



# Mental Health Equity

## Background

Our nation is experiencing a collective mental and behavioral health crisis. More than 50% of adults will be diagnosed with a mental illness or disorder at some point in their lifetime.<sup>1</sup> One in five Americans will experience a mental illness in a given year.<sup>2</sup>

The Greater Cincinnati region is no different. Interact for Health's 2022 Community Health Status Survey and [focus groups with everyday experts](#) looked at frequent mental distress among adults—defined as having 14 or more mentally unhealthy days in the past month. In the region, 17% of adults report frequent mental distress. But the issue is more pronounced among certain groups: 42% of LGBTQ+ people, 31% of people living in poverty, 25% of young adults aged 18 to 29 years old and 23% of rural adults said they have frequent mental distress. To improve the lives of those who experience the greatest injustices in health, Interact for Health has prioritized the following populations: Black communities, Hispanic communities, children in families with low incomes, rural communities, and, for the mental health strategy, LGBTQ+ people.

Factors affecting access to mental health services by members of these populations may include:

- Lack of insurance, underinsurance
- Stigma around mental health and seeking help
- Distrust in the health care system due to historical and current day mistreatment and discrimination
- Lack of diversity among mental health care providers
- Lack of culturally competent providers
- Transportation challenges
- Lack of access to broadband infrastructure and technology hardware
- Language barriers
- Inadequate support for mental health services in safety net settings<sup>3</sup>

## RFP Goal

To improve culturally competent care and access to mental health services and

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<sup>1</sup> Kessler RC, Angermeyer M, Anthony JC, et al. Lifetime prevalence and age-of-onset distributions of mental disorders in the World Health Organization's World Mental Health Survey Initiative. *World Psychiatry*. 2007;6(3):168-176.

<sup>2</sup> Key substance use and mental health indicators in the United States: Results from the 2015 National Survey on Drug Use and Health. Rockville, MD: Center for Behavioral Health Statistics and Quality. Substance Abuse and Mental Health Services Administration. 2016.

<sup>3</sup> Mental Health Disparities: Diverse Populations - Psychiatry.org. 2017, <https://www.psychiatry.org/File%20Library/Psychiatrists/Cultural-Competency/Mental-Health-Disparities/Mental-Health-Facts-for-Diverse-Populations.pdf>.



supports among adults and youth within the priority populations—Black and Hispanic, LGBTQ+, families with low-incomes and rural communities.

## RFP Overview

Interact for Health is embarking on a new strategic plan and hopes to work with new and existing partners in innovative ways to remove systemic barriers in mental health overall through policy advocacy, addressing the workforce shortage, expanding culturally relevant care and reducing stigma. Our intent with this RFP is to discover well-aligned partners, catalyze new innovations and scale existing efforts to advance mental health equity. We hope to identify partners that will join us as we work together over the new few years to improve the mental health and well-being of our priority populations.

Projects will be considered across the behavioral health continuum, from prevention through treatment, recovery and maintenance. Examples of projects that will be considered:

### **Improving culturally competent care**

- Provide interpreter services
- Recruit and retain minority staff
- Provide training to increase cultural awareness, knowledge, and skills
- Modify office space to ensure that it promotes inclusion, safety and allyship
- Provide linguistic competency that extends beyond the clinical encounter to the appointment desk, advice lines, medical billing and other written materials

### **Increasing access to mental health services and supports**

- Locate services in geographic areas that are easily accessible for certain populations
- Expand hours of operation
- Expand navigation and awareness to organizations serving and/or led by priority populations
- Leverage partnerships and coordinate with trusted leaders/businesses/providers that serve the community (e.g., partnering with faith-based organizations, locating services within trusted organizations, etc.)
- Use community health workers, peer supporters or peer support groups

### **Implementing mental health promotion and reducing stigma**

- Efforts to normalize and encourage accessing mental health services
- Engrain mental health promotion programming in settings to reach priority populations

By implementing projects such as these, Interact for Health expects to improve culturally competent care and access to mental health services and supports among priority populations in our region. Examples of the strategic impact expected:

- Increase number of clients from priority populations accessing mental health services and supports



- Improve the mental help-seeking experience among priority populations
- Increase in number of staff that represent the population the organization serves
- Improve cultural competency of staff
- Decrease discrimination and bias in the mental health system

Interact for Health is investing \$750,000 for the Mental Health Equity RFP in 2023. Grants may be awarded for **planning, project-based or general operating support depending on the proposed efforts**. Grant size and length will vary based on the scope of the project. We anticipate they will **range from \$25,000 - \$100,000 for 9-18 months**.

## Eligibility Criteria

Applicants must:

- Be a public or private nonprofit or governmental organization
- Provide services in at least one county of Interact for Health's 20-county service area (see [map](#))

Organizations that are not nonprofits or governmental entities may still seek funding through fiscal sponsorship. A fiscal sponsorship is a relationship between a 501(c)(3) tax-exempt nonprofit organization (the sponsor organization) and charitable project that does not have a tax-exempt status (the sponsored organization).

## Grantee Requirements

Depending on the project, awarded grantees may be expected to:

- Participate in grantee meetings up to three times per year to share their work and learning with other grantees and Interact for Health
- Participate in [evaluation and learning activities](#) for the grant as well as part of the overall initiative

## Proposal Selection Criteria

The most competitive applications will:

- Focus on people and communities who are:
  - Black
  - Hispanic
  - Children in families with low incomes (200% or less of federal poverty level)
  - Rural
  - LGBTQ+
- Authentically center people and communities in the project, including through leadership and decision-making power
- Work to improve health outcomes by reducing disparities and advancing health



- equity
- Have goals for the grant period that are clear, feasible and aligned with the goal of the RFP
- Demonstrate that the organization can achieve the goals outlined in the proposal with the budget, timeline and staff capacity indicated
- Be from organizations led by people who identify as Black or Hispanic, including a majority of Board Members and/or an Executive Director/CEO
- Be from organizations that are based in rural communities

## Timeline

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| Proposal Webinar (Mental Health Equity and Amplifying Youth Voice in Mental Health RFPs will both be discussed) | <b>March 16, 2023, 9:00 – 10:00 a.m.</b> |
| Proposal deadline   | <b>April 25, 2023, 5:00 p.m.</b>         |
| Site visits   | <b>May 15 – 19, 2023</b>                 |
| Notification of grant award   | <b>June 6, 2023</b>                      |

## Proposal Webinar

A proposal webinar will be held to answer questions about the RFP concept and application process on **March 16, 2023, 9:00 – 10:00 a.m.** Attendance is optional and not required in order to submit a proposal. Please register for the webinar [here](#). If you cannot participate in the webinar, the recording will be posted to the [Open Funding page of our website](#) shortly afterwards.

## Community Information Sessions

Program staff will be available during the times below to answer any questions related to the RFP or your proposed project. For in-person sessions, please join us for a cup of coffee at the location listed. For virtual sessions, the link to join can be found on the [Open Funding page of our website](#).

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| Interact for Health (8230 Montgomery Rd Ste 300, Cincinnati, Ohio 45236) | <b>March 21, 2023, 1:00 – 3:00 p.m.</b>      |
| Virtual  | <b>March 27, 2023, 1:00 – 3:00 p.m.</b>      |
| Alreddy Coffee & Café (11083 Reading Rd., Cincinnati, OH 45241)          | <b>April 4, 2023, 11:00 a.m. – 1:00 p.m.</b> |
| Virtual  | <b>April 14, 2023, 10:00 a.m. – noon</b>     |
| Velocity Bike & Bean (7560 Burlington Pike, Florence, KY 41042)          | <b>April 18, 2023, 1:00 – 3:00 p.m.</b>      |



## Proposal Submissions

Completed applications must be submitted no later than **April 25, 2023, at 5:00 p.m.** via Interact for Health's online grants management system. To begin the application process or to access a PDF of the required application questions, please visit the [Open Funding page of our website](#). If you have an open grant or have received a grant from Interact for Health in the past two years, your email address may already be registered in the system. For assistance with the application process, please contact Director of Grants Management Kristine Schultz at [kschultz@interactforhealth.org](mailto:kschultz@interactforhealth.org).

## Site Visits

Before selecting projects for funding, Interact for Health staff will conduct a site visit, either virtual or in person, with the potential grantee. Representatives from collaborating organizations are required to attend the site visit. This meeting allows Interact for Health staff to hear more about the proposed project and ask any clarifying questions. Site visits will be conducted **May 15 – 19, 2023**. Applicants will indicate their preferred timeslot during the application process. Site visit topics will include:

- General discussion of your proposed project and budget
- Population of focus for the project
- Any disparities that exist and how this project plans to address them
- Community engagement tactics
- Collaborating partners and organizations or those you plan to engage
- Your organization's journey around diversity, equity and inclusion

## Questions

For any questions regarding the process, please contact Senior Program Manager Lisa Myers at [lm Myers@interactforhealth.org](mailto:lm Myers@interactforhealth.org) or 513-910-0770.

## Definitions

**Mental Health & Well-Being:** Mental health *is* health. It shapes how we cope with stress, overcome challenges, build relationships and enables us to value and engage in life. Simply put by someone in our [focus groups](#), it means being good with yourself. For Interact for Health, we define mental health broadly to mean the promotion of mental health, resilience and wellbeing; the treatment of mental and substance use disorders; and the support of those who experience and/or are in recovery from these conditions, along with their families and communities.

**Mental Health Equity** is the state in which everyone has a fair and just opportunity to reach their highest level of mental health and emotional well-being.

**Culturally Competent Care** is the ability of systems to provide care to patients with diverse values, beliefs and behaviors, including tailoring health care delivery to meet



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patients' social, cultural and linguistic needs. A culturally competent health care system is one that acknowledges the importance of culture, incorporates the assessment of cross-cultural relations, recognizes the potential impact of cultural differences, expands cultural knowledge and adapts services to meet culturally unique needs. Ultimately, cultural competency is recognized as an essential means of reducing racial and ethnic disparities in health care.<sup>4</sup>

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<sup>4</sup> "Becoming a Culturally Competent Health Care Organization: AHA." American Hospital Association, <https://www.aha.org/ahahret-guides/2013-06-18-becoming-culturally-competent-health-care-organization>.