Overview
For complete details, refer to specific pages/sections noted below.

Purpose
The Health Impact Project: Advancing Smarter Policies for Healthier Communities, a collaboration of the Robert Wood Johnson Foundation and The Pew Charitable Trusts, encourages the use of health impact assessment (HIA) to help decision-makers identify the potential health effects of proposed policies, projects and programs, and make recommendations that enhance their health benefits and minimize their adverse effects and associated costs. We are issuing this call for proposals (CFP) to demonstrate the effectiveness of HIAs and promote their incorporation into local, state, tribal and federal decision-making. This CFP will support organizations that wish to undertake an HIA of a proposed policy, project or program currently or soon to be under active consideration by a decision-making body.

Total Awards
- Up to eight demonstration projects will be awarded in this round of funding.
- Grants will range from $25,000 to $125,000 each and must be completed within 18 months.

Eligibility Criteria (page 12)
Complete information on eligibility criteria starts on page 12.

Eligible applicant organizations include:
- state, tribal or local agencies;
- tax-exempt educational institutions; or
- publicly supported charitable organizations that are tax-exempt under Section 501(c)(3) of the Internal Revenue Code.

Applicant organizations must be located in the United States or its territories.

Selection Criteria (page 12)
Complete information on selection criteria starts on page 12.

Key Dates and Deadlines (See Timetable.)
- March 15, 2011—Start date for submission of brief proposals.
- May 4, 2011—Applicant informational Web conference call. Registration is required. Please visit project website for details.
- May 19, 2011—Web conference call on the “Screening” stage to help applicants define an appropriate decision-making target for the HIA. Registration is required. Visit project website for details.
- June 1, 2011—Deadline for receipt of online brief proposals.
- July 1, 2011—Select applicants invited to submit full proposals.
- September 16, 2011—Deadline for receipt of online full proposals.
- December 2011—Notification of funding decisions and start of awards.

How to Apply (page 17)
All brief proposals and full proposals must be submitted through the online application found on the project website. Complete information on how to apply can be found starting on page 17.

www.healthimpactproject.org
The last two decades of health research have demonstrated the profound importance of social, economic and environmental decision-making to the health of Americans. For example, transportation decisions that contribute to urban sprawl play an important role in changing injury patterns, and the decreasing levels of physical activity which are related to the emerging epidemics of obesity and type II diabetes. Agricultural policies influence food selection, availability and pricing and may inadvertently favor high-calorie foods with low nutritional value. Projects such as energy production, mines and refineries can affect people’s health in a variety of ways, not just through the more obvious routes of air and water emissions and worker safety, but also through changes in employment patterns, economic conditions and social cohesion in local communities.

Every day, legislators, public agencies and other decision-makers make choices that affect Americans’ health, yet too often the risks and consequences related to health are unrecognized and unaddressed. Many health conditions could be prevented or improved and, ultimately, many economic costs reduced if decision-makers in all sectors factored in the effects on health when drafting laws and regulations.

HIA gives federal, tribal, state and local leaders the information they need to advance smarter policies today to prevent health problems in their communities tomorrow. The World Health Organization defines HIA as “a combination of procedures, methods and tools by which a policy, program or project may be judged as to its potential effects on the health of a population and the distribution of those effects within the population.” HIAs look at health from a broad perspective that considers social, economic and environmental influences. HIAs use a practical approach that brings together scientific data, health expertise and public input to identify the potential health effects of a
new proposal and to build in recommendations that enhance their health benefits and minimize their adverse effects and associated costs.

Proactive efforts to recognize and address the multiple factors that drive health are likely to generate health improvements as well as cost savings. The HIA process should not be viewed as a means to advocate health concerns to the exclusion of other important considerations. An HIA is most effective when it provides clear information on previously unrecognized health concerns. A strong HIA acknowledges the trade-offs and potential risks and benefits of the various choices that are under consideration, and it outlines alternatives that would maximize health gains, minimize adverse effects and improve health for all individuals and subgroups across a population.

The field of HIA has developed largely outside the United States through efforts by the World Health Organization, European nations and Canada, among others. HIA in the United States, while at an early stage, has already proven a valuable approach to promote decisions attuned to health. An HIA can add value to any planning or decision-making process that is likely to affect health or the social, economic or environmental conditions that are related to health. Examples of issues ripe for HIA in the United States include:

- educational programs and policies;
- transportation planning and projects;
- natural resource extraction and energy production projects;
- environmental engineering, ecosystem services and water-resources management decisions;
- energy policies;
- climate change projects and policies;
- food and agricultural programs and policies;
housing programs, projects and policies;

social, economic and labor decisions;

incarceration policies.

The applications of HIA are broad and the methods used to analyze impacts are variable, but the basic steps described for completing an HIA are consistent. These steps can be accomplished fairly rapidly (a “rapid” or “desktop” HIA can be completed in a period of weeks), or they can involve a more comprehensive process that includes public meetings, extensive stakeholder consultation and/or collection of new data.

1. **Screening:** Determines whether the HIA is likely to succeed and add value. Questions include: What specific proposed project, program or policy decision will the HIA address? For example, if the HIA will address a proposal for a coal-fired power plant, what specific decision-making process (such as an air-quality permit or environmental impact statement) will the HIA inform? How important to health is the decision? Will the HIA provide new and important information or insight on previously unrecognized health issues? Is it feasible in terms of available resources (e.g., data, time, money, stakeholder interest, and political will)?

2. **Scoping:** Creates objectives for the HIA, and an outline for the steps of the HIA process by asking: What health effects should the HIA address? What concerns have stakeholders expressed about the pending decision? Who will be affected by the policy or project, and how?

3. **Assessment:** Involves two steps, describing the baseline health of people and groups affected by the decision, and then predicting the potential health effects. The baseline health analysis attempts to explain not only the important causes of illness, but also the conditions that influence health and could be
affected by the decision in question—such as the local economy, air quality, availability of parks and recreation facilities, or access to healthy food choices.

The assessment stage can involve literature review, qualitative analysis and/or quantitative modeling. The assessment identifies not only the important health risks and benefits, but also their distribution among vulnerable subgroups within the population (such as children, the elderly, people with chronic illnesses, racial and ethnic groups, or those with low incomes). The impact assessment should be conducted in an impartial, scientific way that identifies both the risks and benefits associated with a decision. Assessment of health-related economic costs and benefits has not been common in HIA but decision-makers sometimes request this information. When possible, such analysis may help decision-makers weigh the relative importance of identified health issues against other considerations.

4. **Recommendations:** The HIA should point the way to decisions that protect and promote health. The actions required to integrate an HIA’s analysis and recommendations into a decision-making process will vary. In some cases, simply providing a thorough analysis that outlines the potential risks, benefits and costs of alternatives may help decision-makers to make informed choices that support health. In many cases, however, an HIA’s ability to influence decision-making will require additional efforts, including the development of specific recommendations based on the analysis, as well as a health management plan that specifies who will implement each recommendation and how outcomes will be monitored going forward. These products should provide practical, specific actions that decision-makers can take in order to promote health and avoid, minimize or mitigate adverse consequences.
5. **Reporting**: The findings are disseminated to decision-makers, affected communities and other stakeholders, and feedback is solicited. This stage may result in a revised report that addresses public responses to the draft.

The success of an HIA depends on effective dissemination. Simply providing recommendations is often not enough to ensure their adoption or implementation. The HIA should be conducted with an eye toward the policy levers, legal or regulatory avenues, communications and non-lobbying advocacy tactics, or other methods that will ensure effective dissemination of the findings and facilitate adoption of the recommendations. For example, in some cases when public agencies conduct an HIA, it may be possible to implement its recommendations under existing laws, policies or regulations or through the creation of new policies or regulations. In other cases, media outreach and efforts to engage, educate and build consensus among all stakeholders may be essential to ensuring that HIA insights inform key policy decisions.

6. **Monitoring and Evaluation**: There are three types of evaluation in HIA. Process evaluation gauges the HIA’s quality according to established standards and the team’s plan for the HIA. Impact evaluation assesses the HIA’s impact on decision-making and its success according to the objectives established during scoping. Outcome evaluation assesses changes in health status and health determinants as the decision is implemented. Monitoring tracks indicators that can be used to inform process, impact, and outcome evaluations.

For more detailed information on HIAs, examples of HIAs conducted in the United States and abroad, and links to other sites related to HIA, please visit [www.healthimpactproject.org](http://www.healthimpactproject.org).
The Project

The Health Impact Project: Advancing Smarter Policies for Healthier Communities, a collaboration of the Robert Wood Johnson Foundation (RWJF) and The Pew Charitable Trusts (Pew), promotes the use of HIAs to help decision-makers in a wide variety of fields better assess proposed policies, programs and projects and make decisions that reduce unnecessary health risks, protect and improve health, and, ultimately, decrease health and social costs.

The Health Impact Project will support up to eight HIA demonstration projects intended to inform decisions on proposed local, tribal or state policies, projects or programs. We will also fund HIAs that will address federal decisions that will have impacts limited to a specific state, region or local community, such as permitting a new mine or building a new highway.

The Health Impact Project seeks to produce a balanced portfolio of completed HIAs that demonstrate the range of useful applications across a range of sectors, levels of government, geographic regions and types of applicant organizations. We encourage proposals from organizations representing a range of fields and sectors, such as transportation, education, economic and social policy, agricultural policy, energy, environmental regulation and natural resource development.

Because many of the HIAs done in the United States to date have focused on aspects of urban land use planning, proposals focused on other areas will receive preference. In addition, because the Health Impact Project has already funded several HIAs specifically addressing transit-oriented development, we will not consider proposals in this area.
The selected projects will:

- result in high-quality HIAs that help establish a strong standard to inform decisions on a range of policies, programs and projects that are important to health;

- demonstrate the effectiveness of HIA as a lens that brings health issues into focus in decision-making at various levels of government and across a range of issues and sectors;

- make policy-makers outside the health sector aware of the health implications of their decisions, and introduce them to HIA as a means to factor health into their decisions;

- establish enduring partnerships and collaborations between public health professionals, community organizations, and other agencies outside the health sector, such as energy, agriculture, transportation, education or housing;

- produce a new cohort of trained HIA practitioners;

- promote more widespread use of HIA for local, tribal, state and federal decisions important to health; and

- share findings through case studies, presentations, publications, the media and other channels to help promote the use of HIA.

Applicants may request grants of between $25,000 and $125,000 for demonstration projects that will be completed within 18 months. We expect to fund up to eight proposals. Applicants may submit separate brief proposals for up to two projects during this solicitation. The Health Impact Project will not fund more than one full proposal per organization.
**HIA Training and Technical Assistance**

Many applicants for this funding will have no prior experience with the HIA process and methods; some may lack the full range of technical expertise—such as familiarity with epidemiology or specific modeling methods—necessary to complete the proposed scope of work. The *Health Impact Project* will provide two types of training and technical assistance for grantees: a specialized package of training and technical assistance in HIA; and consultation with experts in a specific subject area required for the analysis.

Applicants invited to submit full proposals will be asked to describe their training and technical assistance needs in the proposal. The HIA training and technical assistance will be provided by nationally recognized experts and will be tailored to meet the needs of each grantee. Grantees who have not previously conducted a successful HIA will be expected to help organize and attend an on-site two-day training that will include your HIA project team, partners and relevant stakeholders. The tailored technical assistance package may also include, for example, consultation with experts in specific methods and subject areas; help in developing collaborative partnerships with other stakeholders; guidance on communications strategies; or guidance on developing an effective plan for implementing HIA recommendations. Demonstration project grantees will also benefit from an annual meeting with fellow grantees in Washington, D.C. Travel expenses for this meeting must be built into your project budget.
Partnerships
We strongly encourage partnerships between organizations such as public agencies, universities, nonprofits and community groups, and new relationships between public health organizations and decision-makers or stakeholders outside the health sector.

Staffing
Applicants must provide a staffing plan that reflects a realistic estimate of the time it will take to complete the steps of an HIA, manage the project and process, consult stakeholders, manage relationships and input from partners, advisers and consultants, complete a high-quality report, disseminate the results and recommendations, and effectively engage decision-makers. Based on our experience, we suggest that applicants budget for at least 0.5 FTE for one professional staff member to serve as the project coordinator. We also suggest that you carefully define the roles your partners will play, and the time commitment and funding that will be required for their participation. In making a staffing plan, applicants should give consideration to the range of skills that may be required for a successful HIA, such as expertise in public health, community engagement, and communications, and policy experience in the issue that the HIA will address.
Eligibility Criteria

Eligible applicant organizations include:

- state, tribal or local agencies;
- tax-exempt educational institutions; or
- publicly supported charitable organizations that are tax-exempt under Section 501(c)(3) of the Internal Revenue Code.

Applicant organizations must be located in the United States or its territories.

The HIA must address a proposed local, tribal or state policy, program or project in the United States or its territories or a federal decision in which the effects are limited to a specific state, local community or region.

Prior HIA experience is not required. We encourage both public health organizations and agencies, and applicants whose primary focus is not health, to apply. Applicants from outside the field of public health must demonstrate partnerships that provide appropriate health expertise. Applicants from public agencies must demonstrate a robust plan for engaging community stakeholders in the HIA. For more information please refer to the section on HIA training and technical assistance on page 10.

Selection Criteria

All proposals will be screened for eligibility and then assessed by a committee composed of Health Impact Project staff, RWJF staff and expert reviewers. Selection will be based on the following:

- the HIA will inform a proposed policy, program or project that is under active consideration (such as proposed legislation, an agency’s rulemaking, a permitting process for a new highway or power plant, or an environmental impact statement that will be drafted within the period of the grant).

The strongest proposals will address decisions that can be reasonably anticipated within or shortly following the grant period;
- significance of the pending policy, program or project decision to health;

- demonstrated partnerships between the applicant organization(s) and other stakeholder agencies and organizations;

- a strong working relationship between the HIA team and the decision-maker, or a strong plan for engaging the decision-maker and building interest in and support for the HIA findings and recommendations;

- the proposed HIA would address a topic or sector that has not been a common topic in prior U.S. HIAs;

- commitment to an impartial science-based appraisal of the risks, benefits, tradeoffs and alternatives involved in the decision;

- the applicant organization’s credibility as a source of scientifically valid information on the decision addressed by the HIA;

- a clear, effective strategy for disseminating the findings and advocating adoption and implementation of the recommendations;

- potential for the HIA to add value to the decision-making process by addressing health issues that are not already known or may not be immediately obvious, by analyzing and clarifying complex health risks and health effects, addressing the potential for differential impacts on vulnerable populations, or by generating health-based recommendations not already under consideration;

- the potential for the HIA to build new and enduring partnerships between public health organizations and nonhealth sectors such that health will be more regularly factored into future decisions;

- contribution of the proposed project to the field of HIA in the United States.

- the potential for the HIA to raise the prominence of and increase attention to community concerns in the decision-making process;
• a strong plan for soliciting and responding to input from affected communities and key stakeholders, including relevant public agencies and leaders, community groups, scientific experts and other organizations.

• a well-thought-out staffing plan with adequate staff time and commitment of senior leadership;

• appropriateness of proposed budget and project time line.

The Health Impact Project seeks to produce a balanced portfolio of completed HIAs that represent a range of sectors, levels of government, geographic regions and types of applicant organizations. We may, therefore, also give preference to proposals based on their contribution to the overall diversity and balance of the HIA demonstration project portfolio. We encourage proposals from organizations representing a range of fields and sectors, such as transportation, education, economic and social policy, agricultural policy, energy, environmental regulation and natural resource development. Because many of the HIAs done in the United States to date have focused on aspects of urban land use planning, proposals focused on other areas will receive preference. In addition, because the Health Impact Project has already funded several HIAs specifically addressing transit-oriented development, we will not consider proposals in this area.

We also seek proposals that will demonstrate the value of HIA in the context of state or federal environmental impact assessment (EIA), particularly those that seek to formally integrate HIA into EIA. More information about integrated HIA/EIA is available on our website.

Additionally, we will look favorably on projects that help institutionalize the use of HIA by the applicant organization or its partners and stakeholder organizations.
Grantees are expected to meet Pew requirements for the submission of narrative and financial reports, as well as provide periodic information needed for overall project performance monitoring and management. Up to two members of the project staff will be asked to participate in an annual grantees meeting in Washington, D.C. In addition, HIA project staff will be required to have regular check-in calls with *Health Impact Project* staff and technical assistance providers to give progress updates on their grants; the average frequency of these calls is twice monthly. Additionally, the *Health Impact Project* staff and consultants may visit the grantees. At the close of each grant, the grantees are expected to provide a written report on the project and its findings, according to reporting guidelines outlined in the grant agreement. Additionally, grantees must submit their completed HIA and any other reports or public documents developed with grant funding.

Pew monitors the grantees’ efforts and careful stewardship of grant funds to assure accountability. Grantees will be required to submit narrative and financial reports periodically and at the conclusion of the project.

RWJF or Pew, at its discretion, may support an independent evaluation of the project and its grantees. As a condition of accepting these funds, grantees will be required to participate in the evaluation.
**Use of Grant Funds**

Grant funds may be used for project staff salaries and benefits, consultant fees, data collection and analysis, meetings, supplies, project-related travel, and other direct project expenses, including a limited amount of equipment essential to the project and indirect expenses. Grant funds may *not* be used to subsidize individuals for the costs of health care, to support clinical trials of unapproved drugs or devices, to construct or renovate facilities, for lobbying, for political activities, or as a substitute for funds currently being used to support similar activities. Please note that Pew limits the amount of indirect costs it will support to no more than 10 percent of salaries and benefits covered directly by the grant.

In addition, no part of the grant can be used to carry on propaganda or otherwise attempt to influence legislation within the meaning of the applicable provisions of the Internal Revenue Code and the Treasury Regulations thereunder. In addition, no part of the grant can be used to participate or intervene in any political campaign on behalf of (or in opposition to) any candidate for public office.

Grant funds will also be used to pay for travel for up to two project team members to attend the annual grantee meeting (to the extent that such expenses are permissible under the grantee’s applicable ethics rules).
There are two stages in the competitive proposal process: (1) applicant organizations submit a brief proposal that describes the project and; if invited, (2) select applicant organizations will then submit a full proposal, budget, budget narrative and organizational documents for review. For selected grantee organizations, the training and technical assistance will be negotiated based on the applicant organization’s needs. Two Web conferences will be held after the release of the CFP to provide prospective grantees with additional information: one will focus on a general description of the grant initiative, application process, and selection criteria; the second will provide prospective applicants with an introduction to the screening phase of HIA, in order to help them select appropriate decision topics for their proposals. These will be archived on the website for later review. Interested applicants are encouraged to visit our website for more information at www.healthimpactproject.org. Health Impact Project staff will be available by phone and e-mail to address any questions that prospective applicants may have after reviewing these materials.

Unfortunately, due to the large number of proposals that we are likely to receive, neither Pew nor RWJF are able to provide individual comments on brief proposals.

Stage 1: Brief Proposal
Applicants must submit, via our online application system, a brief proposal that describes the project. The proposals will be reviewed by project staff to determine whether applicants meet the eligibility criteria to qualify for funding before entering the full proposal process. The brief proposal application is available at www.healthimpactproject.org. Click the “Apply for Funding” link. Brief proposals must be submitted online by 5:00 p.m. ET on June 1, 2011.
The brief proposal must include the following:

- A description of the proposed public policy, program or project that will be the subject of the proposed HIA. This should include information about the decision-maker, the process for making the decision, and the specific points in the decision-making process where HIA recommendations could be implemented, and the key stakeholders.

- A brief description of the most important health risks and/or health outcomes you seek to address. This does not need to be a comprehensive list but should be adequate to demonstrate the importance to health.

- A brief outline of the strategies that would be used for dissemination and nonlobbying advocacy (i.e., use of existing laws and regulations, educational and outreach to decision-makers, collaboration with the decision-making agency).

- A description of the applicant organization and its capacity to undertake the project. If known, please also list and briefly describe any partner organizations and include letters of support, if applicable. This will be required at the full proposal stage. Applicants should give consideration to the range of skills that may be required for a successful HIA, such as expertise in public health, community engagement, and communications, and policy experience in the issue that the HIA will address.

- The name, title and contact information for the project director.

- Estimated total budget. As described in the “Staffing” section on page 11, based on our experience, we suggest that applicants budget for at least 0.5 FTE for one professional staff member to serve as the project coordinator.

- Expected duration of the proposed grant.
Please note that this brief proposal will become part of the official record of your request and, if approved, the grant file.

By July 1, 2011, *Health Impact Project* staff will notify all brief proposal applicants via e-mail whether or not they will be invited to submit a full proposal.

**Stage 2: Full Proposals**
Select applicants will be invited by e-mail to submit a full proposal and will receive a complete and detailed description of the necessary supporting materials. Full proposals must include a project narrative, budget, budget narrative and supporting organization documents. All full proposals must be submitted via the online application system. The project website, [www.healthimpactproject.org](http://www.healthimpactproject.org), provides more information on the full proposal.

Project staff will be available by phone and e-mail to answer questions. All applicants that are invited to submit a full proposal must attend the “Screening” Web conference or view the archived version. Invited full proposals must be completed and submitted online by 5:00 p.m. ET on September 16, 2011.

An advisory selection committee of the *Health Impact Project* staff, RWJF staff and experts from related disciplines will review full proposals from invited organizations and make recommendations to Pew, which will then make final grant decisions.

The *Health Impact Project* will notify applicants of the final decision in December 2011, but notification could come sooner.
The full proposals must include the following:

- Project Narrative—a written explanation of the project and how it will make progress toward the Health Impact Project objectives. The narrative will become part of the grant agreement and the basis for your reports to Pew during the grant period. It contains two main parts:

  1. Summary—this section will summarize the overall project narrative and briefly describe the HIA’s purpose/goal, expected results, grant-related activities, project duration and total costs.

  2. Project Description—this section will provide the main details of the proposal. Applicants will be asked to discuss the health issues addressed by the proposal, including the scope, scale and who will be affected by the decision. A detailed discussion of the action plan—including how you will complete the steps of the HIA, and your plan for disseminating findings and recommendations, and advocating their adoption and implementation. A discussion of your organizational capacity and project timeline also will be required.

- A staffing plan, detailing the roles and responsibilities of key staff, and the roles and time commitments of partner organizations.

- Project Budget and Detailed Budget Narrative—the budget submitted will be used for financial reporting throughout the life of the grant. The applicant organization will be expected to describe in detail who, what, where, when and why funds will be used.

- Supporting Materials—includes organizational documentation that is required and will vary depending on the applicant organization type. You will receive a complete list of requirements if invited to submit a full proposal.
For complete instructions on the full proposal requirements, please visit our website at www.healthimpactproject.org.

For questions about the CFP requirements, please contact:
Health Impact Project
Phone: (202) 540-6012
E-mail: healthimpactproject@pewtrusts.org

Project Direction
Direction and technical assistance for the Health Impact Project is provided by The Pew Charitable Trusts located at:

The Pew Charitable Trusts
901 E Street, N.W., 10th Floor
Washington, D.C. 20004
Phone: (202) 540-6012
Fax: (202) 552-2299
E-mail: healthimpactproject@pewtrusts.org

Responsible staff members at The Pew Charitable Trusts are:

- Aaron Wernham, M.D., M.S., project director
- Kara Vonasek, M.P.H., project manager

Responsible staff members at the Robert Wood Johnson Foundation are:

- Pamela Russo, M.D., M.P.H., senior program officer
- Abbey Cofsky, M.P.H., program officer
- Joe Marx, senior communications officer
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About the Robert Wood Johnson Foundation

The Robert Wood Johnson Foundation focuses on the pressing health and health care issues facing our country. As the nation’s largest philanthropy devoted exclusively to improving the health and health care of all Americans, we work with a diverse group of organizations and individuals to identify solutions and achieve comprehensive, meaningful and timely change.

For more than 35 years, we’ve brought experience, commitment and a rigorous, balanced approach to the problems that affect the health and health care of those we serve. When it comes to helping Americans lead healthier lives and get the care they need, we expect to make a difference in your lifetime.

For more information, visit www.rwjf.org.

About The Pew Charitable Trusts

The Pew Charitable Trusts is driven by the power of knowledge to solve today’s most challenging problems. Pew applies a rigorous, analytical approach to improve public policy, inform the public and stimulate civic life. We partner with a diverse range of donors, public and private organizations and concerned citizens who share our commitment to fact-based solutions and goal-driven investments to improve society. For more information, visit www.pewtrusts.org.

Sign up to receive e-mail alerts on upcoming calls for proposals at http://my.rwjf.org.