMHI first opened, the original Our House, Inc board members managed nearly every aspect of the House's organization, but they slowly began decreasing their involvement throughout the 1980s. Dr. Beering became the president of Purdue University, Brenda Duncan moved to a new McDonald's position in Houston, and both Karen Campbell and Judy Monnier, the RMHI's "foot soldiers," wanted to spend more time with their families.⁴⁴² The RMHI transitioned from the personal "founder's ownership" and the "extraordinary involvement" of the original board toward a more professional managerial style.⁴⁴³

While the nonprofit professionals that Beth Johnson hired felt a personal commitment to the House's mission, if they left, Beth could replace them with other experienced individuals.⁴⁴⁴ When Lorna Damron moved on shortly before the 1989

⁴⁴⁰ Ronald McDonald House of Indiana, Staff List, <http://www.rmh-indiana.org/Who-We-Are/Staff-Directory.aspx> (accessed February 7, 2012).

⁴⁴¹ Gordons interview with Mize.

⁴⁴² Campbell first interview with Mize; Monnier interview with Mize; Dr. Stephen C. Beering interview with Mize; Duncan interview with Mize.

⁴⁴³ Campbell second interview with Mize.

⁴⁴⁴ The RMHI experienced some turnover in the nonprofit professionals they hired throughout the 1990s. It is not always clear the exact dates professionals were hired or when. Instead the sources and Beth Johnson's oral history interview describe a long trend of professionalization. Johnson and the board hired grant writers, community organizers, or other professionals as the House needed them and as the funds became available to hire them.

expansion, the board found it difficult to replace her because she had managed nearly every detail of the House's day-to-day operations. Damron did not keep detailed files and relied on her personal relationships with the board, the House volunteers, and its guests to keep the RMHI running smoothly. The RMHI's size after the expansion quickly overwhelmed her replacement, Mary Anne Schaefer, who did not have the same the personal connections and experience as Damron. Bringing in professionals "formalized" the relationships within the House. The growing professionalization made the nonprofit easier to sustain and operate, but also decreased "familial" atmosphere between the volunteers and RMHI's staff. This trend, however, did nothing to change the services the House provided to the families of sick children or diminish the passion of its staff and volunteers.⁴⁴⁵

By the end of 1990s, Johnson, her growing staff, and the RMHI board of directors built a solid financial foundation for the House. Together they sought new sources of funding by pursuing large bequests, growing the House's investment portfolio, and expanding and improving its grassroots support network. This solid foundation allowed the board to begin a discussion in the late 1990s and early 2000s about building a RMHI facility within the Riley Hospital building. At the time, RMHs in Houston and Kansas City offered services within their partner hospitals. The possibility of providing a place for parents of young patients in intensive care or on the brink of death to clean up, eat, and rest near their children prompted the board to open a dialogue with Riley. The RMHI board and officials at Riley settled on constructing a multi-use waiting area near their

⁴⁴⁵ Gordons interview with Mize.

Intensive Care Unit, where parents could recuperate while remaining close to their children.⁴⁴⁶ In the summer of 2001 Riley and the RMHI decided to delay the project because the hospital had finished plans to build a new Family Resource Center. Waiting allowed the RMHI to build a bigger, more modern room within the Riley expansion that better served the needs of the hospital and the parents who utilized the space.⁴⁴⁷

After a three-year delay, the Ronald McDonald House at Riley opened in the Frank and Marian Snyder Family Resource Center on February 24, 2004. The 6,500 square foot, “home-like respite area” included six overnight guest bedrooms, a courtyard, a large common area, kitchen, showers, and a large laundry facility.⁴⁴⁸ The RMHI board estimated that the room would cost around \$750,000 but ended up raising \$1,000,000 total to pay for the project.⁴⁴⁹ While it is never “easy” to raise funds, by 2004, the RMHI had evolved into an efficient nonprofit staffed by talented professionals and dedicated volunteers. These individuals drew on their longstanding “relationships” with McDonald’s and their community supporters to quickly raise enough money to pay the \$1,000,000 price tag for the Riley extension.⁴⁵⁰ Furthermore, by the end of 1999, the RMHI board’s investments totaled approximately \$4,000,000 and they continued to increase over the next five years. In 2004 those investments helped sustain the operation

⁴⁴⁶ Johnson interview with Mize.

⁴⁴⁷ Board Minutes May 14, 2001; Johnson interview with Mize.

⁴⁴⁸ Beth Johnson, “RMHI Riley Extension,” Undated, Record Boxes RMHI, Indianapolis, IN.

⁴⁴⁹ Ibid.

⁴⁵⁰ Johnson interview with Mize.

of the main RMHI while the board focused on building the “Ronald McDonald House at Riley” room.⁴⁵¹

⁴⁵¹ Investment Policy Statement for Ronald McDonald House, 2000 Annual Meeting, Record Boxes RMHI, Indianapolis, IN.

Chapter 3: Conclusion

The RMHI transformed during the 1990s from operating on the “mom and pop shop model” to a “small business model.”⁴⁵² This trend towards professionalization began after the House expanded in 1989, and intensified after the board hired Beth Johnson in the summer of 1990. Johnson worked with the board to usher in changes in the House’s funding sources, volunteer organization, and staffing. They intended all of these changes to increase the long-term stability and sustainability of the House, and their efforts proved extremely successful. In the early 1990s, a major reorganization allowed the board of directors to step back from the day-to-day operations of the House and focus on big picture policy issues. Johnson and the board modernized the RMHI’s record keeping and financial practices, which allowed the Finance Committee to build up the House’s investment portfolio. Johnson and her staff continued to expand and maintain the grassroots support network that had sustained the RMHI throughout its history. They refined existing strategies and sought out completely new sources of funds and “friends” through programs like the now-famous RMH pop tab collection campaign. Finally, the RMHI’s improvements in infrastructure, best practices, volunteer organization, and staffing culminated with construction of the Ronald McDonald House at Riley - an extension within the hospital itself.

From the beginning, the RMH concept and the RMHI represented the perfect intersection between philanthropy and need. Since the opening of the first House in Philadelphia in 1974, individuals, corporations, and benevolent organizations have

⁴⁵² Ibid.

eagerly supported the RMH concept. They seized the opportunity to support a nonprofit with the mission of providing a sanctuary for the families of sick children. The success of the RMHs in cities across America testifies to the mass appeal of the idea of creating a home-away-from-home for families undergoing an often terrifying and exhausting ordeal that drained them emotionally as well as financially. RMHs like the RMHI flourished in an era when America's philanthropic realm had evolved into a complex and highly competitive nonprofit sector. In an era when aid groups, advocacy organizations, cultural institutions, and benevolent associations all compete for a limited amount of funds, the RMHI succeeded because the crucial need their nonprofit fulfilled naturally drew passionate advocates and enthusiastic supporters. The House's board of directors, staff, and volunteers capitalized on this natural enthusiasm throughout the RMHI's history.

Those involved, from founders to staff to volunteers to McDonald's representatives, later recalled the experience as one of the most rewarding and meaningful of their lives. Brenda Duncan described her involvement "in founding, building, and oversight of the Indianapolis Ronald McDonald House" as "one of the most meaningful and phenomenal things" she had done in her entire life.⁴⁵³ Karen Campbell felt "lucky" to join a "great group" of people when she became a member of the original Our House, Inc. board of directors.⁴⁵⁴ Jim Props felt "very proud to be associated with the program," and did not think he could put into words the good feelings his long-term commitment to the House gave him.⁴⁵⁵ Judy Monnier talked about the "unique group of

⁴⁵³ Duncan interview with Mize.

⁴⁵⁴ Campbell second interview with Mize.

⁴⁵⁵ Props interview with Mize.

people” the RMHI brought together that included the board, staff, and guests the House served. She enjoyed working with that group because the House’s mission kept them focused on the single goal of providing a home for the families of sick children. She explained how placing the “sick child” at the “center” of everything the board, staff, and volunteers did kept “ego” out of development of the RMHI and contributed greatly to the House’s success.⁴⁵⁶ That focus on sick children and their families inspired Beth Johnson’s passion for the RMHI’s mission and kept her working on behalf of the House for over twenty years.⁴⁵⁷

Many of the original members of the Our House, Inc. board of directors also referred to the feeling of “serendipity” that permeated their involvement with the development of the RMHI.⁴⁵⁸ Karen Campbell cited it as the reason she found herself “at the right place at the right time” to become part of the founding of first RMH in Chicago and the RMHI. She later described an experience when the board received a serendipitous donation during the construction of the original RMHI in 1982. The construction of the House had stalled when problems installing the building’s “metal roof” caused a \$25,000 cost overrun. At a time when the board meticulously counted every five-dollar donation, the large overrun created a mild panic. Within a week, however, the board received a \$25,000 donation from the “Ephromsons” family. The donation came with a letter explaining that the family wanted to contribute to the project to honor the memory of their daughter they lost to leukemia years earlier. Karen Campbell believed moments like

⁴⁵⁶ Monnier interview with Mize.

⁴⁵⁷ Johnson interview with Mize.

⁴⁵⁸ Monnier interview with Mize; Campbell second interview with Mize.

the Ephromsons's donation were part of the "serendipity of a good cause fundraising." She thought the mission of the RMHI inspired individuals to give generously, and their support often arrived in the form and at the exact moment the House needed.⁴⁵⁹

The rewards that McDonald's received from its long-term relationship with the RMHI remain far more complex. Jim Props and Karen Campbell described McDonald's commitment to the RMH concept as the best known example of "cause marketing." Companies employ this public relations strategy because it generates positive press for their business while simultaneously bringing aid to those in need.⁴⁶⁰ Props also described McDonald's sponsorship of RMH concept as building a "trust bank" of good will in communities across the country. McDonald's involvement improved the general public opinion of the company and made its employees feel good about working for the large corporation. Brenda Duncan described the RMH as a "halo" on the company's brand, meaning it improved the public's perception of the company by reinforcing the family-friendly image that McDonald's marketers made every effort to create for their restaurants.⁴⁶¹ This reinforcement allowed McDonald's patrons to feel good about giving their business to the restaurant. McDonald's spent millions of dollars on marketing campaigns that did not generate as much good will and publicity as the RMH and RMHC nonprofits. Ultimately, McDonald's relationship with RMHs became a classic win-win situation for both the company and the community. The affiliation boosted the

⁴⁵⁹ Campbell second interview with Mize. The last name Ehpromson may not be spelled correctly.

⁴⁶⁰ Props interview with Mize; Campbell second interview with Mize.

⁴⁶¹ Campbell second interview with Mize.

McDonald's image, while RMHs fulfilled a crucial need that existed in communities throughout America.⁴⁶²

Throughout its thirty-year history, the key to the success of RMHI has been the hard work, determination, and loyalty of the House's supporters. The original Our House, Inc. board of directors formed a partnership with Riley Hospital for Children, one of the most prestigious children's hospitals in the country, and representatives from McDonald's to build a RMH in only two short years. By 1989 the RMHI had a large pool of supporters repeatedly donating money to fund the House's mission. That support along with the continued backing of the McDonald's corporation, especially franchisees in Indiana, enabled the board to build an expansion that made the RMHI the largest RMH in world. The board then brought in Beth Johnson to guide the RMHI through a gradual process of professionalization that lasted throughout the 1990s. Together, Johnson, her staff, the board of directors, and the House's volunteers transformed the RMHI into an efficient nonprofit and one the premier RMHs in the country. The professionalization process culminated with the Ronald McDonald House at Riley, an extension of the RMHI the board built within Riley Hospital.

Most importantly, for the last thirty years the RMHI has been a home-away-from-home for the families of sick children. A mother, whose child had received burns over 60 percent his body during a house fire, when recalling her stay at the RMHI said, "When our children suffer, we suffer, too. And at 'Our House' we all feel love and compassion

⁴⁶² Duncan interview with Mize.

for each other, so welcome to all.”⁴⁶³ At Christmas 1986 Sharon and Steven Leatherman wrote to thank Lona Damron saying, “Our situation . . . seemed easier to deal with after sharing stories with other people at the House. The peace and comfort of the McDonald House will always be in our memories.”⁴⁶⁴ In 1993 Jacques Harriell lost his infant grandson, a child who spent the last eighteen days of his life in the Intensive Care Unit at Riley. He wrote to thank the “folks at the Ronald McDonald House” for the “generosity, hospitality, love, and concern for us, our son, and his wife” he described as “unmeasurable and almost beyond description.”⁴⁶⁵ Four-year-old Frank McCoy with the help of his mother, Linda, described the RMHI as “simply the best and the kindest most considerate house I’ve ever been to. We will remember the house in our prayers you folk are doing a wonderful job.”⁴⁶⁶ These letters illustrate the crucial need the RMHI fulfilled. Serving individuals in such desperate and stressful situations motivated the board members, staff, and volunteers to make sure the RMHI operated at the highest possible level. Medical technology will continue to improve and save young lives. The problems the RMHI addresses will never disappear, which creates an on-going need for donations and for volunteers who will work to improve the House that provides a home-away-from-home for the families of seriously ill children.

⁴⁶³ RMHI Newsletter, “Our House News,” Vol. 2, No. 8, October 1983, Record Boxes RMHI, Indianapolis, IN.

⁴⁶⁴ RMHI Newsletter, “Our House,” Christmas 1986, Record Boxes RMHI, Indianapolis, IN.

⁴⁶⁵ Jacques Harriell to Our House, Inc., November 12, 1993, Record Boxes RMHI, Indianapolis, IN.

⁴⁶⁶ Frank and Linda McCoy to RMHI, Undated, Annual Meeting 1997, Record Boxes RMHI, Indianapolis, IN. Letter quoted with exact wording and misspellings the child used.

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CURRICULUM VITAE

Christopher S. Mize

Education

- **MA, Public History 2012** - Indiana University, Indianapolis, IN
- **BA, History and English 2005** - University of Dayton, Dayton, OH

Research Accomplishments

- Masters Thesis, *The History of the Ronald McDonald House of Indiana, 1980-2004*
 - Wrote a comprehensive institutional history of the Ronald McDonald House of Indiana located in Indianapolis, IN.
 - Organized the primary sources kept at the Ronald McDonald House of Indiana.
 - Conducted oral history interviews to supplement the primary sources housed at the Ronald McDonald House of Indiana.

Professional Development

- National Council on Public History Annual Conference, Providence, RI
- Preserving Historic Places Conference, Bloomington, IN

Internships

Researcher, Warren Township, Indianapolis, IN 2009-2010

- Surveyed pioneer and Victorian era cemeteries for the Warren Township Trustee
- Conducted background research on individuals interred in the cemeteries
- Helped create an online database of the graveyards for genealogical researchers

Researcher, Ronald McDonald House of Indiana, Indianapolis, IN 2008-2009

- Conducted an independent research project for the Ronald McDonald House of Indiana (RMHI)
- Conducted oral history interviews with key participants in the founding and continuation of the RMHI
- Wrote an institutional history of the RMHI based on sources from the House and the interviews

Exhibits Intern, Indiana Historical Society, Indianapolis, IN 2007-2008

- Developed exhibits from conception to completion
- Aided in the recreation of a World War II era grocery store for the successful “You are There” exhibit

- Performed research, composed text, and aided with the fabrication of multiple exhibits

Intern, Chicago History Museum, Chicago, IL

October 2006-January 2007

- Completed research projects and other assignments for the *Catholic Chicago* exhibit

Career Experience

Historical Consultant, Indianapolis, IN

2011-Present

- Assisted the Indiana Historical Society with the creation of two exhibits, *Great Moments in Indy Sports History* and another on the history German immigrants in Indianapolis.