NEW GRANTS & PROGRAMS

The Atlantic Philanthropies (New York, NY) awarded a $3.5-million grant to Boston College’s Center for the Study of Home and Community Life (Boston, MA). Funding will be used to expand the center’s Cash & Counseling Program, a consumer-directed health care program that matches counselors with individuals who want to design their own health care plans, enabling them to hire family members, friends, or professionals as caregivers; renovate their homes for handicap accessibility; and buy assistive devices. The grant will enable the program to expand the reach of its operations from 15 states to 40 states. For more information, visit www.atlanticphilanthropies.org/news.

Blue Foundation for a Healthy Florida (Jacksonville) awarded a $100,000 grant to Clinica Luz Del Mundo, Inc. (Oakland Park, FL). Funding will enable the clinic to provide free medical exams, prescriptions, disease management, and medical screenings to approximately 1,500 to 2,000 patients within the next two years. In addition to on-site medical care, multilingual volunteer medical professionals will conduct community outreach to educate community members about the importance of regular health, annual checkups, good nutrition, and healthy lifestyles. The foundation also approved $499,418 for grants that will fund further study of the childhood obesity epidemic’s impact on children and health care costs; and War on Poverty (Jacksonville, FL) – $100,000 to research a comprehensive community awareness and engagement campaign with residents, schools, churches, child care centers, restaurants, grocers, and government agencies in northwest Jacksonville to improve children’s access to active living and nutritious food that lead to healthy weight and lifestyles. Contact: Paul Kluding, 904.905.3404.

California HealthCare Foundation (Oakland) announced plans to provide more than $2 million in grants to help educate health care providers about a communications tool that gives seriously ill patients greater control over their end-of-life medical care. The tool, called the Physician Orders for Life-Sustaining Treatment (POLST), addresses issues such as pain management, resuscitation orders, feeding procedures, and other medical interventions. The form is completed with the approval of both the patient and the physician. POLST differs from an advance directive in that it has the force of a physician’s medical order and remains with patients wherever they receive care. The California Coalition (Newark, DE) – $100,000 to engage child care centers in Orlando to teach healthy eating and active lifestyles using a successful curriculum to three- to five-year-olds;

University of South Florida, Division of Sponsored Research (Tampa) – $100,000 to examine 2003 to 2008 data about the impact of obesity on children, youth, and families, as well as health care costs and report findings in a publication that will inform state policymakers and decisionmakers about childhood obesity and its impact on children and health care costs; and

War on Poverty (Jacksonville, FL) – $100,000 to research a comprehensive community awareness and engagement campaign with residents, schools, churches, child care centers, restaurants, grocers, and government agencies in northwest Jacksonville to improve children’s access to active living and nutritious food that lead to healthy weight and lifestyles. Contact: Paul Kluding, 904.905.3404.

GIH NEWS

ANNUAL MEETING REGISTRATION EXTENDED

March 2 is the last day to register for the 2009 GIH annual meeting without being charged a late fee. Register at www.gih.org today!

GIH SURVEYS THE FIELD ON THE ECONOMIC CRISIS

To learn how health foundations are responding to the current economic crisis, GIH surveyed the field at the end of 2008. The survey sought information on how health foundation assets and grantmaking budgets have been affected, the strategies health foundations are using to support grantees, and how foundations are addressing their own financial challenges. Survey highlights include:

• 91 percent of GIH Funding Partners reported a decrease in asset base.
• 61 percent are seeking new collaborations or partnerships with public and private funders.
• 34 percent are delaying consideration of new initiatives or multiyear obligations.
• 58 percent report reductions in overall administrative expenses.

To read the entire survey results, visit www.gih.org.
for Compassionate Care (Sacramento), a partnership of more than 60 statewide and regional organizations dedicated to the advancement of palliative care and compassionate end-of-life care in California, continues to lead the initiative. For more information about POLST, visit www.finalchoices.org. Contact: Marcy Kates, mkates@chcf.org, 510.587.3162.

Greater Rochester Health Foundation (NY) awarded nearly $2 million to local community organizations and health care systems over a two-year period to improve the health of residents of the greater Rochester area. Grants cover a range of activities from transportation, to medical appointments for older adults, to prevention of teen pregnancy. Among the grantees are: Medical Motor Service of Rochester and Monroe County, Inc. – $278,816 to improve transportation access for older adults; University of Rochester – $253,990 to support the Downtown Oral Health Care Center; Visiting Nurse Foundation (Rochester) – $110,395 to support the TeleHealth Home Health Care program; and The Children’s Agenda (Rochester) – $41,216 to support efforts to prevent poor health outcomes for the area’s most vulnerable children. Contact: Lynnette Loomis, 585.258.1717, lloomis@theghf.org.

The Health Foundation of Central Massachusetts (Worcester) awarded a $385,762 grant to the Worcester Advisory Food Policy Council to support the Hunger-Free and Healthy program. This pilot program aims to connect local residents with available programs that work toward combating hunger and advocates for systemic changes and improvements to relevant state programs, such as food stamps and free breakfast programs in public schools. The program also provides gardening classes and works with local stores to expand their offerings of healthy foods. For more information, visit www.hfcm.org.

Kaiser Permanente (Oakland, CA) approved 739 Community Benefit grants and donations totaling approximately $43 million. Kaiser Permanente has funded five organizations with $4.5 million via the Southern California Specialty Care Access Initiative, which addresses the access of low-income and underserved populations to specialty health services including gastroenterology, orthopedics, neurology, ophthalmology, and cardiology. These grants will be issued to: The Children’s Clinic (Long Beach, CA); Council of Community Clinic Healthcare Network (San Diego, CA); Ventura County Medical Center Health Care Agency (CA); Southside Coalition of Community Health Centers (Los Angeles, CA); and Los Angeles County and the University of Southern California Health Care Network. Other grant recipients include: University of California, Los Angeles – $2 million to support the David Geffen School of Medicine’s efforts to expand the Hispanic International Medical Graduate Program aimed at increasing the number of Hispanic family physicians in California; Center to Promote Healthcare Access (Oakland, CA) – $2 million to establish a partnership with the center and the Los Angeles Unified School District to expand programs to increase the number of children and families enrolled in health and social service programs; and California Food Policy Advocates of Southern California (Oakland) – $250,000 to support the Early Childhood Obesity Prevention Project, which targets improving access to healthy food for low-income children under five years of age. Contact: Lorna Fernandes, 510.271.5624, lorna.d.fernandes@kp.org.

Lucille Packard Foundation for Children’s Health (Palo Alto, CA) awarded more than $1.3 million in grants to children’s health organizations in San Mateo and Santa Clara counties. WestEd (San Jose) will receive $410,000 over three years for Promoting Resilience and School Connectedness: A Youth & Data Driven Student-Family-School-Community Partnership Demonstration to pilot-test a project using data from the California Healthy Kids Survey, focus groups, and community forums to develop a program to improve preteen emotional and behavioral health at Bay Area middle schools. A three-year, $366,000 grant to the New Teacher Center (Santa Cruz) will support Professional Development on Behavioral Health and Emotional Literacy, a collaboration with the Cleo Eulau Center to develop curricula on emotional and behavioral health for new teachers and their mentors, offer professional development on emotional literacy for school administrators, provide in-depth emotional literacy consulting to two middle schools, and offer professional development to 375 beginning teachers. Project Cornerstone (San Jose) will use its two-year, $160,000 grant toward its School Partnerships Program’s efforts to provide training and technical assistance to 26 elementary and middle schools to help staff, students, and parents develop and implement strategies to decrease bullying and create safe, caring environments that value and promote all students’ well-being. The foundation awarded $10,000 to Youth Community Service (Palo Alto) for the evaluation and revision of the curriculum for an afterschool service-learning program for underserved preteens from middle schools in the Ravenswood School District, and adopt standards for quality practices. Contact: Eileen Walsh, 650.736.2881, eileen.walsh@lpchf.org.

Phoenixville Community Health Foundation (PA) awarded $213,500 in grants to local nonprofit organizations that provide health and human services to residents of the greater Phoenixville area. Among the grantees are: Healthcare Access Foundation – $44,500 to provide dental and vision services as well as prescription drug assistance to those in need; ARC of Chester County – $10,000 for medical case management services for families living with autism; and Adult Care of Chester County – $4,000 to assist with a new telecommunications system. Contact: Louis Beccaria, 610.917.9890, ljbeccaria@pchf1.org.

Pottstown Area Health & Wellness Foundation (PA) announced an investment of $1.6 million to local community organizations to enhance the health and wellness of area residents. The foundation distributes grants according to its four long-term goals: to reduce behavioral risks, to improve access to medical

(Continued on Page 6)
Lower Pearl River Valley Foundation

The Lower Pearl River Valley Foundation was created in October 1998 as a private foundation resulting from the sale of the Crosby Memorial Hospital in Picayune, Mississippi. The foundation’s mission is to improve the physical, mental, emotional, spiritual, and social health of the people it serves. After Hurricane Katrina, the foundation expanded its service area to meet the needs of children and their families who suffered physical and emotional trauma.

Program Information: The foundation funds proposals that alleviate health-related concerns within its service area. Ninety-five percent of the grants awarded relate to the physical, mental, emotional, spiritual, and social health of the community; however, grants that relate to economic health have also been approved. The foundation supported the development of a countywide strategic plan for community and economic development, planning efforts for a new health department facility for Pearl River County, and the construction of a senior center. Significant funding has been dedicated to the development of a program in local school districts to lessen the effects of obesity and diabetes. Family health initiatives have been funded for developing early childhood education programs. A recent foundation grant provided for space to house a pilot program in Mississippi for the Nurse-Family Partnership program.

Financial Information:
- Total Assets: $17.5 million (FY 2008)
- Amount Dedicated to Health Grants: $5 million (FY 2000-2008)

Special Initiatives and Representative Health Grants

• Safe Harbor – Safe Harbor was the foundation’s largest-ever special initiative. The International Rotary Foundation; the National Recreation Foundation; and other foundations, corporations, and individuals from Seattle, Washington, to Sarasota, Florida, partnered to provide summer activities and after school programs for two years following Hurricane Katrina. These programs assisted in easing the physical and emotional trauma suffered by children in the devastated area. More than 6,000 children and their families engaged in recreational and educational activities that significantly aided in the healing process and provided respite from Federal Emergency Management Agency trailers ($2.3 million over two years).

• Healthy Lifestyles – Mississippi leads the nation in childhood obesity and has a critical problem with childhood diabetes. The foundation led an initiative to educate students, parents, and staff in Pearl River County schools to change their lifestyles by making healthier food choices and adopting a regular exercise regimen. The Healthy Lifestyles program is funded by Lower Pearl River Valley Foundation, Robert Wood Johnson Foundation, and Blue Cross and Blue Shield of Mississippi Foundation. Healthy Lifestyles’ principles are incorporated into the school curriculum, healthy food choices are now available in school cafeterias, and vending machines contain healthier selections. Program participants and local citizens are encouraged to use the walking tracks and fitness stations. Each participant has an initial health screening whereby height, weight, blood pressure, and cholesterol levels are measured and documented. Body mass index is calculated and entered into personal wellness plans. Participants’ progress is tracked, and interim results indicate that some improvement is being realized ($1.1 million over four years).

• Nurse-Family Partnership (NFP) – A pilot initiative for Mississippi, NFP is an early intervention program that teaches various parenting skills through home visits by registered nurses to participating families, from pregnancy until the resulting child is two years old. Office space was constructed to house this program and a planning grant is being completed prior to the program’s launch. ($220,000 for office space and planning grant).

• Sight Savers Katrina Program – This program is a pilot initiative for Mississippi to provide vision screening, referral, diagnosis, and treatment for children in the second, fourth, and sixth grades in Pearl River County, including children in Hancock County who have been affected by Hurricane Katrina ($173,250).

Quality of Life Decisions:
“Our foundation’s work makes real connections and forges lasting and significant relationships with children and their families, program partners, school communities, family advocates, and other organizations to provide care to those most in need.”

Ted J. Alexander
Chief Executive Officer
In this time of economic hardship, foundations – like us all – are searching for the most creative and productive strategies for getting the most out of constrained budgets. Many foundations that support research, as well as health care delivery, have become aware that in attempting to understand complex issues related to human health, behavior, and well-being, it is often most useful, even necessary, to employ an interdisciplinary approach. This relates to the growing consensus that knowledge of real world problems can rarely be grasped through the lens of a single discipline.

Such knowledge requires the integration of different perspectives, intellectual models, and research strategies, as well as overcoming the tendency for researchers to maintain their disciplinary silos and their distinct approaches to knowledge development. Consequently, “interdisciplinary collaboration has become both a scientific and social imperative” (Kahn and Prager 1994). Interdisciplinary research networks are one of the few opportunities to harness these traditionally separate approaches.

Despite the need for such collaboration, the structures and rewards within universities and other research institutions often discourage active cross-disciplinary work, protecting the boundaries that reinforce intellectual isolation. The impediments to cooperation also extend to funding agencies and review groups that evaluate grant applications, which favor single-discipline, single-investigator projects and foster competition among scientists. These forces have constrained the development of collaborative interdisciplinary strategies, such as networks, but at the same time open an opportunity for foundations to step in and facilitate such important efforts.

Although the intellectual and scientific rationale for such interdisciplinary collaboration has recently been articulated, there is little information available on the specific efforts that need to be expended by foundations to establish and support these innovative interdisciplinary endeavors. Brevity of format limits such discussion in this article. This information, however, has been assembled and the interested reader is referred to the monograph Finding Answers to Big Questions: Overcoming Disciplinary Boundaries through Research Networks by Robert Rose, available at www.robertmrose.com.

ESTABLISHING NEW NETWORKS

In searching for prospective network members, one of the most important guiding principles is to look broadly across disciplines. This is often difficult as most researchers or academics are not accustomed to close contact or interchange with others from more disparate fields. Although there are some indications that disciplinary boundaries or “silos” are softening, the general propensity is for finely divided approaches. Much effort is expended in the academy to define differences in models or strategies and to criticize or depreciate those outside one’s own immediate field.

A crucial goal of an interdisciplinary research network is to pose complex and significant research questions and to generate innovative insights for addressing those questions, different intellectual frameworks, and productive evidentiary approaches. In order to facilitate this collaboration, the composition and function of the new network have to overcome the traditional isolation and discomfort in dealing with those outside one’s own field. Often networks must integrate across levels from more macro, cultural, and legal perspectives to those focusing on individual behavioral differences; across disparate approaches to understanding risk or course of disease; or across the continuum from research to practice.

The challenges are great in bringing together, in a truly functional, collaborative manner, scholars and scientists that come from arts and sciences with those from biomedicine or from public health. The success of a network is largely contingent on the members and the chair of the group. Redefining a problem, integrating differing perspectives and coming to

agreement on how to best proceed are all difficult, requiring much discussion and patience in learning new languages, approaches, and models. Network members must not only be experts in their own fields, but also demonstrate a capacity to reframe information into one’s own model system, requiring curiosity, personal and professional security, and lack of disciplinary defensiveness (described in greater detail in the previously mentioned network monograph).

Establishing successful interdisciplinary networks requires close collaboration between foundation staff and the developing network. As the network begins to take form, both staff and network members are tasked with the responsibility of clarifying the most important questions to be addressed along with identifying best strategies to obtain relevant answers. This evolution of thinking, however, has to develop in the context of what the foundation is most interested in learning and then applying it to future grantmaking. It is an iterative process between the staff and network. The staff should not be too prescriptive in laying out these goals as they have convened the network precisely to obtain new insights or approaches. If these are not in concert with the foundation’s greatest concerns or interests and veer too far afield, however, then what ultimately is provided by the network will be a disappointment and not regarded as a wise investment. Thus, the role of staff is to function as facilitators, attentive to the directions in which the network is moving and communicating these back to foundation leadership and vice versa.

NETWORK FOCUS

Over the past two decades The John D. and Catherine T. MacArthur Foundation has sponsored over 20 interdisciplinary research networks. The first networks focused on exploring successful development across the lifespan from infancy to old age, attempting to understand what facilitates adaptation and well-being. These networks integrated social and psychological development in the context of differing challenges in various environments and those brought about by economic forces or shifts in cultural and social expectations.

Recently the foundation has sponsored networks on mental health and the law, adolescent development and juvenile justice, treatment of depression in primary care, economics, mind-body interactions, building resilient regions, early experience and brain development, socioeconomic status and health, and youth mental health care, among others. (More details about these and other networks can be at www.macfound.org under “U.S. Grantmaking, Research Networks.”)

Other foundations have also sponsored successful networks, including the Robert Wood Johnson Foundation’s Tobacco Etiology Research Network, the Christopher and Dana Reeve Foundation’s International Consortium on Spinal Cord Injury, the Lance Armstrong Foundation’s LiveStrong Survivorship Center of Excellence, as well as the National Cancer Institute’s Transdisciplinary Research on Energetics and Cancer.

TWO SUCCESSFUL MACARTHUR NETWORKS

The Mental Health and the Law Network brought together experts from clinical, developmental, and social psychology with those from sociology, psychiatry, law, mental health administration, as well as national and state policymakers. They found that mental illness alone does not necessarily impair treatment decisionmaking. Risk for violence was more related to a history of substance abuse than mental illness. Those with just mental illness without substance abuse showed no higher levels of violence than the control groups. The network was also successful in developing strategies to impact how the legal system deals more rationally and compassionately with the mentally ill, incorporating the insights that their research demonstrated.

The Network on Adolescent Development and Juvenile Justice incorporated the perspectives of practitioners in social science and the law with other experts in psychology, sociology, and policy. They focused on studies to clarify competence of adolescents and how they differ from adults in their ability to understand the trial process, assist in their own defense, and make decisions about their rights. The network has had considerable success testifying to various legislative groups about younger adolescents’ diminished capacity for judgment and their understanding of the consequences of their behavior, which usually improves with their continued growth and development.

Interdisciplinary networks provide a unique way of integrating research and practice that can bridge multiple efforts in a foundation’s portfolio. They offer opportunities to develop novel and powerful approaches to problems. They do require careful planning and judicious selection of members, but these are more than compensated for by what they can deliver.

SOURCES


The authors are former directors of The John D. and Catherine T. MacArthur Foundation’s Health Program.

For more information about topics discussed in this article, contact Robert Rose at bob@robertmrose.com or www.robertmrose.com, or Denis Prager at pragerd@att.net or www.foundationimpact.com.

VIEWS FROM THE FIELD is offered by GIH as a forum for health grantmakers to share insights and experiences. If you are interested in participating, please contact Faith Mitchell at 202.452.8331 or fmitchell@gh.org.
services, to enhance formal and informal supports, and to improve physical and social environments. Programs that work toward improving access to medical services were awarded a total of $637,000. In support of efforts to improve physical and social environments, the foundation is investing $407,000 in construction, program expansion, and project enhancements for various programs and services. To support its goal to reduce behavioral risks, the foundation invested a total of $372,000 in 16 community organizations, schools, and programs whose work addresses a variety of issues, such as nutrition, exercise, risk factors for older adults, mental health, and life skills. The foundation is also investing $216,500 in eight community organizations and programs to cover operating costs, advocacy, capacity-building, and other activities for organizations that promote community wellness, creative housing options, research and development, and other areas. Contact: Marcia Fortley, 610.678.1506, mfortley@theandersongrp.com.

The Regence Foundation (Portland, OR) awarded eight grants aimed at building healthier communities and improving health care technology in Idaho, Oregon, Utah, and Washington. The grants, totaling $380,000, range from rural nursing education to building a Web site focused on health care quality. Western Washington Health Education Center (Seattle) received $135,500 to support a distance learning program for rural nursing students so they can pursue nursing education while continuing to live and work in their own communities. The distance learning program is intended to help ease the state’s nursing shortage, which is especially severe in rural areas. The foundation awarded $58,900 to Rinehart Clinic (Wheeler, OR) to implement an electronic health records system to improve the clinic’s chronic disease management program, prevent prescription drug errors and interactions, increase focus on preventive medicine, and expedite access to patient records and lab results. The Utah Partnership for Value-Driven Health Care (Salt Lake City) will use a $54,800 grant to build a consumer-focused health Web site that will feature a health care rating system and information about health care quality, cost, and access. A $44,200 grant to Coalition of Community Health Clinics (Portland, OR) will help create a prescription drug toolbox for member clinics. The toolbox will contain strategies to help reduce the cost of prescription drugs for the clinics and its patients, thus eliminating a frequent barrier to patients’ ability to follow through on treatment plans. Contact: Joanna Burke, 503.225.6860, jcburke@regence.com.

The SCAN Foundation (Long Beach, CA) awarded $5 million to The Health Technology Center (San Francisco, CA) to establish the nation’s first center devoted exclusively to advancing the use of technologies that significantly enhance home and community-based care for seniors. Specifically, the center will focus on applied research, grantmaking, expert convenings, and policy development to identify strategies and develop tools that will rapidly accelerate health providers’ adoption of technologies that enhance the care and well-being of older adults. The three-year grant will be used to establish the center and develop its programs. Starting in 2010, a portion of the funding will go toward supporting the efforts of selected health and social service providers to implement and evaluate technology diffusion strategies. Contact: René Seidel, 562.308.2862, rseidel@thescanfoundation.org.

The VNA Foundation (Chicago, IL) awarded $562,113 in grants to 14 organizations with programs that address the foundation’s mission of supporting home- and community-based health care for the medically underserved in the Chicago metropolitan area. Among the grantees are: DuPage Community Clinic (Wheaton, IL) – $69,000 in general operating support to provide health care at this free clinic; Community Nurse Health Association (LaGrange, IL) – $60,000 for salary support for part-time nurse practitioners who staff the pediatric and adult clinics at this agency serving low-income families in the western suburbs. American Indian Center (Chicago, IL) – $55,613 to help institutionalize the Wellness Program that includes outreach, screening, health education, and referrals for American Indians; Hospice of Northeastern Illinois (Barrington) – $55,000 toward the salary and benefits of two part-time nurses who provide highly specialized, in-home palliative and hospice care and integrative therapy to children; and Howard Brown Health Center (Chicago, IL) – $20,000 toward the provision of health care at a center offering a variety of comprehensive services for gay, lesbian, bisexual, transgendered, and/or homeless youth. Contact: Claudia Baier, 312.214.1529.

Williamsburg Community Health Foundation (VA) made contributions of nearly $1.6 million to fund two of its programs that support nonprofit organizations with health programs and initiatives. The foundation appropriated $789,763 in support of the Chronic Care Initiative, through which the following local clinics received funding: Angels of Mercy (Williamsburg), Gloucester Mathews Free Clinic (Hayes), Olde Towne Medical Center (Yorktown), and Lackey Free Clinic (Yorktown). The foundation contributed $800,000 to support its Greater Williamsburg Medication Assistance Program (GWMAP), a network of health service organizations that match low-income area residents, who are uninsured or underinsured, with programs to receive free medication through the Virginia Health Care Foundation (Richmond). GWMAP funding spans two years. Participating organizations include: Central Virginia Health Services (Canton), Charles City Health Center, King William Dawn Community Doctor (Aylett), Colonial Service Board (Williamsburg), Gloucester-Mathews Free Clinic (Hayes), Olde Towne Medical Center (Yorktown), Lackey Free Family Clinic (Yorktown), and Northern Neck Free Clinic (Kilmarnock). For more information, visit www.wchf.com.

SURVEYS, STUDIES & PUBLICATIONS

Colorado Health Institute (CHI) (Denver) released the results of a certified nurses aide (CNA) workforce survey that measured their education and train-
ing experiences, employment status, demographic characteristics, and future plans. Responses indicate that CNAs may be a viable resource pool in alleviating the state’s nursing shortage. Approximately two-thirds of respondents said they were interested in continuing their education and training. Further, more than half of the respondents were already pursuing additional training or had plans to do so. The survey is part of CHI’s Health Professions Database Project that is collecting, analyzing, and disseminating Colorado workforce data, with funding provided by the Colorado Trust (Denver). The full report is available at www.coloradohealthinstitute.org.

MEETINGS


OTHER NEWS

Blue Shield of California Foundation (San Francisco) announced 34 community health care professionals from around the state will participate in the 2009-2010 class of its Clinic Leadership Institute (CLI), an innovative program designed to identify and cultivate the next generation of community clinic leaders. Over the next 18 months, CLI participants will attend six intensive, multiday learning seminars that include modules on finance management, strategy development, and leadership skills. The knowledge gained in the intensive learning seminars will be reinforced through special project work designed to support each participant’s own clinic. For more information and a list of 2009-2010 CLI participants, visit www.blueshieldcafoundation.org and click on “News & Events.” Contact: Carri Cummings, 916.341.0472, carri@zieglerassociates.net.

The Rhode Island Foundation (Providence) announced that it has awarded 10 nursing scholarships totaling $15,250 through the foundation’s Albert E. and Florence W. Newton Fund and the Edward J. and Virginia M. Routhier Nursing Scholarship Fund. The foundation also announced intended funding of new scholarships for the fall 2009 – spring 2010 academic year. Newton Fund scholarships are awarded to individuals with a demonstrated financial need who are registered nurses seeking a bachelor’s degree in nursing, students in a baccalaureate nursing program, second- or third-year students in a three-year nursing program, or students in a two-year associate degree nursing program. Applicants for the Routhier Fund must be accepted or already attending an accredited nursing program in Rhode Island, demonstrate financial need, and intend to practice nursing in Rhode Island. Students may be working toward a bachelor’s or graduate degree in nursing. For more information on these and other scholarships, visit the Scholarship Opportunities section of the foundation Web site, www.rifoundation.org. Contact: Libby Monahan, 401.427.4017, ilmonahan@rifoundation.org.

Sisters of Charity Foundation of South Carolina (Columbia) announced changes to its grantmaking cycle. In response to the current economic downturn, the foundation will increase Caritas grants awarded from once a year to three times during 2009. In addition to increasing the frequency and number of grants awarded, the foundation will accept, for the first-time, applications meeting organizations’ basic operating expenses. Caritas grants, which do not exceed $3,000, are awarded to organizations with an annual budget of less than $250,000 that provide direct services to meet the basic needs of poor and marginalized populations. Contact: Brooke Bailey, 803.254.0230, ext. 18, bbailey@sistersofcharitysc.com.

PEOPLE

Mary Black Foundation (Spartanburg, SC) hired Cate Brandt Ryba to join the foundation as its first media and communications officer. Ms. Ryba comes to the foundation from the City of Spartanburg where she served as economic development coordinator since 2006. A key part of Ms. Ryba’s role will be to help the foundation develop communications as a major tool for community change. Contact: Cate Brandt Ryba, 864.573.9500.

The Chicago Community Trust (IL) announced that Cheryl Rucker-Whitaker, M.D., has joined its program department as senior program officer for health. In her new role, she will be responsible for the trust’s grantmaking in the health program’s priority areas that include health care system change, improving lifestyle and behavioral choices, and reducing environmental health threats. Prior to joining the trust, Dr. Rucker-Whitaker was an assistant professor of preventive medicine at Rush University Medical Center in Chicago, Illinois. She received funding from the National Institutes of Health and the Robert Wood Johnson Foundation (Princeton, NJ) to lead major clinical studies designed to improve behavioral and coping skills for people living with chronic conditions. In addition, she hosts a weekly radio segment called Health Matters. Dr. Rucker-Whitaker serves on the Northern Illinois Advisory Council and was recently appointed chair of the health and public policy committee for the American College of Physicians, Northern Illinois Chapter. Contact: Eva Penar, 312.616.8000, ext. 161, evap@cct.org.

POSITION AVAILABLE

The following organization is seeking qualified applicants for the position listed:

The California Endowment (Los Angeles, CA)

• Senior Program Officer (multiple
openings and locations) – The successful candidates will manage program development, grantmaking, grant administration and monitoring, technical assistance, and program evaluation activities for an initiative or component within one of The California Endowment’s strategic program area priorities. Individuals holding these positions are responsible for planning and implementing grantmaking, policy, communications and public affairs, and evaluation activities to achieve the goals and objectives within that initiative or component of the strategic program area. Senior program officers act as staff contacts and spokespersons for their respective initiative or component of the strategic program area and development, develop, commission, prepare, and supervise other members such as one or more program officers, program assistants, and administrative support staff. Qualifications include demonstrated written and verbal communication skills, ability to establish and achieve goals, ability to effectively manage and implement multiple projects, and proficiency in Microsoft Office applications. Requisite experience includes seven or more years of experience as a health care provider, educator, administrator, advocate, or funder in the health field; a minimum of five years working as a program manager, including responsibilities for program development, implementation, evaluation, budget management, and supervision of subordinate staff; relevant knowledge and experience in policy, advocacy, and systems change work; and a background in philanthropy. Candidates must also have a bachelor’s degree; a graduate degree in medicine, nursing, public health, public policy, education, nonprofit management, or a relevant discipline or component strongly preferred. Interested applicants must send, via e-mail, a résumé and cover letter in Microsoft Word format detailing community-based activities for an initiative or component within one of The California Endowment’s strategic program area. Requisite experience includes seven or more years of experience as a health care provider, educator, administrator, advocate, or funder in the health field; a minimum of five years working as a program manager, including responsibilities for program development, implementation, evaluation, budget management, and supervision of subordinate staff; relevant knowledge and experience in policy, advocacy, and systems change work; and a background in philanthropy. Candidates must also have a bachelor’s degree; a graduate degree in medicine, nursing, public health, public policy, education, nonprofit management, or a relevant discipline is strongly preferred. Interested applicants must send, via e-mail, a résumé and cover letter in Microsoft Word format detailing community-based work experience in and process for effecting change.

Contact: Human Resources Dept.
E-mail: jobs@calendow.org
Web site: www.calendow.org