

NORTHWEST HEALTH FOUNDATION

The Community's Partner for Better Health

Kaiser Permanente Community Fund Frequently Asked Questions (FAQs)

Q. We aren't sure whether to pursue a Capacity-Building Grant or an Implementation Grant. How do the expectations of the two tracks differ?

A. **Capacity-Building Grants** are most appropriate for organizations that have an interest in addressing social determinants of health, but have yet to develop their strategies or partnerships. These grants can provide up to \$50,000 for a maximum of 18 months. Grant funds can support staff time, focus groups, community convening, facilitators, training, consultants, travel, conferences and related expenses. By the end of the grant period, organizations will be expected to have developed a clear strategy for addressing one or more social determinants of health; to demonstrate a clear understanding of how their work fits within the social determinants framework; have developed partnerships with other organizations (where necessary), with clearly defined roles and responsibilities for each partner; and be prepared to seek more substantial funding to implement their strategy.

Implementation Grants are most appropriate for organizations that have already fully developed their strategies to improve community health using a social determinants approach; have clearly defined the roles and responsibilities of each partner (collaborations are generally preferred to stand-alone efforts); can articulate how they plan to evaluate the community impact their project would achieve; can articulate their strategy to fully fund and sustain the initiative; and identify the community need for the program and community assets that will be mobilized to ensure its success. Implementation Grant periods can be funded for periods up to 36 months. In 2009, we made 15 Implementation Grants, averaging \$176,000; grants ranged from \$82,500 to \$300,000.

Q. Could you provide practical examples of what you mean by an upstream approach to prevention?

A. One of the Implementation projects we have funded was titled "Portland CASASTART" led by Neighborhood House. This initiative is implementing a school-centered youth development program aimed at preventing substance abuse and violence among high-risk 8 to 13-year-olds, as well as reducing drug-related crimes and improving social cohesion in three Portland neighborhoods. CASASTART is an award-winning model program, which has demonstrated a benefit to the entire school environment when just 5%-7% of the student population is engaged. Neighborhood House and its partners have also engaged local elected officials in order to leverage their evaluation results to drive prevention-oriented policy changes, and has successfully solicited multiple funders to achieve their full vision. Among the 100 students enrolled thus far, 58% have shown significant improvement in school attendance; 78% of have improved math scores; 84% have improved reading scores; and 84% have reduced disciplinary reports.

Another example of a recent Implementation project was titled “Addressing the Health and Equity Impact of Portland Urban Planning.” The focus of this initiative is on neighborhoods in outer Southeast Portland that do not have the same opportunities for healthy eating and active living as neighborhoods that are closer to Portland’s historic core. Community Health Partnership and their partners are using this grant to mobilize community support and advance an advocacy agenda to convince the City to explicitly include health within the revised neighborhood and citywide plans. The Portland Bureau of Planning and sustainability is currently overhauling its comprehensive plan for the first time since 1980, and the revised framework (scheduled to be complete in 2012) will guide commercial, residential and industrial development for decades. A substantial body of research demonstrates the profound effects that community design has over opportunities for health, so the goals of this project fit squarely within the social determinants of health framework.

One example of a Capacity-Building Grant we funded in 2009 is the “Fruit Valley Neighborhood Food Access Project,” submitted by the Clark County Health Department. The Fruit Valley neighborhood of Vancouver lies at the western end of the city, and is home to a mix of residential, industrial and commercial uses. This low-income neighborhood had some of the worst indicators for access to healthy food options in the city. The department has been working with other partners - including the Fruit Valley Neighborhood Association, the Fruit Valley Foundation, the local elementary school and the Clark County Food System Council - to develop strategies to improve healthy food access in the neighborhood. While this informal workgroup has produced some promising ideas, no one organization had the capacity to develop a cohesive plan that involved all neighborhood residents (including those whose primary language is Spanish or Russian) and to develop community leadership necessary to pursue the plan. Our Capacity-Building grant provides resources for them to develop a comprehensive plan to improve access to healthy foods in this neighborhood.

Q. What is the timeline for the Fund’s decisions?

A. Letters of inquiry are due on June 25. We will be informing applicants about whether or not they are invited to submit a full proposal by September 1. Full proposals will be due October 1. Final funding decisions will be made in early December.

Q. The Fund’s focus is on the social determinants of health. Will you also consider funding programs that provide direct health and social services to disadvantaged populations?

A. We appreciate the value of direct services in mitigating the health effects of adverse social conditions. However, the Kaiser Permanente Community Fund is more interested in addressing the conditions that contribute to excess illness and injury than we are in supporting projects that treat adverse effects after they occur. As the Institute of Medicine has noted, “Interventions to improve access to medical care and reduce behavioral risk have only limited potential for success if the larger societal and economic context in which people live is not improved.” We have, however, funded projects that

include a mix of systemic change strategies and direct services, particularly when the services provided build community capacity to drive health-promoting systemic changes.

Q. How competitive is the Kaiser Permanente Community Fund?

A. The Kaiser Permanente Community Fund is one of the Foundation's most competitive grant programs. In 2009, we received 125 letters of inquiry. We invited 36 full proposals, and funded 25 of them (15 Implementation grants and 10 Capacity-Building grants). Therefore, we encourage organizations to carefully consider whether or not a project or initiative fits the mission of the Fund before investing the time and effort involved in writing a letter of inquiry.

Q. Are colleges and universities eligible to apply for funds from the Kaiser Permanente Community Fund?

A. Academic institutions can contribute a wealth of expertise and resources to the development, implementation and evaluation of projects designed to address the social determinants of health disparities. Indeed, a number of the proposals we have funded include an academic institution as a partner. Historically, however, the balance of power between academic institutions and the communities in which they work has been skewed toward the interests of the academic partners. In recent years, a number of private funders and public health professionals have sought to correct this imbalance by supporting programs in which the needs, assets and methodologies are defined by the community, rather than a university faculty member. Such an approach is more likely to yield results that are culturally relevant to the community, and whose benefits can be sustained. In order to help ensure that the community is an equal partner in proposed projects, the Kaiser Permanente Community Fund will welcome proposals from community-university partnerships provided that the proposal is submitted by a community-based organization, rather than the academic institution.

Q. Where can I learn more about the social determinants framework of health promotion?

A. We would like to invite you to one of four informational sessions that we will be hosting on the Kaiser Permanente Community Fund. The dates, times and locations of these sessions are:

May 5, 9:30 a.m.
Northwest Health Foundation
221 NW Second Avenue, Suite 300
Portland, OR 97209

May 13, 10:30 a.m.
Marion-Polk Food Share
1660 Salem Industrial Drive NE
Salem, OR 97301

May 10, 10:00 a.m.
Washington County Public Services
Building
155 N. First Avenue (Auditorium)
Hillsboro, OR 97124

May 21, 9:30 a.m.
Vancouver City Hall
210 E. 13th Street
Vancouver, WA 98660

Please RSVP to Chris Kabel at ckabel@nwhf.org if you would like to attend any of these sessions.

Many scholarly and professional associations, as well as independent public health researchers, have published widely on the topic. Some of the most influential texts include:

- The Robert Wood Johnson Foundation's **Commission to Build a Healthier America** recently released its recommendations titled "Overcoming Obstacles to Health." You can access the full report or its executive summary [here](#).
- **The Community Guide to Preventive Services** summarizes what is known about the effectiveness, economic efficiency, and feasibility of interventions to promote community health and prevent disease. The Task Force on Community Preventive Services makes recommendations for the use of various interventions based on the evidence gathered in rigorous scientific reviews of published studies. They have made their findings available at their [web site](#), grouped by topic.
- **Policy Link** is a national research and action institute advancing economic and social equity. Much of their work supports community-based efforts to improve conditions that influence health. One excellent resource they've published is [Why Place Matters: Building a Movement for Healthy Communities](#), which provides specific examples of such initiatives. They've also published strategies to address specific determinants of health, [such as access to healthy foods](#), and the [built environment](#).
- **The Prevention Institute's** report titled "[Strengthening Communities: A Prevention Framework for Eliminating Health Disparities](#)" demonstrates how addressing specific community factors can create a healthier and more equitable society.
- The World Health Organization has published "[The Social Determinants of Health: The Solid Facts](#)," edited by **Michael Marmot and Roger Wilkinson**, which summarizes the research about how different factors influence population health.
- **The Institute of Medicine** – In 2001, the IOM published "Health and Behavior: The Interplay of Biological, Psychological and Societal Influences," which examined the complex ways that the social environment affects the health status of communities. You can read a summary of this report at <http://www.nap.edu/catalog/9838.html>. Another key IOM report on this subject was "Promoting Health: Intervention Strategies from Social and Behavioral Research," which can be found at <http://www.iom.edu/CMS/3793/5551.aspx>.