

Friday, June 23, 2017

**To:** Idaho Delegates, Oregon Delegates, Washington Delegates, Tribal Chairs and Tribal Health Directors

Greetings! The NPAIHB - Funding Opportunity is provided on the basis that when there is pertinent announces that we are made aware of, received and researched for as part of our commitment to the health and well-being of our tribal members it is posted here for you. Every Friday, new posts will be available (unless there is nothing "New" Funding Opportunity Information (is provided in this color code).

If you have a specific targeted goal, or urgent community needs and find yourself not knowing where to start looking our assistance is available anytime, and we would be very excited to assist you. In addition, at the end of this announcement several funding organizations do not have deadlines and <u>do</u> accept proposals all year round. Thank you for your time, please do not hesitate to contact me:

Tara Fox, Grant Specialist E-mail: <u>tfox@npaihb.org</u> Office Phone: (503) 416-3274



Native Youth Initiative for Leadership, Empowerment, and Development (I-LEAD) - Department of Health and Human Services/Administration for Children and Families - ANA (NPAIHB HAS AN "INTENT TO APPLY" REQUEST SENT OUT TO THE TRIBES - IF YOU WOULD LIKE TO PARTNER WITH US PLEASE LET US KNOW OR IF YOU ARE APPLYING WE NEED TO KNOW- THANK YOU!)

**DEADLINE:** Jul 19, 2017 - Electronically submitted applications must be submitted no later than 11:59 p.m., ET, on the listed application due date.

**AMOUNT:** \$300,000

**DESCRIPTION:** The Administration for Native Americans (ANA), within the Administration for Children and Families (ACF), announces the availability of Fiscal Year (FY) 2017 funds for the Native Youth I-LEAD. This program will emphasize a comprehensive, culturallyappropriate approach to ensure that all young Native people can thrive and reach their full potential by fostering Native youth resilience, capacity building, and leadership. Native Youth I-LEAD will specifically focus on implementation of community programs that promote Native youth resiliency and foster protective factors such as connections with Native languages and Elders, positive peer groups, culturally-responsive parenting resources, models of safe sanctuary, and reconnection with traditional healing. Projects will also promote Native youth leadership development through the establishment of local models to instill confidence in Native youth of their value and potential, preparation of older youth to be role models for younger peers, and activities that foster leadership and skills-building. In addition, it is intended that Native youth must be actively involved during the planning and implementation phases of the projects to ensure that they are responsive to the needs of Native youth in the communities to be served and to ensure that youth remain engaged throughout the project period.

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WEBSITE/LINK: <a href="https://www.grants.gov/web/grants/view-opportunity.html?oppId=290439">https://www.grants.gov/web/grants/view-opportunity.html?oppId=290439</a>

Multidisciplinary Studies of HIV/AIDS and Aging (R01)- Department of Health and Human Services/National Institutes of Health

**DEADLINE:** October 05, 2017

**AMOUNT:** (See announcement.)

**DESCRIPTION:** This FOA encourages applications at the intersection of HIV and aging by addressing two overarching objectives: 1) to improve understanding of biological, clinical, and socio-behavioral aspects of aging through the lens of HIV infection and its treatment; and 2) to improve approaches for testing, prevention, and treatment of HIV infection, and management of HIV-related comorbidities, co-infections, and complications in different populations and cultural settings by applying our current understanding of aging science. Applications appropriate to this FOA should be consistent with the scientific priorities outlined by the NIH Office of AIDS Research (OAR) as described in NOT-OD-15-137.

WEBSITE/LINK: <a href="https://grants.nih.gov/grants/guide/pa-files/PAR-17-321.html">https://grants.nih.gov/grants/guide/pa-files/PAR-17-321.html</a>

NEI Center Core Grant for Vision Research (P30) - Department of Health and Human Services/National Institutes of Health

**DEADLINE:** September 25, 2017

**AMOUNT:** (See announcement.)

**DESCRIPTION:** The NEI Center Core Grant combines three or more Resource and/or Service Cores for a group of R01 investigators to enhance their research, consolidate resources, avoid duplication of efforts, and/or contribute to cost effectiveness by providing a service with lower costs or higher quality than could be attempted for independent projects by several individual Program Directors/Principal Investigators (PD(s)/PI(s)). Shared resources and facilities that are accessible to a group of independently funded investigators lead to greater productivity for the separate projects and can provide instrumentation and facilities that are too costly to be maintained by an individual investigator. The design and purpose of each Center Core may vary in how it serves its users. This program is designed to enhance an institution's environment and capability to conduct vision research and to facilitate collaborative studies of the visual system and its disorders.

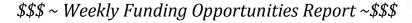
WEBSITE/LINK: https://grants.nih.gov/grants/guide/pa-files/PAR-17-322.html

**Integration of Individual Residential Histories into Cancer Research (R01)** 

**DEADLINE:** October 05, 2017

**AMOUNT:** (See announcement.)

**DESCRIPTION:** The purpose of this Funding Opportunity Announcement (FOA) is to support substantive investigation of the role of individual residential histories in cancer



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etiology and outcomes, and to encourage the development of complex analytical strategies in support of substantive investigation.

WEBSITE/LINK: <a href="https://grants.nih.gov/grants/guide/pa-files/PA-17-298.html">https://grants.nih.gov/grants/guide/pa-files/PA-17-298.html</a>

Basic Center Program - Department of Health and Human Services/Administration for Children & Families - ACYF/FYSB

**DEADLINE:** Jul 14, 2017

**AMOUNT:** \$200,000

**DESCRIPTION:** The Administration for Children and Families (ACF), Administration on Children, Youth and Families (ACYF), Family and Youth Services Bureau (FYSB) support organizations and communities that work every day to put an end to youth homelessness, adolescent pregnancy, and domestic violence. FYSB's Runaway and Homeless Youth (RHY) program is accepting applications for the Basic Center Program (BCP). The purpose of the BCP is to provide temporary shelter and counseling services to youth who have left home without permission of their parents or guardians, have been forced to leave home, or other homeless youth who might otherwise end up in the law enforcement or in the child welfare, mental health, or juvenile justice systems.

WEBSITE/LINK: <a href="https://www.grants.gov/web/grants/view-opportunity.html?oppId=290154">https://www.grants.gov/web/grants/view-opportunity.html?oppId=290154</a>

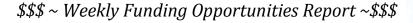
Collaborative Improvement and Innovation Network on Infant Mortality (IM CollN) - Department of Health and Human Services/Health Resources and Services Administration

**DEADLINE:** Jul 17, 2017

**AMOUNT:** \$2,000,000 x 4 awards

DESCRIPTION: The infant mortality rate (IMR) is a widely used indicator of the nation's health. In 2012, the United States ranked 25th among 29 industrialized nations, with an overall IMR of 5.98/1,000 live births.1 Most notable, the IMR for infants born to non-Hispanic black mothers was 11.19/1,000, more than double the non-Hispanic white IMR of 5.04/1,000.2 State public health departments lead infant mortality reduction efforts within their states with support of the Title V Maternal and Child Health Services Block Grant Program.3 At the local level, Healthy Start grants are provided to communities with high annual rates of infant mortality (i.e., at least 1½ times the U.S. national average) and high rates for other adverse perinatal outcomes (e.g., low birthweight, preterm birth, maternal morbidity and mortality) in order to address the needs of high-risk women and their families before, during, and after pregnancy. To advance the mission of Healthy Start and contribute to state infant mortality reduction efforts, this announcement solicits applications for the Collaborative Improvement and Innovation Network on Infant Mortality (IM CoIIN).

WEBSITE/LINK: <a href="https://www.grants.gov/web/grants/view-opportunity.html?oppId=290904">https://www.grants.gov/web/grants/view-opportunity.html?oppId=290904</a>



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Innovations in Nutrition Programs and Services -Department of Health and Human Services/Administration for Community Living

**DEADLINE:** Aug 01, 2017

**AMOUNT:** \$250,000

**DESCRIPTION:** This funding opportunity is for competitive grants to be awarded under the OAA Title IV authority to increase the evidenced based knowledge base of nutrition providers, drive improved health outcomes for program recipients by promoting higher service quality, and increase program efficiency through innovative nutrition service delivery models. Funding will support innovative and promising practices that move the aging network towards evidenced based practices that enhance the quality, effectiveness of nutrition services programs or outcomes within the aging services network. Innovation can include service products that appeal to caregivers (such as web-based ordering systems and carryout food products), increased involvement of volunteers (such as retired chefs), consideration of eating habits and choice (such as variable meal times, salad bars, or more fresh fruits and vegetables), new service models (testing variations and hybrid strategies) and other innovations to better serve a generation of consumers whose needs and preferences are different. Innovation and promising practices may include the testing and publishing of positive outcomes in which nutrition programs provide a meaningful role in support of the health and long-term care of older individuals. Outcomes should focus on methods to improve collaboration with local health care entities, decrease health care costs for a specific population or decrease the incidence of the need for institutionalization among older adults. Through this program, funds may be used to help develop and test additional models or to replicate models that have already been tested in other community-based settings.

WEBSITE/LINK: https://www.acl.gov/grants/open-opportunities

**Elder Justice Innovation Grants - Department of Health and Human Services/Administration for Community Living** 

**DEADLINE:** : Aug 14, 2017

**AMOUNT:** \$500,000

**DESCRIPTION:** The purpose is to support the development and advancement of new and emerging issues related to elder justice. Funded projects will contribute to the improvement of the field of elder abuse prevention and intervention at large, such as by developing materials, programs, etc. that can be widely disseminated and/or replicated, or by establishing and/or contributing to the evidence-base of knowledge.

WEBSITE/LINK: <a href="https://www.acl.gov/grants/open-opportunities">https://www.grants.gov/web/grants/view-opportunity.html?oppId=294104</a>

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U.S. Tobacco Control Policies to Reduce Health Disparities (R01) -Department of Health and Human Services/National Institutes of Health

**DEADLINE:** October 11, 2017

**AMOUNT:** (See announcement.)

**DESCRIPTION:** The purpose of this Funding Opportunity Announcement (FOA) is to support observational or intervention research focused on reducing health disparities in tobacco use in the United States. Specifically, this FOA is intended to stimulate scientific inquiry focused on innovative tobacco control policies. Applicants may propose projects in which the primary outcome of interest is on reducing tobacco use health disparities in vulnerable populations by utilizing tobacco prevention and control strategies. The long-term goal of this FOA is to reduce health disparities in health outcomes thereby reducing the excess disease burden of tobacco use within these groups. Applicants submitting applications related to health economics are encouraged to consult NOT-OD-16-025 to ensure that applications align with NIH mission priorities in health economics research.

WEBSITE/LINK: <a href="https://grants.nih.gov/grants/guide/pa-files/PAR-17-217.html">https://grants.nih.gov/grants/guide/pa-files/PAR-17-217.html</a>

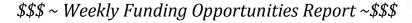
Pilot Studies to Test the Initiation of a Mental Health Family Navigator to Promote Early Access, Engagement and Coordination of Needed Mental Health Services for Children and Adolescents (R34) -Department of Health and Human Services/National Institutes of Health

**DEADLINE:** October 5, 2017

**AMOUNT:** (See Announcement.)

**DESCRIPTION:** The purpose of this Funding Opportunity Announcement (FOA) is to encourage research applications to develop and pilot test the effectiveness and implementation of family navigator models designed to promote early access, engagement and coordination of mental health treatment and services for children and adolescents who are experiencing early symptoms of mental health problems. For the purposes of this FOA, NIMH defines a family navigator model as a health care professional or paraprofessional whose role is to deploy a set of strategies designed to rapidly engage youth and families in needed treatment and services, work closely with the family and other involved treatment and service providers to optimize care and monitor the trajectory of mental health symptoms and outcomes over time. Applicants are encouraged to develop and pilot test the navigator model's ability to promote early access, engagement and coordination of mental health treatment and services for children and adolescents as soon as symptoms are detected. Of interest are navigator models that coordinate needed care strategies, determine the "personalized match" to the level of needed service amount, frequency and intensity, and harness novel technologies to track and monitor the trajectory of clinical, functional and behavioral progress toward achieving intended services outcomes.

WEBSITE/LINK: https://grants.nih.gov/grants/guide/pa-files/PAR-17-266.html



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Socioeconomic Disparities in Health and Mortality at Older Ages (R01)-Department of Health and Human Services/National Institutes of Health

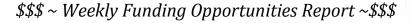
**DEADLINE:** Letter of Intent Due Date(s) - September 20, 2017; Application Due Date(s) - October 20, 2017, by 5:00 PM local time of applicant organization. All types of non-AIDS applications allowed for this funding opportunity announcement are due on these dates.

**AMOUNT:** (See announcement.)

**DESCRIPTION:** Life expectancy and health in later life have both improved substantially across the 20th century in the United States. However, these gains in the quality and quantity of life have not been equally distributed. Inequalities in life expectancy and health are strongly associated with differences in income, education, and geographic location (i.e. region, state, county) in the United States. Higher income, more education, and living in particular areas are associated with longer and healthier life.

In recent decades, however, there have emerged new and largely unexplained trends in the size of these disparities: the gaps in life expectancy and health outcomes at middle and older ages by income, education, and geographic location have been increasing. For example, between the mid-1980s and the mid-2000s, the education-mortality gradient among non-Hispanic white and black men became steeper, largely because mortality reductions were concentrated among the most educated. Further, some groups have actually experienced declines in life expectancy. Between 1990 and 2000, life expectancy (conditional on survival to age 25) increased by one year among white, non-Hispanic women with 13 years of education or more, but decreased among their counterparts with 12 or fewer years of education. Another recent study showed that between 2001 and 2014, life expectancy increased by 2.34 years for men and 2.91 years for women in the top five percent of the income distribution; at the same time, life expectancy increased only by 0.32 years for men and 0.04 years for women in the bottom five percent of the income distribution. For both education and income, the relationship with mortality takes the form of an inverse relationship, or gradient—additional earnings and years of education continue to be associated with decreased mortality throughout the distribution—even at the very top. In addition, studies show that geographic differences in life expectancy (between regions, states, and/or counties) have increased over time. For example, life expectancy for men at age 50 was about 20 years in both California and Kentucky in 1965, but by 2004, California men could expect to live nearly 30 additional years, while Kentucky men could expect to live only about 26 years more. Finally, some studies show that the associations between income and education and mortality are complicated by additional factors such as gender, race, age, and geography. Recent work, for example, finds that life expectancy for those in the bottom income quartile varies by 4.5 years, depending where one lives. It is worse to be poor in some places than in others.

We currently lack good answers to a number of critical questions regarding why inequalities in mortality and other health outcomes at older ages are growing in the United States. Why have socioeconomic health gradients grown more for some groups than others (e.g. age, gender, race/ethnicity, geographic area)? To what extent—and when—are these associations between socioeconomic factors and aspects of health causal, as opposed to reflecting shifts in the composition of disadvantaged groups and selective forces over time? To what extent are these trends the product of age, period, and/or cohort effects? What



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role do behavioral, social, psychological, environmental, policy, and other factors from across the entire lifespan play in explaining these trends?

#### Research Objectives

The purpose of this funding opportunity is to support studies that identify mechanisms, explanations, and modifiable risk factors underlying recent trends of growing inequalities in morbidity and mortality by income, education, and geographic location at older ages in the United States. Applicants are encouraged to consider a variety of health outcomes in order to explain the processes generating these trends. Applicants are strongly encouraged to present well-developed conceptual models.

Examples of analytic approaches that fall within the scope of this FOA include (but are not limited to) those that:

Identify the mechanisms that explain growing socioeconomic and geographic inequalities in health at older ages, explain their role in racial disparities, and detect modifiable risk factors

Ascertain the extent to which these trends are driven by age, period, and cohort-related factors

Consider the role of education, income, and geographic region as causal factors versus alternative explanations such as differential selection over time or shifting composition of groups

Leverage longitudinal data, ideally from childhood through old age

Use a diverse set of analytic methods (e.g. life-cycle, comparative, cohort, multi-level)

Consider how institutional and cultural contexts (including their timing within the life course of individuals) influence health disparities

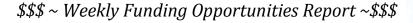
Examine a wide range of physical, mental, and functional health outcomes, in addition to mortality

Capitalize on NIA-funded data sources with life history and geographic information (e.g., English Longitudinal Study of Ageing; Health and Retirement Study; Midlife in the United States; National Longitudinal Mortality Study; Panel Study of Income Dynamics; Survey of Health, Ageing, and Retirement in Europe)

Examples of data improvements that fall within the scope of this FOA include (but are not limited to) those that:

Enhance existing data resources to improve data availability on a variety of topics (e.g., early life development, exposures to inequality prior to midlife, comprehensive stress measurements, employer and work issues, and minority groups) to enable examination of within-group heterogeneity

Enhance existing clinical studies to add complementary measures in areas such as social, emotional, and psychological domains



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**Characteristics of Responsive Applications** 

- 1. Life course approaches are encouraged, but applications proposing analysis of data solely from childhood or young adulthood are not responsive to this FOA.
- 2. Applications that document descriptive trends without assessing potential mechanisms or explanations will not be considered responsive.
- 3. Applications proposing projects that use only animal models are not responsive to this FOA.

WEBSITE/LINK: https://grants.nih.gov/grants/guide/rfa-files/RFA-AG-18-011.html

First Responders – Comprehensive Addiction and Recovery Act Cooperative Agreement (Short Title: FR-CARA) - Department of Health and Human Services/Substance Abuse and Mental Health Services Adminis

**DEADLINE:** Monday, July 31, 2017

**AMOUNT:** Up to \$250,000 – \$800 000 per year x 4 YEARS

**DESCRIPTION:** The Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Substance Abuse Prevention (CSAP), is accepting applications for fiscal year (FY) 2017 First Responders-Comprehensive Addiction and Recovery Act (FR-CARA) Cooperative Agreements. SAMHSA will award FR-CARA funds to states, tribes and tribal organizations, and local governmental entities. Local governmental entities include, but are not limited to, municipal corporations, counties, cities, boroughs, incorporated towns, and townships. The purpose of this program is to allow first responders and members of other key community sectors to administer a drug or device approved or cleared under the Federal Food, Drug, and Cosmetic Act for emergency treatment of known or suspected opioid overdose. Grantees will train and provide resources to first responders and members of other key community sectors at the state, tribal, and local governmental levels on carrying and administering a drug or device approved or cleared under the Federal Food, Drug, and Cosmetic Act for emergency treatment of known or suspected opioid overdose. Grantees will also establish processes, protocols, and mechanisms for referral to appropriate treatment and recovery communities.

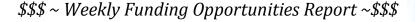
WEBSITE/LINK: <a href="https://www.samhsa.gov/grants/grant-announcements/sp-17-005">https://www.samhsa.gov/grants/grant-announcements/sp-17-005</a>

Curing Hepatitis C among People of Color Living with HIV - Department of Health and Human Services/Health Resources and Services Administration

**DEADLINE:** Jul 28, 2017

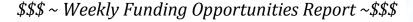
**AMOUNT:** \$2,500,000

**DESCRIPTION:** This announcement solicits applications for the Secretary's Minority AIDS Initiative Fund (SMAIF) fiscal year (FY) 2017 Curing Hepatitis C among People of Color Living with HIV program. This multi-pronged initiative will support up to two (2) recipients to improve the prevention, care, treatment, and cure of hepatitis C (HCV) in areas affected by HIV/HCV coinfection among low-income, underinsured, or uninsured racial and ethnic minority populations. Components of the initiative will include:



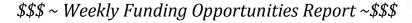
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Expansion of HCV prevention (including education), testing, care (including preventive health care), and treatment capacity among RWHAP-funded clinics, HRSA and Medicarecertified Federally Qualified Health Centers (FQHCs),[1] and SAMHSA-funded communitybased substance use disorder (SUD) and behavioral health treatment providers that predominantly serve people of color living with both HIV and HCV; Improved coordination of linkage to and retention in care and treatment for people who are co-infected with HIV/HCV; Improved coordination with SAMHSA-funded SUD treatment providers to expand the delivery of behavioral health and substance use treatment support to achieve treatment completion and to prevent HCV infection and re-infection; and Enhancement of health department surveillance systems to increase their capacity to monitor acute and chronic coinfections of HIV and HCV in areas affected by HIV/HCV coinfection among lowincome, underinsured, or uninsured racial and ethnic minority populations, and to enable an HCV Data to Care capacity.[2] You must provide evidence of HIV/HCV coinfection among low-income, underinsured, or uninsured racial/ethnic minority populations and demonstrate your ability to access people living with HIV (PLWH) who are also living with or at risk for acquiring HCV infection. Populations of interest include racial and ethnic minorities living with HIV who have demonstrated a high prevalence of HCV, including, but not limited to, people who use drugs (PWUD), especially people who inject drugs (PWID); men who have sex with men (MSM); high-risk heterosexuals; and transgender persons. During the first year of the initiative, recipients will develop a plan that, based on local needs, will coordinate the implementation of multiple strategies to increase the number of people living with HIV and HCV in their service area who are screened, diagnosed, linked to care, treated, and cured of HCV. This project planning and development phase will be followed by two (2) years of implementation. Recipients will be expected to partner with and provide annual subawards to clinical sites seeking to improve their capacity to treat HIV/HCV coinfection among low-income, underinsured, or uninsured racial/ethnic minority populations. Applicants should propose how they will work with subrecipients to increase capacity in the following areas: Provision of HIV/HCV coinfection care and treatment according to the HHS guidelines; Provision of HIV/HCV medication adherence support; Performance of necessary lab testing, referrals for liver biopsy and other staging procedures; and Provision of prevention education about HCV infection and re-infection. Subrecipient clinics will be expected to conduct targeted outreach to include low-income, underinsured, or uninsured out of care (OOC) people living with both HIV and HCV; contact tracing; and development of their own HCV/HIV multidisciplinary teams. Strategies for collaboration between recipients and clinics may include case conferences, sharing OOC lists, and shared training events. Please note that you may not use funds for the purchase of medications to treat HCV. Therefore, participating providers must have adequate access to direct acting antivirals (DAA) medications through other existing funding mechanisms and/or payor sources. Recipients will also be expected to partner (which may include providing subawards) with SUD and mental health treatment provider(s) in the service communities of each of the clinical sites, if these services are not available at the clinical sites. You should propose how you will accomplish the following activities: Formation of partnerships (which may include providing subawards) with local SUD and mental health treatment provider(s) to build their capacity to provide integrated care and to enable bidirectional client referrals for appropriate HIV/HCV and SUD treatment; Linkage of clients of clinical sites who screen positive for SUDs into SUD treatment, either at the clinical site or at the partnering agency; Linkage of clients in SUD and mental health treatment who test or are identified as living with HIV and HCV and who are out of care to the clinical site for treatment; Provision of interventions by clinical sites working with SUD and mental health treatment providers to clients living with HIV and HCV with SUDs to



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prevent overdose and re-infection (including referrals to syringe services programs, or SSPs); and Provision of referrals to community education programs, including those which address the benefits of access to medication-assisted treatment (MAT) and SSPs. Please note that funds from this initiative may be used by recipients to make subawards to accomplish any or all of the activities outlined above. Partnership agreements and/or subawards with either clinical sites or SUD providers should be established expeditiously in order to accomplish the goals of the project in the time period. Recipients will also be expected to deliver training to HCV care providers at the clinical sites. You should propose how you will accomplish the following activities: Training of providers through the use of a curriculum and provider competencies developed by the AIDS Education Training Center (AETC) National Coordinating Resource Center; Collaboration (which may include subawards) with their Regional AETC; Collaboration (which may include subawards) with their Local Performance Site (LPS), if applicable, and; Support of practice transformation and other HIV/HCV – specific workforce development activities for all entities within the formal partnership of the recipient and all of their subrecipients/subawardees. Please note that recipients will also be expected to partner (which may include subawards) with their state, local, or tribal health department to improve surveillance of HCV coinfection among PLWH in areas of high populations of racial/ethnic minorities, including people of color. Similar to HIV Data to Care efforts, the enhanced surveillance data systems will enable the use of HCV surveillance data to identify HCV-diagnosed PLWH in areas of high populations of racial/ethnic minorities, including people of color, who are not in care, and link them directly to care. Health departments will also play a critical role in facilitating the collection of HCV-related data required by the initiative. Recipients will also be expected to work closely with a technical assistance and evaluation team (funded separately by HRSA/HAB) to demonstrate outcomes and disseminate findings, best practices and lessons learned. Recipients will be required to collect and report data on the extent of knowledge among HIV and HCV coinfected patients regarding HCV treatment; and of health care providers regarding HCV screening and treatment. Applicants who have previously collected these data should indicate such and provide the results. Applicants that have not previously collected these data will be required to conduct rapid assessments using existing instruments previously developed by the evaluation team. With the assistance of the technical assistance and evaluation team, recipients must submit these instruments to their Institutional Review Board (IRB) for review and approval within two months of award. The two knowledge assessments must be completed in the first nine months of year one, and will be used to identify gaps among consumers to be addressed by implementing educational programs; and to address provider training needs in their areas. During the first year of the initiative, recipients will be expected to develop a detailed project implementation plan to enhance their service area's public health infrastructure that will result in increased prevention, screening, care, treatment, and cure of HCV in people living with HIV, targeted to people of color. Subsequently, recipients shall implement their plans to expand their area's capacity to provide HCV screening, care, and treatment to people who are living with HIV and HCV, targeted to people of color. In year three, recipients will also be expected to work collaboratively with the evaluation team in the production of a project monograph and other publication and dissemination activities to document the findings, best practices, and lessons learned from this demonstration project initiative. At the end of the three-year project period, recipients will have implemented effective, comprehensive, area-wide HCV screening, care, and treatment systems leading to demonstrable improvements in HCV care outcomes among people living with HIV and HCV, including people of color. Recipients also will be expected to work with their partners and/or subrecipients to fully integrate their HCV screening, care, and treatment systems



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into their ongoing program efforts, clinical practice, and fiscal and administrative planning for their continuous operation and maintenance beyond the three-year funded project period. [1] See https://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MLN/MLNProducts/downloads/fqhcfactsheet.pdf [2] See https://effectiveinterventions.cdc.gov/en/highimpactprevention/publichealthstrategies/D atatoCare.aspx

WEBSITE/LINK: <a href="https://www.grants.gov/web/grants/view-opportunity.html?oppId=290885">https://www.grants.gov/web/grants/view-opportunity.html?oppId=290885</a>

Tracking Electronic Health Record Adoption, Use, and Related Insights in U.S. Hospitals - Department of Health and Human Services/Office of the National Coordinator

**DEADLINE:** Jul 05, 2017

**AMOUNT:** \$105,000

**DESCRIPTION:** Significant federal investments to accelerate the adoption of EHRs and exchange of clinical data are now in place. It is critical to continue to track the adoption and use of EHRs and related insights to: (1) ascertain the status of adoption and evaluate existing and proposed policy decisions; (2) evaluate the impact of ONC programs and related incentives for meaningful use; and (3) make resources available to ONC and external researchers to assess the effects of health IT adoption and exchange on key aspects of care, such as quality and efficiency. The data generated under this funding opportunity will enable ONC and other researchers to carry out these important activities for inpatient settings.

WEBSITE/LINK: <a href="https://www.grants.gov/web/grants/view-opportunity.html?oppId=294415">https://www.grants.gov/web/grants/view-opportunity.html?oppId=294415</a>

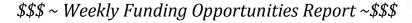
#### **COMMUNITY**

FY 2017 Economic Development Assistance Programs - Application submission and program requirements for EDA's Public Works and Economic Adjustment Assistance programs. Department of Commerce

**DEADLINE:** There are no submission deadlines under this opportunity. Proposals and applications will be accepted on an ongoing basis until the publication of a new EDAP NOFA.

**AMOUNT:** \$3,000,000

**DESCRIPTION:** Under this NOFA, EDA solicits applications from applicants in rural and urban areas to provide investments that support construction, non-construction, technical assistance, and revolving loan fund projects under EDA's Public Works and EAA programs. Grants and cooperative agreements made under these programs are designed to leverage existing regional assets and support the implementation of economic development strategies that advance new ideas and creative approaches to advance economic prosperity in distressed communities, including communities and regions that have been impacted, or can reasonably demonstrate that they will be impacted, by coal mining or coal power plant



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employment loss, or employment loss in the supply chain industries of either. EDA provides strategic investments on a competitive- merit-basis to support economic development, foster job creation, and attract private investment in economically distressed areas of the United States. This EDAP NOFA supersedes the EDAP Federal Funding Opportunity dated December 23, 2016.

WEBSITE/LINK: <a href="https://www.grants.gov/web/grants/view-opportunity.html?oppId=294771">https://www.grants.gov/web/grants/view-opportunity.html?oppId=294771</a>

#### **2017 JUNE**

Agriculture and Food Research Initiative - Childhood Obesity Prevention Challenge Area

**DEADLINE:** Wednesday, June 28, 2017

**AMOUNT:** \$2,500,000

**DESCRIPTION:** This AFRI Challenge Area focuses on the societal challenge to end obesity among children, the number one nutrition-related problem in U.S. Food is an integral part of the process that leads to obesity, and USDA has a unique responsibility for the food system in the United States. The long-term goal of this Challenge Area is to reduce the prevalence of obesity among children and adolescents ages 2–19 years or any subset of this age range. Applications to this Challenge Area will support multi-function Integrated Research, Education, and Extension Projects and Food and Agricultural Science Enhancement (FASE) Grants. See Childhood Obesity Prevention Challenge Area RFA for details.

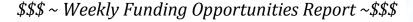
WEBSITE/LINK: https://nifa.usda.gov/sites/default/files/rfa/FY%202017%20AFRI%20Childhood%20Obesity%20Prevention Final.pdf

SMART-2017-4840 - SMART FY 17 Support for Adam Walsh Act Implementation Grant Program Department of Justice

**DEADLINE:** Jun 29, 2017

**AMOUNT: \$400,000** 

**DESCRIPTION:** The Office of Sex Offender Sentencing, Monitoring, Apprehending, Registering, and Tracking (SMART) Support for Adam Walsh Act Implementation Grant Program assists jurisdictions with developing and/or enhancing programs designed to implement the Sex Offender Registration and Notification Act (SORNA). SORNA (42 U.S.C. § 16901, Title I) was enacted to protect the public by establishing a comprehensive national system of standards for the registration and notification of convicted sex offenders. The term jurisdiction is defined in the SORNA national guidelines as any State of the United States, the District of Columbia, the principal U.S. territories and federally-recognized Indian tribes to the extent provided by SORNA section 127. Statutory Authority: This solicitation will be funded by funds made available pursuant to the Adam Walsh Child Protection Act, 42 U.S.C. 16901 et seq.; Pub. L. No. 114-113, 129 Stat. 2242, 2307. Program-Specific InformationThe Support for Adam Walsh Act (AWA) Implementation Grant Program assists jurisdictions with developing and/or enhancing programs designed to



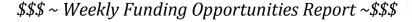
## Friday, June 23, 2017

implement requirements of SORNA. In summary, SORNA requires: (1) all States, the District of Columbia, the principal U.S. territories, and participating federally recognized Indian tribes to maintain a sex offender registry; and (2) sex offenders to register and maintain a current registration in each jurisdiction where the offender resides, is an employee, or is a student. SORNA also sets forth requirements for sex offender registries, to include specified information, duration of registration, and in-person verification of sex offender registration information, as well as participation in the National Sex Offender Public Website (NSOPW), and the utilization of the SORNA Exchange Portal. For more specific information about substantial implementation of SORNA and access to the National Guidelines and Supplemental Guidelines on Sex Offender Registration and Notification, please visit http://www.smart.gov/pdfs/final\_sornaguidelines.pdf. For information and resources on SORNA, visit www.smart.gov. Goals, Objectives, and Deliverables The SMART Office is interested in proposals that facilitate, enhance and maintain jurisdictional implementation of SORNA. For State and Territorial jurisdictions that have not yet substantially implemented SORNA, applicants must have received a SORNA Substantial Implementation Report from the SMART Office, or submitted materials for review, and must explain how the proposed project will bring the jurisdiction closer to implementation based upon SMART's review. For tribal jurisdictions that have not yet substantially implemented SORNA, applicants must have received a SORNA Substantial Implementation Report, or submitted materials for review or requested and received a "reasonable time" extension from the SMART Office. If the jurisdiction has received a Substantial Implementation Report, the applicant must explain how the proposed project will bring the jurisdiction closer to implementation based on SMART's review. Discussion of a jurisdiction's planned activities should include information regarding the jurisdiction's SORNA implementation working group. The working group plan should include a list of the working group members, their responsibility regarding SORNA implementation, and an agenda for the group's work during the grant period, in addition to the timeline of the applicant's planned activities otherwise required by this solicitation. It is expected that successful grantees will complete semi-annual progress reports that include updates on their jurisdiction's working group meetings. This requirement does not apply to jurisdictions that have already been found to have substantially implemented SORNA. For those jurisdictions that have substantially implemented SORNA, the application must explain how the proposed project will either support continued implementation of SORNA or enhance their registration/notification programs. State and Territorial applicants should link their proposed activities with non-implemented factors as identified in their most recent SORNA Substantial Implementation Report. In developing and/or enhancing efforts or programs designed to implement or maintain SORNA standards, applicants may propose specific strategies and projects including, but not limited to, the following examples: Examples of strategies and projects to develop or enhance jurisdiction-wide SORNA implementation All applicants:• Developing proposed legislation and administrative materials (such as policies and procedures) that address SORNA's requirements, including legal support. •

Providing support for coordinated interagency efforts to enhance implementation of SORNA requirements. Developing or enhancing law enforcement and other criminal justice agency information sharing within the jurisdiction as well as between jurisdictions.

• Implementing records management projects, such as converting paper documents to digital format as required by SORNA. • Developing and implementing training, including safety training, for law enforcement and other criminal justice agency personnel responsible for sex offender registration, notification, monitoring, and/or management. •

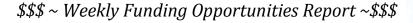
Enhancing registration verification strategies, collaborating with other jurisdictions and agencies on absconder investigations, and expanding community education and



## Friday, June 23, 2017

prevention programs related to sex offender registration, notification, or management. Enhancing infrastructure to assist implementation of SORNA, such as the collection, storage, submission or analysis of sex offender biometric data (finger and palm prints) and DNA. See budget information on page 6 including referenced footnote for more information. Tribal applicants: • Tribes that have elected to carry out the requirements of SORNA are encouraged to apply for funding to support SORNA implementation activities that benefit a consortium of tribes that have elected to implement SORNA. Several tribes may choose to form a consortium to share resources (e.g., hardware, digital fingerprint equipment, kiosks; joint staff or shared registry office space; shared public registry website, etc.) or collaborate on enforcement activities or other facilities used for registration. An application to fund such a collaborative approach or project must include supporting documentation, such as an interagency agreement, a memorandum of understanding, or a letter of cooperation that demonstrates commitment from each member jurisdiction of the consortium. • Tribes that have been found to have substantially implemented SORNA may apply for funding to create, improve and/or sustain registration/notification activities, including but not limited to developing community education programs on sex offender topics (e.g., promoting an understanding of the tribe's sex offender registration, notification, treatment, and community supervision strategies; safety planning; and facts and statistics about sexual offending and offenders), or collaboration with intra-tribal organizations, including victim service agencies, courts, probation, schools and other entities. An application to fund such a collaborative approach or project must include supporting documentation from the included tribal organizations detailing how the collaboration will be effectuated. The application should also detail how such strategies will sustain and support the tribe's sex offender registration and notification program. • Tribes that have been found to have substantially implemented SORNA may apply for funding to develop or enhance their inter-jurisdictional cooperation, including but not limited to information-sharing infrastructure improvement. States with tribal jurisdictions within their borders:• States may apply to support efforts of local or state units of government, or P.L. 280 tribes, to develop or enhance their sex offender registration and notification functions as they pertain to tribal nations that have been delegated to the state for the purpose of substantial implementation of SORNA. • State jurisdictions that include P.L. 280 tribes are encouraged to design projects that address SORNA implementation as it relates to these tribes. State jurisdictions that have Tribal SORNA Jurisdictions within their borders may apply for funding to enhance their collaboration with SORNA tribes including but not limited to enhancing information sharing such as tribal access to NCIC/NSOR. An application to fund such a collaborative approach or project must include supporting documentation, such as an interagency agreement, a memorandum of understanding, or a letter of cooperation, which demonstrates the collaborative endeavor from each member SORNA jurisdiction involved in the collaboration. Additional Information Required State and territory applicants that are eligible to receive Byrne/JAG reallocation funding should describe how the proposed project complements the work that the jurisdiction plans to perform with that reallocation funding. Applicants shall ensure that the project involves activities that are separate from or complement the tasks being performed with the SORNA reallocation funding, so as to avoid receiving duplicate funds for the same activity. The Goals, Objectives and Deliverables are directly related to the performance measures set out in the table in Section D. Application and Submission Information, under "Program Narrative."

WEBSITE/LINK: https://www.smart.gov/pdfs/SMARTFY17AWA.pdf



## Friday, June 23, 2017

Tribal Management Grant Program - Department of Health and Human Services/Indian Health Service

**DEADLINE:** Jun 30, 2017

**AMOUNT:** \$100,000

**DESCRIPTION:** The purpose of this Indian Health Service (IHS) grant announcement is to announce the availability of the TMG Program to enhance and develop health management infrastructure and assist Indian Tribes and Tribal organizations (T/TO) in assuming all or part of existing IHS programs, functions, services and activities (PSFAs) through a Title I contract and assist established Title I contractors and Title V compactors to further develop and improve their management capability. In addition, TMGs are available to T/TO under the authority of 25 U.S.C. section 5322(e) for (1) obtaining technical assistance from providers designated by the T/TO (including T/TO that operate mature contracts) for the purposes of program planning and evaluation, including the development of any management systems necessary for contract management and the development of cost allocation plans for indirect cost rates; and (2) planning, designing, monitoring, and evaluating Federal programs serving the T/TO, including Federal administrative functions.

WEBSITE/LINK: https://www.federalregister.gov/documents/2017/05/01/2017-08775/office-of-direct-service-and-contracting-tribes-tribal-management-grant-program

## Eileen Fisher Seeks Applications for Leadership Programs for Women and Girls

**DEADLINE:** All applications must be received no later than noon EDT, June 30, 2017.

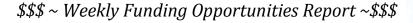
**AMOUNT:** Grants of up to \$5,000 will be awarded to nonprofit organizations working to champion the activation of leadership qualities in women and girls.

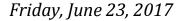
**DESCRIPTION:** Eileen Fisher believes that by activating the natural leadership qualities within themselves, women and girls are able to find their voices, build inner strength, and develop the confidence to pursue what really matters.

To advance this belief, the fashion retailer is accepting applications for its Activating Leadership program. In 2017, the program will review applications from nonprofit organizations in the following focus area: Leading for Impact. Preference will be given to programs that bring bring about self-discovery and personal transformation; help women and/or girls find their inner strength and trust their intuition; and/or address any phase of a woman's or girl's life.

To be eligible, applicants must be a 501(c)(3) nonprofit with a program that fits the grant program's overall theme and focus or be an individual who fits that description who has a (c)(3) fiscal sponsor.

WEBSITE/LINK: <a href="https://www.eileenfisher.com/grants/activating-leadership/grant-guidelines/">https://www.eileenfisher.com/grants/activating-leadership/grant-guidelines/</a>





### **2017 JULY**

**Hospice and Palliative Nurses Foundation** 

**DEADLINE:** July 1, 2017

**AMOUNT:** A single grant of up to \$15,000 will be awarded.

**DESCRIPTION:** The Hospice and Palliative Nurses Foundation, the charitable arm of the Hospice and Palliative Nurses Association, is accepting applications for its Certification Research Grant program.

The HPNF Certification Research Grant is intended to provide investigators with resources to conduct exploratory, pilot, or feasibility studies that will lead to larger scale projects linking certification with patient outcomes. Examples include collecting preliminary data about the distribution of certification qualifications among staff of different types of organizations or examining datasets from healthcare systems for patterns of staffing and outcomes. To be eligible, the principal investigator must be actively involved in some aspect of hospice and palliative care practice, education, or research; hold a master's or doctoral degree or be enrolled in a doctoral program; and have a project that is consistent with the purpose of the research grant. Preference will be given to HPNA members.

For complete program guidelines and application instructions, see the HPNF website.

WEBSITE/LINK: <a href="http://hpnf.advancingexpertcare.org/research/research-grant-opportunities/">http://hpnf.advancingexpertcare.org/research/research-grant-opportunities/</a>

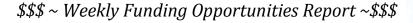
National Lupus Outreach and Clinical Trial Education Program (Lupus Program)

**DEADLINE:** July 1, 2017

**AMOUNT:** \$250,000-\$325,000 for Priority A; \$450,000-\$550,000 for Priority B

**DESCRIPTION:** The Office of Minority Health (OMH) at the United States Department of Health and Human Services announces the availability of Fiscal Year 2017 grant funds for the National Lupus Outreach and Clinical Trial Education Program (Lupus Program). The Lupus Program seeks to reduce lupus related health disparities among racial and ethnic minority populations disproportionately affected by this disease by: (1) implementing a national health education program on lupus (Priority A); and (2) developing, piloting and assessing clinical trial education interventions for health care providers and paraprofessionals focusing on improving recruitment and retention rates in clinical trials for racial and ethnic minority populations affected by lupus (Priority B).

WEBSITE/LINK: <a href="http://www.grants.gov/web/grants/view-opportunity.html?oppId=289374">http://www.grants.gov/web/grants/view-opportunity.html?oppId=289374</a>



## Friday, June 23, 2017

## Karma for Cara Foundation Invites Applications for Youth Microgrants

**DEADLINE:** JULY 1, 2017

**AMOUNT:** \$250 and \$1,000

**DESCRIPTION:** As part of our efforts to support youth volunteerism, we started a microgrant program in fall 2014. We are encouraging kids 18 and under to apply for funds between \$250 and \$1,000 to complete service projects in their communities. Whether it is turning a vacant lot into a community garden, rebuilding a school playground or helping senior citizens get their homes ready for winter, we want to hear what project you're passionate about.

WEBSITE/LINK: <a href="http://karmaforcara.org/get-involved/apply-for-a-microgrant/">http://karmaforcara.org/get-involved/apply-for-a-microgrant/</a>

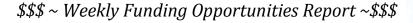
Comprehensive Addiction and Recovery Act: Building Communities of Recovery (Short Title: BCOR) - Department of Health and Human Services/Substance Abuse and Mental Health Services Adminis

**DEADLINE:** Monday, July 3, 2017

**AMOUNT:** Up to \$200,000 per year. Up to 3 years. 13 Awards. Cost Sharing/Match Required?: Yes - Proposed budgets cannot exceed \$200,000 in total costs for the Federal portion (non-match, direct and indirect) in any year of the proposed project. Annual continuation awards will depend on the availability of funds, grantee progress in meeting project goals and objectives, timely submission of required data and reports, and compliance with all terms and conditions of award.

**DESCRIPTION:** The Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Substance Abuse Treatment (CSAT), is accepting applications for fiscal year (FY) 2017 Comprehensive Addiction and Recovery Act: Building Communities of Recovery (Short Title: BCOR). The purpose of this program is to mobilize resources within and outside of the recovery community to increase the prevalence and quality of long-term recovery support from substance abuse and addiction. These grants are intended to support the development, enhancement, expansion, and delivery of recovery support services (RSS) as well as promotion of and education about recovery. Programs will be principally governed by people in recovery from substance abuse and addiction who reflect the community served.

SAMHSA recognizes the essential role of recovery support for persons with substance abuse and addiction in order for them to maintain their overall health and wellness. SAMHSA recognizes all pathways to recovery including abstinence attained with FDA-approved medications (e.g., methadone, buprenorphine products including buprenorphine/naloxone combination formulations and buprenorphine mono-product formulations, naltrexone products including extended-release and oral formulations, disulfiram, and acamprosate calcium). Participation in evidence based clinical treatment services produces the best recovery outcomes when paired with robust recovery supports. SAMHSA expects to improve long term recovery for persons with substance abuse and addiction through the provision of individualized recovery supports and sustained support for recovery-focused community efforts. The latter is achieved by building connections between recovery networks, between Recovery Community Organizations (RCOs), and



## Friday, June 23, 2017

with other RSS, as well as by conducting public education and outreach on issues relating to addiction and recovery. Grantees may use funds to: 1) build connections between recovery networks, between RCOs, and with other RSS; 2) reduce the stigma associated with addiction; and 3) conduct public education and outreach on issues relating to addiction and recovery.

WEBSITE/LINK: https://www.samhsa.gov/grants/grant-announcements/ti-17-015

Robbie Foundation Accepting Applications for Adaptive Equipment/Assistive Technology/Therapy Treatment Program (AAT Program)

**DEADLINE:** July 5 2017 and October 5 2017.

**AMOUNT:** Funding will be given for items and services that help maximize growth and development, as well as create an easier and more enjoyable learning and/or living environment for the child.

**DESCRIPTION:** The Robbie Foundation was founded on behalf of a boy living with cerebral palsy, a condition that leaves him dependent on others for all his daily needs. The goal of foundation is to see the world brought to children who are unable to explore it on their own.

To that end, the foundation is accepting applications for its ATT Program, which is open to children with special needs who would benefit from adaptive equipment, assistive technology, therapy treatment, and/or any other essential item not covered by insurance or any additional funding resource. Grants will be awarded for items and services that help maximize the growth and development of and that create an easier and more enjoyable learning and/or living environment for the child.

Any individual may submit an application on behalf of a recipient. However, consent must be given by the individual or his/her parent(s) or guardian(s).

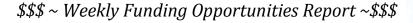
WEBSITE/LINK: http://robbiefoundation.com/rf/programs/

Distance Learning & Telemedicine Grant - Department of Agriculture Utilities Programs

**DEADLINE:** Jul 17, 2017

**AMOUNT:** \$500,000

**DESCRIPTION:** DLT grants are designed to provide access to education, training, and health care resources for rural Americans. The DLT Program is authorized by 7 U.S.C. 950aaa and provides financial assistance to encourage and improve telemedicine and distance learning services in rural areas through the use of telecommunications, computer networks, and related advanced technologies that students, teachers, medical professionals, and rural residents can use. The regulation for the DLT Program can be found at 7 CFR part 1703 (Subparts D through E). The grants, which are awarded through a competitive process, may be used to fund telecommunications-enabled information, audio and video equipment, and related advanced technologies which extend educational and medical applications into rural areas. Grants are intended to benefit end users in rural areas, who are often not in the same location as the source of the educational or health care



## Friday, June 23, 2017

service. Of the funds made available, \$1,600,000.00 will be prioritized to provide for communication upgrades between ambulances, emergency transportation vehicles and medical facilities.

WEBSITE/LINK: <a href="https://www.rd.usda.gov/programs-services/distance-learning-telemedicine-grants">https://www.rd.usda.gov/programs-services/distance-learning-telemedicine-grants</a>

Rural Health Opioid Program - Department of Health and Human Services/Health Resources and Services Administration

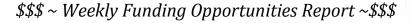
**DEADLINE:** Jul 21, 2017

**AMOUNT:** \$3,000,000/12 awards

**DESCRIPTION:** This announcement solicits applications for the Rural Health Opioid Program (RHOP). The purpose of RHOP is to promote rural health care services outreach by expanding the delivery of opioid related health care services to rural communities. The program will reduce the morbidity and mortality related to opioid overdoses in rural communities through the development of broad community consortiums to prepare individuals with opioid-use disorder (OUD) to start treatment, implement care coordination practices to organize patient care activities,[1] and support individuals in recovery through the enhancement of behavioral counselling[2] and peer support activities.[3] This program will bring together health care providers (i.e. local health departments, hospitals, primary care practices, and substance abuse treatment providers) and entities such as social service and faith-based organizations, law enforcement, and other community-based groups to respond multifaceted to the opioid epidemic in a rural community. The consortium must include at least three (3) health care providers. The program supports three (3) years of funding. This program incorporates a range of objectives to respond comprehensively to the opioid crisis within rural communities. Consortiums will work towards identifying individuals at-risk of overdose and guide them towards recovery by providing outreach and education on locally available treatment options and support services. Educating community members on OUD is also a critical component of responding to the opioid epidemic, which incorporates education on OUD, treatment options, methods for preparing individuals with OUD for treatment, referring individuals with OUD to treatment, and how to best support individuals in recovery. Consortiums are encouraged to implement care coordination practices to organize patient care activities. Finally, consortiums are further encouraged to support individuals in recovery by establishing new or enhancing existing behavioral counselling and peer support activities. [1] SAMHSA's Working Definition of Recovery provides guiding principles and is available at http://store.samhsa.gov/product/SAMHSA-s-Working-Definition-of-Recovery/PEP12-RECDEF. [2]

https://www.samhsa.gov/treatment/substance-use-disorders [3] What Are Peer Recovery Support Services? http://store.samhsa.gov/shin/content//SMA09-4454/SMA09-4454.pdf

WEBSITE/LINK: <a href="https://www.grants.gov/web/grants/view-opportunity.html?oppId=284888">https://www.grants.gov/web/grants/view-opportunity.html?oppId=284888</a>



# Friday, June 23, 2017 PeopleForBikes Invites LOIs for Fall 2017 Community Grant Program

**DEADLINE:** JULY 21, 2017 (LETTERS OF INTENT) - PeopleForBikes will begin accepting Letters of Intent on June 12, 2017. LOIs must be received no later than July 21, 2017. Upon review, selected applicants will be invited to submit a full proposal by October 13, 2017.

**AMOUNT:** To that end, grants of up to \$10,000 will be awarded to support bicycle infrastructure projects such as bike paths, lanes, trails, and bridges; mountain bike facilities; bike parks and pump tracks; BMX facilities; and end-of-trip facilities such as bike racks, bike parking, and bike storage. Grant requests in which PeopleForBikes funding would amount to 50 percent or more of the project budget will not be considered.

**DESCRIPTION:** PeopleForBikes is a national movement to make riding better for everyone. By collaborating with millions of individual riders, businesses, community leaders, and elected officials, the organization is uniting people to create a powerful, united voice for cycling and its benefits. The PeopleForBikes Community Grant Program supports bicycle infrastructure projects and targeted advocacy initiatives that make it easier and safer for people of all ages and abilities to ride. To be eligible, applicants must be a nonprofit organization with a focus on bicycling, active transportation, or community development; city or county agencies or departments; or state or federal agencies working locally. PeopleForBikes only funds projects in the United States.

WEBSITE/LINK: <a href="http://www.peopleforbikes.org/pages/grant-guidelines">http://www.peopleforbikes.org/pages/grant-guidelines</a>

Improving HIV Health Outcomes through the Coordination of Supportive Employment and Housing Services — Demonstration Sites - Department of Health and Human Services/Health Resources and Services Administration

**DEADLINE:** Jul 24, 2017

**AMOUNT:** HRSA will award up to ten (10) grants of up to \$300,000 each per year for three years to support the design, implementation, and evaluation of innovative interventions that coordinate HIV care and treatment, housing, and employment services to improve HIV health outcomes for low-income, uninsured, and underinsured people living with HIV (PLWH) in racial and ethnic minority communities.

**DESCRIPTION:** This announcement solicits applications for fiscal year (FY) 2017 for a new, three-year initiative entitled Improving HIV Health Outcomes through the Coordination of Supportive Employment and Housing Services—Demonstration Sites. This Department of Health and Human Services (HHS) Secretary's Minority AIDS Initiative Fund project is also supported, in part, through Special Projects of National Significance. Providing effective HIV care for communities at the greatest risk for poor health care outcomes involves addressing structural factors, such as poverty, lack of education, unemployment/underemployment, homelessness and other social determinants of health. To promote long-term health and stability for PLWH, this initiative will support organizations that can demonstrate innovative strategies for integrating HIV care, housing and employment services into a coordinated intervention.

WEBSITE/LINK: <a href="https://www.grants.gov/web/grants/view-opportunity.html?oppId=294068">https://www.grants.gov/web/grants/view-opportunity.html?oppId=294068</a>

\$\$\$ ~ Weekly Funding Opportunities Report ~\$\$\$

## Friday, June 23, 2017

Improving HIV Health Outcomes through the Coordination of Supportive Employment and Housing Services – Evaluation and Technical Assistance Provider-Department of Health and Human Services/Health Resources and Services Administration

**DEADLINE:** Jul 24, 2017

**AMOUNT:** \$700,000

**DESCRIPTION:** This announcement solicits applications for fiscal year (FY) 2017 for a new three-year initiative entitled Improving HIV Health Outcomes through the Coordination of Supportive Employment and Housing Services – Evaluation and Technical Assistance Provider (ETAP). HRSA will award one (1) cooperative agreement to a single organization for up to \$700,000 per year for three (3) years to conduct a multi-site evaluation and provide technical assistance (TA) to up to 10 demonstration sites. These sites (funded under a separate announcement, HRSA-17-113) will design, implement and evaluate innovative interventions that coordinate HIV care, housing, and employment services to improve health, housing, and employment outcomes for low-income, uninsured, and underinsured people living with HIV (PLWH) in racial and ethnic minority communities. This Department of Health and Human Services (HHS) Secretary's Minority AIDS Initiative Fund project is also supported in part, through Special Projects of National Significance.

WEBSITE/LINK: <a href="https://www.grants.gov/web/grants/view-opportunity.html?oppId=294069">https://www.grants.gov/web/grants/view-opportunity.html?oppId=294069</a>

### **Global Infectious Disease Research Training Program (D43)**

**DEADLINE:** Letter of Intent Due Date(s) -30 days prior to the application due date. July, 27, 2017

**AMOUNT:** Applications budgets are limited to \$230,000 per year for new awards and \$276,000 per year for renewal awards (total direct costs). The maximum project period is up to 5 years.

**DESCRIPTION:** This Funding Opportunity Announcement (FOA) encourages applications for the Global Infectious Disease Research Training program from U.S. and LMIC research institutions. The application should propose a collaborative research training program that will strengthen the capacity of a LMIC institution to conduct infectious disease research that focuses on 1) major endemic or life-threatening emerging infectious diseases 2) neglected tropical diseases 3) infections that frequently occur as co-infections in HIV infected individuals or 4) infections associated with non-communicable disease conditions of public health importance in LMICs. FIC will support innovative research training programs that are designed to build sustainable infectious disease research capacity at an institution in an endemic LMIC. Sustainable infectious disease research capacity is known to require a critical mass of scientists and health research professionals with in-depth scientific expertise and complementary leadership skills that enable the institution to conduct independent, internationally-recognized infectious disease research relevant to the health priorities of their country.

WEBSITE/LINK: http://grants.nih.gov/grants/guide/pa-files/PAR-17-057.html

\$\$\$ ~ Weekly Funding Opportunities Report ~\$\$\$

## Friday, June 23, 2017

# First Responders - Comprehensive Addiction and Recovery Act Cooperative Agreement

**DEADLINE:** Monday, July 31, 2017

**AMOUNT:** Up to \$250,000 – \$800 000 per year. Up to 4 years.

**DESCRIPTION:** The Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Substance Abuse Prevention (CSAP), is accepting applications for fiscal year (FY) 2017 First Responders-Comprehensive Addiction and Recovery Act (FR-CARA) Cooperative Agreements. SAMHSA will award FR-CARA funds to states, tribes and tribal organizations, and local governmental entities. Local governmental entities include, but are not limited to, municipal corporations, counties, cities, boroughs, incorporated towns, and townships. The purpose of this program is to allow first responders and members of other key community sectors to administer a drug or device approved or cleared under the Federal Food, Drug, and Cosmetic Act for emergency treatment of known or suspected opioid overdose. Grantees will train and provide resources to first responders and members of other key community sectors at the state, tribal, and local governmental levels on carrying and administering a drug or device approved or cleared under the Federal Food, Drug, and Cosmetic Act for emergency treatment of known or suspected opioid overdose. Grantees will also establish processes, protocols, and mechanisms for referral to appropriate treatment and recovery communities.

WEBSITE/LINK: <a href="https://www.samhsa.gov/grants/grant-announcements/sp-17-005">https://www.samhsa.gov/grants/grant-announcements/sp-17-005</a>

**Improving Access to Overdose Treatment** 

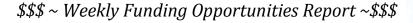
**DEADLINE:** Monday, July 31, 2017

**AMOUNT:** Up to \$1,000,000 per year. Up to 5 years. 1 award.

Eligibility: SAMHSA is limiting eligibility to Federally Qualified Health Centers (FQHCs) (as defined in section 1861(aa) of the Social Security Act), opioid treatment programs as defined under part 8 of title 42, Code of Federal Regulations, and practitioners dispensing narcotic drugs pursuant to section 303(g) of the Controlled Substances Act.

The eligibility for this grant program is statutorily defined in Section 544 of the Public Health Service Act.

**DESCRIPTION:** The Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Substance Abuse Prevention (CSAP), is accepting applications for fiscal year (FY) 2017 Improving Access to Overdose Treatment (Short Title: OD Treatment Access). SAMHSA will award OD Treatment Access funds to a Federally Qualified Health Center (FQHC), Opioid Treatment Program, or practitioner who has a waiver to prescribe buprenorphine to expand access to Food and Drug Administration (FDA)-approved drugs or devices for emergency treatment of known or suspected opioid overdose. The grantee will partner with other prescribers at the community level to develop best practices for prescribing and co-prescribing FDA-approved overdose reversal drugs. After developing best practices, the grantee will train other prescribers in key community sectors as well as individuals who support persons at high risk for overdose.



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In 2013, SAMHSA released the Opioid Overdose Prevention Toolkit to help reduce the number of opioid-related overdose deaths and adverse events. The OD Treatment Access grant program will utilize this toolkit and other resources to help the grantee train and provide resources for health care providers and pharmacists on the prescribing of drugs or devices approved or cleared under the Federal Food, Drug, and Cosmetic Act for emergency treatment of known or suspected opioid overdose

The OD Treatment Access grant program will also ensure the grantee establishes protocols to connect patients who have experienced a drug overdose with appropriate treatment, including medication-assisted treatment and appropriate counseling and behavioral therapies.

WEBSITE/LINK: <a href="https://www.samhsa.gov/grants/grant-announcements/sp-17-006">https://www.samhsa.gov/grants/grant-announcements/sp-17-006</a>

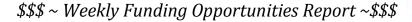
**Empowered Communities for a Healthier Nation - Department of Health and Human Services/Office of the Assistant Secretary for Health** 

**DEADLINE:** Aug 01, 2017

**AMOUNT:** \$350,000

**DESCRIPTION:** The Empowered Communities for a Healthier Nation Initiative seeks to demonstrate the effectiveness of collaborations with academic research centers, prevention research centers, teaching hospitals, and Native American Tribes and Tribal organizations to reduce significant health disparities impacting minorities and disadvantaged populations through the implementation of evidence-based strategies with the greatest potential for impact. The program will serve residents in counties disproportionately impacted by the opioid epidemic; reduce the impact of serious mental illness and improve screening for serious mental illness at the primary care level for children, adolescents and/or adults; and reduce obesity prevalence and disparities in weight status among disadvantaged children and adolescents. The cooperative agreement will support the HHS Secretary's priority areas that include the following core program components: Opioid abuse: These cooperative agreements are targeted to rural and urban communities that have experienced large increases in rates of opioid overdose deaths or opioid use disorder within the past five years. The cooperative agreements will: Support the development of community-level strategies aimed at preventing opioid abuse and increasing access to treatment and recovery services. These strategies should include the following partners: local public health, law enforcement, substance abuse providers, the medical community, community-based prevention and risk reduction organizations, and faith-based organizations.

- Support research to improve understanding of networks of people who inject drugs and risk factors for initiation of injection drug use and/or identifying effective strategies to reach, engage, and retain people who inject drugs in substance abuse treatment, including medication-assisted treatment for opioid use disorder.
- Support implementation research to identify innovative strategies to provide comprehensive services to people who inject drugs, including a focus on reducing the transmission of viral hepatitis and HIV, engaging in opioid use disorder treatment, and providing overdose prevention education and naloxone distribution. Address mental illness through collaborative care networks:



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- Improve the routine screening and diagnosis of mental disorders.
- Increase providers' use of evidence-based protocols for the proactive management of diagnosed mental disorders.
- Improve clinical and community support for active patient engagement in treatment goals setting and self-management. Address childhood/adolescent obesity:
- Support prevention research studies to identify the combinations of intervention components that are most effective and determine which components are critical to success.
- Improve access to behavioral interventions to reduce recreational sedentary time and improve nutritional, physical activity and weight-related outcomes among children and adolescents.
- Develop family-centered strategies that reduce obesity and co-occurring conditions such as diabetes, hypertension, and hyperlipidemia. Each application may address only one of the three priority areas: opioid abuse; mental illness; or childhood/adolescent obesity.

WEBSITE/LINK: <a href="https://www.grants.gov/web/grants/view-opportunity.html?oppId=294060">https://www.grants.gov/web/grants/view-opportunity.html?oppId=294060</a>

Targeted Capacity Expansion: Medication Assisted Treatment - Prescription Drug and Opioid Addiction (Short Title: MAT-PDOA) - Department of Health and Human Services/Substance Abuse and Mental Health Services Adminis

**DEADLINE:** Jul 31, 2017

**AMOUNT:** \$2,000,000 X 5 AWARDS.

**DESCRIPTION:** 

#### **Eligibility (CONTACT YOUR STATE):**

As the 2017 Omnibus requires, eligibility is limited to the states with the highest rates of admissions, including those that have demonstrated a dramatic increase in admissions for the treatment of opioid use disorder. See Appendix E for a list of eligible states. The application must be submitted by the Single State Agency (SSA) for Substance Abuse within the state. FY 2015 MAT-PDOA grantees funded under announcement TI-15-007 and FY 2016 MAT-PDOA grantees funded under announcement TI-16-014 are not eligible to apply for this program.

The Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Substance Abuse Treatment (CSAT), is accepting applications for fiscal year (FY) 2017 Targeted Capacity Expansion: Medication Assisted Treatment - Prescription Drug and Opioid Addiction (MAT-PDOA) grants. The purpose of this program is to expand/enhance access to medication-assisted treatment (MAT) services for persons with an opioid use disorder seeking or receiving MAT. This program targets states identified with having the highest rates of primary treatment admissions for heroin and opioids per capita and includes those with the most dramatic increases for heroin and opioids, as identified by SAMHSA's Treatment Episode Data Set (TEDS): 2007 – 2014. The desired outcomes

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include: 1) an increase in the number of admissions for MAT; 2) an increase in the number of clients receiving integrated care/treatment; 3) a decrease in illicit opioid drug use at sixmonth follow-up; and 4) a decrease in the use of prescription opioids in a non-prescribed manner at six-month follow-up. For the purpose of this FOA, integrated care/treatment is defined as the organized delivery and/or coordination of medical (including the use of Food and Drug Administration (FDA)-approved drugs [buprenorphine, methadone, extended release injectable naltrexone for addiction), behavioral, social, peer, and other recovery support services provided to individual patients who have multiple healthcare needs in order to produce better overall health outcomes. MAT is defined as the use of FDA-approved opioid agonist medications (e.g., methadone, buprenorphine products, including buprenorphine/naloxone combination formulations and buprenorphine monoproduct formulations) for the maintenance treatment of opioid use disorder and opioid antagonist medication (e.g., extended-release) in combination with behavioral therapies to prevent relapse to opioid use. MAT includes screening, assessment (which includes determination of severity of opioid use disorder, including presence of physical dependence and appropriateness for MAT), and case management. MAT is to be provided in combination with comprehensive opioid use disorder treatment, including but not limited to: counseling, behavioral therapies, other clinically appropriate services in order for individuals to achieve and maintain abstinence from all opioids and heroin, and, when needed, pharmacotherapy for co-occurring alcohol use disorder. MAT is to be provided in a clinically driven, person-centered, and individualized setting.

WEBSITE/Link: https://www.samhsa.gov/grants/grant-announcements/ti-17-017

#### (CHILDREN / YOUTH ~ OREGON ONLY)

PGE Foundation Accepting Applications From Oregon Organizations for Safe and Stable Families Program

**DEADLINE:** Applications will be accepted between June 1, 2017, and July 10, 2017.

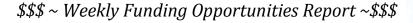
**AMOUNT:** SEE ONLINE APPLICATION.

**DESCRIPTION:** Portland General Electric established the PGE Foundation in 1997 to improve quality of life for Oregonians. Since its inception, the foundation has awarded grants totaling nearly \$20 million across the state.

Currently, the foundation is accepting applications for its Safe and Stable Families, which supports organizations that use preventive approaches designed to help Oregon families create stable environments in which children can grow and thrive, with a focus on food insecurity, housing/homelessness, mental wellness, and parent engagement.

Grants are awarded for programs that help parents, grandparents, and guardians caring for children (up to age 26) develop stable family relationships, economic security, and a safe and consistent home environment. Priority will be given to projects that support underserved communities and deliver measurable outcomes. Grant amounts will be determined on a project-by-project basis.

To be eligible, applicants must be an Oregon-based organization classified as 501(c)(3) by the Internal Revenue Service. Priority will be given to those located in and serving counties



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where PGE has customers and power-generating plants, as well as those that operate collaboratively or in partnership with other nonprofits or agencies.

WEBSITE/LINK: <a href="http://www.pgefoundation.org/apply">http://www.pgefoundation.org/apply</a> for funding.html

#### (COMMUNITY OPPORTUNITIES)

#### **Rural Community Development Initiative Grants**

**DEADLINE:** The deadline for receipt of an application is 4 p.m. local time, July 25, 2017. The application date and time are firm. The Agency will not consider any application received after the deadline. Applicants intending to mail applications must provide sufficient time to permit delivery on or before the closing deadline date and time. Acceptance by the United States Postal Service or private mailer does not constitute delivery. Facsimile (FAX), electronic mail, and postage due applications will not be accepted.

#### **AMOUNT:**

- Minimum grant award is \$50,000; maximum grant award is \$250,000
- Grant funds are limited and are awarded through a competitive process

#### Are matching funds required?

- Matching fund requirement equal to amount of grant
- In-kind contributions cannot be used as matching funds
- Partnerships with other federal, state, local, private and nonprofit entities are encouraged

**DESCRIPTION:** RCDI grants are awarded to help non-profit housing and community development organizations, low-income rural communities and federally recognized tribes support housing, community facilities and community and economic development projects in rural areas.

#### What is an eligible area?

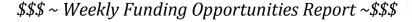
Rural and rural area--Any area other than (i) a city or town that has a population of greater than 50,000 inhabitants; and (ii) the urbanized area contiguous and adjacent to such city or town.

## How may funds be used?

To improve housing, community facilities, and community and economic development projects in rural areas.

## Rural Community Development Initiative grants may be used for, but are not limited to:

- Training sub-grantees to conduct:
- Home-ownership education
- Minority business entrepreneur education
- Providing technical assistance to sub-grantees on



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- Strategic plan development
- Accessing alternative funding sources
- Board training
- Developing successful child care facilities
- Creating training tools, such as videos, workbooks, and reference guides
- Effective fundraising techniques

WEBSITE/LINK: <a href="https://www.rd.usda.gov/programs-services/rural-community-development-initiative-grants">https://www.rd.usda.gov/programs-services/rural-community-development-initiative-grants</a>

Community Facilities Technical Assistance and Training Grant- Department of Agriculture/Utilities Programs

**DEADLINE:** Jul 24, 2017

**AMOUNT**: \$150,000 X 15 awards.

**DESCRIPTION:** The Agency will make grants to public bodies and private nonprofit corporations, (such as States, counties, cities, townships, and incorporated towns and villages, boroughs, authorities, districts, and Indian tribes on Federal and State reservations) to provide associations Technical Assistance and/or training with respect to essential community facilities programs. The Technical Assistance and/or training will assist communities, Indian Tribes, and Nonprofit Corporations to identify and plan for community facility needs that exist in their area. Once those needs have been identified, the Grantee can assist in identifying public and private resources to finance those identified community facility needs.

Congress authorized the Community Facilities Technical Assistance and Training Grant program in Title VI, Section 6006 of the Agricultural Act of 2014 (Pub. L. 113–79). Program regulations can be found at 7 CFR part 3570, subpart F, which are incorporated by reference in this Notice. The purpose of this Notice is to seek applications from entities that will provide technical assistance and/or training with respect to essential community facilities programs. It is the intent of this program to assist entities in rural areas in accessing funding under the Rural Housing Service's Community Facilities Programs in accordance with 7 CFR part 3570, subpart F. Funding priority will be made to private, nonprofit or public organizations that have experience in providing technical assistance and training to rural entities.

WEBSITE/Link: <a href="https://www.gpo.gov/fdsys/pkg/FR-2017-05-23/pdf/2017-10487.pdf">https://www.gpo.gov/fdsys/pkg/FR-2017-05-23/pdf/2017-10487.pdf</a>

#### (ATHLETICS / SPORTS)

#### Bill Belichick Accepting Applications for Football, Lacrosse Programs

**DEADLINE:** Submit completed typed application and essay by July 1, 2017 online.

**AMOUNT:** To advance this mission, grants of up to \$10,000 will be awarded to deserving athletic communities or organizations in need of financial support.

**DESCRIPTION:** The Bill Belichick Foundation was established in 2013 by New England Patriots' coach Bill Belichick to provide coaching, mentorship, and financial assistance to

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individuals, communities, and organizations, with a focus on the sports of football and lacrosse. Through its grantmaking, the foundation endeavors to instil a love of sports, coaching, and team-building in the athletic leaders of tomorrow.

WEBSITE/Link: <a href="http://billbelichickfoundation.org/bill-belichick-foundation-grant-application/">http://billbelichickfoundation.org/bill-belichick-foundation-grant-application/</a>

#### **AUGUST 2017**

Centers for AIDS Research (P30) - Department of Health and Human Services National Institutes of Health

**DEADLINE:** August 1, 2017

**AMOUNT:** \$3,000,000

**DESCRIPTION:** The purpose of this Funding Opportunity Announcement (FOA) is to invite applications for the Centers for AIDS Research (CFAR) program to provide administrative and shared research support to enhance HIV/AIDS research. CFARs provide core facilities, expertise, resources, and services not readily obtained otherwise through more traditional funding mechanisms. The program emphasizes interdisciplinary collaboration across all areas of HIV/AIDS research.

WEBSITE/LINK: https://grants.nih.gov/grants/guide/pa-files/PAR-17-237.html

Russell Sage Foundation Seeks Letters of Inquiry for Social Inequality Research

**DEADLINE:** AUGUST 21, 2017 (LETTERS OF INQUIRY)

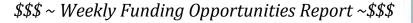
**AMOUNT:** Two-year grants of up to \$150,000 will be awarded to qualified organizations.

**DESCRIPTION:** One of the oldest foundations in America, the Russell Sage Foundation was established by Mrs. Margaret Olivia Sage in 1907 for "the improvement of social and living conditions in the United States." In pursuit of its mission, the foundation now dedicates itself to strengthening the methods, data, knowledge, and theoretical core of the social sciences as a means of diagnosing social problems and improving social policies.

The foundation's program on Social Inequality supports research on the social, economic, political, and labor market consequences of rising economic inequality in the United States. The program seeks Letters of Inquiry for investigator-initiated research projects that broaden current understanding of the causes and consequences of rising economic inequality. Priority will be given to projects that use innovative data or methodologies to address important questions about inequality.

Examples of the kinds of topics that are of interest include but are not limited to economic well-being, equality of opportunity, and intergenerational mobility; the political process and resulting policies; psychological and/or cultural change; education; labor markets; child development and child outcomes; neighborhoods and communities; families, family structure, and family formation; and other forms of inequality.

WEBSITE/LINK: <a href="http://www.russellsage.org/research/funding/social-inequality">http://www.russellsage.org/research/funding/social-inequality</a>



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### Foundation for Physical Therapy Accepting Applications for Research Grants

**DEADLINE:** AUGUST 3, 2017

**AMOUNT:** To that end, grants of up to \$40,000 will be awarded to research projects designed to evaluate the effectiveness of physical therapist interventions within any discipline relevant to the field. Funds may be requested to meet any type of expense reasonably associated with the research project, including salaries and fringe benefits, purchase or rental of equipment, supplies, travel, publication costs, printing or postage, and special services such as computer time, photographic services, and secretarial or research assistant support.

**DESCRIPTION:** The mission of the Foundation for Physical Therapy is to fund and publicize physical therapy research that determines the scientific basis and value of services intended to optimize physical functioning by physical therapists, and to develop the next generation of researchers.

FPT supports only those intervention studies in which the interventions are provided by physical therapists, or selected components of the interventions are provided by physical therapist assistants under the direction and supervision of physical therapists.

To be eligible, applicants must be an individual or a group of investigators applying through a U.S. sponsoring organization/institution with which they are affiliated. Groups must designate one member as the principal investigator responsible for directing the project. Other members of the group may be physical therapists, physical therapist assistants, or individuals from other disciplines that are relevant to the proposed study.

WEBSITE: <a href="http://www.foundation4pt.org/wp-content/uploads/2014/10/FRG-guidelines-4.11.17-Final.pdf">http://www.foundation4pt.org/wp-content/uploads/2014/10/FRG-guidelines-4.11.17-Final.pdf</a>

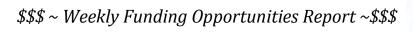
Behavioral Interventions for Prevention of Opioid Use Disorder or Adjunct to Medication Assisted Treatment-SAMHSA Opioid STR Grants (R21/R33) -Department of Health and Human Services/National Institutes of Health

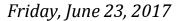
**DEADLINE:** Aug 04, 2017

**AMOUNT:** \$200,000

**DESCRIPTION:** The purpose of this FOA is to solicit applications to examine the impact of behavioral interventions within the context of states plans for use of the SAMHSA Opioid STR grant funds authorized under the 21st Century Cures Act. Applications are encouraged for studies that examine the impact of interventions such as mindfulness meditation, cognitive behavioral therapy, or multi-disciplinary rehabilitation for primary or secondary prevention for opioid use disorder (OUD) or as an adjunct to medication assisted treatment (MAT) of OUD. Applications that emphasize treatment of the comorbidity of OUD and chronic pain are of particular interest.

WEBSITE/LINK: https://grants.nih.gov/grants/guide/rfa-files/RFA-AT-18-001.html





#### **SEPTEMBER 2017**

Leveraging Population-based Cancer Registry Data to Study Health Disparities (R21) - Department of Health and Human Services/National Institutes of Health

**DEADLINE:** Sep 07, 2017

**AMOUNT:** \$200,000

**DESCRIPTION:** The goal of this Funding Opportunity Announcement (FOA) is to efficiently use the existing cancer registry infrastructure by augmenting data already collected with additional information needed to understand health disparities among people diagnosed with cancer. Specifically, this FOA will support the study of factors influencing observed health disparities within the framework of population-based cancer registries by the inclusion of data not routinely collected by or linked to the registries. The studies should be hypothesis-driven and multidisciplinary approaches are encouraged. Investigators are encouraged to leverage the data already collected by the registries to investigate the determinates of health disparities. The goal of these analyses will be to understand why disparities in cancer treatment and outcomes persist by identifying factors contributing to disparities and their relative importance.

WEBSITE/LINK: https://grants.nih.gov/grants/guide/pa-files/PA-17-288.html

HIV/HCV Co-Infections in Substance Abusers (R01) - Department of Health and Human Services/National Institutes of Health

**DEADLINE:** Letter of Intent Due Date(s) - 30 days prior to the application due date. September 7, 2017.

**AMOUNT:** (SEE ANNOUNCEMENT)

**DESCRIPTION:** The purpose of this Funding Opportunity Announcement (FOA) is to fill gaps in our understanding of (a) the impact of substance abuse on HIV, HIV/HCV coinfection associated disease progression, (b) the pathogenic interactions between HIV and hepatitis C virus, (c) hepatic and non-hepatic co-morbidities associated with HIV/HCV-coinfections in people with substance abuse disorders (SUDs), and (d) the effectiveness of interferon-free direct acting antiviral (DAAs) drug regimens to treat HIV/HCV co-infections in people with SUDs. This FOA is informed by priority area in the NIH HIV/AIDS Research Priorities and Guidelines for Determining AIDS Funding:

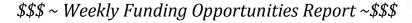
https://grants.nih.gov/grants/guide/notice-files/NOT-OD-15-137.html and the HHS National Viral Hepatitis Action Plan 2017-2020:

https://www.hhs.gov/hepatitis/blog/2017/01/19/updated-national-viral-hepatitis-action-plan-2017-2020.html

WEBSITE/LINK: <a href="https://grants.nih.gov/grants/guide/pa-files/PAS-17-311.html">https://grants.nih.gov/grants/guide/pa-files/PAS-17-311.html</a>

Disaster Assistance for State Units on Aging (SUAs) and Tribal Organizations in National Disasters Declared by the President – DHHS/Administration for Community Living

**DEADLINE:** Sep 15, 2017 Electronically submitted applications must be submitted no later than 11:59 p.m., ET, on the listed application due date.



Friday, June 23, 2017

**AMOUNT:** \$40,000

**DESCRIPTION:** Grants awarded under this announcement are to provide disaster reimbursement and assistance funds to those State Units on Aging (SUAs) and federally recognized Tribal Organizations who are currently receiving a grant under Title VI of the Older Americans Act (OAA), as amended. These funds only become available when the President declares a National Disaster and may only be used in those areas designated in the Disaster Declaration issued by the President of the United States. Eligible SUAs and Title VI grantees should discuss all disaster applications with ACL/AoA Regional staff before submitting a formal application. The amount of funds requested should be discussed with Regional staff before the application is completed. Providing a draft of the narrative justification for the application will help expedite the processing of an award. Applicants should talk with the State and local Emergency Managers to determine what funds may be available through other resources before applying for OAA funding. State Units on Aging (SUAs) and federally recognized Tribal Organizations currently receiving a grant under Title VI of the Older Americans Act must submit proposals electronically via http://www.grants.gov. At http://www.grants.gov, you will be able to download a copy of the application packet, complete it off-line, and then upload and submit the application via the Grants.gov website.

WEBSITE/LINK: <a href="https://www.grants.gov/web/grants/view-opportunity.html?oppId=289875">https://www.grants.gov/web/grants/view-opportunity.html?oppId=289875</a>

## **AAFP Accepting Applications for Free Clinics Grant Program**

**DEADLINE:** The application deadline is September 15 at 5:00 CST. Application materials must be requested from the AAFP Foundation. See the AAFP Foundation website for complete program guidelines, a fact sheet, and application instructions.

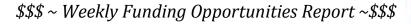
**AMOUNT:** Up to \$25,000

**DESCRIPTION:** The American Academy of Family Physicians Foundation advances the values of family medicine by promoting humanitarian, educational, and scientific initiatives that improve the health of all people. To that end, the academy is accepting applications to its Family Medicine Cares USA program.

Launched in 2011, the program is designed to help new and existing free clinics care for the uninsured in areas of need across the United States by providing grants of up to \$25,000 for the purchase of items such as exam tables, EHR systems, and medical equipment. Family Medicine Cares USA also gives AAFP members, residents, and students the opportunity to volunteer their time and talents.

As of 2016, the program had awarded a total of \$340,829 to thirteen new clinics and seventeen existing clinics.

To be eligible, applicants must be a new clinic nearing completion of the Volunteers in Medicine (VIM) clinic development process and have an AAFP member in a leadership role within the clinic. Primary consideration will be given to clinics with an AAFP member serving as medical director and to those that have family medicine residents and/or medical students involved as volunteers.



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WEBSITE/LINK: <a href="http://www.aafpfoundation.org/foundation/our-work/grants-awards/all/fmc-usa.html">http://www.aafpfoundation.org/foundation/our-work/grants-awards/all/fmc-usa.html</a>

#### Scleroderma Foundation Seeks Applications for New Investigator Grant Program

**DEADLINE:** SEPTEMBER 15, 2017

**AMOUNT:** To that end, grants of up to \$50,000 will be awarded in support of promising research likely to lead to individual research project grants.

**DESCRIPTION:** The Scleroderma Foundation is seeking applications from promising new investigators who hold a faculty or equivalent position and who wish to pursue a career in research related to scleroderma for its New Investigator Grant program. The annual program is designed to facilitate the entry of promising new investigators into areas of research related to scleroderma. Applications will be accepted from principal investigators at nonprofit organizations and public and private entities such as universities, colleges, hospitals, and laboratories. Applicants must have a doctoral degree in medicine, osteopathy, veterinary medicine, or one of the sciences; have completed a postdoctoral fellowship; and have been principal investigator on a grant from the Scleroderma Foundation or other national, private, or government agencies in the past.

WEBSITE/LINK: <a href="http://www.scleroderma.org/site/PageServer?pagename=prof-rese">http://www.scleroderma.org/site/PageServer?pagename=prof-rese</a> arch types#new

# Kelly Brush Foundation Invites Applications From People With Spinal Cord Injuries for Adaptive Sports

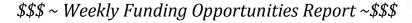
**DEADLINE:** SEPTEMBER 30, 2017

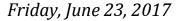
**AMOUNT:** The funds must support the purchase of sport and recreation equipment, from the ordinary (handcycles, monoskis, sport chairs, etc.) to the less typical (scuba equipment, bowling ramps, equestrian saddles, etc.).

**DESCRIPTION:** The Kelly Brush Foundation strives to empower those with paralysis to lead engaged and fulfilling lives through sport and recreation and to prevent ski racing injuries through a shared commitment to proper safety practices.

The foundation's Adaptive Sports Grant program awards grants for the purchase of adaptive sports equipment for either recreation and competition, with preference to those applicants with financial limitations who demonstrate a desire to achieve an active lifestyle. Grants will be awarded to individuals with paralysis due to a spinal cord injury with the aim of increasing their participation in adaptive sports and recreation activities and improving their quality of life. To be eligible, applicants must be be living in the United States and must supply the foundation with information about their spinal cord injury, details on their source of income, and a description of the type of equipment they are seeking.

WEBSITE/LINK: <a href="http://kellybrushfoundation.org/grants-programs/adaptive-sports-equipment/">http://kellybrushfoundation.org/grants-programs/adaptive-sports-equipment/</a>





#### **2017 OCTOBER**

Uncovering the Causes, Contexts, and Consequences of Elder Mistreatment (R01) – DHHS, NIH

**DEADLINE:** Oct 20, 2017

**AMOUNT:** \$300,000

**DESCRIPTION:** The purpose of this Funding Opportunity Announcement is to solicit applications proposing research that can lead to advancements in the understanding of elder mistreatment (emotional abuse, physical abuse, and sexual abuse; financial exploitation; abandonment; and neglect) and lay the foundation for the future design of mechanistically focused interventions for individuals at risk for mistreating elders, for promoting recovery and resilience in the maltreated and their families, and for preventing re-perpetration for those who have inflicted harm. Applications are solicited from multidisciplinary teams which include researchers from the fields of elder mistreatment, child abuse and neglect, intimate partner violence, and/or emergency medicine to pursue research in two priority areas: (1) the development of new and innovative tools and methods for the screening and detection of elder mistreatment; and (2) the identification of modifiable risk factors for elder mistreatment and modifiable protective factors, with potential to prevent maltreatment and/or enable individuals who have been mistreated and those who have mistreated others to overcome adversity and thrive. All applications should propose evidence-based strategies for addressing ethical challenges surrounding informed consent and study design in the research proposed, and to employ, when possible, best practices established in the fields of child abuse and neglect and/or intimate partner violence.

WEBSITE/LINK: https://grants.nih.gov/grants/guide/rfa-files/RFA-AG-18-010.html

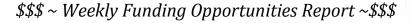
## 2017 NOVEMBER

Addressing Suicide Research Gaps: Understanding Mortality Outcomes (R01)-Department of Health and Human Services/National Institutes of Health

**DEADLINE:** Nov 02, 2017

**AMOUNT:** \$300,000

**DESCRIPTION:** This funding opportunity announcement (FOA) seeks to support efforts focused on linking pertinent data from healthcare system records (e.g., suicide attempt events) to mortality data so that a more accurate understanding of the risk factors for, and the burden of, suicide among those seen in structured healthcare settings can be discerned. Specifically, data are needed on the type, severity, and timing of suicide predictors in the U.S. In addition to improving our national knowledge of the burden of suicide, these data offer the hope of yielding essential benchmarks for both public and private care providers/insurers, who increasingly will be seeking improvements to reduce the



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frequency of suicide events in their systems. Projects supported by this FOA will help address gaps identified in the 2014 Prioritized Research Agenda for Suicide Prevention.

WEBSITE/LINK: <a href="https://grants.nih.gov/grants/guide/rfa-files/RFA-MH-18-410.html">https://grants.nih.gov/grants/guide/rfa-files/RFA-MH-18-410.html</a>

#### NO DEADLINE - GRANT RESOURCE INFORMATION:

Evidence for Action: Investigator-Initiated Research to Build a Culture of Health

#### **DEADLINE:**

**Informational Web Conferences:** 

Lessons Learned from a Year of Evidence for Action Grant Reviews

February 18, 2016 from 1:30-2:30 p.m. ET (10:30-11:30 a.m. PT)

Registration is required.

**Archived Web Conferences** 

Informational Web Conferences were scheduled for June 3, 2015 and July 22, 2015 Recordings for both events are now available.

June 3, 2015 web conference recording available here.

July 22, 2015 web conference recording available here.

Timing: Since applications are accepted on a rolling basis, there is no deadline for submission. Generally, applicants can expect to be notified within 6-8 weeks of their LOI submission. Applicants invited to the full proposal stage will have 2 months to submit their proposal once they receive notification. Full proposal funding decisions will generally be made within 6-8 weeks of the submission deadline.

**AMOUNT:** Approximately \$2.2 million will be awarded annually. We expect to fund between five and 12 grants each year for periods of up to 30 months. We anticipate that this funding opportunity will remain open for at least a period of three years; however, decisions about modifications to the program and the duration of the program will be made by RWJF at its sole discretion.

**DESCRIPTION:** Evidence for Action: Investigator-Initiated Research to Build a Culture of Health is a national program of RWJF that supports the Foundation's commitment to building a Culture of Health in the United States. The program aims to provide individuals, organizations, communities, policymakers, and researchers with the empirical evidence needed to address the key determinants of health encompassed in the Culture of Health Action Framework. In addition, Evidence for Action will also support efforts to assess outcomes and set priorities for action. It will do this by encouraging and supporting creative, rigorous research on the impact of innovative programs, policies and partnerships on health and well-being, and on novel approaches to measuring health determinants and outcomes.

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WEBSITE: <a href="http://www.rwjf.org/en/library/funding-opportunities/2015/evidence-for-action-investigator-initiated-research-to-build-a-culture-of-health.html?rid=3u0aFeLLc]ROtLce2ecBeg&et\_cid=469879</a>

#### **Changes in Health Care Financing and Organization: Small Grants**

**DEADLINE:** Grants are awarded on a rolling basis; proposals may be submitted at any time.

**AMOUNT:** This solicitation is for small grants of \$100,000 or less.

**DESCRIPTION:** Changes in Health Care Financing and Organization (HCFO) supports research, policy analysis and evaluation projects that provide policy leaders timely information on health care policy, financing and organization issues. Supported projects include:

examining significant issues and interventions related to health care financing and organization and their effects on health care costs, quality and access; and

exploring or testing major new ways to finance and organize health care that have the potential to improve access to more affordable and higher quality health services.

## **Eligibility and Selection Criteria**

Researchers, as well as practitioners and public and private policy-makers working with researchers, are eligible to submit proposals through their organizations. Projects may be initiated from within many disciplines, including health services research, economics, sociology, political science, public policy, public health, public administration, law and business administration. RWJF encourages proposals from organizations on behalf of researchers who are just beginning their careers, who can serve either individually as principal investigators or as part of a project team comprising researchers or other collaborators with more experience. Only organizations and government entities are eligible to receive funding under this program.

Preference will be given to applicants that are either public entities or nonprofit organizations that are tax-exempt under Section 501(c) (3) of the Internal Revenue Code and are not private foundations as defined under Section 509(a).

Complete selection criteria can be found in the Call for Proposals.

WEBSITE: <a href="http://www.rwjf.org/en/grants/funding-opportunities/2011/changes-in-health-care-financing-and-organization--small-grants.html">http://www.rwjf.org/en/grants/funding-opportunities/2011/changes-in-health-care-financing-and-organization--small-grants.html</a>

#### The National Children's Alliance

Deadline: http://www.nationalchildrensalliance.org/

**Amount:** See website

**Description:** The National Children's Alliance has a Request for proposals to help support the development of CACs and Multidisciplinary Teams. NACA encourages all

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tribal communities to apply. They can offer FREE technical support to help you with your application.

#### Common Wealth Fund

The Commonwealth Fund encourages and accepts unsolicited requests on an ongoing basis. The Fund strongly prefers grant applicants to submit letters of inquiry using the online application form. Applicants who choose to submit letters of inquiry by regular mail or fax should provide the information outlined in a two- to three-page document.

#### They fund:

- Delivery System Innovation and Improvement
- Health Reform Policy
- Health System Performance Assessment and Tracking

http://www.commonwealthfund.org/Grants-and-Programs/Letter-of-Inquiry.aspx

Kaboom! Invites Grant Applications to Open Previously Unavailable Playgrounds

**Deadline:** <u>KaBOOM!</u> is inviting grant applications from communities anywhere in the United States working to establish joint use agreements to re-open playground and recreational facilities previously unavailable due to safety and upkeep concerns. (No specific deadline.)

**Amount:** Let's Play Land Use grants of \$15,000 and \$30,000 will support creation of joint-use agreements between local governments and school districts that address cost concerns related to safety, vandalism, maintenance, and liability issues to re-open previously unavailable playgrounds and recreational facilities.

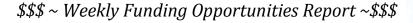
The \$15,000 grants will support the opening of at least four playgrounds in cities with populations of less than 100,000 people. The \$30,000 grants will support the opening of at least eight playgrounds in larger communities.

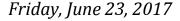
**Description:** Grants can be used for training and technical assistance, utilities and other building related to the extra use of the facility, legal fees, contract security

services, and marketing campaigns related to the joint-use agreement. Grant recipients must commit to opening the playgrounds within twelve months of the grant decision.

Complete grant application guidelines are available on the KaBOOM! website:

http://kaboom.org/about kaboom/programs/grants?utm source=direct&utm medium=surl





# Meyer Memorial Trust

**Deadline**: Monthly (Except January, April and August)

**Amount:** Range generally from \$40,001 to \$300,000 with grant periods from one to two (and occasionally three) years.

**Description:** Responsive Grants are awarded for a wide array of activities in the areas of human services, health, affordable housing, community development, conservation and environment, public affairs, arts and culture and education. There are two stages of consideration before Responsive Grants are awarded. Initial Inquires are accepted at any time through MMT's online grants application. Applicants that pass initial approval are invited to submit full proposals. The full two-step proposal investigation usually takes five to seven months. <a href="http://www.mmt.org/program/responsive-grants">http://www.mmt.org/program/responsive-grants</a>

Kellogg Foundation Invites Applications for Programs that Engage Youth and Communities in Learning Opportunities

**Deadline:** No Deadline

**Amount:** No Amount Specified

**Description:** The W.K. Kellogg Foundation is accepting applications from nonprofit organizations working to promote new ideas about how to engage children and youth in learning and ways to bring together community-based systems that promote learning. The foundation will consider grants in four priority areas: Educated Kids; Healthy Kids; Secure Families; and Civic Engagement.

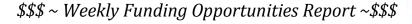
**Educated Kids:** To ensure that all children get the development and education they need as a basis for independence and success, the foundation seeks opportunities to invest in early child development (ages zero to eight) leading to reading proficiency by third grade, graduation from high school, and pathways to meaningful employment.

**Healthy Kids:** The foundation supports programs that work to ensure that all children grow and reach optimal well-being by having access to fresh, healthy food, physical activity, quality health care, and strong family supports.

**Secure Families:** The foundation supports programs that build economic security for vulnerable children and their families through sustained income and asset accumulation.

**Civic Engagement:** The foundation partners with organizations committed to inclusion, impact, and innovation in solving public problems and meeting the needs of children and families who are most vulnerable.

See the Kellogg Foundation Web site for eligibility and application guidelines. <a href="http://foundationcenter.org/pnd/rfp/rfp">http://foundationcenter.org/pnd/rfp/rfp</a> item.jhtml?id=411900024#sth ash.8WbcfJRk.dpuf



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# • W.K. Kellogg Foundation

**Deadline:** The Kellogg Foundation does not have any submission deadlines. Grant applications are accepted throughout the year and are reviewed at their headquarters in Battle Creek, Michigan, or in our regional office in Mexico (for submissions focused within their region).

# Amount: NO LIMIT (Please read restrictions/What they won't fund.)

**Description:** What to Expect Once they receive your completed online application, an automated response, which includes your WKKF reference number, will be sent to you acknowledging its receipt. Their goal is to review your application and email their initial response to you within 45 days. Your grant may be declined or it may be selected for further development.

As part of review process you may be asked to submit your organization's financial reports and/or IRS Form 990. While this information may be required, it is not intended to be the overall determining factor for any funding. You will not be asked to provide any financial reports or detailed budget information during this initial submission. They will only request this information later if needed as part of the proposal development.

If you would like to speak with someone personally, please contact the Central Proposal Processing department at (269) 969-2329. <a href="http://www.wkkf.org/">http://www.wkkf.org/</a>

## AHRQ Research and Other Activities Relevant to American Indians and Alaska Natives

http://www.ahrq.gov/research/findings/factsheets/minority/amindbrf/index.html

#### **Community Grant Program- WALMART**

**DEADLINE**: The 2016 grant cycle begins Feb. 1, 2016 and the application deadline to apply is Dec. 31, 2016. **Application may be submitted at any time during this funding cycle. Please note that applications will only remain pending in our system for 90 days.** 

**AMOUNT:** Awarded grants range from \$250 to \$2,500.

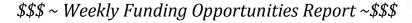
**DESCRIPTION:** Through the Community Grant Program, our associates are proud to support the needs of their communities by providing grants to local organizations.

WEBSITE: http://giving.walmart.com/apply-for-grants/local-giving

#### **SCHOLARSHIP:**

#### The Meyerhoff Adaptation Project -

The Meyerhoff Scholars Program is open to all high-achieving high school seniors who have an interest in pursuing doctoral study in the sciences or engineering, and who are interested in the advancement of minorities in the sciences and related fields. Students must be nominated for the program and are most typically nominated by their high school administrators, guidance counselors, and teachers. Awards range from \$5,000 – \$22,000 per year for four years.



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The Meyerhoff Selection Committee considers students academic performance, standardized test scores, recommendation letters, and commitment to community service. Scholars are selected for their interests in the sciences, engineering, mathematics, or computer science, as well as their plans to pursue a Ph.D. or combined M.D./Ph.D. in the sciences or engineering. Reviewing the freshman class profile may provide an idea of the kinds of students who are admitted to UMBC and the Meyerhoff Scholars Program.

Applicants are expected to have completed a strong college preparatory program of study from an accredited high school. The minimum program of study should include:

English: four years

Social Science/History: three years

Mathematics\*: three years

Science: three years

Language other than English: two years

\*Students are strongly recommended to have completed four years of mathematics, including trigonometry, pre-calculus, and/or calculus.

## **Eligibility Criteria**

To be considered for the Meyerhoff Scholars Program, prospective students must have at least a "B" average in high school science or math courses, and many applicants have completed a year or more of calculus. Preference is given to those who have taken advanced placement courses in math and science, have research experience, and have strong references from science or math instructors. In recent years, a strong preference has been given to those students interested in the Ph.D. or M.D./Ph.D. (over the M.D.).

Students must meet all eligibility requirements:

Minimum of 600 on the Math component of the SAT

Cumulative High School GPA of a 3.0 or above

Aspire to obtain a Ph.D. or M.D./Ph.D. in Math, Science, Computer Science, or Engineering

Display commitment to community service

Must be a citizen or permanent resident of the United States

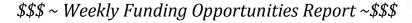
#### WEBSITE:

http://meyerhoff.umbc.edu/how-to-apply/benefits-and-eligibility/

#### ~ONLY FOR WASHINGTON STATE UNIVERSITY~

First Scholars - The Suder Foundation

**DEADLINE:** 



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**AMOUNT:** The goal of the First Scholars program is to help first-generation college students succeed in school, graduate, and have a life complete with self-awareness, success and significance. Scholars receive personalized support, including a four-year renewable scholarship of \$5,000. The program is open to incoming first-time, full-time freshmen whose parents have no more than two years of education beyond high school and no post-secondary degree.

**DESCRIPTION:** The First Scholars™ Program is available to incoming first-time, full-time freshmen whose parents have no more than two years of education beyond high school and no post-secondary degree. Participation in First Scholars™ includes a four-year renewable scholarship, half disbursed in the fall semester and half disbursed in the spring semester. Students can receive the award depending on eligibility requirements for a total of 4 years if program requirements are met.

This scholarship is open to Washington residents who enroll at Washington State University - Pullman full-time during the 2016-2017 academic year. The program requires that the recipients live on campus in a specified residence hall for the 2016-2017 academic year, and outside of the family home the following three academic years in order to renew the scholarship.

First-generation students represent a cross-section of America and college campus demographics. First Scholars come from diverse cultural, socioeconomic, geographic and family backgrounds and experiences. First-gen students are found in all departments and colleges of virtually every major public university across the country. Our affiliate universities have an average 30-50% first-gen enrollment and the number keeps rising. However, the average national graduation rate for first-generation students is only 34%, compared with 55% for the general student population.

WEBSITE: http://firstscholars.wsu.edu/

**Education Award Applications - The American College of Psychiatrists** 

**DEADLINE:** June 30

**AMOUNT:** (SEE WEBSITE)

**DESCRIPTION:** The Award for Creativity in Psychiatric Education is open to any creative/innovative program for psychiatric education that has been in operation for at least two years, and has been a part of a U.S. or Canadian approved psychiatric residency training program. Trainees may include: medical students, residents, other physicians, allied mental health professionals, or members of the community. The Committee selects an awardee in the fall; all applicants are notified of the Committee's decision by November 15.

WEBSITE: <a href="http://www.acpsych.org/awards/education-award-applications-deadline-december-1">http://www.acpsych.org/awards/education-award-applications-deadline-december-1</a>

(Internship Program/Scholarship Opportunities)

CDC Undergraduate Public Health Scholars Program (CUPS): A Public Health Experience to Expose Undergraduate and Graduate Students to Minority Health,

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# Public Health and Health Professions/Department of Health and Human Services/Centers for Disease Control - OD

**DEADLINE:** Jun 19, 2017 Electronically submitted applications must be submitted no later than 5:00 p.m., ET, on the listed application due date.

**AMOUNT:** \$850,000

**DESCRIPTION:** CDC seeks to fund organizations with the ability to reach undergraduate and graduate students, including sexual and gender, people with disabilities, low socioeconomic status (SES) and those from underrepresented racial and ethnic minority populations. The ultimate goal is to increase the diversity of the public health workforce, improve the representation of underrepresented populations in public health, and increase the quality of public health services nationally.

WEBSITE/LINK: <a href="http://www.cdc.gov/features/studentopportunities/index.html">http://www.cdc.gov/features/studentopportunities/index.html</a>

# DIRECTORS OF HEALTH PROMOTION AND EDUCATION (DHPE)-2017 SPRING HEALTH EQUITY INTERNSHIP

**DEADLINE: & AMOUNT:** For more information, contact Karen Probert at **internship@asphn.org**.

**DESCRIPTION:** DHPE has received supplemental funding to support the Health Equity Internship for an additional year. The funding is from the Centers of Disease Control and Prevention (CDC) Division for Heart Disease and Stroke Prevention (DHDSP). The mission of the CDC DHDSP is to provide public health leadership to improve cardiovascular health for all, reduce the burden, and eliminate disparities associated with heart disease and stroke. DHPE is working with the Association of State Public Health Nutritionists (ASPHN) to administer the Internship Program for the 2017 Spring cohort.

College students selected for these cohorts should be interested in an internship project and placement site that focuses on the following:

Cardiovascular Disease Risks Reduction:

Heart Disease Prevention and Education, including Hypertension and Stroke;

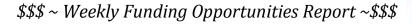
Nutrition and Healthy Eating;

Physical Activity and/or Obesity. Interested students should mention their proposed internship site within their application.

Preference will be given to undergraduate and graduate students who attend Minority-Serving Institutions (HBCUs, HSIs and Tribal Colleges), are from racial and ethnic populations, and/or have demonstrated interest in working to achieve health equity in minority and underserved communities.

**WEBSITE/LINK:** For more information, contact Karen Probert at <a href="mailto:internship@asphn.org">internship@asphn.org</a>.

**Native Student Travel Scholarships: Connecting STEM and Justice** 



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**DEADLINE:** Apply now for sponsorship to visit Philadelphia and attend the International Association of Chiefs of Police Conference (IACP) on October 21-24, 2017.

**AMOUNT:** Funding includes registration, airfare, lodging, ground transportation, baggage, meals, and incidental expenses. You would fly from your home airport to Philadelphia on October 20, 2017, and return on October 25, 2017. Decision notices will be sent to all applicants by August 30, 2017.

# DESCRIPTION: Are you an American Indian or Alaska Native student in science, tech, engineering, or math (STEM)?

The National Institute of Justice is looking for five qualified undergrad or grad students to attend this conference, which brings together thousands of professionals from federal, state, local, and tribal organizations.

Attendance will aid you in exploring applications of your STEM training to issues of criminal justice and public safety. You will have the opportunity to interact with scientists and attend panel discussions on the most urgent issues facing communities and innovative, evidence-based solutions.

WEBSITE/LINK: <a href="https://nij.gov/topics/tribal-justice/Pages/native-student-travel-scholarships.aspx?utm-source=eblast-govdelivery&utm-medium=email&utm-campaign=adhoc">https://nij.gov/topics/tribal-justice/Pages/native-student-travel-scholarships.aspx?utm-source=eblast-govdelivery&utm-medium=email&utm-campaign=adhoc</a>

#### **VETERANS**

VFW Accepting Applications From Veterans for Emergency Financial Assistance

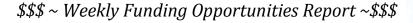
**DEADLINE:** Open

**AMOUNT:** Grants of up to \$5,000 will be awarded to active and discharged military service members who have been deployed in the last six years and have run into unexpected financial difficulties as a result of deployment or other military-related activity or natural disaster....

**DESCRIPTION:** As the nation's largest organization of combat veterans, we understand the challenges veterans, service members and military families can face and believe that experiencing financial difficulties should not be one of them. That's the premise behind the VFW's Unmet Needs program.

Unmet Needs is there to help America's service members who have been deployed in the last six years and have run into unexpected financial difficulties as a result of deployment or other military-related activity. The program provides financial aid of up to \$5,000 to assist with basic life needs in the form of a grant -not a loan- so no repayment is required. To further ease the burden, we pay the creditor directly.

Since the program's inception, Unmet Needs has distributed over \$5 million in assistance to qualified military families, with nearly half of those funds going directly toward basic housing needs.



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The needs of our veterans, service members and their families should never go unmet. Let us offer you a hand up when you need it!

Please review the Unmet Needs eligibility criteria to see if you or someone you know qualifies for a grant through the Unmet Needs program.

WEBSITE: http://www.vfw.org/UnmetNeeds/?gclid=CjwKEAiAhPCyBRCtwMDS5tzT0 3gSIADZ8VjRw5RxJw1br5NTowrY1NFzylowGtdvOagXa3LHyYK PRoCB4Hw wcB

RWJF: Submit a Pioneering Idea Brief Proposal - Throughout the year, we welcome Pioneering Ideas Brief Proposals that can help us anticipate the future and consider new and unconventional perspectives and approaches to building a Culture of Health.

**DEADLINE:** Open

**AMOUNT:** See site

**DESCRIPTION:** The goal of the Pioneering Ideas Brief Proposal funding opportunity is to explore; to look into the future and put health first as we design for changes in how we live, learn, work and play; to wade into uncharted territory in order to better understand what new trends, opportunities and breakthrough ideas can enable everyone in America to live the healthiest life possible.

While improving the status quo is vital to the health and well-being of millions of Americans now, the Pioneering Ideas Brief Proposal opportunity reaches beyond incremental changes to explore the ideas and trends that will influence the trajectory and future of health. Ultimately, we support work that will help us learn what a Culture of Health can look like—and how we can get there.

# What is a Pioneering Idea?

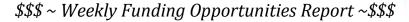
Good question! We don't want to provide a checklist that limits your thinking—or ours. We do want to give you as clear a picture as we can about the kinds of proposals we hope to see, so you can best assess whether submitting an idea through our Pioneering Ideas Brief Proposal process is the right next step for you. Our application form allows you to introduce your idea; if it seems to be a fit for our portfolio we will reach out for more information.

We share some examples below of Pioneering Ideas we have funded in the past to give you a sense of where we've been. Keep in mind that ultimately, we need you to challenge us, and to tell us where we should be going and what ideas have the most potential to transform the way we think about health. As you review the examples below, you may notice some shared themes or characteristics which:

Challenge assumptions or long-held cultural practices.

Take an existing idea and give it a new spin—or a novel application.

Offer a new take or perspective on a long-running, perplexing problem.



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Apply cutting-edge ideas from other fields to health.

Explore the potential for emerging trends to impact our ability to build a Culture of Health.

WEBSITE/LINK: <a href="http://www.rwjf.org/en/how-we-work/submit-a-proposal.html?rid=CR0RfoW1kVrIxFKudcSYjlL9Zh7yWU63VdhdaVE2UAc&et cid=6">http://www.rwjf.org/en/how-we-work/submit-a-proposal.html?rid=CR0RfoW1kVrIxFKudcSYjlL9Zh7yWU63VdhdaVE2UAc&et cid=6</a> 39126

#### **IDAHO & WASHINGTON - ONLY**

#### **ASPCA Northern Tier Shelter Initiative Coalition Grants**

**DEADLINE:** No Deadline

**AMOUNT:** Grant amounts will vary depending on project. A site visit may be required as part of the review process or as a condition of receiving the grant funds. Consultation services may be offered as part of a grant package.

**DESCRIPTION:** Priority will be given to coalitions working toward long-term, systemic, and sustainable community/regional improvements in animal welfare services. This may include (but not limited to) programs that:

Increase capacity to provide quality animal care and services by:

Improving protocols around vaccination on intake, disease spread prevention, decreased length of stay, physical and behavioral care of sheltered pets

Improving capacity to provide basic health services including spay/neuter and vaccines for animals at risk in the community.

Increase coalition live release rate via:

Fee-waived adoption programs and policies

High-volume adoption events

Foster programs

Relocation initiatives within the seven Northern Tier target states

Decrease shelter intake via:

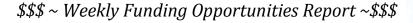
Lost and found programs

Return to owner in the field

Pet retention assistance, such as safety net programs

Re-homing assistance

WEBSITE: <a href="http://aspcapro.org/grant/2016/05/06/aspca-northern-tier-shelter-initiative-coalition-grants">http://aspcapro.org/grant/2016/05/06/aspca-northern-tier-shelter-initiative-coalition-grants</a>



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# **Healthy Native Babies Outreach Stipend Application**

**DEADLINE:** Applications will be accepted on a rolling basis as funds are available.

**AMOUNT:** \$1500

**DESCRIPTION:** The Healthy Native Babies Project, a project of the Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD), has created culturally appropriate materials with safe infant sleep messages for American Indian and Alaska Native communities. These materials can be tailored for local communities by selecting various photos, graphic designs, and phrases in Native languages from the Healthy Native Babies Project Toolkit Disk. Outreach stipends are available for printing customized outreach materials to disseminate in your community. Recipients must be from one of the following Indian Health Service (IHS) Areas: Alaska, Bemidji, Billings, Great Plains, and Portland. Information on IHS Areas can be found at: <a href="https://www.ihs.gov/locations/">https://www.ihs.gov/locations/</a>.

WEBSITE/LINK: <a href="http://files.constantcontact.com/913a319f001/8e50ceae-d3be-462e-be3d-3216455225bc.pdf?ver=1470849886000">http://files.constantcontact.com/913a319f001/8e50ceae-d3be-462e-be3d-3216455225bc.pdf?ver=1470849886000</a>

**Good Sports Accepting Applications for Sports Equipment Program** 

**DEADLINE:** ROLLING FUNDING

**AMOUNT:** While the equipment, apparel, and footwear received through the program are free, recipients are expected to pay shipping and handling costs, which amount to roughly 10 percent of the donation value, with a maximum fee of \$1,500.

**DESCRIPTION:** Good Sports helps lay the foundation for healthy, active lifestyles by providing athletic equipment, footwear, and apparel to disadvantaged young people nationwide. By working closely with teams, coaches, and community leaders across the United States, the organization is able to focus on the respective needs of each individual program and help offset the main factors causing the greatest challenges.

Good Sports is accepting applications from organizations and schools for equipment, apparel, and footwear for a wide range of sports. Organizations that are approved will have access to equipment, apparel, and footwear inventory for a two-year period. During that time, organizations can make up to six separate donation requests — as long as need is well documented, donations will be granted. There is no need to resubmit a full application again during the two-year period.

To be eligible, applicants must directly serve youth between the ages of 3 and 18; serve youth in an economically disadvantaged area; be located in North America (the U.S. and Canada); and operate an organized sport, recreational activity, or fitness program that offers consistent and structured opportunity for play to large groups of children. Schools must apply as a whole; applications for individual programs within a school will not be considered. Donation requests for short-term events such as sports camps and tournaments or to individual athletes will not be considered.

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Applications are reviewed on a rolling basis. It is recommended, however, that organizations apply at least eight weeks prior to the start of their particular season or program to ensure the desired equipment can be accessed and shipped on time.

WEBSITE/LINK: https://www.goodsports.org/apply/

**Good Sports Accepting Applications for Athletic Equipment Grants** 

**DEADLINE:** ROLLING FUNDING

**AMOUNT:** You will be required to sign a release form and pay a shipping and handling fee with each donation. This will always equal 10% of the total retail value of the items; for example, if the total value of your items equals \$2,000, you will be asked to provide \$200, etc.

**DESCRIPTION:** Good Sports in Quincy, Massachusetts, is a nonprofit whose mission is to increase youth participation in sports, recreation, and fitness activities.

To that end, the organization provides sports equipment, apparel, and footwear to youth organizations offering sports, fitness, and recreational programs to youth in need.

To be eligible, organizations must directly serve youth between the ages of 3 and 18 in an economically disadvantaged area; be located in North America (U.S. and Canada); and operate an organized sport, recreational activity, or fitness program that offers consistent and structured opportunity for play to large groups of children. Winning organizations may make up to six equipment requests within a two-year period. Winners will be responsible for operational costs, including equipment shipping, up to \$1,500.

WEBSITE/LINK: <a href="http://www.goodsports.org/apply/">http://www.goodsports.org/apply/</a>

# **Voya Foundation Grants**

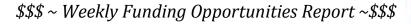
**DEADLINE:** Grant requests are reviewed throughout the year. Grant applicants should check the online system for quarterly deadlines, which are subject to change.

**AMOUNT:** Value of grant requests must be a minimum of \$2,500.

**DESCRIPTION:** The Voya Foundation, the philanthropic arm of Voya Financial, works to ensure that youth are equipped with science, technology, engineering, and math (STEM) expertise and financial knowledge necessary to compete in the twenty-first century workforce and make smart financial decisions that lead to a secure retirement.

To that end, Voya is accepting applications from organizations that provide innovative and experiential K-8 STEM learning opportunities that promote an early interest in STEM career fields and improve teachers' capabilities in STEM; or that provide financial education curriculum to grade 9-12 students focused on navigating major financial milestones such as student debt, credit, home ownership, financial products and services/financial capability, and family needs.

1) STEM Education: The foundation supports organizations that fund high-quality experiential STEM learning opportunities for children in grades K-8. Programs are



# Friday, June 23, 2017

evaluated based on improvements in covered STEM concepts and increased interest in STEM careers generated over the course of the program.

2) Financial Literacy: Voya's financial literacy grants support organizations that provide financial literacy curriculum to students in high school (grades 9-12). Programs must cover student debt, credit, home ownership, investing, and understanding of financial products and services (financial capability), and family financial planning.

To be eligible, applicants must be considered tax exempt under Section 501(c)(3) of the Internal Revenue Code.

WEBSITE/LINK: <a href="http://corporate.voya.com/corporate-responsibility/investing-communities/voya-foundation-grants">http://corporate.voya.com/corporate-responsibility/investing-communities/voya-foundation-grants</a>

Greetings,

Please see the following grants which are currently available.

<u>Basic Center Program</u> – Applications due: Jul 14, 2017. The purpose of the BCP is to provide temporary shelter and counseling services to youth who have left home without permission of their parents or guardians, have been forced to leave home, or other homeless youth who might otherwise end up in the law enforcement or in the child welfare, mental health, or juvenile justice systems.

Collaborative Improvement and Innovation Network on Infant Mortality (IM CollN) – Applications due: Jul 17, 2017. At the local level, Healthy Start grants are provided to communities with high annual rates of infant mortality (i.e., at least 1½ times the U.S. national average) and high rates for other adverse perinatal outcomes (e.g., low birthweight, preterm birth, maternal morbidity and mortality) in order to address the needs of high-risk women and their families before, during, and after pregnancy.

Rural Health Opioid Program – Applications due: Jul 21, 2017. The purpose is to promote rural health care services outreach by expanding the delivery of opioid related health care services to rural communities. The program will reduce the morbidity and mortality related to opioid overdoses in rural communities through the development of broad community consortiums to prepare individuals with opioid-use disorder (OUD) to start treatment, implement care coordination practices to organize patient care activities,[1] and support individuals in recovery through the enhancement of behavioral counselling[2] and peer support activities.[3] This program will bring together health care providers (i.e. local health departments, hospitals, primary care practices, and substance abuse treatment providers) and entities such as social service and faith-based organizations, law enforcement, and other community-based groups to respond multifaceted to the opioid epidemic in a rural community. The consortium must include at least three (3) health care providers.

<u>Innovations in Nutrition Programs and Services</u> – Applications due: Aug 7, 2017. Funding will support innovative and promising practices that move the aging network towards evidenced based practices that enhance the quality, effectiveness of nutrition services programs or outcomes within the aging services network. Innovation can include service products that appeal to caregivers (such as web-based ordering systems and carryout food products), increased involvement of volunteers (such as retired chefs), consideration of eating habits and choice (such as variable meal times, salad bars, or more fresh fruits and vegetables), new service models (testing variations and hybrid strategies) and other innovations to better serve a generation of consumers whose needs and preferences are different.

<u>Elder Justice Innovation Grants</u> – Applications due: Aug 14, 2017. The purpose is to support the development and advancement of new and emerging issues related to elder justice. Funded projects will contribute to the improvement of the field of elder abuse prevention and intervention at large, such as by developing materials, programs, etc. that can be widely disseminated and/or replicated, or by establishing and/or contributing to the evidence-base of knowledge.

Socioeconomic Disparities in Health and Mortality at Older Ages (R01) – Applications due: Oct 20, 2017. The purpose of this funding opportunity announcement (FOA) is to support studies that identify mechanisms, explanations, and modifiable risk factors underlying recent trends of growing inequalities in morbidity and mortality by income, education, and geographic location at older ages in the United States.

Pilot Studies to Test the Initiation of a Mental Health Family Navigator to Promote Early Access, Engagement and Coordination of Needed Mental Health Services for Children and Adolescents (R34) — Applications due: Jan 7, 2018. The purpose is to encourage research applications to develop and pilot test the effectiveness and implementation of family navigator models designed to promote early access, engagement and coordination of mental health treatment and services for children and adolescents who are experiencing early symptoms of mental health problems. NIMH defines a family navigator model as a health care professional or paraprofessional whose role is to deploy a set of strategies designed to rapidly engage youth and families in needed treatment and services, work closely with the family and other involved treatment and service providers to optimize care and monitor the trajectory of mental health symptoms and outcomes over time.

U.S. Tobacco Control Policies to Reduce Health Disparities (R01) / U.S. Tobacco Control Policies to Reduce Health Disparities (R21) - Applications due: Jun 15, 2020. This FOA is intended to stimulate scientific inquiry focused on innovative tobacco control policies. Applicants may propose projects in which the primary outcome of interest is on reducing tobacco use health disparities in vulnerable populations by utilizing tobacco prevention and control strategies. The long-term goal of this FOA is to reduce health disparities in health outcomes thereby reducing the excess disease burden of tobacco use within these groups.

FY 2017 Economic Development Assistance Programs Application submission and program requirements for EDA's Public Works and Economic Adjustment Assistance programs — No application due date. Under this NOFA, EDA solicits applications from applicants in rural and urban areas to provide investments that support construction, non-construction, technical assistance, and revolving loan fund projects under EDA's Public Works and EAA programs. Grants and cooperative agreements made under these programs are designed to leverage existing regional assets and support the implementation of economic development strategies that advance new ideas and creative approaches to advance economic prosperity in distressed communities.

Thanks!

Nicki

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Region 10 serving Alaska, Idaho, Oregon and Washington

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For information on how to use your health coverage, whatever the source, visit From Coverage to Care.

Subject: Emergency Preparedness Final Rule Webinar Link for your review

Good Afternoon,

The following link is to the **CMS Emergency Preparedness Final Rule Webinar** that was held on May 18<sup>th</sup>, 2017: <a href="http://www.cmsitutrainings.net/">http://www.cmsitutrainings.net/</a>

It can also be found by traversing the <a href="CMS.gov">CMS.gov</a> website to Outreach and Education>AI/AN>Outreach and Education Resources>Trainings and then to the <a href="www.CMSITUTRAININGS.net">www.CMSITUTRAININGS.net</a> link.

Please forward to tribal organizations and facilities in your area for their continued Emergency Preparedness CoP development which is to be in place by November 15, 2017.

Thank you for sharing,

**CAPT Susan V. Karol, MD, FACS** 

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2017-ISSUE 124

# N C C D P H P GOOD HEALTH AND WELLNESS IN INDIAN COUNTRY TRIBAL RESOURCE DIGEST

Welcome to Centers for Disease Control and Prevention's (CDC) tribal resource digest for the week of June 19, 2017. The purpose of this digest is to help you connect with the tools and resources you may need to do valuable work in your communities.



Alaska June 2017

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# **Request for Photos**

Please send any photos of GHWIC work (community gardens, events, team meetings, etc.) to Anisha Quiroz, <u>AQUIROZ@cdc.gov</u> with a short description of the photo.

#### **Announcements**

# 2017 National Tribal Health Conference Call for Proposals

he National Tribal Health Conference is the leading Indian health event in the nation. The event attracts over 800 Tribal leaders, health directors, advocates, researchers, and federal partners. This year's conference theme, "United Tribal Voices Advocating for Healthy Native People" will provide key opportunities for leaders in Indian health to network, participate in Tribal consultations and listening sessions with federal agencies, and choose from over 80 hours of training on leading Tribal healthcare and public health programs and policy. Proposals due by July 7, 2017. Read more here.

When: September 25-28, 2017 Where: Bellevue, WA

Native Youth Initiative for Leadership, Empowerment, and Development

upports the development of programs that apply comprehensive, culturally-appropriate approaches to fostering Native youth resilience, capacity building, and leadership, thus ensuring opportunities for all Native youth to thrive. This framework will support capacity building, inter-generational engagement and understanding, and the empowerment and self-development of Native youth, ages 14-24. Projects should be youth centered and youth driven.

Read more here.



# Southwest Hepatitis C Tribal Summit

he Indigenous Food and Agriculture Initiative (IFAI), with generous support by the Shakopee Mdewakanton Sioux Community (SMSC) through its Seeds of Native Health campaign, announce the opening of up to 20 VISTA positions available at up to 10 tribal governments and tribal communities throughout the United States. VISTA is an important and vital community and public service program operated by the Corporation for National and Community Service. Read more <a href="https://example.com/here-example

When: June 28-29, 2017 Where: Albuquerque, NM

# Nutrition Environment Measures Survey

he NEMS Tools are observational measures to assess the community and consumer nutrition environments in food outlets, specifically stores, corner stores and restaurants. The measures focus on availability of healthful choices, prices and quality. Read more here.



#### Law 360/Native American

se this as a resource to get free daily emails regarding varied topics like Policy & Regulation and Litigation related to Native Americans. Read more <a href="here">here</a>.



## Suicide Prevention

he Division of Violence Prevention is hiring a post-doctoral level ORISE fellow in suicide prevention. The fellow will assist with a project to conduct an environmental scan of suicide prevention activities and climate in all 50 US states, Washington DC and US territories. In addition, the fellow will have opportunities to assist with research trials testing the effectiveness of innovative interventions to decrease suicidality among middle-aged men, and will gain valuable knowledge and experience related to the public health approach to suicide prevention.

Read more here.

# **Funding Opportunities**

# The Health Impact Project

he Health Impact Project provides grants to support the use of health impact assessment to improve local health outcomes and to build the capacity of organizations to conduct health impact assessments to bring both health evidence and community voice to decisions made in sectors outside of healthcare.

This opportunity is focused on addressing the social and economic factors that contribute to health, including education, employment, family and social support, and community safety. These factors can be affected by decisions in a range of sectors, such as housing, transportation, criminal justice, community development, and others.

# Empowered Communities for a Healthier Nation Initiative

he Empowered Communities for a Healthier Nation Initiative will seek to reduce significant health disparities impacting minorities and disadvantaged populations through the implementation of evidence-based strategies with the greatest potential for impact. The program will serve residents in counties disproportionately impacted by the opioid epidemic; reduce the impact of serious mental illness at the primary care level for children, adolescents and/or adults; and reduce obesity prevalence and disparities in weight status among disadvantaged children and adolescents. Read more <a href="here">here</a>.

Deadline: July 31, 2017

# Webinar

# NNN Webinar: "American Indian Commercial Tobacco Program (AICTP) Updates"

he Inter-Tribal Council of Michigan's National Native Network and the Indian Health Service Clinical Support Center (Accredited Provider) present a webinar series: Cancer Risk Reduction in Indian Country. Register <a href="here">here</a>. Read more <a href="here">here</a>.

When: June 27, 2017 @ 3pm EDT



Incorporating Public Health Skills To Improve Quality of Life: Examples From Native American Food Systems

he Western Region Public Health Training Center (WRPHTC) is hosting its first virtual conference bringing together public health workers, researchers, and educators to discuss and develop the skills needed to tackle disparities in diet-related disease and food access. Register now. Read more <a href="here.">here.</a>

When: August 22-24, 2017

# Mountain States Regional Health Equity Council Native American Cultural Competency Series

id you miss the Mountain States RHEC's recent webinars?

Overview of Working with Tribal Governments—This webinar covers the history of tribes and treaties, utilization of CLAS Standards, cultural sensitivity when working with tribal communities and the impact of cultural needs assessments. View it here.

Cultural Sensitivity when Collecting Sensitive Data—This webinar discusses the benefits of providing culturally and linguistically appropriate services and identifies the protocols of the Great Plains tribes, and it discusses effective strategies when working with the Native American population.

View it here. More info here.



# American Indian/Alaska Native NPA Caucus

heck out these recordings!

National Tribal Behavioral Health Agenda (TBHA)—The TBHA marks the first tribally informed blueprint for improving behavioral health outcomes in American Indian and Alaska Native (Al/AN) communities. Watch as NIHB staff provides an in-depth analysis of the TBHA. View it <a href="here">here</a>.

The Hope Squad Program—This webinar focuses on the work of the Hope Squad Program, a school-based peer advocate program that works to prevent suicide and decrease the incidence of untreated mental illness and how the program is implemented. View it <a href="here">here</a>. More info here.

#### **Contact Information**

National Center for Chronic Disease Prevention and Health Promotion

Office of the Medical Director 4770 Buford Highway, MS F80 Atlanta, GA 30341 (770) 488-5131

http://www.cdc.gov/chronicdisease/index.htm

The digest serves as your personal guide to repositories of open and free resources where you can find content to enrich your program or your professional growth. Please note that CDC does not endorse any materials or websites not directly linked from the CDC website. Links to non-Federal organizations found in this digest are provided solely as a courtesy. CDC is not responsible for the content of the individual organization web pages found at these links.

If you have comments or suggestions about this weekly update, please email Anisha Quiroz at <a href="mailto:AQUIROZ@cdc.gov">AQUIROZ@cdc.gov</a> with the words "TRIBAL DIGEST" in the subject line.



# **Position Announcement**





Suzanne Gray, Sexual Assault Response Coordinator <a href="mailto:suzanne@oregonsatf.org">suzanne@oregonsatf.org</a>

Suzanne Gray, who has served as our Criminal Justice Coordinator for the last 18-months, is moving into a newly minted position at SATF - the *Sexual Assault Response Coordinator*. In addition to serving as staff liaison to the <u>Victim Response Subcommittee</u>, Suzanne will lead our advocacy and Sexual Assault Response Team (SART) training and technical assistance efforts. Suzanne will plan and implement our annual 40-hour Advocate Training, co-lead our Rural SANE Training and Capacity Building Project with a focus on medical advocacy and SART support in Curry, Morrow, Umatilla, and Union Counties, and provide broader advocacy and SART support through a variety of funding sources. Suzanne will

transition into her new role beginning in July, while shepherding our current projects during our search for a Criminal Justice Coordinator.

Please continue to reach out to Suzanne for any questions you might have and offer up a congratulations to her! You can <u>learn more about Suzanne and all of the SATF staff</u> by visiting our website (or over coffee!).

# **Criminal Justice Coordinator**



Come work with us! In addition to serving as the staff liaison to the Criminal Justice Subcommittee, the Criminal Justice Coordinator will lead and develop training and technical assistance activities for multi-disciplinary partners, with a particular focus on the criminal justice system. The Criminal Justice Coordinator works with allied staff and works closely with our <u>Sexual Assault Training Institute faculty</u> to develop curriculum and training materials to improve the investigation and prosecution of sexual assault related crimes.

This position is supported by a mix of state and federal funds, and requires travel with our instructors in Oregon and nationally to provide sexual assault specific training for law enforcement and prosecutors. This position maintains a survivor-centered, social justice, and mission-driven focus while navigating system-based environments.

Applications can be emailed to <a href="mailto:taskforce@oregonsatf.org">taskforce@oregonsatf.org</a> and will be reviewed beginning June 28, 2017. The interview process will include a writing sample, brief presentation, and conversation with the SATF team. The position will remain open until filled.

Apply Here!

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Our mailing address is: 3625 River Rd, N Suite 275 Keizer, OR 97303

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