Caring for Colorado’s Statewide Responsive grantmaking program is rooted in our purpose of achieving equity, health and well-being for Colorado’s children, youth and families. When reviewing applications and assessing alignment, we rely on our Grantmaking Guiding Principles.

1. We center the health and well-being of all children, youth and their families, and we prioritize resources and attention to children and youth living in families with low incomes, children and youth of color, and children and youth who experience systemic injustice.

2. We center the voice and perspective of children, youth, families and caregivers and support efforts that seek, integrate, and respond to their insights and solutions.

3. We center organizations that are rooted in and trusted by the children, youth and communities they serve.
FUNDING STRATEGIES:

Enhancing Perinatal and Pediatric Health Care

- Integrated behavioral and mental health services in obstetric, pediatric, and family care settings that promote greater accessibility to parent-child support and seek to enhance holistic, team-based care. This includes capacity building of necessary infrastructure to make integrated health services accessible and sustainable.

- Screening and referral processes developed in collaboration with community-based partners to provide continuum of family support services.

- Education and group-based services, such as group prenatal care and other family-focused programming.

Strengthening Support During Pregnancy and Early Parenting

- Education and social connection for expecting parents and parents of young children, including peer groups, social networks, doula programs, and parenting classes.

- Evidence-based and evidence-informed home visitation programs.

Promoting Infant and Early Childhood Mental Health

- Early Childhood Mental Health Consultation across multiple program/organization types including early care and education, home visitation, family childcare homes, and integrated health settings. Consultants must work across a region and/or settings.

- Capacity building for early childhood caregivers, with an emphasis on family, friend, and neighbor providers, to nurture social and emotional development. Requests from community partners working across regions or settings are encouraged.

WHAT WE DO NOT FUND:

- Services that can be billed to insurance
- Screening in the absence of clearly identified referral partnership
- Free Clinics
- Pharmacies
- Pregnancy resource centers
- Programming focused on specific medical disorders
- Basic needs support in the absence of comprehensive programming
- General operating costs for childcare centers
- Mental health diagnosis and treatment within early childhood education centers

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FUNDING STRATEGIES:

Supporting Youth Development

OUT-OF-SCHOOL-TIME PROGRAMS
- Programs that operate 10 hours or more per week on an ongoing basis and provide regularly scheduled, structured and supervised activities at no or low cost to participants.
- Offer regular programming focused on emotional and mental wellness, resilience, social-skill building, and/or sexual and reproductive health.

YOUTH-CENTERED PROGRAMS
- Group programming designed for and with youth who experience systemic obstacles and injustice, including LGBTQ+ youth, youth of color, youth experiencing homelessness, pregnant and parenting youth, youth in or aging out of foster care and youth involved with the juvenile justice system.
- Offer ongoing, safe, inclusive, and affirming engagement opportunities at no cost to participants.

Promoting Youth Health

Integration or co-location of behavioral health services and/or sexual and reproductive health services in schools or community-based settings where youth feel safe, supported, and affirmed.

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

WHAT WE DO NOT FUND:
- Academic tutoring or enrichment
- College prep
- Workforce development
- Mentoring
- Short-term camps
- Sports programs
- Nutrition programs
- Physical health/education programs
- Free clinics
- Pharmacies
- Pregnancy resource centers
- Services that can be billed to insurance

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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.

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.