

Grant Initiatives

In the past year, the MetroWest Health Foundation has pivoted its grantmaking and operations to support the region's efforts to address the coronavirus pandemic. We have been in regular communication with grantees to assess their needs and the ways the foundation can be responsive. Early on we converted many existing grants to operating support, reduced reporting requirements, accelerated grant payments and provided emergency COVID-19 funding.

The need for funding has not diminished. To the contrary, many health issues have been exacerbated by the pandemic. As a result, the foundation is offering grants that seek to address a variety of issues that have emerged as a result of COVID. In addition, the foundation has also shortened its application and timeframe in order to streamline the process at a time when staff are already stretched thin meeting emergency needs.

The foundation is pleased to solicit proposals from eligible nonprofit and government organizations for the following grantmaking initiatives:

- COVID-19 Emotional Resilience
- COVID-19 Social Isolation Among Older Adults
- Health Equity
- Responsive

Application Information

Proposals must be submitted online and be received by the foundation by **4:00 p.m. on THURSDAY, March 18**. Instructions for the online application are available on the foundation's website at www.mwhealth.org. Incomplete or late proposals will not be considered for review.

Bidders Conference

The foundation will host a virtual bidders' conference with information on funding initiatives and the application process on **February 18**, from 2:00-3:00 p.m. Pre-registration is required. Please RSVP to rdonham@mwhealth.org by February 17.

Concept Papers/Calls

The foundation requires applicants to submit a one-page concept paper or call the foundation prior to a full proposal. Concept papers and calls help the foundation assess whether the proposed project is aligned with its funding priorities. Concept papers, along with an accompanying cover sheet, or calls must be completed by **4:00 p.m. February 26**. Please call or email Rebecca Donham at (508) 879-7625 or rdonham@mwhealth.org.

Foundation Support

Once a grant is made, foundation staff work with grantees to ensure that project outcomes are achievable and measurable, that grant activities are connected to larger community efforts to address area health needs, and that grantees have access to technical assistance and training to help them achieve success. The foundation also seeks to learn from each grant, using site visits and grantee reports to record lessons learned that can inform our work and that of future grantees. We encourage grantees to consider the foundation as a resource throughout the duration of the grant.

General Restrictions

The foundation supports programs that directly benefit the health of those who live and work in one of the 25 communities served by the foundation. Such support is limited to organizations that qualify as tax-exempt under Section 501(c)3 of the IRS Code, or organizations that are recognized as instrumentalities of state or local government.

The foundation does not provide grants to individuals, nor does it provide funds for endowments, fundraising drives and events, retirement of debt, operating deficits, projects that directly influence legislation, political activities or candidates for public office or programs that are customarily operated by hospitals in Massachusetts.

The foundation does not award grants to organizations that discriminate in the provision of services on the basis of race, color, religion, gender, age, ethnicity, marital status, disability, citizenship, sexual orientation or veteran status.

About the Foundation

The MetroWest Health Foundation's mission is to improve the health status of the community, its individuals and families through informed and innovative leadership. The foundation serves the following communities: Ashland, Bellingham, Dover, Framingham, Franklin, Holliston, Hopedale, Hopkinton, Hudson, Marlborough, Medfield, Medway, Mendon, Milford, Millis, Natick, Needham, Norfolk, Northborough, Sherborn, Southborough, Sudbury, Wayland, Wellesley and Westborough.

COVID-19 Emotional Resilience Grants

Introduction

The COVID-19 pandemic and resulting isolation and economic downturn have negatively affected many people's mental health and exacerbated challenges for those already living with mental illness and substance use disorders. A June 2020 survey conducted for the Centers for Disease Control and Prevention found that nearly 41% of respondents reported at least one adverse mental or behavioral health condition, including symptoms of trauma- and stressor-related disorder related to the pandemic (26.3%) and having started or increased substance use to cope with stress or emotions related to COVID-19 (13.3%)¹.

Certain populations may be more impacted by the stress of a crisis, including children and adolescents; parents and caregivers; individuals with preexisting medical and behavioral health conditions; socially isolated adults; individuals experiencing reduced employment; and racial and ethnic minorities.

While the Commonwealth has begun vaccinating its residents through a phased approach, it is expected that a return to normal activities will take time. Furthermore, the grief and mourning of lost lives and way of life faced by residents will not simply disappear once vaccinations have been completed.

Activities and Outcomes

The foundation seeks to support nonprofit and municipal agencies in improving the emotional resilience of those they serve. Specifically, the foundation seeks grant proposals for the following new activities:

- Evidence- and research-based trauma/stress reduction programs such as Psychological First Aid and Emotional CPR
- Resilience promotion and stress reduction programs
- Grief support for first responders and others disproportionately impacted by COVID-19
- Relapse prevention efforts for individuals with substance use disorders
- Enhanced screening for substance use disorders
- Mental health promotion programs, particularly for people of color and those who do not speak English as their primary language

¹ Czeisler M&, Lane RI, Petrosky E, et al. Mental Health, Substance Use, and Suicidal Ideation During the COVID-19 Pandemic — United States, June 24–30, 2020. MMWR Morb Mortal Wkly Rep 2020;69:1049–1057. DOI: <http://dx.doi.org/10.15585/mmwr.mm6932a1external icon>

Equity Focus

COVID-19 has highlighted vast disparities in health outcomes. Grant proposals must address how the proposed intervention will serve populations with high individual-level risk factors, including but not limited to, people of color, those speaking a primary language other than English, uninsured individuals, and people in low-income households.

Funding

The pandemic has required leaders and organizations to use new approaches to their work. As a result, the foundation will only support activities that are new or expanded. Providing existing services via videoconferencing does not constitute a new or expanded service.

The maximum grant amount is \$30,000. Grants are for one year.

COVID-19 Grants to Decrease Social Isolation Among Older Adults

Introduction

Social isolation among older adults has been an ongoing public health issue for many years. According to the CDC, social isolation in those over age 50 can lead to increased risk of premature death for all causes, similar to that of smoking and obesity; increased risk of dementia; and higher rates of depression and anxiety.² Some are more at-risk for social isolation, including LGBT older adults; immigrants, especially those for whom English is not their first language; and older adults of color.³

COVID-19 has led to stay-at-home recommendations for older adults as well as the closure of many spaces where older adults engage in recreational, volunteer and other activities. This, combined with a hesitancy on the part of many to visit children and grandchildren for fear of contracting the virus, has led to even more social isolation for many older adults in the MetroWest region. Effective vaccines are here and over the coming months, most older adults will have access to them. This means agencies serving older adults can begin to gradually offer in-person programming.

Councils on Aging and other agencies that provide opportunities for older adults to socialize are on the forefront of finding the balance between offering safe in-person programming and continuing virtual programs. The foundation is offering support to organizations that serve older adults to create and/or enhance virtual or other socially distanced programming, as well as to plan for return to in-person programming.

Activities and Outcomes

The foundation is seeking grant proposals from organizations who serve predominantly older adults that address the following objectives:

- 1. Create or enhance virtual or socially distanced programming for older adults that provides an opportunity to engage with others in a safe way.** This can include, but is not limited to, programming via meeting platforms (i.e., Zoom, Google Hangout, etc.), social media, telephone, or local cable TV or socially distanced in-person programs.
- 2. Improve access to technology so that older adults can engage in available programming from their homes.** This can include, but is not limited to, offering support on how to use devices and online programs or purchasing devices for those who could not otherwise afford a device.

² Centers for Disease Control. *Loneliness and Social Isolation Linked to Serious Health Conditions*. <https://www.cdc.gov/aging/publications/features/lonely-older-adults.html>

³ Ibid.

3. Develop and implement plans for re-opening in-person programming when it is safe.

This can include, but is not limited to, planning for hybrid models of in-person and virtual programming, developing policies and safety protocols around who is permitted to participate in in-person programming and PPP required, adapting programming so it meets safety protocols.

Equity

Equity should be a factor in all design decisions. This means ensuring that those most at risk for social isolation and most likely to have challenges accessing technology or safe in-person programming are part of the target population. Make sure outreach materials and programming are culturally and linguistically appropriate and accessible (i.e., translated into different languages, available to those with low vision and hearing, in formats that all can access, etc.).

Funding

Grants are for a maximum of \$25,000 and will be funded for one year.

Health Equity

Introduction

The foundation is committed to putting health equity at the core of our efforts to improve health in the region. Grant funding focused on organizational development is a key strategy to promote equity.

COVID-19 has highlighted vast disparities in health outcomes. The five communities in the MetroWest region that have consistently had the highest case rates per 100,000 are those with high percentages of foreign-born residents; people of color; households below poverty level and those speaking languages other than English at home.⁴ There has also been increased awareness and activism around structural racism in the nation and locally. The foundation's belief is that all of us working together toward common equity goals as well as doing work as individual agencies to ensure that all organizational and programmatic decisions are made through an equity lens, will have the greatest long-term impact on decreasing health inequities in the region.

With these foundational beliefs as the framework, grants in this category are designed to help agencies further build capacity to systematically address health inequities in MetroWest.

For more information on the foundation's health equity strategy and ongoing work, see the Health Equity section of our website at <https://mwhealth.org/strategic-investments/health-equity>.

Activities and Outcomes

The foundation is seeking grant proposals from qualified organizations that address the following objectives:

1. Development and implementation of organizational Health Equity Plans. Support for creating a plan to advance health equity within your agency or to implement aspects of a plan that has been developed. The plan should include input from key stakeholders including those utilizing services; staff; volunteers; senior management; and the Board of Directors. For an example of components to include in your plan see the foundation's [Building Inclusive Communities Guidebook](#) (page 17).

2. Development and implementation of health equity training and education programs. Internal training for boards, staff and volunteers as well as community-wide education programs will be considered.

⁴ *The Impact of COVID-19 on MetroWest.* <https://d2yy08d49bfqoo.cloudfront.net/images/Impact-of-COVID19-on-MetroWest.pdf>

3. Outreach and engagement of people of color for the purpose of increasing vaccination rates within communities. This can include, but is not limited to, developing materials to distribute, holding forums, training staff and volunteers to deliver messages, or other creative ways to increase trust in the vaccine and reduce logistical barriers to receiving it.

4. Capacity building grants to support agencies led by people of color working on issues of health equity in their communities. Support to improve sustainability and increase the reach of agencies led by people representative of the populations they serve. Some examples of capacity building are strategic planning and growth; professional development for staff and/or volunteers; improving financial systems; improving or creating evaluation systems; and board development. Agencies led by people of color are defined as agencies with people of color in leadership positions on the board and staff levels, as well as involved in the design, delivery and evaluation of services.

Funding

Grants are for a maximum of \$30,000. Grants are made for one year.

Responsive

Introduction

The foundation is reopening its responsive grants to allow for pressing health needs not included in its other categories to be supported. These grants will focus on addressing emerging issues that have a disproportionate impact on the health of low-income and/or communities of color.

Activities and Outcomes

The foundation is seeking grant proposals from qualified organizations that address the following objectives:

- 1. Support an organization's or community's plans for safely re-opening services to clients and residents.** This could include, but is not limited to, vaccination education, promotion and distribution, and supplies necessary for clients and patients to safely return for in-person services.
- 2. Respond to new and emerging health issues.** This could include but is not limited to, the consequences of delaying preventative care during the pandemic; new patterns or trends in substance use in the region; and program needs that stem from new state and/or federal health policies or the disruption of services as a result of COVID-19.

Responsive grants are one-time, non-renewable grants.

Equity Focus

COVID-19 has highlighted vast disparities in health outcomes. Grant proposals must address how the proposed intervention will serve populations with high individual-level risk factors, including but not limited to, people of color, those speaking a primary language other than English, uninsured individuals, and people in low-income households.

Funding

The foundation will fund a limited number of proposals through its responsive grantmaking. The maximum grant amount is \$20,000. Grants are for one year only and are not eligible for continuation funding.