FUNDING STRATEGIES:

Strengthening Protective Factors

Child and family-centered, community-based organizations that:

► Provide comprehensive programming focused on building family resilience, social connections, knowledge of parenting and child development, and/or social and emotional competence of children.

► Help prevent and respond to children and families in crisis, including domestic violence, families experiencing homelessness, or children at risk of or experiencing out of home placement, through comprehensive, multi-pronged programming.

► Offer concrete services in times of need, such as resource and system navigation, co-located services, or access to safety net resources.

Family-Centered Mental Health

► Trauma-informed and community-based outpatient, virtual and/or in-home mental and behavioral health services for children and families.

► Evidence-informed approaches that address whole family mental and behavioral health, including the community health and peer support workforce.

► Planning and capacity building for organizations or coalitions seeking to develop or enhance access to family-centered mental and behavioral health, including access via telehealth.

Organizations that incorporate family voice into decision-making, provide culturally responsive and affirming services, and reduce barriers to accessing programming (e.g., child care, transportation, language justice) are prioritized.

We use our Guiding Principles to make funding decisions across all of our focus areas.

WHAT WE DO NOT FUND:

► Organizations exclusively focused on basic needs or immediate/short-term assistance [e.g., food, clothing, short-term shelter, utility assistance]

► Organizations that do not offer free or accessible services based on sliding fee scale

► Mental health organizations operating independently of community or regional support

► Services for adults only, without accompanying support for children, youth, and families.

► Programming focused exclusively on specific health or medical conditions.

► Services that can be billed to insurance*

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*We recognize that current mental health payment models may not adequately support costs associated with hiring, training, startup, or the delivery of whole person mental health care. CFC will consider funding for services that may eventually be covered or supplemented with earned revenue.