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III. GRANTS

Independent foundations primary focus is grant making. In general, their assets come from the gift of an individual or family. Community foundations’ assets usually come from many donors rather than a single source, and grant making is limited to a particular region. Community foundations are usually classified as public charities under the tax law and are subject to different rules and regulations than are private foundations.

### AIDS

**Independent Foundation Grants:**

**HIV Center for Clinical and Behavioral Studies, New York, NY.** New York City has the nation’s highest proportion of human immunodeficiency virus (HIV)-infected children of drug-addicted and HIV-infected mothers. These children are at risk of developing neuropsychiatric disorders, which may be attributable to HIV infection and fetal exposure to drugs. This grant will support developmental and behavioral studies to evaluate children of drug-using mothers for effective treatment and education. $74,918 over one year. Funded by the Aaron Diamond Foundation.

### Health Care Finance

**Independent Foundation Grants:**

**National Academy for State Health Policy, Portland, ME.** This grant will address the philosophical and technical barriers that keep managed care from being a viable alternative for Medicaid beneficiaries. Federal and state policymakers and congressional staff will conduct analysis and make policy recommendations for, expanding the use of managed care in the Medicaid program. Funding will support technical papers that aim to generate consensus for a national strategy among consumers, the managed care industry, state officials, and federal health policymakers. $125,000 over fifteen months. Funded by The Henry J. Kaiser Family Foundation.

### Health Care For The Elderly

**Independent Foundation Grants:**

**Alliance for Aging Research, Washington, DC.** Funding will support three distinct projects to improve the health and well-being of older Americans. One project will support efforts to promote a national research agenda on aging, developed by the National Academy of Sciences’ Institute of Medicine, among federal and state policymakers and the public. In a second project, the alliance will develop plans to increase corporate support for training geriatric physicians and scientists. Lastly, funding will support a public education and awareness campaign to help people, especially older women, who suffer from urinary incontinence to understand new treatments for this condition. The alliance plans to develop patient education materials on urinary incontinence, a leading cause of dependent care and isolation among the elderly. These materials will be disseminated to medical association groups. $340,000 over eighteen months. Funded by The Commonwealth Fund.

**Benedictine Nursing Center, Benedictine Institute for Long-Term Care, Mount Angel, OR.** Recent studies have focused on whether restraint-free environments in nursing homes lead to improved patient health and social outcomes. This grant will support efforts to develop strategies, clinical guidelines, and criteria for the appropriate use of physical and chemical restraints in long-term care facilities. The goal is to improve the health and quality of care of the elderly in nursing homes. $400,248 over three years. Funded by The Robert Wood Johnson Foundation.
Health Professions Education

Independent Foundation Grants:

Carnegie Foundation for the Advancement of Teaching, Princeton, NJ. Eighty years ago, the Carnegie Foundation for the Advancement of Teaching produced an influential study on medical education, known as the Flexner Report. This grant will support a study to examine medical education reforms that aim to prepare physicians for challenges in the current and future health care system. Based on study findings, a policy report addressing key health and medical education issues will be published in 1992.

$550,000 over two years. Funded by the W.K. Kellogg Foundation.

San Jose State University, San Jose, CA. Under The Henry J. Kaiser Family Foundation’s More Minorities in the Health Professions program, this grant will support the Division of Health Professions, School of Applied Arts and Sciences, to help minority high school students enroll in college programs leading to health careers. Funding will help to establish the Center for Health Careers to provide academic counseling and information on college programs, in collaboration with the Andrew Hill High School and Alum Rock Counseling Center. To better prepare minority students for college math courses, the David and Lucile Packard Foundation has provided support to the Valdez Summer Math Institute.

$100,000 over twenty-one months. Funded by The Henry J. Kaiser Family Foundation.

University of Massachusetts Medical Center, Worcester, MA. This grant aims to help health and human services agencies to strengthen their delivery of services in communities that have fewer resources to meet the increasing demand for health services. The Community Partners program will provide training and technical assistance to help establish community coalitions, whose aim is to solve local health-related service delivery problems. The program, administered by the medical center’s Area Health Education Center, may serve as a model for strengthening community leadership and promoting local self-reliance.

$620,000 over three years. Funded by the W.K. Kellogg Foundation.

Health Promotion/Disease Prevention

Independent Foundation Grants:

American Cancer Society, Atlanta, GA. Funding will support nutrition demonstrations in elementary, middle, and high schools in four low-income school districts nationwide. These demonstrations will test the practicality of fully implementing new federal dietary guidelines in school lunch programs, including steps to reduce significantly dietary fat in meals. The program will also test a nutrition education curriculum. An evaluation of the program will be conducted.

$300,000 over three years. Funded by The Henry J. Kaiser Family Foundation.

MacNeil/Lehrer Productions, New York, NY. Overwhelming scientific research links dietary habits to diseases and long-term health prospects more than any other environmental factor. Funding will support a Public Broadcasting Service (PBS) special on nutrition, “Eat Smart,” which will be shown in fall 1991. The program will be produced in collaboration with the Vincent T. Lombardi Cancer Research Center of the Georgetown University Medical Center. Georgetown University School of Medicine Associate Professor Sushma Palmer will serve as the project’s editorial consultant. The Fannie E. Rippel Foundation and Nestle USA have provided support for the program, which will be disseminated for home and educational use after broadcast.

$400,000 over six months. Funded by the W.K. Kellogg Foundation.

Information Dissemination

Independent Foundation Grants:

The George Washington University,
Washington, DC. This grant will support the Center for Health Policy Research to develop a comprehensive analysis of current public and private funding sources and programs to address the health and related needs of drug-exposed infants and their families, from prenatal care through school entry. This information will be disseminated to providers and policymakers nationwide. $228,354 over two years. Funded by The Robert Wood Johnson Foundation.

The George Washington University, Washington, DC. While federal policies appear to be revised continually, so too are policies evolving in the health sphere. Funding will support the Center for Health Policy Development to assist policymakers in twenty states with newly elected governors to design health policy and make informed decisions based on the most current information available. $217,801 over eighteen months. Funded by The Robert Wood Johnson Foundation.

Police Executive Research Forum, Washington, DC. To help urban police officers respond more effectively to the mental and physical needs of homeless persons, funding will support a survey of law enforcement agencies’ policies, procedures, and problem-solving techniques in responding to the needs of the homeless. This project will outline effective approaches and guidelines to treat homeless people. Findings will be disseminated to urban police departments nationwide in fall 199. $190,000 over eighteen months. Funded by The Robert Wood Johnson Foundation.

International Health

Independent Foundation Grants:

Paulista School of Medicine, Sao Paulo, Brazil. The Indian Population in the Amazon rain forest, particularly those in Xingu—Brazil's oldest and most developed Indian reserve—lack health personnel, medical supplies, and adequate access to medical centers. This grant will support a model primary health care program to train health personnel serving Indian populations in Brazil. The program, linking traditional Indian medicine with Western medicine, aims to enhance health promotion, disease prevention, and early detection of diseases such as malaria, tuberculosis, and parasitic infestations. $356,506 over three years. Funded by the WK. Kellogg Foundation.

Maternal, Child, And Adolescent Health

Independent Foundation Grants:

American College of Nurse-Midwives, Washington, DC. Funding will support a study of the availability and cost of nurse-midwifery care to women and infants nationwide. This study will be the first descriptive nationwide study of the characteristics of women served by certified nurse-midwives. This information will provide a framework for evaluating midwifery care according to the regulatory basis of practice and reimbursement. $228,816 Over eighteen months. Funded by The Robert Wood Johnson Foundation.

The Family Place, Washington, DC. Current estimates indicate that the Special Supplemental Food Program for Women, Infants, and Children (WIC) could save $25 million annually if mothers breastfeed their babies for three months. In collaboration with the Center to Prevent Childhood Malnutrition, funding will support a program to develop a model breastfeeding and maternal and infant health project, which may be replicated in other communities. This grant is continued support for efforts to improve child health and development among low-income urban families by providing intensive neighborhood-based health, social, parenting, and educational services. The program, originally funded in 1989, will target underserved women and children, particularly women who are substance abusers or live in neighborhoods where there is drug use. The program, mainly serving Spanish-speaking immigrants from Central America, will conduct outreach services to African-
American families with young children. $123,350 over three years. Funded by the W.K. Kellogg Foundation.

Texas Woman’s University College of Nursing, Houston, TX. In Houston’s predominantly Hispanic Near Northside section, infant mortality is 16.5 per 1,000 live births, compared with 11.4 per 1,000 for other parts of the city. This grant will expand community-based outreach efforts that encourage Hispanic women to receive early prenatal care. De Madres a Madres: A Community Coalition for Health involves volunteer mothers, who provide pregnant women at risk of not receiving early prenatal care with social support and community resource and referral information. An evaluation will test the effectiveness of the program as an international model for establishing community coalitions in promoting primary health care for high-risk women. The program, begun in 1989, has received support from the March of Dimes. $587,666 over three years. Funded by the W.K. Kellogg Foundation.

**Medical Practice (Quality, Outcome, And Variation)**

Independent Foundation Grants:

Cleveland Tomorrow, Cleveland, OH. The Greater Cleveland Health Quality Choice program is a cooperative effort of Cleveland business leaders, hospitals, and physicians to measure and improve the quality, affordability, and accessibility of local health services. This grant will support efforts to develop profiles of Cleveland hospitals’ quality of care. These reports will be disseminated to local employers, who may use them to encourage their employees to use cost-effective hospitals. Funding also will support the design of new arrangements for health care purchasing by local employers. The program, a potential model for purchaser-driven local market reform, will evaluate and monitor its impact by collecting health care cost and use data. $400,000 over two years. Funded by The John A. Hartford Foundation.

**Mental Health**

Independent Foundation Grants:

The Carter Center, Emory University, Atlanta, GA. To improve mental health services and research and reduce the stigma of mental illness, this grant will support the Task Force on Mental Health Policy to provide leadership and support to strengthen laws, policies, programs and practices, and attitudes that affect the mental well-being of individuals. The task force, chaired by former First Lady Rosalynn Carter and supported by mental health–related organizations and constituencies, aims to sustain the momentum for national cooperation for strengthening the field of mental health and improving the mental well-being of individuals. $800,000 over twenty months. Funded by the John D. and Catherine T. MacArthur Foundation.

Community Foundation Grants:

Hastings Center, Briarcliff Manor, NY. When health care resources are, or must be, restricted, what priority should be given to the promotion of mental health and the treatment of mental illness? This grant will address this question and support a research and educational program on ethical issues in mental health policy. The center will explore (1) allocation of health care resources to mental health; (2) the definition of a minimal health care package; (3) comparison of mental health and other types of health problems; (4) mental health and the medical model; (5) technology assessment and mental health; and (6) mental health and mental illness. $250,000 over two years. Funded by the John D. and Catherine T. MacArthur Foundation.
IV. OUTCOMES

Grant Outcomes:

Demonstration tests new approach to post-hospital care. The Economic and Social Research Institute has completed the first phase of a three-year project to determine whether enhanced posthospital care for high-risk patients will improve their prospects for full, uneventful recovery and reduce overall health care costs per episode of illness. The Subacute Care Alternative (SCA) demonstration is testing a new approach to care in the immediate posthospital period. To promote optimal patient recovery at home, it provides comprehensive clinical services, monitoring, and intensive education in a day-only hospital setting. This demonstration is funded by The Robert Wood Johnson Foundation’s Health Care Financing and Organization program to develop and evaluate innovative approaches to health care financing and delivery with an emphasis on improved quality and cost containment.

In the current health care system of fragmented services and incentives for shorter hospital stays, patients who are discharged with complex care requirements and unstable medical conditions, particularly when complicated by adverse social circumstances, frequently experience medical complications and repeat hospitalizations. Under current practice the Economic and Social Research Institute believes that transition from acute care to home care may be too abrupt for these patients, with adequate posthospital services either unavailable or difficult to obtain.

Under the first phase of the SCA demonstration, a screening instrument that incorporates a series of risk factors has been designed and tested to identify patients at risk of poor posthospital outcomes and target them for intervention. Data gathered on a representative sample of 379 patients at a New York teaching hospital between October 1989 and March 1990 reveal the serious nature of medical complications in a large proportion of discharged patients. Findings show 72 percent of those classified “high-risk” in the screening process reported adverse outcomes during the three-month period following hospital discharge; a comparable percentage designated “low risk” were free of such outcomes. Of those high-risk patients reporting adverse outcomes, three-quarters sought medical care for their problems, and just over half required readmission to the hospital. Additionally, among the 78 percent of those who were readmitted during the study period, all had also experienced at least one related hospital admission in the twelve-month period prior to the start of the study. This occurrence further underscores the magnitude of the “revolving door” readmissions problem.

High-risk patients were twice as likely as low-risk patients to be over age sixty-five, twice as likely to live alone, and two and one-half times more likely to be widowed or divorced. They were discharged on nearly twice as many medications as low-risk patients, were four times more likely to have experienced medical complications while hospitalized, and were five times more likely to have been hospitalized within the previous year for a related condition. Adverse health outcomes included postoperative wound infections and other surgical complications, adverse drug reactions, and exacerbations of medical conditions.

Over the next two years, the SCA program will target these high-risk patients. Using a randomized controlled trial research design, the Economic and Social Research Institute will determine the impact of SCA on health outcomes, service use, and health care costs over the episode of an illness. If successful, this demonstration will help to legitimize and rationalize carefully targeted early interventions throughout the health care delivery system and reduce the incidence of “after-the-fact” high-cost medical care. For further information, contact Ingrid M. Abolins, Project Manager, Economic and Social Research Institute, 1820 Discovery Street, Suite 340, Reston, VA 22090.

The Pew Health Professions Commission has established seven advisory panels to
translate the commission's national agenda for health professions education reform into specific information for dissemination within the health professions and health professions schools nationwide. The advisory panels will focus on allied health, dentistry, medicine, nursing, pharmacy, public health, and veterinary medicine. Panel members will include academics, practitioners, and health professions students. The commission, established in 1990 with a $2.9 million grant from The Pew Charitable Trusts, aims to help health professions schools to be more responsive to the nation's changing health care needs. The commission is developing an Agenda for Action, which addresses issues for training health professionals and is developing and disseminating policy recommendations for federal, state, professional, and institutional agencies to implement these reforms. A future objective will be to advance change models at health professions schools nationwide.

For more information, contact the Pew Health Professions Commission, 3101 Petty Road, Suite 1106, Durham, NC 27707.

Publications:

The Future of Children is a new multidisciplinary journal designed to inform policymakers and professionals in the public and private sectors on the current state of knowledge and critical public policy concerning children's health and welfare issues. Its inaugural issue, released in spring 1991, focuses on the problems of drug-exposed infants from the perspectives of child welfare, medicine, economics, ethics, and law and public policy. Each issue of the journal will be devoted to selected topics. The journal's second issue, which will be released in January 1992, will feature school-linked health and social services for children. The Future of Children is published by the David and Lucile Packard Foundation's Center for the Future of Children, a grant-making, applied research, and policy development program (see GrantWatch Profile, Winter 1990, page 195). Copies are available from the Center for the Future of Children, 300 Second Street, Suite 102, Los Altos, CA 94022.

National Guide to Funding for Women and Girls, published by The Foundation Center, is a directory of over 700 funders of programs serving women and girls. This 1991 directory includes information on private foundations and corporate giving programs and provides descriptions of funded programs for family planning and reproductive health, education, employment centers, shelters for abused women, girls' clubs, and health clinics. The directory arranges information on foundation and corporate grant making alphabetically and by state. Indexes provide information according to donors, officers, and trustees; geographic location; type of support; subject area; and foundation name. Copies are available for $95 plus $4.50 for shipping and handling (for each additional copy.
add $1.50 for postage and handling) from The Foundation Center, 79 Fifth Avenue, New York, NY 10003.

Shaping New York's Health Care: A Report on Grantmaking, published by the United Hospital Fund of New York, is the first in a series of reports highlighting the fund's grant-making activities and those of its grantees. In the spring 1991 issue, the lead article, "The Challenges of AIDS," profiles eight innovative acquired immunodeficiency syndrome (AIDS) programs, which focus on AIDS education and services, public policy, and voluntarism.

One project, the Citizens Commission on AIDS for New York City and Northern New Jersey, established in 1987 with multifoundation support, has published reports on access to health care, AIDS education and prevention, drug use, and AIDS workplace policies. In February 1991, the commission ended its work and released its final report, AIDS: Is There a Will to Meet the Challenge? The commission found that "the prevailing mood [toward AIDS and HIV] is apathy and hostility. Outside the most devastated communities, the epidemic seems hidden, happening to someone else, somewhere else. An invisible wall seems to separate those who are suffering from everyone else." The commission calls for a "wholehearted and holistic approach" to AIDS and HIV, which should not compete with other social and medical problems.

From 1983 to 1900, the United Hospital Fund awarded forty-nine grants totaling $2.25 million. Copies of Shaping New York's Health Care are available free from United Hospital Fund, 55 Fifth Avenue, New York, NY 10003. Copies of AIDS: Is There a Will to Meet the Challenge? and other commission reports are available from the Citizens Commission on AIDS, 121 Avenue of the Americas, Sixth Floor, New York, NY 10013.

Announcements:

Council on Foundations President James A. Joseph announced that foundations and corporate giving programs must seize the opportunity "to share research, analysis, data, and nonpartisan insights...to inform and enrich policy making," if foundations want to fully realize their potential in future years. "My vision is that foundations need to make sure that policymakers attain [policy relevant] information," generated by foundation-funded programs, said Joseph at the council's April 1991 annual meeting in Chicago.

One step to encourage grantmakers to be involved in public policy issues is through support of a project by the Council of Governors' Policy Advisors (CGPA), a state policy think tank and membership association that researches emerging public policies, public/private partnerships, and nonpartisan policy issues and provides technical assistance to governors' policy advisors. The project will support a dialogue on public policy issues among grantmakers, policy advisors to governors, and representatives from nonprofit and media organizations to improve outcomes in state policy making. CGPA aims to advance public policy and "develop effective strategies enabling grantmakers to be involved in the development and implementation of policy at the state level," said Joseph.

Although this three-year project is in the initial early stages of development, health policy is one of three areas on which the project will focus. In collaboration with regional associations of grantmakers, the project will sponsor a November 1991 working conference, commission papers, disseminate a conference report and recommendations, and provide technical assistance to grantmakers and policymakers, among other activities. The project has received funding commitments from The Henry J. Kaiser Family Foundation, The Joyce Foundation, and the Wisconsin-based Johnson Foundation; additional funding partners are currently being sought.

The council's announcement supporting the CGPA project is particularly timely because it reflects a surge of interest by foundations to increase their influence in the public policy arena. Two major national foundations have recently announced new funding directions in national and state health policy issues. In spring 1991, The Henry J. Kaiser Family Foundation an-
nounced new funding directions in public policy and government reforms in health. The Robert Wood Johnson Foundation’s shifting of program interest to funding goals aims to improve access for basic health services, coordinate services for chronically ill people, and address the problems of substance abuse (see related articles in this GrantWatch section).

Among other issues addressed at the council’s meeting, which focused on defining the values of a civil society, were subjects ranging from health care rationing and reform to public education, acquired immunodeficiency syndrome (AIDS) discrimination and public policy, homelessness and affordable housing, women and the crisis of health services research, civil rights, early childhood services, and grant-making opportunities in the 1990s. For additional information, contact The Council on Foundations, 1828 L Street, NW, Washington, DC 20036.

The Aaron Diamond Foundation has established a new fellowship program for physicians and postdoctoral students in the biomedical and social sciences to conduct research in either AIDS or drug abuse. The program, administered by the New York State Health Research Council, will award up to twenty-five fellowships annually over the next three years to conduct research at medical and research facilities in New York City. The Aaron Diamond Foundation will contribute $16 million over five years to support the fellowship program. The deadline for submitting applications is 31 July 1991. For more information, contact Ellen Rautenberg, program director, Aaron Diamond Foundation Postdoctoral Research Fellowships, New York State Health Research Council, 5 Penn Plaza, Room 308, New York, NY 10001.

The Henry J. Kaiser Family Foundation has established new directions for its grant making and is launching three new grant-making programs. The foundation will spend nearly $100 million over the next five years to help make government more responsive to the health needs of the American people, to improve the health of low-income and minority Americans, and to help make California a leader in health innovation and reform.

In discussing the rationale for the new Government and Health program, Drew Altman, The Henry J. Kaiser Family Foundation president, said, “Foundations need to be much more directly involved with what government does. The sum total of all foundation resources devoted to health barely constitutes a rounding error in our $660 billion health care system. If foundations are to make a significant difference, they must help and sometimes push government to respond more effectively to our health care problems.” The objective of the Government and Health program is to help government chart fundamental changes in policy and management. Priorities are to help set new directions in major public-sector programs, such as Medicare and Medicaid; to strengthen the role of the states in providing effective and efficient health care; and to help develop minority leadership for the public sector in health.

“Poverty puts people at risk of ill health, and failures of our health delivery system to provide essential care virtually guarantee poor health outcomes,” said Altman. The new Poverty and Health program will support efforts to combat the health problems of low-income and minority Americans, such as improved access to preventive and primary health services. The foundation also will support work on general health problems, such as teen pregnancy, substance abuse, and poor nutrition, that have their greatest incidence and worst effect among the disadvantaged.

The third new initiative, the California Grants program, will support efforts to help the foundation’s home state become a leader among its peers in the delivery of effective, affordable, and accessible health care.

The foundation will continue to support ongoing grant-making programs to increase the number of minorities in the health professions, to promote community health and primary care in South Africa, and to support a development program in health outcomes. For more information, contact The Henry J. Kaiser Family Foundation, Quadns, 2400 Sand Hill Road, Menlo Park, CA 94025.