



# COMMUNITY FUND FOR IMMIGRANT WELLNESS

## 2022-2023 User Guide

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# COMMUNITY FUND FOR IMMIGRANT WELLNESS

## About the Community Fund for Immigrant Wellness

The Community Fund for Immigrant Wellness alters the traditional process of philanthropic giving. In this innovative approach, community-based, immigrant-serving organizations define the grantmaking strategy and disseminate grant dollars from a pooled fund. Ultimately, this process shifts the power dynamic in the funder-grantee relationship by asking service providers to not only inform a funding process but to drive it.

### MISSION

The Community Fund serves diverse immigrant communities throughout Southeastern Pennsylvania by providing financial support and capacity building to organizations that remove barriers and provide opportunities for individuals to live with dignity and joy. The Community Fund is stewarded by a granting group of community-based, immigrant-serving organizations and local philanthropic organizations who are deeply committed to shifting power dynamics between philanthropy and service organizations by utilizing a transparent shared decision making process. Listening, learning, and humility are central to this approach. At its core, the Community Fund's approach is asset driven, drawing on the tremendous expertise, commitment, and resilience of the immigrant and refugee communities in Southeastern PA.

### GRANTMAKING

In its fourth cycle of grantmaking, organizations can apply for *up to* \$50,000 to support the emotional health and wellbeing of immigrant and refugee communities. The funding is flexible and should be used to support programs that:

- Promote healing and resilience in immigrant communities
- Build spaces that cultivate meaningful connections among community members
- Foster a sense of dignity and self-agency
- Center cultural practices of participants

For applicants that are new to the Community Fund for Immigrant Wellness or that have received funding in the past but are not currently funded by the Fund, please apply using the full application.

Grantees of the current cycle of the Community Fund for Immigrant Wellness are encouraged to apply using the Current Grantee Application, in which they will be asked to outline the progress of their work, discuss what they have learned, and describe their plan for future funding.

In addition to grant dollars, grantees will also receive stipends to participate in a Community of Practice, where they will have the opportunity to build relationships, share their work, learn from one another, and develop collaborative projects. Grantees will also have access to capacity building support through their involvement in the Community of Practice.



# COMMUNITY FUND FOR IMMIGRANT WELLNESS

## Application Requirements

Applicants will be asked to provide the following information in the Community Fund for Immigrant Wellness application, which can be accessed through our [online grant portal](#).

### ALL APPLICATIONS

#### Organizational Information

1. Information that will be included as a part of the Foundant Profile Information
  - a. Organization Name
  - b. Organization EIN
  - c. Contact: Address, Phone Number, Email Address, Website
2. 501(c)(3) Status/Fiscal Sponsorship Determination
3. Leadership Information
  - a. Executive Director Name and Email Address
  - b. Board Chair Name and Email Address
4. Representative Leadership: Please describe how your organization's leadership team and board is representative of the community you work with.
5. Organization Mission Statement
6. Annual Budget and Financial Review: Please provide a copy of your organization's most recent budget using your preferred budget template.  
*Scattergood Foundation staff will pull additional financial information from [Guidestar/Candid](#) for your organization. If you would like to provide information that is not included on your [Guidestar/Candid](#) profile, please contact Caitlin O'Brien at [cobrien@scattergoodfoundation.org](mailto:cobrien@scattergoodfoundation.org). If your organization is fiscally sponsored, we reserve the right to contact your fiscal sponsor.*
7. Organization Location

### NEW APPLICANTS GRANT APPLICATION

Organizations are eligible to apply for up to \$50,000 in funding. Community Fund for Immigrant Wellness grants can be used to support the organization's programs as they relate to the following activities:

- Promoting healing and resilience in immigrant communities
- Building spaces that cultivate meaningful connections among community members
- Fostering a sense of dignity and self-agency
- Centering cultural practices of participants

The Community Fund for Immigrant Wellness aims to support organizations that use emergent, community-driven approaches for promoting emotional and health and wellbeing.



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## Application Information

### *Community*

1. **Community Description:** Please describe the community your organization works with. Please include demographic information, location of services, and community strengths and assets.
2. **Community Trust and Power:** Please describe how your organization builds trust with and power in your community. In your description, please provide an example that shows how your organization has built trust.

### *Grant Request*

3. **Amount Requested:** Please provide your grant amount request. Organizations can apply for up to \$50,000 in funding.
4. **Organization Description:** Please provide a description of the programs that your organization provides. In your description, please answer the following questions:
  - What is your organization's approach to supporting and improving mental health and emotional wellbeing?
  - How does your organization work to ensure that participants' basic needs are met?
  - How does your organization's staff work together with participants and community members to shape programming and to make critical decisions?
5. **Alignment with Community Fund for Immigrant Wellness Goals:** Please describe how the work of your organization aligns with the mission and goals of the Community Fund for Immigrant Wellness.

The mission of the Community Fund for Immigrant Wellness is to serve diverse immigrant communities throughout Southeastern Pennsylvania by investing in organizations that remove barriers and provide opportunities for individuals to live with dignity and joy.

In your answer, please speak to the specific goals of the Community Fund for Immigrant Wellness, which include:

- Promoting healing and resilience in immigrant communities
  - Building space for participants to cultivate meaningful connections with their community
  - Fostering a sense of dignity and self-agency among participants
  - Centering cultural practices of participants
6. **Funding Request:** Please describe your plan for how the funding will be used. In your description, please answer the following questions:
    - Will the funding requested be used to support existing work or to develop new programming?
    - How will this funding allow your organization to fulfill a community need?
    - How will the funding be used toward the four goals listed above?
    - Who will be the staff responsible for carrying out activities?



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7. **Budget:** Please provide a budget that outlines how you plan to use the grant dollars. Please use your preferred budget template.
8. **Staff Wellness and Leadership:** Providing quality supervision, opportunities for professional development, supportive organizational practices, and community care are foundational elements of supporting nonprofit staff and building a healthy workplace. Please describe how your organization currently approaches staff wellness and leadership.
9. **Three outcomes of interest:** Please include three outcomes that your organization is interested in measuring as they relate to this funding request. Example outcomes include:
  - Improved attitudes toward mental health help-seeking
  - Decreased social isolation
  - Increased use of coping skills
10. **Partnering Organization(s):** Please list any organizations with whom you plan to partner for this grant opportunity and what their role would be. Partnerships are encouraged but not required.
11. **Future Support:** Please describe what kind of support your organization would need to sustain this work beyond the funded grant year.

## *Community of Practice*

12. **Capacity Building:** Please list areas in which your organization would be interested in capacity building opportunities. Potential examples include: program planning and evaluation, grantwriting, fundraising, budgeting, trauma-informed practice training.  
*Your application will not be judged on your answer to this question.*

## *Supplemental Information*

13. [OPTIONAL] **Additional Information:** Is there anything else you would like to say to support this application?  
*You may answer this question in writing or by copying and pasting a link to a video clip, audio clip, photos, or another medium of communication. The intention of this question is to provide organizations with an additional opportunity to share about their program using whatever communication tool feels right for them.*

## CURRENT GRANTEE APPLICATION

Grantees of the 2022-2023 cycle of the Community Fund for Immigrant Wellness can apply for funding to continue and expand upon their work through the 2023-2024 grant cycle. Current grantees are halfway through they're year-long grant cycle. To receive funding in the upcoming cycle, please respond to the following questions.

1. **Amount Requested:** Please provide your grant amount request. Organizations can apply for *up to* \$50,000 in funding.



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2. **Program Update:** Please describe the current status of your funded program. In your description, please address how your organization has completed the activities you outlined in your previous grant application.
3. **Key Learnings:** Please describe what your organization has learned as a result of the grant-funded program to date. In your description, please answer the following questions:
  - What has your organization learned with regard to the mission and goals of the Community Fund for Immigrant Wellness?

The mission of the Community Fund for Immigrant Wellness is to serve diverse immigrant communities throughout Southeastern Pennsylvania by investing in organizations that remove barriers and provide opportunities for individuals to live with dignity and joy.

In your answer, please speak to the specific goals of the Community Fund for Immigrant Wellness, which include:

    - Promoting healing and resilience in immigrant communities
    - Building space for participants to cultivate meaningful connections with their community
    - Fostering a sense of dignity and self-agency among participants
    - Centering cultural practices of participants
  - How has the work of the program for which you were funded impacted the work across your organization?
  - What are you working to improve?
4. **Funding Request:** Please describe your plan for how the funding will be used. In your description, please answer the following questions:
  - Will the funding requested be used to support existing work (including the work for which your organization is currently funded) or to develop new programming?
  - How will this funding allow your organization to fulfill a community need?
  - How will the funding be used toward the four goals listed above?
  - Who will be the staff responsible for carrying out activities?
5. **Budget:** Please provide a budget that outlines how you plan to use the grant dollars. Please use your own budget template.
6. **Staff Wellness:** Providing quality supervision, opportunities for professional development, supportive organizational practices, and community care are foundational elements of supporting nonprofit staff and building a healthy workplace. Please describe how your organization currently approaches staff wellness and leadership.
7. **Future Support:** Please describe what kind of support your organization would need to sustain this work beyond the funded grant year.



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## *Supplemental Information*

8. [OPTIONAL] **Additional Information:** Is there anything else you would like to say to support this application?

*You may answer this question in writing or by copying and pasting a link to a video clip, audio clip, photos, or another medium of communication. The intention of this question is to provide organizations with an additional opportunity to share about their program using whatever communication tool feels right for them.*



# COMMUNITY FUND FOR IMMIGRANT WELLNESS

## Frequently Asked Questions

### GENERAL INFORMATION

#### 1. Who is eligible to submit an application?

Organizations that meet all of the following criteria are eligible to apply:

- **Non-Profit Organization:** The organization is recognized as tax-exempt under Section 501(c)(3) of the Internal Revenue Code or has a fiscal sponsor.
- **Geographic Location:** The organization serves communities located in the Greater Philadelphia region, including: Bucks County, Chester County, Delaware County, Montgomery County, and Philadelphia County
- **Organization Budget Size:** The organization has an annual budget of \$10 million or less.
- **Organization Mission:** The organization's mission is to work with immigrant and/or refugee communities.
- **Representative Leadership:** The Community Fund for Immigrant Wellness is dedicated to advancing leadership of immigrants and refugees. In the evaluation process, consideration will be given to how the organization has worked to build a leadership team and board that reflects the community they serve.

#### 2. What is the deadline to submit an application?

The deadline to submit applications for planning grants is Friday, December 9<sup>th</sup>, 2022 at 5pm ET.

#### 3. Is there a fee to apply?

No, there is no fee associated with submitting and application.

#### 4. Are previous grantees of the Community Fund eligible to apply?

Yes, previous grantees of the Community Fund will be eligible to apply for this year's round of grants. Grantees who were funded in the FY22 grant year should apply using the Current Grantee Application. All other previous grantees should apply using the New Applicants Application.

#### 5. Can current or past grantees of the Scattergood Foundation or other funders who have contributed to the pooled fund apply?

Yes, current and/or past grantees of the Scattergood Foundation or other funders who have contributed to the pooled fund may apply to the Community Fund for Immigrant Wellness.

#### 6. Does the program have to be new or can an organization apply for an existing program?

Organizations can apply for new or existing programs. If current grantees are applying for funding, they can apply for funding new programs if they would like.





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## 7. How many grants will the Community Fund award?

There is not a pre-specified number of grants that will be awarded. Decisions will be made based on quality of applications.

## 8. What is the Community of Practice and who will participate?

Community Fund for Immigrant Wellness grantees will be invited to participate in a Community of Practice. The group will meet at least four times per year to build a space for stakeholders to share best practices and innovative strategies, unite stakeholders around pressing behavioral health issues for immigrant and refugees, and advocate for necessary systems change.

## 9. Will participation in the Community of Practice be required?

It is our hope that the Community of Practice will provide a rich and engaging space for grantees and other stakeholders to share their work, learn from one another, and develop shared advocacy. Grantees will be required to participate and will receive stipends for their participation.

## 10. How will the Community Fund for Immigrant Wellness support capacity building?

We will review grant applications and work with grantees to determine capacity building needs as a part of the Community of Practice.

## 11. How does the Community Fund for Immigrant Wellness define 'behavioral health'?

The Community Fund for Immigrant Wellness defines behavioral health as:

A dynamic state of well-being which enables individuals to use their abilities in harmony with societal values. Important components of mental health include an individual's ability to:

- recognize, express, and manage emotions;
- cope with normal stresses of life;
- relate to others and function in social roles;
- maintain a healthy relationship to addictive substances;
- make a contribution to the community; and
- realize their own potential.

\*Adapted from the World Health Organization; Galderisi, S., Heinz, A., Kastrup, M., Beezhold, J., & Sartorius, N. (2015). Toward a new definition of mental health. *World psychiatry: official journal of the World Psychiatric Association (WPA)*, 14(2), 231-3.; and *MentalHealth.gov (HHS)*.

## 12. Is the pooled fund still taking donations for this grant cycle?

Yes. Funders and private donors can still give to the Community Fund for Immigrant Wellness. Please contact Joe Pyle at [jpyle@scattergoodfoundation.org](mailto:jpyle@scattergoodfoundation.org) for more information.

## 13. Who do I contact if I have questions about the Community Fund for Immigrant Wellness?



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Please contact Caitlin O'Brien at [cobrien@scattergoodfoundation.org](mailto:cobrien@scattergoodfoundation.org) with any questions.

## SUBMISSION PROCESS

### 14. How can organizations submit an application?

Submissions can be made through our online grant portal, which can be found at <https://www.grantinterface.com/Process/Apply?urlkey=SGF>.

**No paper applications will be accepted.**

### 15. What are the steps for submitting an application?

The steps for submitting an application are as follows:

1. Create a Foundant account for the Scattergood Foundation. If you already have a Foundant account with the Foundation, log on using your email address and password. You may access the logon page [here](#).
2. You will then be directed to your Applicant Dashboard. Click on the "Apply" tab at the top toward the left.
3. You will then see a list of Scattergood Foundation applications. Select either of the two "Community Fund for Immigrant Wellness Cycle Four" grant applications. Click the "Apply" button on the right side of the application you wish to complete.
4. Complete the application. If you would like to save the application and return to it, click the "Save Application" button. Once you are ready to submit, click the blue "Submit Application" button.

*If you need assistance using the online platform, please reach out to Caitlin O'Brien at [cobrien@scattergoodfoundation.org](mailto:cobrien@scattergoodfoundation.org).*

### 16. What are the different types of applications?

There are two different applications for the Community Fund for Immigrant Wellness:

- **New Applicant Grant Application:** Use this application if your organization is not a current grantee of the Community Fund for Immigrant Wellness.
- **Current Grantee Grant Application:** Use this application if your organization is currently funded by the Community Fund for Immigrant Wellness.

In each application, organizations are eligible to apply for up to \$50,000.

### 17. What is the timeline for the Community Fund for Immigrant Wellness?

Date	Event
Wednesday, October 19 <sup>th</sup> , 2022	Application period for planning grants opens
Monday, November 7 <sup>th</sup> , 2022 at 1pm ET	Informational webinar about the application process <i>To register for the webinar, <a href="#">click here</a>. The webinar will also be recorded and posted on the Scattergood Foundation's website for your convenience.</i>



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Friday, December 9 <sup>th</sup> , 2022 at 5pm ET	Application period closes
Friday, December 9 <sup>th</sup> , 2022 – Friday, January 27 <sup>th</sup> , 2023	Decision Making Group reviews applications
Week of February 6 <sup>th</sup> , 2023	Applicants notified of award status
March 2023 – February 2024	Grantees implement programs and participate in Community of Practice

*\*The Community Fund for Immigrant Wellness reserves the right to change any of the above dates. All changes will be posted online.*



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## SELECTION PROCESS

### 18. What is the selection process?

Members of a Decision Making Group will individually review applications and score them based on pre-determined selection criteria. The Scattergood Foundation will tabulate scores and facilitate an in-depth discussion of applications with the Decision Making Group. The Decision Making Group will come to consensus about grant decisions based on their scoring rubrics and the discussion of applications.

### 19. Who decides which organizations will receive grant awards?

The Decision Making Group will evaluate applications and make decisions about grant awards.

### 20. What is the difference between the Community Advisory Board and Decision Making Group?

The Community Advisory Board is a group of non-profit leaders with years of experience working with immigrant and refugee communities. They develop the strategy for how funds from the Community Fund will be disbursed, including the development of the Request for Proposals. Members of the Community Advisory Board are paid a stipend of \$1,500 for their time.

The Decision Making Group is a smaller group, members of which are nominated by the Community Advisory Board. This group is tasked with evaluating applications and allocating funds. Members of the Decision Making Group are paid a \$1,500 stipend for their time.

### 21. What organizations are involved in the Community Advisory Board?

The following organizations are involved in the Community Advisory Board:

- ACANA
- AFAHO
- HIAS PA
- Nationalities Service Center
- La Puerta Abierta
- SEAMAAC
- The Welcoming Center

### 22. Can members of the Community Advisory Board or Decision Making Group apply for grants?

Community Advisory Board member organizations are eligible to apply for grants. Organizations that have staff or board members who are in the Decision Making Group are not eligible to apply.



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## 23. What is the role of the funders in making decisions?

The funders of the Community Fund for Immigrant Wellness do not have a vote in the selection process. However, they can act as a tiebreaker if necessary and will also provide guidance should the granting group request it.

## 24. What are the selection criteria?

The Decision Making Group will review and applications and select grantees based on the following criteria:

- **Eligibility Criteria:** Does the organization meet the eligibility criteria for the Community Fund for Immigrant Wellness?
- **Community:** Does the organization serve a community that will benefit from programming related to mental health and emotional wellbeing?
- **Community Trust and Power:** How has the organization demonstrated their ability to build community trust and power?
- **Organizational Approach:** How does the organization work to support and improve mental health and emotional wellbeing?
- **Mission Alignment:** How does the organization's approach align with the Community Fund for Immigrant Wellness mission and goals?
- **Funding Request and Budget:** How will the funding request and budget support the organization's work?
- **Potential for Impact:** How will the organization's work create positive impact?
- **Staff Wellness and Leadership:** How does the organization support staff wellness and leadership?
- **Field Contribution:** How will the grant-funded work contribute to our broader understanding of how to attend to the emotional health and wellbeing needs of immigrants and refugees?

For current grantees, Decision Making Group members will review applications to understand how the organization is moving toward the goals of the current grant-funded program, what the organization is learning from the work and what it is working to improve, how the funding request will support the organization's future work, the future work's potential for impact, and the organization's approach to staff wellness and leadership.

## 25. How will you determine if my organization meets the eligibility requirements?

The Scattergood Foundation and Decision Making Group will determine your organization's eligibility using the following methods:

- **Non-Profit Organization:** The application will require organizations to submit their 501(c)(3) determination letter or fiscal sponsorship letter.
- **Geographic Location:** The application will require each applicant to select the county where their organization is located.



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- **Organization Budget Size:** The application will require each applicant to state their annual budget size.
- **Organization Mission:** The application will require each organization to include their mission statement. The Scattergood Foundation and Decision Making Group will determine, based on the mission and community served, whether the organization's mission is primarily focused on serving immigrants and/or refugee communities.
- **Representative Leadership:** The application will require applicants to describe how their organization has worked to ensure that their leadership team and board are representative of the community they serve. The Decision Making Group will review the answers and assess how the organization has worked to build representative leadership.

## 26. How will I know if I am selected to receive a grant?

The Scattergood Foundation will manage all communications about grant decisions, contracting, payments, and reporting via email and the grant portal.