

2023 NUTRITION & HEALTHY LIFESTYLES INITIATIVE
REQUEST FOR PROPOSALS

MICHIGAN HEALTH
ENDOWMENT FUND

Grant Timeline	
March 2, 2023	Grant portal opened for applicants
March 23, 2023	Concept papers due by email at 5:00 p.m. (strongly encouraged)
May 4, 2023	Application due by 5:00 p.m.
August 2, 2023	Awards announced
September 1, 2023	Earliest start date

OFFICE HOURS

We are excited to offer opportunities for applicants to speak with and ask questions of a member of the Nutrition & Healthy Lifestyles program team prior to submitting a concept paper. Office hour Zoom calls will be fifteen-minute conversations to answer grant cycle-related questions. This is not an opportunity to pitch concepts and should not replace the submission of a concept paper. Participation in office hours will not impact our assessment of a proposal.

Please [register here](#) to schedule a call with a member of the team.

A. PROGRAM OVERVIEW

MISSION AND STRATEGY

The mission of the Health Fund is to improve the health of Michigan residents, with special emphasis on the health and wellness of children and seniors, while reducing the cost of healthcare. The 2023 Nutrition & Healthy Lifestyles Initiative is the product of an ongoing evolution to address critical nutrition and lifestyle challenges that negatively impact Michigan children and older adults.

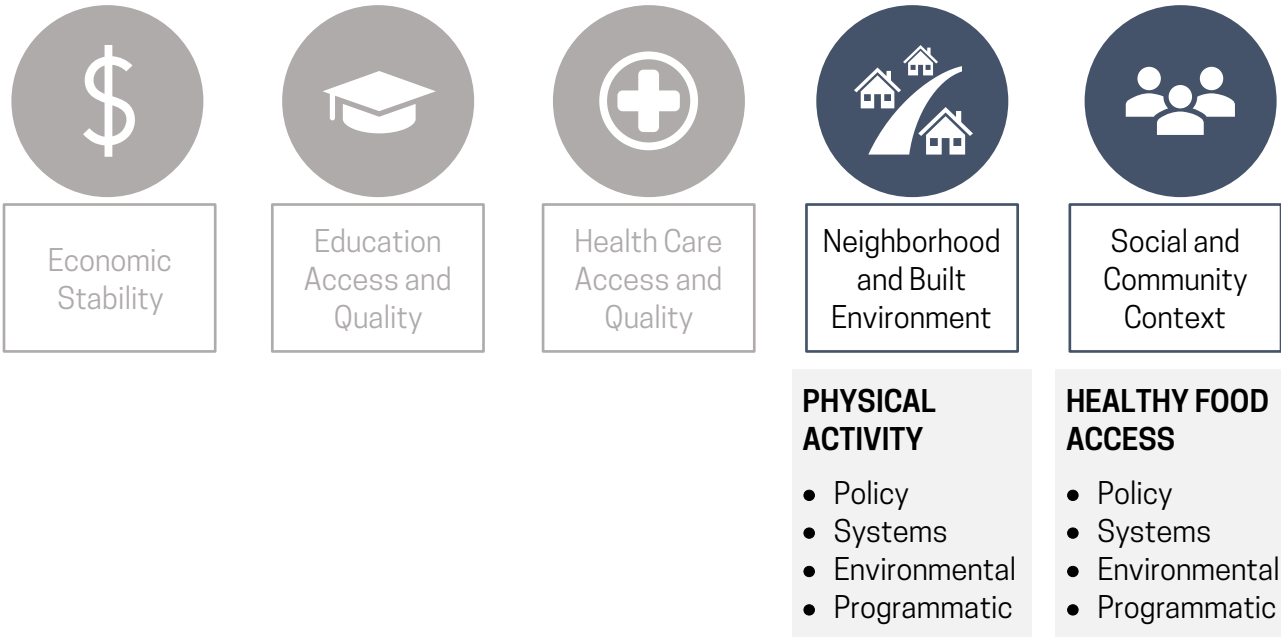
Michigan is the country's second most agriculturally diverse economy (Michigan Agricultural Council, 2017). At the same time, 1 in 9 Michiganders is food insecure. For children in Michigan, that figure is 1 in 7. (Feeding America, 2020). In the area of physical activity, only 23% of Michiganders under 17 are physically active for at least 60 minutes every day (America's Health Rankings, 2022). Moreover, racial and ethnic minorities, individuals with lower incomes, and other marginalized communities are often disproportionately affected by the lack of access to health-promoting resources, leaving too many already disadvantaged children and older adults even further behind.

The Nutrition & Healthy Lifestyles grant program continues to adapt our grantmaking strategies based on evaluative efforts from previous grant rounds, new learnings, and counsel from subject matter experts. We are committed to funding projects that align with Health Fund goals, inform effective policy, strengthen systems, and amplify the power of communities to address their health priorities.

Through our previous work, we have learned that we can best address health disparities and food insecurity by funding innovative program interventions with potential to achieve sustainable, long-term results or influence larger systemic changes.

The Nutrition & Healthy Lifestyles team casts healthy food access and lack of physical activity as social determinants of health based on the [Healthy People 2030](#) framework, alongside healthcare access, education and economic stability. With this position established, our team has developed a three-pronged strategy to begin to address two of the framework’s five social determinants that impact health, as described below:

SOCIAL DETERMINANTS OF HEALTH FRAMEWORK



THREE-PRONGED STRATEGY

<p>1 Strengthen community capacity</p> <ul style="list-style-type: none"> • Support food policy councils • Support state and school-community coalitions to increase healthy food access and physical activity opportunities 	<p>2 Inform policy through analysis, collaboration and education</p> <ul style="list-style-type: none"> • Support policy education • Develop and share reliable data 	<p>3 Spark innovation and build sustainability</p> <ul style="list-style-type: none"> • Replicate interventions that effectively engage those most affected by lack of healthy food access and physical activity opportunities
---	---	--

ON BUILT ENVIRONMENT

Incorporating built environments within our three-pronged strategy builds a better case for sustainability and long-term impact. As an example, supporting the community engagement component of a region or a community's master plan ensures that health-related factors such as safe walking paths, parks, and recreational areas are integrated into the plan.

Ideally, Health Fund dollars will create a permanent impact on residents' access to physical activity. Safe and walkable communities are associated with a lower prevalence of obesity and lower cardiovascular disease risk (Kowaleski et al., 2017; Howell et al., 2019).

Learn more about our built environment work and examples of projects we've funded previously [by reading our recent blog post](#).

HIGHLY RECOMMENDED PROPOSALS

BUILD AND STRENGTHEN COMMUNITY CAPACITY

The Nutrition & Healthy Lifestyles program will support improving or creating food policy councils to promote healthy food policies in the state and local communities. We also will support state and school-community coalitions to improve food systems and the built environment.

INFORM POLICY THROUGH ANALYSIS, COLLABORATION, AND EDUCATION

We intend to support efforts with outcomes that lead to creation or promotion of policies expanding access to a healthier built environment. This strategy also involves developing and sharing reliable data that support statewide and local actions to address food insecurity and lack of physical activity.

SPARK INNOVATION PRACTICES AND BUILD THE CASE FOR SUSTAINABILITY

We are also seeking efforts that replicate or scale interventions that effectively engage those most affected by lack of healthy food access and physical activity opportunities, leveraging existing resources to promote sustainability.

PLEASE NOTE

While the Health Fund has been one of the biggest and most ardent supporters of produce prescription programs in Michigan, at this time the Nutrition & Healthy Lifestyle team highly encourages proposals that advance the collective sustainability of all prescription programs through policy and systems approaches, rather than replication of new individual programs.

ADDRESSING DISPARITIES AND PROMOTING HEALTH EQUITY

Across all strategic priority areas, the Health Fund seeks proposals that address disparities and promote health equity. What does that look like? Equitable programs:

1. Benefit or increase access for populations most affected by a health issue.
2. Remove barriers to health.
3. Empower communities.
4. Engage community leaders and members in decision-making.

KEY DEFINITIONS

Health Disparities

Differences in the incidence, prevalence, mortality, and burden of diseases, and other adverse health conditions that exist among specific population groups in the United States. (National Institutes of Health, 2002)

Health Equity

Achieved when every person has the opportunity to "attain his or her full health potential" and no one is "disadvantaged from achieving this potential because of social position or other socially determined circumstances." (Centers for Disease Control and Prevention, 2022)

Community Empowerment

Achieved when marginalized or oppressed individuals and groups gain greater control over their lives and environment, acquire valued resources and basic rights, achieve important life goals, and reduce societal marginalization. (Community Engagement Key Function Committee Task Force, 2011)

Systems Change

Transforming and redesigning the practices and structures within organizations, institutions, or networks to promote better health outcomes. Systems change addresses problems on a fundamental level and often works hand-in-hand with policy change. (Community Commons, 2022)

MEASURABLE HEALTH OUTCOMES

To be considered for funding, all proposals must have evaluation plans including measurable health outcomes, with the understanding that all health outcomes may not be achieved within the grant period. While some outcomes are specific to your program or project, the Health Fund strongly encourages applicants to use indicators that can speak to the effectiveness of the interventions as it relates to systemic, behavioral, or biological changes. These indicators include:

- Physical activity minutes
- Impacts of physical activity interventions on the total health of children and older adults
- Fruit and vegetable consumption
- Behavioral change
- Body mass index measurements pre-and post-intervention in clinical settings
- Improvements in chronic disease indicators (blood pressure, A1C, etc.)

Some projects will focus on structural changes that facilitate positive behavioral and biological change. In this case, a detailed qualitative evaluation should speak to the system impact of the grant award on children and older adults.

All proposals are required to submit a document outlining a proposed project evaluation approach. This document should not exceed three pages in length. This evaluation approach could be a logic model, theory of change, or another format. The document should describe the relationship between project activities, outputs, short- and long-term outcomes, and overall impact(s). Evaluation templates are provided [here](#).

The Health Fund is also interested in initiatives that may reduce the cost of healthcare. If applicable, applicants will be asked to explain if the initiative leads to any potential or actual healthcare cost savings.

REVIEW CRITERIA

The Health Fund intends to solicit innovative proposals that align with the priorities of the organization and the needs of Michigan communities. Proposals are evaluated holistically based on the following criteria below. We understand that some submissions may not be as robust in some of these elements. In this case, we encourage applicants to illustrate their intent and concrete action steps to address areas where detail may be currently lacking during the course of the grant.

1. **Strategic alignment.** The project aligns with the Health Fund’s mission, strategies, and goals and focuses on improving the health of Michigan children and older adults.
2. **Long-term impact.** The project has the potential to achieve significant long-term impacts by implementing effective models or supporting needed innovation.
3. **Clear outcomes.** The project has clear outcomes and the potential to have a measurable impact on improving health.
4. **Collaboration.** The project demonstrates a high degree of collaboration.
5. **Health equity.** Equitable programs benefit or increase access for populations most affected by a health issue, remove barriers to health, empower communities, and engage community leaders in decision-making.
 - a. *Access to care.* The project increases access to resources for those most affected by the health issue and removes barriers to health.
 - b. *Empowering communities.* The project empowers communities to support their ongoing health needs or challenges, and it engages with community leaders to share in decision-making.
6. **Sustainability.** The project can be sustainable after the end of the grant period.
7. **Replication.** The project can be replicated in other settings, including opportunities to learn, disseminate knowledge, and inform public policy.

B. APPLICATION PROCESS

CONCEPT PAPERS (DUE MARCH 23, 2023)

We strongly encourage concept paper submission (not to exceed two pages) for review and feedback by the Health Fund prior to submission of a full proposal. While not required, this may result in a stronger, more competitive proposal that clearly aligns with Health Fund goals.

Concept papers should include the following sections, in this order:

1. Project title
2. Organization name
3. Description of health problem, with a focus on groups and localities that experience disproportionate impact
4. Description of proposed intervention, including measurable outcomes
5. Key collaborative partners and their roles
6. Sustainability plan
7. Description of potential for replication, sharing of knowledge, or to inform policy
8. Estimated budget (Note: a detailed budget breakdown is not required. However, please include an overview of what the budget would cover)

Send concept papers to grants@mihealthfund.org **before 5:00 p.m. on March 23, 2023**. We will not review concept papers submitted after the deadline.

APPLICATIONS (DUE MAY 4, 2023)

Applications must be submitted electronically using Fluxx, the Health Fund's [grants portal](#). **We strongly recommend using Google Chrome to access Fluxx.** We ask applicants to keep the total narrative within the equivalent of 10 standard pages. The workplan, budget, budget narrative, letters of support, and organizational documentation are excluded from this page limit.

Please note: You will need an account to create and submit an application. If you have not registered with our Fluxx portal before, you can request an account on the grants portal home page. It may take 48 hours for your account to be approved. Once approved you will receive login credentials via email.

Full proposals must be received by 5:00 p.m. on May 4, 2023. Proposals submitted after the deadline will not be considered.

The Health Fund reserves the right to confidentially share proposals with external reviewers and other foundation partners. Applicants may be asked to provide follow-up information to address reviewer questions. This request will be sent to the primary contact on the application in mid-May 2023, and questions will be available in Fluxx. Responses are due in Fluxx within two weeks of the notification. If an organization does not receive questions, it is not an indication of our funding recommendation.

If a proposal is not recommended for funding, we will notify the primary contact on the application in July. We will offer opportunities to discuss your proposal and why it was not recommended. The Health Fund Board of Directors has sole responsibility for all grant decisions.

BUDGET CONSIDERATIONS

The Health Fund anticipates awarding grants between \$50,000 to \$500,000. We welcome proposals toward the smaller end of that range. Applicants may apply for a one or two-year grant, but the total request is limited to no more than \$500,000 for the entire grant period. Please be sure to clearly identify your funding requests per year in your proposal, along with any other associated program revenue.

An organization may apply for a grant no larger than 20% of its annual operating budget. Fiduciary, or financial sponsor, agreements may be considered for small organizations to meet the budgetary or eligibility requirements listed below. We welcome ideas to increase access to health from all types of eligible organizations, regardless of size or funding request.

Applicant organizations with operating budgets less than \$10 million may request indirect costs up to 30% of the total grant budget. Applicant organizations with operating budgets at or above \$10 million may request indirect costs up to 20% of the total grant budget. The percentage is based on the primary applicant's operating budget size. We expect the indirect cost line item to include indirect costs for all project partners.

C. ELIGIBILITY

Nonprofits, local units of government, and the State of Michigan are eligible for grants. Applicants must:

- Be recognized by the Internal Revenue Service as a nonprofit organization;
- Serve Michigan residents;
- Have a current certified financial audit or independently reviewed financial statements; and
- Have at least 1 FTE.

EXCLUDED FROM FUNDING CONSIDERATION

- X Organizations that discriminate because of age, race, ethnic origin, religion, sexual orientation, disability, or gender
- X Requests to increase COVID-19 testing or vaccination capacity
- X Requests that are exclusively for the purchase of personal protective equipment, medications or medical devices
- X Litigation
- X Lobbying activities
- X Tuition costs and related fees
- X Existing and ongoing program operations and staffing, including staffing models that do not leverage available insurance reimbursement avenues
- X Clinical or academic research
- X Capital projects
- X Electronic medical record software
- X Loans
- X Health-related emergencies*

* The Health Fund might in some situations consider support to address longer-term rebuilding or other needs following emergency situations.

D. HEALTH RESOURCES

The following resources may be useful as you develop your proposal.

- a. [The Built Environment Assessment Tool](#)
- b. [Michigan Food Security Council Final Report](#)
- c. [The ALICE Project](#)
- d. [Kids Count](#)
- e. [Michigan County Health Rankings](#)
- f. [Michigan Food Environment Scan](#)
- g. [Michigan Good Food Charter](#)
- i. [Michigan Model for Health](#)
- j. [Project Healthy Schools](#)
- j. [Self Sufficiency Standard for Michigan](#)
- k. [What Is Culinary Medicine and What Does It Do?](#)
- l. [Whole School, Whole Child, Whole Community \(WSCC\) Model](#)
- m. [CDC Healthy Schools](#)
- n. [CDC Adolescent and School Health](#)
- o. [CDC Guide to Strategies to Increase Physical Activity in Communities](#)
- p. [Advancing Health Equity and Preventing Chronic Disease](#)

For more information on our grantmaking, view our [Frequently Asked Questions](#) page. If you have further questions, please email grants@mihealthfund.org.