

Con Alma Health Foundation 2012 Grant Cycle Guidelines

The 2012 Grant Cycle opens on April 2, 2012. These guidelines and the applications can be downloaded from our website at www.conalma.org under “apply for a grant”. For limited computer access, please request a hard copy at (505) 438-0776 ext. 5.

DEADLINES: Must be received (not postmarked) by Con Alma Health Foundation **NO** later than 5pm. 144 Park Avenue, Santa Fe, 87501.

Small Grant Applications: Friday, June 1st

Northern New Mexico Health Grant Group (NNMHGG) Applications: Friday, June 22nd

Grant Term: 2012 Grant Cycle will be funded for the grant period Jan. 1, 2013- Dec. 31, 2013.

ABOUT THE FOUNDATION'S GRANTMAKING:

- ▶ **MISSION:** Con Alma Health Foundation is organized to be aware of and respond to the health rights and needs of the culturally and demographically diverse peoples and communities of NM. The foundation seeks to improve the health status and access to health care services for all New Mexicans and advocates for a health policy, which will address the unmet health needs of all New Mexicans. The Foundation makes grants, contributions, and program related investments to fulfill its Mission.
- ▶ **DEFINITION OF HEALTH:** Con Alma Health Foundation defines health broadly to include not only physical health, but also mental, emotional, behavioral, social, oral, environmental, economic, and spiritual health and well-being. This definition represents an approach to both individual and community well-being which impacts local and statewide health systems;
- ▶ **SYSTEMS CHANGE:** We support changes that result in a health related system (public or private) being increasingly accessible, responsive or capable of meeting the health needs of New Mexicans, especially from communities and cultures whose needs are underserved by existing systems.
- ▶ **SYSTEMS CHANGE VS DIRECT SERVICES:** While the Foundation is aware that direct services are valuable and critical to the health system, the Foundation's philanthropic purpose is to improve the health status and access for health care through programs and activities that promote systemic change. *Thus, we do not fund direct services.* However, many organizations providing direct services do promote systemic change through their work. Applications should reflect the systemic change aspects of their work rather than direct services. Specifically, they should address how their work is impacting the health system in New Mexico.

FUNDING REQUIREMENTS:

- ▶ Grantees must be recognized by the IRS as a 501 (c) 3 tax exempt organizations. If you are not a 501 (c) 3 you may apply using a Fiscal Sponsor. Contact clabore@conalma.org for more information.
- ▶ The activities funded by the grant must occur (or benefit the people) in the state of NM.
- ▶ Any organization working directly with pueblo or tribal communities/nations **must** submit a letter from those pueblos or tribes acknowledging support for the organization and the project that will be implemented. This letter must accompany any application for a grant.

FUNDING RESTRICTIONS:

- ▶ No grants may be made to individuals and/or for scholarships and fellowships.
- ▶ Con Alma grants may not be used to fund lobbying activities or other activities prohibited under section 502 (c) (3) of the Internal Revenue Code.

- ▶ Grant funds may not be used for capital purposes, construction or renovation, or for the purchase of property and equipment at more than \$5,000 per item.
- ▶ Grants may not be used for annual fund raising campaigns, political campaigns, endowments, event sponsorships, clinical research, or direct financial subsidy of health services to individuals or groups.

2012 GRANT CYCLES

There are two grant cycles for 2012- Small Grants and Northern New Mexico Grant Group Grants.

SMALL GRANTS	NNMHGG
Projects may serve any geographic area within the state of New Mexico.	Projects must serve the target geographic areas of Los Alamos, Rio Arriba & Northern Santa Fe Counties.* (Northern Santa Fe County defined as north of the city of Santa Fe and does not include the city of Santa Fe)
Requests can be made up to \$15,000	Requests can be made up to \$20,000
Project must demonstrate funding from at least one other funding source.	Project must demonstrate funding from at least one other funding source.
Must address Key Findings and Recommendations from Con Alma’s Health Equity Report “Health Equity in New Mexico: A Roadmap for Grantmaking and Beyond” (see summary below or www.conalma.org/health resources)	Must address priorities from NNMHGG 2008 Report “Data for Grantmaking: A Comparative Study in Community Health in Los Alamos, Rio Arriba and Northern Santa Fe Counties.” (see www.conalma.org/health resources)

**Health Equity in New Mexico: A Roadmap for Grantmaking and Beyond
Key Findings and Recommendations Summary**

Please visit www.conalma.org for the full report (preliminary) and or Executive Summary.

➤ **KEY FINDINGS**

1. Improved conditions and policies that address Social Determinants of Health and advance health equity, especially among racially and ethnically diverse and underserved populations, can significantly improve health in New Mexico.
2. Access to quality and affordable health care services continues to be a barrier to good health, especially in rural New Mexico, communities of color, and underserved populations (e.g. elderly, immigrants, border communities, and veterans).
3. Prevention, nutrition, health promotion & holistic health are critical to improving health in NM.
4. Our rapidly changing environment, including demographic shifts, will have major implications in health for the people and communities of New Mexico.

➤ **RECOMMENDATIONS FOR GRANTMAKING**

1) Invest in communities

The data and focus group responses point to the Con Alma's core mission to understand and respond to the health rights and needs of the culturally and demographically diverse peoples and communities of New Mexico. They also underscore Con Alma's core values to involve, collaborate and partner with New Mexico communities.

Recommendations:

- Support improved access to quality and affordable health care. This includes supporting programs that increase the scope of medical services in rural clinics, increase transportation to health facilities and enhance educational efforts that make Medicaid more understandable to the community user.
- Expand grantmaking to rural communities, including efforts that seek to link rural communities to health care resources from other areas such as tele-health and sharing means to implement best practices with limited resources.
- Strengthen outreach to Tribes, Pueblos, Apache Nation, and Navajo Nation.
- Fund programs that increase cultural and linguistic competency with providers trained to be culturally competent, that increase access to bilingual health and that support traditional uses such as promotoras and traditional healers.
- Support preservation and enhancement of cultural and spiritual assets.
- Give grants that increase and diversify the health workforce and support leadership development for people of color in health care professions.

2) Invest in health basics

Communities need the most basic of health care: sufficient access to primary care physicians and other health professionals, dental checkups and oral health, mental health services and preventative measures that alleviate undesired health care outcomes.

Recommendations:

- Continue to support organizations that promote wellness strategies such as prevention, nutrition, health promotion, holistic health, and spiritual health and well being.
- Provide support for replications of basic health programs that have worked elsewhere.
- Give grants to nonprofit organizations that offer technical and capacity building skills.
- Continue general operating support to nonprofit, health-related organizations to support infrastructure and administrative overhead costs.
- Continue to fund organizations that serve preadolescent children (below age 10) to encourage healthy lifestyles (reducing youth risk behaviors such as obesity, diabetes, substance abuse, teen pregnancy and accidental deaths.)
- Support programs that provide mental health care in wrap-around approaches in rural communities.

3) Leverage resources

Leverage Con Alma Health Foundation's human and financial resources to attract other resources for New Mexico; and support/encourage multi-sector collaboration.

Recommendations:

- Leverage Con Alma Health Foundation's resources to attract local, state and national funding and other resources to improve health in New Mexico.
- Continue to participate in advocacy networks that pool resources and ideas to lead to improved health policy making at the state and local levels.
- Support collaborations such as partnerships between public health departments and community-based health programs and organizations offering mentoring programs to tap underutilized community resources and strengthen social networks.
- Support organizational efforts to enhance coordination and multi-sector collaboration.

4) Invest in systems change

Innovation, leadership, acting as an effective advocate and promoting change are all underpinnings of Con Alma's mission. While experience has shown there are no easy answers to the mission of health equity, Con Alma can continue to serve as a catalyst for positive, systemic change in NM.

Recommendations:

- Support policies that advance health equity, especially among racially and ethnically diverse populations, and underserved populations/communities.
- Support policy development through research, evaluation and advocacy.
- Support programs that provide analysis of health data, policy issues and programs.
- Support workforce development that provides a pathway to health care professions. Inherent in this goal is encouraging organizations to use innovative models that blend traditional and nontraditional health and support cultural and linguistic competency.
- Support and strengthen nonprofits that seek to improve the health of underserved populations through community organizing and advocacy.
- Provide support and foster collaborations for organizations to educate legislators and policy makers on the work of nonprofits in New Mexico on strengthening health equity and on the impact of Medicaid and the Patients Health Care Protection Act to the state's underserved populations.

Organizations that have met the funding requirements, restrictions and priorities outlined above, are able to demonstrate that the activities will advance Con Alma Health Foundation's mission and can ensure that the activities funded by the grant will be completed no later than December 31, 2013 may submit an application.

All applicants will be notified the third week of July of their current status. If selected for a site visit, you will be asked to provide further information. Unless requested, do not provide further materials with your application. **Final selections will be made in November.**

Please visit www.conalma.org for information on the Foundation, the full 2012 Grants Calendar, how funding decisions are made, lists of past grantees, definitions and Frequently Asked Questions or contact Cecile LaBore at clabore@conalma.org or (505) 438-0776 ext. 5.