

Inside Philanthropy



The State of
American Philanthropy

Giving for Public
Health

Table of Contents

ABOUT INSIDE PHILANTHROPY

Inside Philanthropy is a digital media site that covers the world of charitable giving. We report daily on foundations, major donors, and trends in philanthropy. Through our GrantFinder resource, we also profile and track thousands of funders working across key issue areas and geographic regions. Inside Philanthropy is supported by reader subscriptions and advertising. We do not receive funding from any other source. Learn more at insidephilanthropy.com

ABOUT THE STATE OF AMERICAN PHILANTHROPY

The State of American Philanthropy is a series of background papers on important topics and trends in U.S. philanthropy. The papers draw on past research and reporting by IP writers, as well as new interviews, grantmaking data, and other sources. Learn more at insidephilanthropy.com/state-of-american-philanthropy.

AUTHOR: Jennifer Roche

EDITOR: Michael Hamill Remaley

COPY EDITOR: Chris Packham

GRAPHICS & DESIGN: Sue-Lynn Moses

Executive Summary	1
Introduction	4
The Lay of the Land	6
Who's Giving	6
Who's Getting.....	10
Getting & Giving Deeper Dive	14
The Big Issues & Beyond	17
Funder Strategies & Trends.....	21
Perspectives on Equity	22
A Closer Look at Funder Types.....	26
Private Foundations	26
Corporate Funders	27
Community Foundations	30
Major Donors.....	30
Intermediaries and Associations.....	33
An Analysis of Opportunities and Challenges.....	35
Resources	37

EXECUTIVE SUMMARY

Vast public resources and philanthropy are devoted to health services and hospitals generally. That's not what this State of American Philanthropy report is about. Giving for Public Health focuses instead on the kinds of work that aim to keep Americans from winding up in treatment. But maximizing the health of the entire U.S. population is a massively complex goal, fraught with gaps, underfunding and priorities that don't match public needs. Our nation directs the vast majority of healthcare resources to treatment over prevention. We also don't invest what we should in things like disease research, systems reforms, reductions in inequality and outbreak prevention, which became frighteningly clear during the COVID-19 pandemic. While the pandemic didn't create most of the conditions that shape public health today, it certainly showed them in stark relief.

The American Public Health Association [describes public health](#) as promoting and protecting “the health of people and the communities where they live, learn, work and play,” which further hints at the field's size and reflects the fact that almost any facet of daily life can be seen through the lens of public health. Diverse practices, including sanitation, social work and epidemiology, fall squarely into the field, but have been expanding as [social determinants](#) of health emerge as a priority area of focus.

Protecting public health is widely viewed as a governmental responsibility due to the sheer size of the task and the need for coordinated efforts, and the federal government has long reigned as the primary funder of U.S. public health initiatives. Through the Center for Disease Control and other health agencies, the federal government contributes significant resources to state, local, tribal and territorial health departments with possible increases on the horizon in the 2023 federal budget.

In 2020, the federal government spent approximately \$4 trillion on healthcare, of which just over 5% targeted public health and prevention. A [2022 report](#) by Trust for America's Health called these levels a “chronic underfunding” and a “pattern that must change.” The report also showed that at least 15 states reduced their public health investments in fiscal year 2021.

Even though the federal government appears to be raising its public health funding in FY 2023, philanthropy long ago stepped in to address shortcomings and fund issues of interest. According to Giving USA's 2021 annual report, overall charitable giving to healthcare, including public health, totaled over \$40 billion, or 8% of all philanthropic giving, one of the biggest years of giving to this sector in recent memory (adjusted for inflation).

This brief focuses primarily on the major trends in U.S. private funding in public health (the parameters of which are discussed in more detail in this report's Introduction section). Key takeaways include the following:

Who's Giving

- Because the private donations for public health are frequently embedded in more generalized healthcare giving totals, tracking giving amounts in the field presents a challenge.
- Inside Philanthropy's informal analysis of giving for public health between the years of 2015 to 2019 suggests that stalwarts like the Susan Thompson Buffett Foundation (reproductive care and rights), Bill & Melinda Gates Foundation (global health), and Bloomberg Philanthropies (noncommunicable diseases), play sizable roles, each contributing more than \$200 million for public health work during the period.
- As the field of public health broadens beyond disease prevention and wellbeing to include health equity and nonmedical factors that affect health, the funders that can be considered as supporters of public health advancement widens, too.

Who's Getting

- Based on Inside Philanthropy's analysis of private giving in public health from 2015 to 2019, the big "getters" in the field were women's health (maternal and perinatal), family planning, substance use disorder treatment and environmental health issues.
- Planned Parenthood, Lucile Packard Children's Hospital, the National Abortion Federation Hotline and the Center for Reproductive Rights lead the list of top recipients by dollar amount.
- The pandemic upended giving priorities, and by 2022, there were sizable jumps in giving for communicable disease control and epidemiology.

The Big Issues and Funding Trends

- Many philanthropic leaders in public health are now focusing on the social determinants of health. Across funders, nonprofits, government and healthcare systems, health and wellbeing are no longer considered simply as factors of physical status, but as outcomes that have been shaped by five social determinants of health: access to and quality of health and healthcare, education, social and community contexts, economic stability, and the neighborhood or built environment.
- Racism is increasingly being discussed as a public health crisis. In 2021, the Centers for Disease Control and Prevention formally centered racism as a threat to public health in that agency's work, launching research and investment, and dedicating governmental resources to confront racism's role in creating disparate public health outcomes and adding momentum to the growing work in this field.
- The global climate crisis and its wide-ranging effects are also being increasingly centered as a major public health concern.
- Ideally, philanthropy's investments in public health avoid eroding the expectation that federal, state and local governments play the primary role in protecting citizens' health. Yet, the reality of the situation – the distinct inequities in patient outcomes and the care gaps revealed by the pandemic – yields three primary paths of philanthropic influence in public health: filling the funding gaps and addressing human needs, shaping government policies that prioritize public health, or a combination of both.

Equity in the Sector

- Frustratingly, racial bias and the lack of diversity in the philanthropy field persist. Experts say the conversation has shifted, but the power has not.
- Disparity persists among the cohort of scientists, too. Diverse scientists who seek funding to advance medicine and treatments also face too many obstacles. Meanwhile, people of color continue to be underrepresented in clinical trials, which has important long-term health implications.
- Nonetheless, there are countless examples of the strategies toward addressing racial justice and health equity and the promise they hold. Many can be found in California, a state often at the forefront of public health, given the size of its population. Three organizations highlight the challenges and potential for building health equity: The California Endowment, California Health Care Foundation and the Latino Community Foundation.

Given the breadth of the public health field, this brief focuses primarily on major trends in U.S. private funding in public health. Inside Philanthropy has published separate, targeted giving briefs in many of the largest areas of public health funding, including [mental health; substance use disorders prevention and treatment; reproductive health, rights and justice; violence prevention \(including gun violence\); LGBTQ issues \(including HIV/AIDS\)](#), and [housing and homelessness](#). Grantseekers focused on issues in these areas are encouraged to seek out these briefs for richer funding environment discussions, or to review Inside Philanthropy's [targeted lists of funding for specific diseases](#).

Introduction

Securing the health and wellbeing of 330 million Americans is a massive and complex goal, fraught with gaps, underfunding, and, as became inescapably clear during the COVID-19 pandemic, disturbing inequities. In the first year of the pandemic, Black, Hispanic, Asian and Indigenous people were 1.5 times more likely to be infected by COVID-19 and twice as likely to die from the virus. The elderly represented almost half of all deaths. While the pandemic didn't create most of the conditions that shape public health today, it certainly revealed them.

When the American Public Health Association defines public health as promoting and protecting “the health of people and the communities where they live, learn, work and play,” the organization alludes to the all-encompassing scope of the field — almost any facet of daily life can be seen through the lens of public health. Diverse practices, including sanitation, social work and epidemiology, fall squarely into the field.

Protecting the public health of the people living in the United States is widely viewed as a governmental responsibility due to the sheer size of the task and the need for coordinated efforts, and the federal government has long reigned as the primary funder of U.S. public health initiatives. Through the Centers for Disease Control and Prevention and other health agencies, the federal government contributes significant resources to state, local, tribal and territorial health departments. In 2020, the federal government spent approximately \$4 trillion on healthcare, of which just over 5% targeted public health and prevention. [A 2022 report](#) by Trust for America's

Health characterized these levels as “chronic underfunding” and a “pattern that must change.” The report also showed that at least 15 states reduced their public health investments in fiscal year 2021. The trust's report emphasized that governmental pandemic infusions of cash were not a long-term health solution for the nation, nor money best spent.

In response, the [Biden administration's FY2023 federal budget](#) introduces massive new investments (>\$80 billion) in public health infrastructure that will shape and reshape the field over the next five years. The investments touch on critical needs, such as building public health systems and capacity, ending the HIV/AIDS epidemic, addressing the opioid and drug overdose epidemic, expanding healthcare to low-income women, and transforming mental healthcare.

Even though the federal government has recently increased its public health funding, philanthropy long ago stepped in to address shortcomings. According to Giving USA's 2021 annual report, overall charitable giving to healthcare, including public health, totaled over \$40 billion or 8% of all philanthropic giving, among the highest annual rates of philanthropy in this sector in recent memory (adjusted for inflation).

However, it is important to note that philanthropic giving often goes to nonprofit healthcare providers, such as hospitals and medical research, and is not usually earmarked for public health investments. The Chronicle of Philanthropy's 2021 list of the top 100 charities in the U.S. gives a good example. Twenty of the most favored charities based on cash and stock donations (excluding donor advised funds) were health organizations and medical centers. Planned Parenthood, a stalwart for

women’s reproductive health and public health services was one, but so were St. Jude Children’s Hospital and Partners HealthCare System in Boston, showing that funds may often be earmarked for research and to offset the high cost of medical care rather than prevention and wellness efforts.

As explored later in the “Big Issues & Beyond” and “Perspectives on Equity” sections of this brief, racism and health inequities are profound public health challenges. Health outcomes, exacerbated by the pandemic, are shaped by far more than the systems responsible for physical wellbeing and healthcare access. Today, the field of public health is pivoting toward leveling the playing field for Americans across five determinants of health beyond medical care: healthcare access and quality, neighborhood and built environment, social and community context, economic stability, and information access and quality. Philanthropy has heard this call and many funders are pivoting to broaden their thinking and priorities.

In 2021, Grantmakers in Health teamed up with [The Funders Network](#), [Grantmakers for Education](#), [Native Americans in Philanthropy](#) and 49 other funders in a joint letter to President Joe Biden that identified poverty as “the most critical social determinant of health.” The authors highlighted the role structural racism and rural disinvestment play in creating and perpetuating poverty.

Cara James, the president and CEO of Grantmakers in Health, [told Inside Philanthropy](#) that health funders have long understood the impact of social, environmental and economic factors on health. “Our members recognize that most of our health outcomes have very little to do with what’s happening in a doctor’s office, and more with the

conditions in which we live, learn, work and play,” she said. This tracks with what Inside Philanthropy has heard from regional and national health funders alike, which are just as likely to make a grant to a community organizing group as they are to fund direct services these days.

Social Determinants of Health



Social Determinants of Health
Copyright-free

Healthy People 2030

The Lay of the Land

Who's Giving

Because private foundation funding earmarked for public health is frequently embedded in healthcare giving totals, tracking giving amounts in the field presents a challenge. Inside Philanthropy's informal analysis of giving between the years of 2015 to 2019 suggests that stalwarts like the Susan Thompson Buffett Foundation (reproductive care and rights), Bill & Melinda Gates Foundation (global health) and Bloomberg Philanthropies (noncommunicable diseases) play sizable roles, each contributing more than \$200 million during the period.

The two top donor-advised funds in public health, Fidelity Investments Charitable Gift Fund and the National Philanthropic Trust, contributed at about half the level of the giant foundations during that period, around \$100 million. Community foundations also contribute significantly to public health investments: Among the top community foundations funding public health efforts were the Houston Endowment, Chicago Community Trust, Foundation for the Carolinas and Silicon Valley Community Foundation (which contributes mostly via DAFs). California Endowment and the Colorado Health Foundation are important examples of "health conversion foundations," private foundations that were set up upon the sale of nonprofit health organizations to for-profit entities. Health conversion foundations are major players in public health in many states.

As the field of public health broadens beyond disease prevention and wellbeing to include health equity and nonmedical factors that affect health, the funders that are considered to be advancing

public health widens, too. Here, we highlight 10 prominent funders serving public health, giving a sense of the scope of giving practices.

10 Public Health Funders to Know

Bloomberg Philanthropies

California Endowment

California Wellness Foundation

Chicago Community Trust

Colorado Health Foundation

Commonwealth Fund

David and Lucile Packard Foundation

Duke Endowment

New York Community Trust

Robert Wood Johnson Foundation

The [Robert Wood Johnson Foundation](#) is one of the largest funders in the space (giving more than \$140 million between 2015 to 2019). Led by Rich Besser, former ABC News chief health and medical editor and acting director of the CDC, this accessible funder seeks creative, novel and transformative approaches to improving the nation's overall health and wellbeing on multiple levels. It has four focus areas, all targeting facets of public health: Health Systems, Healthy Communities, Healthy Children and Families and Leadership for Better Health.

RWJF's [Healthy Communities](#) focuses on improving environmental and community determinants of good health, such as quality housing, access to healthcare, mental health and safety. [Healthy Children and Families](#) is concerned with improving childhood nutrition and promoting active life habits among children, with a view toward preventing obesity and its attendant health issues later in life. [Leadership for Better](#)

Health supports the development of health policy and “connects change leaders nationwide who are working to build a culture of health.” **Health Systems** is concerned primarily with improving the delivery of healthcare, but also touches on addressing diseases.

“We are a national philanthropy, which means we invest in health and healthcare improvement initiatives across the U.S.,” said Kristin Schubert, assistant vice president, program, at the foundation. Schubert added that RWJF sees itself as a strategic investor, rather than a charitable donor. She encouraged prospective grantseekers to connect and engage in conversations with the foundation, including asking for a phone meeting. “There’s nothing, really, that replaces that,” Schubert said.

Arnold Ventures, established by hedge funder John Arnold and his wife Laura, is yet another giving vehicle – it converted from a private foundation into an LLC. It takes a venture philanthropy approach to giving in a wide range of fields, including public health. Its grantmaking prioritizes evidence-based efforts to “improve healthcare delivery, lower costs, and reduce disparities in access.” While their healthcare arm focuses on reducing costs and ensuring high-quality care, their public health programming expands contraceptive choice and reproductive care, and works to frame the opioid epidemic as a public health issue rather than a criminal one. This data-driven venture philanthropy funder is highly proactive in its grantmaking and generally does not accept unsolicited proposals, but it does periodically release requests for proposals (RFPs) for select initiatives via its website. If your work doesn’t strive for transparency and doesn’t depend on evidence-based data, your public health organization is unlikely to be considered for funding.

Bloomberg Philanthropies was founded by former New York Mayor Michael Bloomberg, of the media and financial giant Bloomberg LP, who also signed the **Giving Pledge**. In 2022, Bloomberg received his third reappointment as the World Health Organization’s global ambassador for noncommunicable diseases (NCDs) and injuries. Not surprisingly, Bloomberg Philanthropies tackles chronic public health issues and NCDs globally and in the U.S. Their investments aim to reduce the factors that put people most at risk for NCDs. On their funding horizon in the U.S., they expect to focus on reducing youth vaping and tobacco product use, address the overdose epidemic, and improve access to healthy food and diets.

Inside Philanthropy

August 2020 Survey

“No matter what philanthropy does, the growing and now entrenched inequality affects so many aspects of peoples lives that we are always trying to catch up. Philanthropy may be able to find a cure for a disease, or create a grew technology to help the poor, but until we can work with governments to manage inequality we will be always be playing catch up.”

—Foundation professional, Ohio

“As we look ahead to the next three to five years, Bloomberg Philanthropies remains deeply committed to this (public health) work through giving to advance proven interventions, working at both the policy and grassroots levels,” said Kelly Henning, MD, and public health program lead for Bloomberg Philanthropies. Bloomberg’s grantmaking process is highly competitive and it’s challenging for health organizations to cross their radar, but IP encourages grantseekers to reach out to them. The grants can be quite large. According to **Forbes**, Michael Bloomberg spent over \$1 billion to reduce tobacco use over the last decade, pledging \$1.8 billion to his alma mater Johns Hopkins

University and an additional \$100 million for four medical schools at historically Black universities. “My advice to grantseekers in public health would be to show how your solution helps address unmet needs that pose a heavy burden on communities that are underappreciated and under-resourced,” Henning said.

The [Otto Bremer Trust](#) broadly supports programs that contribute to the increased health, safety and well-being of people in the Upper Midwest (defined as Minnesota, Montana, North Dakota and/or Wisconsin). Their model is unusual, and is framed in an interesting way. Bremer divides its investing among organizations that provide “social return,” “financial return” and “hybrid return” – that is, “organizations that successfully contribute to both the financial and social capital within a community.” Their health and well-being funding delivers care to underserved and rural communities, including programs that support social determinants of health, such as affordable housing, early education and job skills. Bremer has an open application process and welcomes both large and small organizations. For those who meet its geographic requirements, the trust is seen as an accessible funder that enjoys working closely with its grantees. Grants generally range from \$20,000 to \$100,000. Its regional approach to giving for public health is typical of mid-sized, private foundations.

The [California Wellness Foundation](#) advances health and wellness in the state and was established in 1992 as a health conversion fund. Its grantmaking spans the social determinants of health, supporting community wellbeing, health equity and access and economic security and dignity. It is also the largest funder of gun violence prevention in California and among the largest in the country, a focus they’ve narrowed in recent

years. “Communities are interested in addressing the root causes of gun violence,” Cal Wellness Chief of Staff Alex Johnson [told Inside Philanthropy](#). “They are also interested in looking at what happens after the incident, and thinking about how to reduce the trauma that attaches to gun violence. So we’ve directed a lot of our grantmaking in that way over the last couple of years.” The foundation accepts unsolicited letters of inquiry from California-based grantseekers via an online portal. Grants range from \$5,000 to \$1 million.

The [Commonwealth Fund](#) is a private foundation “dedicated to affordable, quality healthcare for everyone.” It supports research, policy and interventions that improve healthcare quality and access for vulnerable and uninsured people in the U.S. with a focus on “independent research on healthcare issues.” Recent grantmaking prioritizes system reform, cost reductions, medicare enrollment and preventative healthcare, to name a few. The fund’s grantees tend to be well-established organizations, institutes and service providers, and RFPs have prioritized researchers from underrepresented groups. This is an accessible funder that accepts letters of inquiry through its online portal at any time. The fund makes about \$20 million a year in grants.

In 2022, it launched the Commonwealth Fund Commission on a National Public Health System with the vision of designing a strengthened public health system at the federal, state and local levels in the wake of COVID-19’s impact and the profound barriers to accessing equitable health care that the pandemic revealed. The commission will be chaired by Margaret Hamburg, the former Commissioner of the U.S. Food and Drug Administration and will be supported by faculty from several prestigious schools of public health.

Since 1998, the [de Beaumont Foundation](#) has been working to advance policies that improve community health through a strong public health workforce, build strategic partnerships, and strengthen public health systems so that people in all communities can be healthy. It creates programs to achieve this in three core areas: policy, partnerships and people. The de Beaumont Foundation often works as a convener and looks for scalable solutions. “We don’t just write checks,” said Brittany Giles-Cantrell, program director at the de Beaumont Foundation. “We are doing the work alongside our grantees, and we bring resources to these efforts to increase their impact,” she said, including internal capabilities, such as communication strategies, research and knowledge around advancing public health workforce and systems. Since the de Beaumont Foundation does not accept unsolicited proposals, it can be tough to connect with the organization. But it does solicit proposals for certain opportunities. For example, one open request for proposals, Innovative, Multi-Sector Partnerships for Community Transformation (IMPACT) in Public Health, targeted partnerships between governmental

public health agencies and businesses to engage leaders with resources to pursue ambitious, solution-oriented projects. In 2023, a cohort of four to six partnerships among public health agencies will receive up to \$100,000 to help with implementation.

[First Nations Development Institute](#) functions as a grantmaking intermediary – it is both a funder and fundraiser. It recently took a deep dive into philanthropic giving in Colorado, where the organization is headquartered. Its [findings](#) were striking: Just 0.1% of Colorado philanthropy is awarded to Native American community-based organizations in the state. In response, the [Colorado Health Foundation](#) launched an initiative to counter philanthropy’s underinvestment in Native communities with a \$1.5 million gift to First Nations Development Institute that was [reported](#) in [Inside Philanthropy](#). The matching grant is being used to develop a Native American Fund for Health Equity, which will provide support to Native nations and Native-led organizations working to advance health equity in Colorado. In creating the fund, the Colorado Health Foundation and First Nations want to boost awareness of and support for Native issues among Colorado’s philanthropy community.

Despite this investment, Raymond Foxworth, First Nations Development Institute’s vice president for grantmaking, development and communications, emphasizes they don’t think of themselves as public health funders. First Nations Development Institute primarily considers itself an economic catalyst, acknowledging that public health plays a part, which includes supporting nutrition and native foods, stewarding native lands, and investing in Native youth. “We invest in the ideas and genius of Native communities,” Foxworth said.

Grantmaker Spotlight



The overall mission of the First Nations Development Institute is to improve and strengthen Native American economies and build healthy Native communities. As of mid-2022, the institute has awarded nearly \$55 million in grants to support projects in 44 states, Washington, D.C., and American Samoa. Supporters of First Nations Development Institute include 11th Hour Project, Agua Fund, and Patagonia.

David and Lucile Packard Foundation may be best known for its environmental giving, but its voice and role in funding public health initiatives, particularly for women and children, is formidable, too. In the U.S., the foundation emphasizes reproductive health, child health, and racial justice and equity. CEO Nancy Lindberg was an early and vocal opponent of the Supreme Court’s decision to overturn Roe v. Wade. “This decision,” she said in a statement, “will reinforce cycles of poverty and inequity for people across the country and have the greatest impact on people of color and those with lower incomes.”

Packard is one of only a handful of large funders that have been steadfast supporters of abortion rights. In her public statement, Lindberg also made clear that Packard “is unwavering” in its support of abortion access in the United States. It has awarded an additional \$14.1 million in emergency grants for reproductive health this year, in addition to its annual giving of \$12.5 million to reproductive health grantees in the United States. Packard has been a funder of reproductive rights for more than 50 years and is explicit about its support for abortion care and eliminating the stigma of abortion. It also funds children’s health initiatives and in the area of “agriculture, livelihoods and conservation.” Its COVID-19 rapid response supported efforts including local grants in the Bay area and scientific research. It gave over \$21 million through 66 emergency response grants in 2020.

Who’s Getting

According to Inside Philanthropy’s analysis of giving from private donors to public health from 2015 to 2019, the highest funded issues were the general field of women’s health (maternal and perinatal), family planning, substance abuse treatment, and environmental health. (Inside

Philanthropy has published separate briefs detailing giving in each of these areas, linked in this brief’s introduction.) Planned Parenthood, Lucile Packard Children’s Hospital, the National Abortion Federation Hotline and the Center for Reproductive Rights lead the list of top recipients by dollar amount. Of course, the pandemic upended giving priorities, and by 2022, there were sizable jumps in giving for communicable disease control and epidemiology. This list of “who’s getting” is designed to introduce readers to the widening range of nonprofits working to address public health and health equity issues.

10 Public Health Grantees to Know

Advocates for Youth

Alliance for a Healthier Generation

American Heart Association

Campaign for Tobacco-Free Kids

CDC Foundation

Drug Policy Alliance

Futures Without Violence

Guttmacher Institute

Health Care Without Harm

National Campaign to Prevent Teen and Unplanned Pregnancy

Examining even a small sampling of dynamic public health organizations attracting considerable funder attention quickly demonstrates the extraordinarily wide scope of the field.

Abortion rights were upended by the 2022 Supreme Court decision overturning Roe v. Wade, and now reproductive healthcare – a major portion of the public health sector – is at greater risk across the nation. In response, philanthropy has redoubled its

efforts to support organizations working on the forefront of the issue. The [Guttmacher Institute](#), arguably the most prominent research institute working to advance reproductive health policy and access, has shifted into overdrive since the Dobbs decision. Guttmacher was formed in 1968 under a different name as an independent affiliate of the Planned Parenthood Federation of America; it became a separate nonprofit in 2007, according to [its website](#). A 2022 grant from the Packard Foundation helped Guttmacher launch an [interactive state-by-state map](#) of the legal and policy status of abortion in the U.S. prior to the Dobbs decision, making it a real-time tracker of the erosion of abortion rights in the nation. Its approach and mission combines research, data and advocacy to help “all people realize their rights and access the resources they need to achieve sexual and reproductive health.”

Grantee Spotlight



Formerly known as the National Black Women's Health Project, Black Women's Health Imperative promotes the “physical, mental and spiritual health and well-being of African American women and girls.” Since 1983, the organization has invested over \$80 million toward those ends. Black Women's Health Imperative has a wide range of corporate, nonprofit and private foundation supporters including Lululemon, the Hewlett Foundation, and AARP. In 2022, the nonprofit received a \$1.2 million grant from the Kellogg Foundation for support in its work in preconception and postpartum care for Black mothers.

Supporting grassroots nonprofits to organize communities around their own health and wellness priorities is an important and growing priority for many public health funders. One of the refrains of [Advocates for Youth](#) is “When social institutions fail to recognize young people’s rights, we push them to do better.” The nonprofit leverages the determination, energy and commitment of young leaders to shape their future through activism on issues critical to their health and wellbeing, including sexual health, gender identity and social justice. Through youth-led mobilization efforts, Advocates for Youth has become even more critical in light of political attacks on bodily autonomy and LGBTQ+ people. Its 2021 annual report tracks the network of 100,000 youth activists at 1,200 colleges and universities, including in every state and in over 100 countries. Youth advocates from the organization have created sex education resources (in a program called AMAZE) to fill community gaps, and started a network of peer educators and advocates in the face of reduced and retracted abortion rights (ABORTION OUT LOUD). Approximately 75% of its FY 2021 \$6.9 million budget came from grants and contributions, including from private foundations such as Charles and Lynn Schusterman Family Philanthropies and Overbrook Foundation.

Early childhood health is another key concern of the philanthropic sector. [Alliance for a Healthier Generation](#) plays an especially visible role in the public health puzzle, promoting children’s health and healthy environments. It takes a holistic approach to child health and partners with schools, nonprofit organizations and the juvenile justice system, among others. In 2021, it provided access to better nutrition, physical activity, mental health skills and COVID-19 resources to more than 30 million children and 5 million families and staff

members. The BlueCross Blue Shield of South Carolina Foundation, Clinton Foundation, Kohl's and the Campbell Soup Foundation are among the private funders of their work. In total, philanthropic giving made up \$10 million of its \$17 million in 2021 revenue. The partnership also cultivates a roster of celebrity advocates, including chef Rachel Ray and professional snowboarder Eddie Wall.

The health of Black people has been consistently overlooked and underfunded, but increasingly, organizations focused on the Black community's wellbeing are gaining much-needed philanthropic support. Founded in 1983, [Black Women's Health Imperative](#) is the country's first (and only) national nonprofit focused on improving the health and lives of Black women and girls. With a mission of eliminating "barriers to wellness for Black women and girls," the organization serves Black women through several signature programs, including diabetes prevention, workplace fairness initiative, and Positive Period!, which reduces menstrual stigma and supplies resources to girls. A [2022 NPR story](#) highlighted the importance of (and need for) its work with pregnant mothers in Georgia, where Black women are three times as likely to die in childbirth as white women. The organization also works on advancing policy that lifts Black women, including developing the first national health policy agenda for Black women.

In many instances, fundraising organizations focused on specific diseases also act as grantmakers, serving as a critical conduit between funders and the communities impacted by specific diseases and those working to speed treatments and cures into existence. The [Lupus Research Alliance](#), for example, is the country's largest philanthropic funder of lupus research at around \$15 million in

annual grantmaking. Estimates suggest about 1.5 million Americans and about 5 million people worldwide have some form of the condition. However, it's difficult to diagnose; many people go undiagnosed for years, and treatments have remained limited. The alliance redoubled its efforts to speed the development of medicines that more precisely target the underlying disease and its manifestations. The alliance [recently announced](#) awards totaling \$9 million to three international research teams across four continents. The backing for the awards came from a longtime LRA supporter, Bloomberg Philanthropies, and the awards focus on the development of treatments that can benefit lupus patients as soon as possible. Its grants are made primarily to scientific researchers.

Similarly, the [American Heart Association](#) continually invests in scientific research, while also being a prolific grantseeker. In 2019, the AHA awarded more than \$14 million to a collaborative research network linking teams at four universities (Northwestern, Michigan, Washington and Vanderbilt) so they can study two important, closely related issues: sudden cardiac arrest and arrhythmias.

"We had been doing traditional funding, mostly for early career investigators and some established investigators, but we weren't entirely happy with how well we were doing," Mariell Jessup, MD, chief science and medical officer at AHA, [told Inside Philanthropy](#). "In addition to our initial goal to fund early career investigators and help launch their careers, we wanted to develop different models of funding to ultimately have an important impact on the health of Americans with respect to cardiac health."

The [ALS Association](#) seeks a cure for amyotrophic lateral sclerosis, a progressive, degenerative disease that affects the brain and spine and is fatal. In late 2022, the patient and medical community welcomed news of a promising new “investigational” drug that helped extend the life of patients living with ALS by an average of six to 10 months in clinical trials. The ALS Association helped fund the drug’s research, the trials, and advocated to the Federal Drug Administration for swift approval of the drug’s use. Notably, the ALS Association reported that it paid for these investments through proceeds from the ALS Ice Bucket challenge, a social media event in 2014 that raised awareness and donations. According to the association, the challenge “accelerated” the search for a cure. Among its wealthy supporters are Pinterest cofounder Ben Silbermann and his wife Divya Silbermann, who fund their local ALS chapter. Divya is also a board member of [I Am ALS](#), another nonprofit working to end the disease.

Large healthcare institutions are frequent recipients of foundation giving, and many also prioritize public health initiatives among their medical research and healthcare activities. [Fred Hutch Cancer Center](#) was originally launched to honor professional baseball player Fred Hutchinson, who died in 1964 from cancer. Today, Fred Hutch represents the big end of the pool of grantseekers with total 2021 revenues from all sources nearing \$1 billion. Philanthropic grants and outright gifts comprised \$83 million, with individual gifts at 44% of that total, philanthropic grants at 41%, planned gifts at 8% and the rest made up of corporate gifts and community-raised funds. Although the center now provides clinical care, which boosted that revenue number, Fred Hutch continues its flagship research programs. Its programs now fund study in 19 subject areas, six

diseases and five divisions, including one devoted to public health. Fred Hutch also enjoys support from the [Bezos family](#), who Inside Philanthropy reports made a whopping \$710 million commitment to Fred Hutch in 2022.

Inside Philanthropy

August 2020 Survey

“Top funders want to see their key agendas go forward; the pandemic pinpoints serious gaps in research and capacity not only in public health but in food security, climate change, social justice and in unpreparedness. I find donors are pushing well equipped nonprofits to step up to the plate and fill these gaps. That means nonprofits must reevaluate their missions.”

—Counsel to nonprofit CEOs and trustees, United States

Given the inequities in how natural resources are shared (think Flint, Michigan’s water crisis) and the community locations chosen by polluters, environmental health is also a primary area of interest for funders. Three community leaders of color launched [WE ACT](#) in Harlem in 1988 when a sewage plant was sited in their neighborhood. Today, WE ACT is one of the oldest Black-led environmental justice organizations in the nation. Cofounder and executive director Peggy Shepard and the organization have become role models for environmental health and justice activism well beyond Manhattan and New York state borders. Its current programmatic areas advance policy and initiatives in cleaner air, better jobs, climate justice, healthy homes, and sustainable and equitable land use, and engage community members with the democratic process. They are vocal advocates on initiatives across the nation. WE ACT enjoys support from funders such as billionaire MacKenzie Scott (\$6 million in 2021) as well as Mitchell Kapor (Lotus Corporation) and his wife Freada Kapor Klein through their Kapor Center for Social Impact.

[Health Care Without Harm](#) is also a major player in the environmental health and justice space with a focus that includes reducing the environmental impact of the healthcare industry. It works globally to “protect public health from climate change” by identifying and promoting solutions to transform the supply chain to “leverage healthcare’s purchasing power to drive policies and markets for ethically produced, healthy, sustainable products and services,” and to support and advance environmental leaders. In the U.S., they have launched a sustainable healthcare network for hospitals and advocate for climate policy solutions. Health Care Without Harm enjoys support from many private foundations, including the Oak, Robert Wood Johnson and Skoll foundations.

A key segment of the field is working on gun violence prevention with a public health lens. One hospital-based violence intervention program is the [Wraparound Project](#) at Zuckerberg San Francisco

Collaboration Spotlight



The Wraparound Project

In 2009, the Wraparound Project teamed up with the National Network of Hospital-based Violence Intervention Programs, (now known as Health Alliance for Violence Intervention or HAVI) to create a nationwide database measuring outcomes in violence prevention. The partnership allows network members to collaborate on research, best practices, and opportunities for funding sustainability. HAVI members include Aim4Peace, Caught in the Crossfire, and Detroit Life is Valuable Everyday (DLIVE). Major hospitals such as Johns Hopkins, Beth Israel, and Massachusetts General operate HAVI based violence intervention programs.

General Hospital (ZSFG), which receives funding from the [San Francisco General Hospital Foundation](#) (SFGHF). The project goes right to the point of crisis, meeting patients in the hospital after violent incidents. Wraparound case managers, all of whom come from the communities where they work, offer patients initial support and continue the connection after the patient leaves the hospital, connecting them to mental health services, job training and employment resources. The goal of the Wraparound Project is to prevent violence from further spreading. Research shows that people who have been violently injured are at high risk of suffering a second injury within a year, Kim Meredith, SFGHF’s CEO [told Inside Philanthropy](#). In some cases, a patient leaves the hospital and returns to the same violent situation; in other cases, they seek revenge for the initial attack. “The Wraparound Project’s goal is to prevent that second injury,” Meredith said. “Wraparound does ongoing case management, giving people those supports in their lives that we all want and need.” Since Wraparound started in 2005, there has been a 50% reduction in reinjury among patients at ZSFG.

Giving & Getting Deeper Dive

The public health funding landscape has seen notable changes during the past few years. The pandemic heightened the urgency of funding for communicable disease control and epidemiology, and the overturning of *Roe vs. Wade* galvanized funder attention and new approaches. As discussed in the introduction and Big Issues section of this brief, health equity and social determinants of health have emerged as greater priorities both for philanthropy and the federal government. Meanwhile, long-time public health issues, such as substance use disorder treatment and prevention, obesity, aging, and environmental health, also command funding attention.

Protecting women’s health in a post-Roe world. As Inside Philanthropy [reported](#), in the aftermath of the Supreme Court’s decision to overturn Roe v. Wade, organizations working to protect abortion rights and access reported a huge surge in giving toward the cause. Kelley Robinson, vice president of advocacy and organizing for Planned Parenthood Federation of America and executive director at Planned Parenthood Action Fund, said that in the 24 hours that followed the court’s decision, PP Federation of America and PP Action Fund saw a 40-fold total increase in donations compared to a typical day, with more than half coming from new donors.

The [Packard Foundation](#), in addition to announcing its “unwavering” support for abortion access, awarded \$14.1 million in emergency grants for reproductive health in 2022, in addition to \$12.5 million to reproductive health grantees in the United States annually. Longtime institutional funders pledged their continued support, with some shifting strategy, increasing giving, or organizing other donors. But grantees and funders alike called for more and steadier support, including long-term funding and support for legal and policy advocacy, while pointing out the need for a broader approach to the fight for reproductive justice.

Giving trends following the Dobbs decision follow a well-established pattern in crisis philanthropy—whether following a natural disaster or one that’s created by government policy fallout—in which recipients on the ground see an immediate surge in donations but struggle to maintain the durable funding they need to tackle the root of the problem.

“We’ve been inspired by the generosity of our donors, but we have heard from partners—particularly abortion funds—that this movement

cannot be sustained by the boom-and-bust cycle that follows breaking news on abortion restrictions,” said Jethro Miller, chief development officer at Planned Parenthood Action Fund.

A [2021 survey](#) by the Groundswell Fund, which works to support women-of-color-led organizing and reproductive justice in the U.S., found that 64% of organizations said their work would be more powerful if they had increased resources.

Funder Spotlight

The Susan Thompson Buffett Foundation

While some states have shored up their constitutions protecting abortion as a right, women’s fight for bodily autonomy is still under attack. According to Guttmacher, 24 U.S. states have banned abortion or are likely to do so in the coming months. The Susan Thompson Buffett Foundation has long been regarded as one of the largest funders of abortion rights and access. In 2020 it gave over \$60 million to the National Abortion Federation and its grants specifically earmarked for abortion totaled over \$96 million that year. STBF has also been a longtime supporter of various Planned Parenthood and NARAL Pro Choice entities. Since 2000, it has given around \$2 billion to pro-choice and reproductive justice organizations.

COVID and pandemic-related giving. The COVID-19 crisis naturally disrupted philanthropic patterns and drew funding attention to the crisis at hand. Giving USA’s 2022 Annual Report on Philanthropy said health funders prioritized COVID-19 vaccines, health equity and mental health and invested in “strengthening future pandemic mitigation and prevention efforts” across healthcare and public health.

Funders also targeted public health initiatives to address systemic inequities. For example, Paychex founder Tom Golisano gave \$30 million to the Special Olympics to bring equity to the care of people with intellectual disabilities during the pandemic, and the Rockefeller Foundation donated more than \$13 million to distribute vaccines.

In early 2022, the Center for Disaster Philanthropy (CDP), in collaboration with Candid, [released a report](#) highlighted in Inside Philanthropy that looked at philanthropy’s pandemic-related giving across 2020. It concluded that foundations, corporations and high-net-worth donors allocated more than \$20 billion globally for COVID response, easily eclipsing giving for other recent disasters, and encouraged funders to ramp up support to underserved communities disproportionately impacted by the crisis.

By mid-2022, CDP and Candid [published a new study](#) looking at whether funders maintained robust COVID-related support throughout 2021. Short answer: They didn’t. The study found that COVID funding by survey respondents declined by 31% from fiscal year 2020 to 2021. But it isn’t all bad news. Among the 490 foundations that shared data with CDP and Candid for fiscal years 2020 and 2021, overall grantmaking actually increased by 11% in 2021, not adjusted for inflation.

This finding also points to a silver lining embedded in the report: The boost in overall grantmaking, coupled with the study’s intentionally open-ended methodology, suggests that while respondents may not be explicitly funding COVID-related programs, they’re clearly addressing the challenges that the pandemic caused or exacerbated in areas like mental health, housing and education. Moreover, the inequities in public health outcomes and

obstacles to accessing care during the pandemic raised the urgency among philanthropic organizations.

Giving USA reported that overall charitable funding to health-related causes from all sources rose by 7.7% to just over \$40 billion in 2021. Among more than 160 nonprofit healthcare organizations, major gifts and foundation gifts were the largest sources of revenue in 2020, followed by planned giving, corporate gifts, government grants, annual gifts, and special events. Notably, revenue from peer-to-peer fundraising events such as walk-a-thons, grew for the first time since 2008, reaching just under \$1 billion in revenue in 2021.

Intersectional and integrated giving post-pandemic. The Elevance Health Foundation – formerly known as the Anthem Foundation, but still the philanthropic arm of the healthcare insurance giant now renamed Elevance Health – announced a \$13 million commitment in 2022 to several community mental health programs to promote mental health equity, [as reported by IP](#). What is perhaps most important to note about these new grants is that they demonstrate an acceleration of the funder’s COVID-era strategic rethink to focus on improving health and access to care for communities that have long experienced more than their fair share of health problems.

“Over the past couple of years, the effects of COVID-19 and the recent social unrest really called to attention the racial inequalities and health disparities that have plagued our communities for way too long,” said Maggie Bowden, a program manager at Elevance Health Foundation. This difficult period in American health has been a good time for the foundation to consider its strategic direction for the future, she said. “We redefined

our approach and really tightened our focus to invest in partnerships and programs that address health inequities for the socially vulnerable.”

That strategic refocus resulted in the foundation’s three-year, \$90 million philanthropic giving strategy, which focuses on four pillars. Substance use is one of those pillars, along with improving maternal and child health, encouraging the use of healthy food as medicine, and providing disaster relief. (For more information, see [Connie Matthiessen’s article](#) about the then-Anthem Foundation’s funding for maternal health.)



The Elevance Health Foundation's Substance Use Disorder (SUD) program focuses its funding on early intervention, prevention, crisis response, harm reduction and reducing barriers to trauma-informed approaches to SUD and mental health care equity. Nationally, Elevance supports initiatives promoting scaleable and systemic change. Locally, it supports programs in California, Georgia, New York, Ohio and Virginia. Elevance plans to invest up to \$30 million over three years in its SUD grantmaking.

Similarly, much of the momentum around today’s age-related giving comes from the growing interest in intersectional funding. Growing old makes people ever more vulnerable to other forms of discrimination or disadvantage they may already face, including racism, sexism, housing insecurity, isolation, ableism and homophobia. Seen through an intersectional lens, funding focused on housing, urban development, transportation, broadband access, healthcare, food insecurity, socialization — you name it — all connect to aging, particularly as our society steadily grows older.

Gender is a great example. Aging is a women’s issue since women tend to live longer and have less financial security than men. As many funders are now beginning to recognize, this means that programs designed to shore up women’s financial power are also programs for aging.

As [reported](#) in Inside Philanthropy, leaders in the intersectional funding space include the Metta Fund, a San Francisco-based nonprofit that focuses on aging and racial equity, and Point32Health, a New England-based partnership among healthcare organizations that sees behavioral health, clinical innovation, health equity and community involvement as interlocking parts of the wellbeing whole. Lindsay A. Goldman, CEO of Grantmakers in Aging, a consortium of more than 115 funders in the aging space and champion of age-related issues and funding, also points to women such as MacKenzie Scott and Melinda French Gates for some of the exciting action around funding in aging due to the enormity of their grants and the attention they have generated. “They are the ones who are saying, ‘This is a population we need to pay attention to.’ That is helping to move the field faster,” Goldman said.

The Big Issues & Beyond

All eyes are on social determinants of health. Among an increasing number of funders, nonprofits, government agencies, and healthcare systems, the path to good health and wellbeing is being reframed as resulting not just from access to healthcare and the mitigation of physical maladies and diseases, but as outcomes shaped by five key social determinants of health: access to and quality of health and healthcare, education and information access, social and community contexts, economic stability, and the neighborhood or built environment.

In philanthropy, the breadth of these determinants results in myriad funding strategies and approaches. Philanthropy is sometimes critiqued for being out of touch with the issues impacting most Americans. But a [2022 letter](#) to President Biden from Grantmakers in Health, Funders Network, Native Americans in Philanthropy and more than 40 other groups reflects a clear-eyed understanding of the mechanisms that affect health, particularly hunger. The letter demonstrates the positive role philanthropy can play when it uses its experience and connection to local communities to push public institutions to do better.

For example, on the issue of poverty, which the letter identifies as “the most critical social determinant of health,” the authors address the roles that structural racism and rural disinvestment play in creating and perpetuating poverty. COVID-19 made matters worse for poor communities, Cara James, president and CEO of Grantmakers in Health [told IP](#). “We’ve seen increasing utilization of food pantries and other food programs because of job loss, or just an inability to access food programs that may have been available through the schools, as well as the increasing cost of food, and those issues have obviously disproportionately affected our communities of color. And as we’ve moved into the endemic side of COVID from the pandemic, and with the increase in inflation, those challenges have lingered.”

Inside Philanthropy August 2020 Survey

“Funders talk a lot about systems change, but fail to see how direct service providers are addressing the inequities in the systems and therefore are shifting funding away. There is a lot of ambiguity as well around what systems change actually means.”

—Fundraiser, Falls Church, Virginia

Health funders have long understood the impact of social, environmental and economic factors on health, according to James. The de Beaumont Foundation’s Brittany Giles-Cantrell concurs with this view. “We believe that health is really a function of upstream systemic practices that shape the communities where we all live,” Giles-Cantrell said. “We have a mission to change the national conversation, and that needs to start by changing how we talk about public health.”

Racism is an unabated public health menace.

In 2021, Rochelle P. Walensky, director of the CDC, formally centered racism as a threat to public health in that agency’s work, launching research, investment, and dedicating governmental resources for confronting racism’s role in creating disparate public health outcomes. She pointed to structural barriers that many people face based on race and called for addressing inequities in social determinants of health. “Over generations, these structural inequities have resulted in stark racial and ethnic health disparities that are severe, far-reaching and unacceptable,” Walensky stated in a [press release](#).

For many funders, the CDC’s announcement reflected what they already knew. “Systemic and structural racism have cemented inequities into America’s foundation, and the implications were exacerbated by COVID,” [wrote Kresge’s Monica Valdes Lupi](#) in a reflection shared on the foundation’s website. Kresge’s work during the pandemic provided illuminating lessons. “It’s important to use explicit language that racism is a public health crisis or emergency; focus on meaningful partnerships and collaboration; put accountability measures in place; and dedicate the funding and infrastructure required to facilitate implementation and accountability,” Lupi said.

The climate emergency is having a major impact on public health. Scary stats on the effects of environmental problems and the climate crisis on human health can be hard to stomach. In a 2019 [U.N. report](#), an international team of scientists called for “urgent” environmental action to slow the rates of related illness and death. One disturbing finding was that freshwater pollution tied to antimicrobial resistance will be the top cause of death by 2050. In the U.S., the National Oceanic and Atmospheric Administration warns that the most vulnerable groups – children, the elderly, people with preexisting health conditions, outdoor workers, people of color and people with low income – will be the most susceptible to the compound impacts of climate change.

But Kathy Sessions, executive director of the Health and Environmental Funders Network (HEFN), [told Inside Philanthropy](#), “There isn't any environmental health or justice problem – even climate change – that is too big or too tough to tackle.” She says the key is “building the power to make getting better health and equity outcomes our priority.” She and HEFN think a big part of environmental health and justice work is centering the voices of the people most impacted by environmental hazards, who are often people of color and/or those with less money.

Environmental health and justice funding generally focuses on understanding how people are exposed to environmental hazards and then coming up with ways to address these threats in an equitable way. According to HEFN, philanthropy has invested hundreds of millions of dollars in environmental health in the past decade. But such funding, especially for grassroots environmental justice groups, makes up just a sliver of all environmental giving, much of which goes to big,

established nonprofits that, like green funders themselves, are still mostly staffed by white people.

Combating vaccine hesitancy and misinformation. When the COVID-19 vaccine rollout was just beginning, many funders in the philanthropic community anticipated the problem of vaccine hesitancy in the United States. They foresaw that vaccination equity was a multilayered, complex problem that wasn't just about access to clinics, transportation, (mis)information and broadband, but also lack of trust in the government and the healthcare system. As [IP reported](#), many regional partnerships came together to raise money around vaccine outreach with the intent to fund hyperlocal organizations that wouldn't necessarily have the infrastructure to apply for the big public dollars that everyone assumed were forthcoming from the Biden administration.

Network Spotlight



HEFN was established in 1999 when a group of funders shared concerns over the environmental and health impacts of pollution. HEFN member numbers have since grown to over 250 and the organization now works in partnership with Virginia Organizing. HEFN's current strategies include supporting collaboration among funders to help accelerate problem solving for significant environmental health and justice issues; building leadership and increasing grants to grassroots groups led by BIPOC, women, young people and low-income people; and doubling philanthropic commitments and leveraging investments from outside of the philanthropic community.

“We knew there would be a lot of money out there from the government and from health systems,” said Elena Marks, president and CEO of Episcopal Health Fund in Houston. “But we were concerned about the groups who would not be reached or persuaded by the government or the healthcare delivery system, and how to get to this population. So we set up a fund,” she said. That fund became “Your Shot Texas,” which worked to increase confidence in the vaccine and uptake. The Chicagoland Vaccine Partnership and Together Toward Health are two other initiatives that took a hyperlocal focus to increase vaccine trust and uptake.

Similarly, as a public health funder for more than two decades, the [de Beaumont Foundation](#) has held a particular interest in helping doctors and public health professionals communicate more effectively with community members. When the COVID pandemic emerged as a proxy battleground between the right and the left, the foundation wanted to ensure that facts – and democracy – survive.

Long before COVID entered the picture, de Beaumont spearheaded the development of [research-based communication tools](#) to help public health professionals communicate across sectors. In late 2020 and early 2021, the foundation and its President and CEO Brian Castrucci decided to confront issues like COVID misinformation, vaccine myths, and the role of social media, particularly as they exacerbated the nation’s political divisions.

For example, the de Beaumont Foundation sought to address vaccine hesitancy among Americans who identified as Republicans. As part of its “Changing the COVID Conversation” initiative, de Beaumont worked with well-known Republican pollster Frank

Luntz to conduct national polls, hold focus groups, and develop effective messaging that addressed target concerns and questions common among Republicans and others who questioned the vaccines’ safety.

This work, says de Beaumont, has had a major impact on COVID communications around the country. The foundation has worked with the White House, the CDC and other philanthropic foundations, among others. Its messaging has influenced outreach throughout the country.

“Our materials helped Democrats and political leaders address the concerns in their constituencies,” Castrucci said. Several well-known Republican political figures, including former New Jersey Gov. Chris Christie, also worked with de Beaumont. The de Beaumont Foundation and Oxford University Press published “[Talking Health: A New Way to Communicate about Public Health](#),” featuring leading communicators in the field and a take on where public health communications goes next in the wake of the pandemic.

Preventing gun violence is an increasing focus. According to the [American Public Health Association](#), “Gun violence is a leading cause of premature death in the U.S. Guns kill more than 38,000 people and cause nearly 85,000 injuries each year. As a longtime advocate for violence prevention policies, APHA recognizes a comprehensive public health approach to addressing this growing crisis is necessary.”

As IP’s Connie Matthiessen [reported](#), there appears to be an increasing number of [major funders](#) and [funding collaboratives](#) taking on gun violence prevention. Several major health philanthropies, including the [Annie E. Casey Foundation](#) and the

[Robert Wood Johnson Foundation](#), for example, are explicitly addressing gun violence as a public health crisis that is not only extinguishing lives, but devastating families and communities.

The [California Wellness Foundation](#), the largest funder of gun violence prevention in California and among the largest in the country, has supported such work since 1992, and was an inaugural funder of the [Hope and Heal Fund](#), which IP has covered. In recent years, Cal Wellness has zeroed in more narrowly on community-based gun violence prevention efforts. “Communities are interested in addressing the root causes of gun violence,” said Cal Wellness Chief of Staff Alex Johnson. “They are also interested in looking at what happens after the incident, and thinking about how to reduce the trauma that attaches to gun violence. So we’ve directed a lot of our grantmaking in that way over the last couple of years.”


Funder Strategies & Trends

Ideally, philanthropy’s investments in public health should avoid eroding the expectation that federal, state and local governments play the primary role in protecting community health. Yet, the reality of the situation – the distinct inequities in patient outcomes and the care gaps revealed by the pandemic – yields three primary paths of philanthropic influence in public health: fill the funding gaps and address human needs, shape government policies that prioritize public health, or a combination of both.

Public-private partnerships. The de Beaumont Foundation advances policies and builds partnerships to center government investment in and strengthen the practice of public health. “We support the public health workforce as well as system changes that are required to strengthen that

workforce,” said Brittany Giles-Cantrell, program lead for de Beaumont Foundation. “We focus on developing local and national solutions through partnerships among public health, community-based organizations, businesses, and other sectors.” They work alongside public health stakeholders and pull strategic guidance from extensive research about the identified interests and needs of the public health workforce.

Program Spotlight



The California Wellness Foundation's Violence Prevention and Healing Justice program focuses on decreasing community trauma and increasing safety and resilience. The program supports groups working to prevent and reduce community violence, gun violence and trauma, and those promoting healing justice. Centering its grant support on communities of color, the program also supports nonprofits combating police brutality and structural racism. Recent grantees include Advance Peace, Community Justice Reform Coalition and Health Alliance for Violence Intervention.

Model programs to scale. As a national funder, one of the strategic tactics at the Robert Wood Johnson Foundation has evolved from identifying best practices in public health issues and populating those solutions elsewhere in the U.S. to supporting more localized solutions based on best-practice examples. “It is difficult for us to go community by community and provide funding for all of these amazing local initiatives,” said Schubert of RWJF. “The role we try to play instead is to lift up the best and better practices happening in real time and fund and assist communities who want to emulate them.” Schubert said she wished there was a “catchy

phrase” for this kind of cross-pollinating work, but she sees it as technical assistance where the foundation “democratizes access for local leaders who crave learning from others.”

Funder collaborations. Given the sheer size of the public health challenges, partnerships also emerge frequently among funders. For example, the elderly living in nursing homes were early and tragic victims of the pandemic, sparking the emergence of Program of All-Inclusive Care for the Elderly, which keeps older people in their homes with nursing-level care. As Inside Philanthropy [reported](#), the Harry and Jeanette Weinberg Foundation, the John A. Hartford Foundation and West Health combined forces and funding to ramp up PACE, giving a combined \$3.5 million over the past handful of years, as well as individual gifts.

The [Chicagoland Vaccination Partnership](#) grew out of a collaboration that included the Chicago Community Trust, the Joyce Foundation and the United Way, which had been working together on community access to COVID-19 treatment and testing in collaboration with the City of Chicago. The [Psychedelic Science Funders Collaborative](#) (PSFC) formed to advance research into treatments

Collaboration Spotlight

PSFC Psychedelic Science Funders Collaborative

Established in 2017, PSFC supports scientists and organizations exploring the potential of psychedelic medicine as treatments for conditions such as PTSD, depression and addiction. The Steve and Alexandra Cohen and Bob and Renee Parsons foundations are supporters of the collaborative. In 2020, PSFC, in partnership with the Multidisciplinary Association for Psychedelic Studies, completed an \$30 million fundraising campaign.

for post-traumatic stress disorder. The collaborative [raises money](#) for scientists and organizations working on clinical trials for psychedelics and works to ensure that people who can benefit from psychedelics have access to the drugs. Leading health funders like [Gates](#), [Bloomberg Philanthropies](#) and [Rotary International](#) deployed billions for decades to eradicate polio – and helped save millions of lives – a philanthropic [success story](#) driven by equal parts funding and resolve.

Advancing Public Health Policy. Some of today’s savviest mega-givers strategically blend philanthropic and political giving. Many are paying special attention to the role the government needs to play in public health. Laura and John Arnold of Arnold Ventures, an LLC, not a private foundation, have long embraced a kind of [dual-track strategy](#) to reform drug pricing, for example, their foundation has given millions for academic research and policy development while the couple has also invested in 501(c)(4) advocacy work. Separately, during the 2018 midterm elections, the Arnolds moved about [\\$10 million](#) through a super PAC called Patients for Affordable Drugs Action. As discussed in the next section, “Perspectives on Equity,” the [California Endowment](#) is making coalition-building and empowering citizens a cornerstone of its work to impact government investments in that state.

Perspectives on Equity

While racism as a public health crisis and the turn toward social determinants of health as a pathway to building health equity are discussed elsewhere in this brief, there are plenty more critical perspectives on crucial equity work.

Moving the needle of health equity in states. Excellent examples of the strategies and promise in addressing racial justice and health equity can be

found in California, a state often at the forefront of public health. Three organizations highlight the challenges and potential for building health equity: The California Endowment, California Health Care Foundation, and the Latino Community Foundation.

[The California Endowment](#), a conversion foundation established through a health insurance company merger, has been out front on race and health equity issues for over a decade. TCE's Building Healthy Communities program prompted the funder to address social determinants of health and the inequities at the conclusion of the program. As [IP reported](#), one of BHC's most impactful messages was: "Your ZIP code should not predict how long you'll live, but it does." In addition to broadening the definition of health and raising awareness of health inequities in the state, the initiative also built public will for expanding healthcare coverage to all residents, created a richer approach to power-building, and grew youth organizing in the state, according to the report.

"It is fundamentally clear that social exclusion, marginalization, inequality, civic disengagement and hopelessness have a lethal effect on community health," Robert K. Ross, president and CEO of TCE shared at the [conclusion](#) of that program. "By the same token, inclusion, engagement, power-building and civic voice lay the groundwork for the reduction of health disparities and closure of the gaps in health status," he said.

At the close of the program, the endowment launched initiatives to shape power building in communities, among other strategies, as a means for driving policy change. Hanh Cao Yu, chief learning officer, [summarized](#) their approach as "Agency + Belonging = Change." Yu writes, "Our

breakthrough was the realization that building community power is a key end in itself, in addition to being a means of gaining leverage in changing policy." Their "people power" approach shows that foundations are recognizing the government needs to play its visionary and funding role in public health, and the populations most affected by their underinvestment and oversights have the power to change government policy.

Similarly, TCE's peers at the California Health Care Foundation launched a new focus area in 2021, "[Advancing Black Health Equity](#)," broadening that funder's key areas beyond behavioral health. Disparities in Black health outcomes during the pandemic also galvanized the program, which was shaped by three key ideas: listening to Black Californians, building transparency within the health system (to drive accountability), and creating a more diverse healthcare workforce.

On the CHCF website, the initiative's leader, Katherine Haynes, wrote that the organization is in it for the long haul. "Philanthropy has a big role to play in supporting the information base for this movement and building healthcare system capacity to develop and enforce equity standards. This is just the beginning of CHCF's long-term investment in encouraging California's health care system to embrace the fundamental principles of fairness, accountability, and cultural humility."

According to several reports, Latinos bore a disproportionate share of the COVID-19 burden in California. Despite comprising about [40% of the state's population](#), Latinos accounted for [56% of positive cases](#). One of the largest contributing factors was the fact that more than half of all essential workers in the state are Latinos. In other words, Latinos are overrepresented in "essential"

job sectors. In response, the Latino Community Foundation launched its [Love Not Fear Fund](#) in 2020, which backed Latino-led grassroots organizations serving front-line communities and essential workers. As part of that work, LCF engaged in advocacy with Gov. Gavin Newsom’s office to secure necessary resources, followed by a campaign to get all Californian Latinos vaccinated. “We like to say 2021 started with healing first and then focused on rebuilding. And so we began to start resurfacing our plans for the Latino Power Fund,” LCF CEO Jacqueline Martinez Garcel [told IP](#). Today, its grantmaking continues to prioritize Latino-led, grassroots and civic engagement causes. The foundation's grantmaking is by invitation only, but the website offers an email address for inquiries.

One area many funders are looking at more closely is Black women’s maternal health and projects revolving around “birth justice.” According to IP’s Connie Matthiessen, The [Centers for Disease Control](#) (CDC) identified sharp racial disparities in maternal outcomes, pointing out that Black, American Indian and Alaska Native women were two to three times more likely to die from pregnancy-related causes as white women. These women’s infants are also at higher risk: Another [report](#) cited by the CDC found that Black women were twice as likely as white or Hispanic women to have stillborn babies. And the [trends](#) are heading in the wrong direction, as pregnancy-related deaths more than doubled between 1987 and 2017.

The [Anthem Foundation](#) recently launched an [initiative](#) that aims to reverse these trends – or at least chip away at them. In an investment that has the potential to impact as many as 100,000 women, the foundation will provide more than \$14.5 million in grants to 17 organizations working to boost the health of mothers and babies. In 2021, the

[Ballmer Group](#) invested \$525,000 in Los Angeles-based [Black Women for Wellness](#); the grant supports the expansion of doula and home visiting services for Black families. And recently, Blue Cross of California unveiled an [initiative](#) supporting maternal and infant health in underserved communities. Many of these projects mix public health and direct service provision and are often uncaptured in data on public health funding.

Nonprofit Spotlight



Black Women for Wellness has a number of goals and objectives involving health, building the power of Black women and girls, and publishing information from Black women's perspectives. The organization operates five programs: Civic Engagement, Environmental Justice, Sisters@Eight, Sisters in Control: Reproductive Justice and Sisters in Motion. Black Women for Wellness has offices in Los Angeles and Stockton, California.

Philanthropy still so white. Frustratingly, racial bias and the lack of diversity in the philanthropy field persist. “There has been a noticeable shift in philanthropic sector conversations – more focus on racial equity at conferences, gatherings, meetings... and some shifts in practice,” Michele Kumi Baer, philanthropy project director at [Race Forward](#), [told Inside Philanthropy](#). “But it is hard to tell from this vantage point how deeply people of different positions of power within philanthropic organizations are really being introspective about race and power in their daily practice.”

The author of “[Decolonizing Wealth](#),” Edgar Villanueva, is less impressed by the efforts of most

foundations. “We indulge those who say that diversity is important by conducting several decades of analyses, hiring consulting groups with absurd price tags. We publish reports. We create a task force and debate mightily over what to call it. We do not actually change, not more than superficially,” Villanueva [told](#) Inside Philanthropy.

Raymond Foxworth of First Nations Development Institute shared similar concerns. “Most individuals who work in philanthropy have little knowledge around Native communities and Native people in general,” he said. This means that the burden to educate philanthropy about Native communities often falls on prospective grantseekers and Native communities. “Native people end up unfairly acting as educators for those funders,” Foxworth said. “It’s one of the complexities in trying to raise awareness within philanthropy.”

Disparity persists among scientists, too. Diverse scientists who seek funding to research medicine and treatments face an abundance of obstacles. According to a [Nature Medicine article](#), diversity, equity, and inclusion goals in medicine can only be

achieved if private (and public) funders prioritize health disparities research, “specifically, the funding allocated to health disparities and diversity, equity and inclusion and also the funding success of researchers from under-represented minority groups.” The authors write that the lack of diverse scientists not only boxes out diverse scientists from pursuing their work, it also leads to a “diversity tax,” whereby the burden to bring diverse perspectives falls to too few scientists, creating unfair time and resources burdens. Funders are asked to address this by including “specific review criteria that are focused on appropriate planning for the inclusion of health-disparity populations as well as on the diversity of the research team, including the lead investigators.”

Inside Philanthropy has also explored racial inequities in clinical trials, and how [philanthropy](#) is a part of the picture. [Matthiessen reports](#) that [Bristol Myers Squibb Foundation](#), in partnership with [National Medical Fellowships](#), just [announced](#) a new push to improve diversity in clinical trials.

There are also major public health issues revolving around equity for women and for LGBTQ populations. The 2022 monkeypox outbreak and the federal government’s slow response despite the lessons of COVID, is a case in point. Philanthropic support for public health for queer populations mostly focuses on STIs and mental health, and seems to assume that LGBTQ populations are otherwise essentially like all other populations. Public health approaches that specifically consider the lives of women and LGBTQ populations are a part of the ongoing conversation about intersectionality and health, but haven’t received the same level of philanthropic attention over the past decade as the long-neglected issues resulting from our nation’s history of structural racism.

Inside Philanthropy

August 2020 Survey

“[philanthropy is neglecting] issues that address systems change, rather than just individual programs that may seem more attractive to the average person, but don’t correlate to longlasting change. Looking at the root causes of things, and how they all relate to each other. You can’t have a healthy child without safe housing, you can’t have good jobs without effective transportation, you can’t have affordable rental housing in overpriced urban centers, etc.”

—Fundraising strategy & prospect researcher, Columbia, Maryland

A Closer Look at Funder Types

Private Foundations

Large, private foundations dominate philanthropy for public health among U.S.-based funders. In addition to many of the largest foundations mentioned in this brief's Who's Giving section, many more private foundations stand out for their giving and approaches to addressing public health.

[Susan Thompson Buffett Foundation](#) flies so deeply under the radar that it's hard to find statements in which it describes its own work. But STBF is by far the largest private funder of reproductive healthcare in the United States, donating more than \$1.5 billion since 2003. It has made an outsized impact through its support of services, advocacy, policy and research on access to contraception and abortion, among other areas of reproductive healthcare. While it does not publicize widely, and specifically does not talk publicly about its funding of abortion, STBF supports a diverse range of grantees and strategies, including major abortion rights advocates and reproductive healthcare providers with strong institutional capacity, policy-focused research projects, front-line grassroots abortion advocates, and more.

The [Duke Endowment](#), based in Charlotte, North Carolina, was established in 1924 by James Buchanan Duke, a tobacco and electric power magnate of the early 20th century. Today, the foundation works mainly in public health and higher education. Duke supports public health through its [healthcare](#) and [child and family wellbeing](#) initiatives. The healthcare initiative aims to improve the quality and safety of care and to

increase access to healthcare and preventative programs. The child and family wellbeing program names prevention and early intervention for at-risk children as a main area of focus. Both programs prioritize the southeastern U.S., with more than half of the endowment's health grantees operating in North Carolina, but national organizations and programs in other areas of the U.S. have recently gained this funder's attention.

The [Kresge Foundation's](#) health grants are heavily connected to alleviating urban poverty and reducing healthcare disparities in underserved communities. The foundation supports organizations that improve access to high-quality healthcare for low-income individuals, and organizations advocating health-policy-related changes. Kresge does not provide details about the specific types of health programs it funds, but indicates that programs should create "pathways out of poverty," helping disadvantaged, marginalized and vulnerable communities attain "circumstances where they have the opportunity to achieve wellbeing and lead self-sufficient, self-determined, productive lives."

Kresge also forms community health partnerships through its [Health Program](#) grantmaking. This grantmaking focuses on "improving the environmental and social conditions affecting communities" and improving access to high-quality healthcare. Kresge's program features two initiatives: [Accelerating Community-Centered Approaches to Health](#) and [Developing Healthy Places](#). This program awards a decent number of grants to projects to inform broader health policies and practices. Kresge's health grants typically range from \$40,000 to \$1.25 million. Kresge's grants only support highly engaged organizations with a proven plan of attack, so IP advises grantseekers to expect

serious competition when applying for Kresge funding. It supports organizations that make a visible impact, both nationally and within lower-income communities in Detroit.

Notably, the [Kate B. Reynold Charitable Trust](#), which was built on the R.J. Reynolds Tobacco Company fortune, announced it would completely [divest from tobacco](#) by the end of 2022. In conversations with local media, Dr. Laura Gerald, the trust's president, had to navigate tricky terrain. She acknowledged tobacco's contributions to the region's growth, but she also pointed out tobacco's many health risks and the conflict with the trust's mission to improve the lives of low-income people throughout North Carolina and to improve healthcare in the state. "We had to right this wrong and correct this hypocrisy, really," she said in an interview with radio station [WFDD](#).

Another key funding source for grantseekers are local health conversion foundations, which are created when a nonprofit hospital, HMO or other organization is purchased by a for-profit entity. The new foundation operates as an independent private foundation, usually with a commitment to public health, broadly defined. There are over 300 of these around the country. IP has reported on several, including the [Episcopal Healthcare Foundation](#),

the [Missouri Foundation for Health](#) and several [new health legacy foundations](#) in rural areas. Many health conversion foundations employ a broad definition of healthcare, which includes [addressing social determinants of health](#). The [Health Foundation of Central Massachusetts](#) is one of the more well-established health foundations in the country and has granted over \$50 million to local organizations since 1999. One of the largest health-conversion funds, the California Endowment, is highlighted in this brief's Perspectives on Equity section, and another, the California Wellness Foundation, is featured in the Who's Giving section.

Corporate Funders

According to a report by Giving USA, corporate funders showed up as some of the largest private backers of pandemic relief, driven by tax incentives and a strong GDP. They boosted their pandemic giving using several tactics, including in-kind giving, matching employee giving, and supporting employee volunteerism. In total, their giving comprised just over 4% (\$21 billion) of all philanthropic giving in 2021, a 24% increase for corporations year-over-year. Almost one-quarter of corporate giving was earmarked for health and social services (with roughly another quarter going to disaster relief).

Program Spotlight



The Growing Justice Fund is taking a wholistic approach toward achieving equitable and sustainable food systems. The fund aims to raise \$50 million and supports a wide range of justice-centered efforts related to the food value chain including health equity, racial equity, food justice, access to healthy and affordable food, economic justice, and environmental sustainability. Founding funders include the Kresge, Rockefeller, Panta Rhea and Clif Family foundations, as well as, the Native American Agriculture Fund.

A [special report](#) by Candid and the Center for Disaster Philanthropy that examined \$1 billion of pandemic-related funding from 2020 through 2021 suggested a different view of corporate giving. Both the number of corporate donors and the dollar amount dedicated to COVID-19 relief fell by 42% and 76%, respectively, over the two-year period.

This funding drop, while specific to the shifting pandemic landscape, shows grantseekers the volatility of pursuing corporate philanthropy. Corporate giving ebbs and flows not only in response to national or regional crises, but also to the economy and their bottom lines. Grantseekers keen on pursuing corporate funding will also need to recognize that corporate giving is frequently only accessible through company leadership connections, existing relationships, or via employees who care about their cause.

While banks were [early entrants](#) into COVID-19 giving, many insurance companies' foundations also played to their strengths in responding to the pandemic. A leader in funding domestic violence interventions, the [Allstate Foundation](#), focused its funding there, at a time when sheltering in place sparked [higher abuse rates](#). And the USAA Foundation, which works to build military family resilience, aimed the majority of its funding at supporting military communities.

MassMutual supported its hometown areas by seeding the Community Foundation of Western Massachusetts [COVID-19 Response Fund](#) with a \$1 million lead gift, and the Boston Resiliency Fund. It also funded a three-year life insurance program for front-line healthcare workers. [MetLife Foundation](#) committed \$25 million to support the short- and long-term impacts of COVID-19 in the communities where it operates. Continued support

will likely come through its "resilient communities" initiative. While MetLife operates by invitation only, it is open to inquiries through its Foundation Relationship Managers. [Cigna Foundation](#), the philanthropic arm of the health insurance company, accepts applications from grantseekers targeting health equity issues. They focus on supporting organizations that address the social determinants of health and granted more than \$12 million to nonprofits in 2021. A five-year giving target of \$25 million targets a healthier future for children by reducing food insecurity and promoting mental health and emotional wellbeing. Most grants range from \$50,000 to \$100,000.

Corporate Funder Spotlight



The Newman's Own Foundation's overall mission is to "nourish and transform the lives of children who face adversity." Funding programs related to public health include Nutritious Food in Schools, which focuses making school meals healthier and available to all children regardless of their family's ability to pay; and Nutrition Security for Indigenous Youth which focuses on the health and well-being of Native children in Kyle, South Dakota and those living on the Zuni Pueblo in western New Mexico.

[Siemens Foundation](#) invested more than \$7 million to ensure equity in the nation's COVID-19 response, including a 2021 \$1.5 million donation to 12 community health centers across the U.S. It partnered with the National Alliance for Hispanic Health; Choose Healthy Life, a faith-based wellness

initiative supporting Black Americans; and continued COVID-19 support. Unfortunately, it is otherwise inaccessible for grantseekers.

[Elevance Health Foundation](#) announced \$13 million in grants to community healthcare centers in 2021, demonstrating an acceleration of its COVID-era strategic rethink to focus on improving health and access to care for communities that have long experienced more than their fair share of health problems. As IP reported, the strategic rethink resulted in the foundation's three-year, \$90 million philanthropic giving strategy. Elevance Health Foundation issues annual RFPs for grantseekers in three areas: maternal and child health, food as medicine, and substance use disorders.

Gilead Sciences, with a long track record of supporting LGBTQ communities and HIV/AIDS issues, is one of the latest big pharma grantmakers promoting health justice and equity, as [reported](#) in *Inside Philanthropy*. Gilead Sciences relaunched its philanthropic arm with a \$200 million endowment backing three key programs: the Creating Possible

Fund, funding local community organizations, and a bolstered donation matching program. The Creating Possible Fund announced its first 13 grantees, all which are aiming to create a wider pipeline of Black health leaders. It also accepts funding requests from patient advocates, nonprofits and healthcare professionals in many therapeutic areas via an online portal.

Many corporations outside of healthcare prioritize public health initiatives or are open to funding requests, too. [Newman's Own Foundation](#), which gives 100% of the profits from its signature food products to charity (\$570 million since 1982), focuses on children, especially improving school nutrition and providing "nutrition security" for Indigenous youth. All funding is by invitation only. [Duke Energy Foundation](#) accepts applications for small-scale grants (most from \$5,000 to \$25,000) from nonprofits in areas in which it operates: North Carolina, South Carolina, Florida, Ohio, Kentucky and Louisiana. [Clif Family Foundation](#), of nutrition bar fame, accepts applications three times a year for small operating grants (ranging from \$1,000 to \$10,000) for organizations focused on building health equity and strengthening the food system.

Grantseekers should note that among top corporate funders in public health, employee-matching gifts are a common strategy for giving. [Verizon Foundation](#) donates through matching gifts and places where employees volunteer. [Allstate Foundation](#) does not accept applications either, but supports work that disrupts cycles of domestic violence and directs small Helping Hands grants (\$500-\$1,000) to employees who work with community groups.

Program Spotlight



The Gilead Foundation's Creating Possible Fund is allocating up to \$30 million over the next three years organizations "advancing health prosperity through education equity." Focusing on the mental and physical health and wellness of middle school and high school aged students in the U.S., the foundation expects to fund three to five grantees yearly, with each grantee receiving grants of \$ 1 million to \$3 million per year for up to three years.

Community Foundations

When hardship strikes communities, local foundations are often among the first to help. Not surprisingly, community foundations consistently rank among the top 20 grantmakers in public health according to the Candid database, both in dollar amounts and number of grants. Regional and local community foundations make natural partners for public health grantseekers as the foundations have a strong interest in – and understanding of – local needs.

The pandemic highlighted this role, and community foundations were hit with a tsunami of funding requests as soon as the COVID-19 response funds were announced. At the [Oregon Community Foundation](#) (OCF), for example, the number of grant applications rose exponentially as the pandemic's impacts spread through society. "We've had more than 1,000 requests through our online portal in three weeks – that's normally what we get in a year," Max Williams, president and CEO of OCF [told IP](#) in the early months of the pandemic.

That so many community COVID-19 response funds were assembled so rapidly speaks to the response of communities and how this dislocating emergency raised awareness of the fragility of the systems they depend on. The National Center for Family Philanthropy and the Giving Compass published a searchable [COVID-19 Response and Recovery Fund](#) map that highlights hundreds of funds set up globally. The map does not flag those that have closed, but grantseekers can search by their location to learn what was established.

Many geographic areas have community foundations with which grantseekers should be in contact. For example, in New York City, the [New York Community Trust](#) is a prolific grantmaker,

supporting roughly 5,000 organizations with more than \$160 million in grants each year. Grants have been as large as \$500,000, but the average grant size for this funder is about \$10,000. The trust's Healthy Lives grants run sub-initiatives for biomedical research, health and behavioral health, older adults, and people with disabilities. In addition to funding direct services in these areas, the trust invests in training programs for professionals in target areas and advocacy programs for underserved and underrepresented groups.

The [Chicago Community Trust](#) is the go-to foundation for many nonprofits around Chicago because of its broad approach to grantmaking, which it uses to stay flexible. CCT has provided funding for education, workforce, economic development, housing, hunger, poverty, health, arts and culture, strengthening the nonprofit sector, and sustainable development. It also regularly considers proposals from public safety and justice organizations. CCT provides general operating support and responsive grants, sharing RFPs on its website as they are made available. Grants tend to range from \$5,000 to \$50,000.

Major Donors

The [Washington Post](#) tracked 2020 billionaire giving in light of COVID, estimating that the 50 wealthiest people mustered only about \$1 billion, or 0.1% of their fortunes, to alleviate suffering and respond to the pandemic's impact. Former NYC Mayor Michael Bloomberg donated [\\$75 million](#) through Bloomberg Philanthropies at the height of COVID-19, including to the World Health Organization and the Bloomberg School of Public Health at Johns Hopkins University. The Gates Foundation has long addressed issues of global health, spending half of its resources annually on the issue. It contributed \$300 million to fight

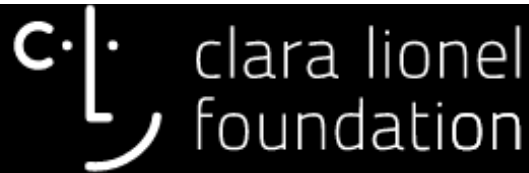
COVID worldwide and [redirected](#) organizational efforts, emphasizing global reach and backing U.S.-based nonprofits that deliver services globally. It also has taken on mental health and substance use causes, particularly the overdose epidemic, making it one of the largest private funders in mental health.

Philanthropist MacKenzie Scott continues her great giveaway, donating more than \$12 billion to nonprofits since 2020. Public health issues are at the forefront of her giving. She has demonstrated a keen understanding that community initiatives and funding play a critical role in addressing racial health inequities. As [in the past](#), Scott's March 2022 giving announcement touched on the idea of mutuality in nonprofit work, rejecting the notion that nonprofits must exist in a state of competition. "It's easy to think of different groups struggling within the same systems as not only separate but also opposing," Scott wrote. "Yet when we help one group, we often help them all." One public health commitment by Scott included a \$275 million gift to Planned Parenthood, [\\$8 million](#) to Health Leads to support collaborative community health efforts, and donations to Alliance for a Healthier Generation, Healthy Learners, Last Mile Health, National Collaborative for Health Equity, and the National Rural Health Association, among others.

While Bloomberg's foundation strategically addresses major issues of public health, and Scott's personal giving shows recognition of public health equity issues, the Opportunities and Challenges section of this brief highlights the tendency of wealthy donors to direct funding toward health issues of personal interest, especially named research centers focused on specific diseases, underscoring the point that philanthropy is not a strong substitute for government funding of public

health initiatives. Personal motivation, rather than national public health strategies, can be seen as drivers among many of the major donors highlighted here.

Funder Spotlight



The impacts of climate change affect public health in a number of ways and disproportionately impact BIPOC and low-income communities. Much of the Clara Lionel Foundation's giving focuses on the intersections of climate change, climate justice and health. Foundation partners include Integrated Health Outreach, Belize Family Life Association and Health Equity International. The Clara Lionel Foundation also awards grants for disaster preparedness and response efforts.

Jackie and Mike Bezos, parents of Amazon CEO Jeff Bezos, and early investors in the giant online retailer, stepped forward with a \$700-million-plus donation to the Fred Hutch Cancer Center. As IP noted about the mega gift, it came after the center showed it could steward an earlier \$10 million donation from the family. "This (large donation) was not a case of us sitting down and presenting a proposal, making an ask and getting an answer," Kelly O'Brien, Fred Hutch's vice president of philanthropy, told Inside Philanthropy. "It was an iterative process of looking at what was most important to the family and putting a lot of rigor behind how we would use the funding over the course of the decade."

The wooing of the couple and their donation is a lesson in large gift cultivation, which requires patience and consideration. Fred Hutch staff

continually provided the elder Bezos couple with annual reports that “showed not only financially what we were doing with those gifts of magnitude, but also how we were generating a return on investment,” O’Brien said. “We showed them how scientists who were supported with start-up grants went on to receive federal grants. We showed them how industry partnerships and clinical trials were getting started because of things they seeded.”

Renowned “junk bond king” [Michael Milken](#), who spent 22 months in jail for securities fraud, and whose record was later expunged during the Trump presidency, devoted his life after prison to advancing philanthropy with an eye toward medical issues with public health impacts. When Milken discovered he had prostate cancer in 1993, he was in the relatively unique position of being able to use his resources to do something significant about the disease. His Prostate Cancer Foundation quickly became the world’s largest private sponsor of prostate cancer research, raising more than \$200 million in its first decade. The foundation raises awareness, spurs innovative research, leverages additional resources, attracts new people to the field, and brings a number of new drugs to clinical trials. The result has been a 25% drop in the death rate, more than four times the decline in overall cancer rates in the same period. More recently, Milken has turned his attention toward melanoma

and epilepsy, launching the Melanoma Research Alliance, the Epilepsy Research Awards Program, and a medical think tank called FasterCures.

Google co-founder [Sergey Brin](#) launched Aligning Science Across Parkinson’s ([ASAP](#)) in 2020 with a first-round investment of \$161 million across 21 research teams at 60 institutions. Its formation followed what was already more than a decade of substantial Parkinson’s grantmaking from the tech industry titan. For Brin, the cause of Parkinson’s disease is highly personal. In 2008, he announced that he carried a gene that elevated his risk of developing Parkinson’s, which also affected his mother and another relative. Since then, Brin and then-wife Anne Wojcicki (the couple split in 2015), cofounder and CEO of 23andMe, became major contributors to the [Michael J. Fox Foundation](#), a public charity launched by Fox, an actor, who was diagnosed with Parkinson’s disease in 1991.

MJFF’s core funding programs are annual, open-ended awards that aim to support “novel and iterative ideas across the spectrum of Parkinson’s research.” These include the Target Advancement program, which supports “research characterizing promising, novel, PD-relevant targets or continuing target biology work on established PD targets” with an aim to accelerate the advancement of innovative therapies. The Therapeutic Pipeline program seeks projects “with potential for fundamentally altering disease course and/or significantly improving treatment of symptoms above and beyond current standards of care.” The foundation accepts applications for the majority of its programs. Grantseekers should check for open funding opportunities.

Pop-star [Rihanna](#)’s giving spans many pressing public health issues. Her Clara Lionel Foundation

Inside Philanthropy

August 2020 Survey

“[There is] a growing awareness of health disparities, as exemplified by Covid; Growing awareness is of the role of structural racism and systemic inequities in contributing toward health and other disparities; Sudden awareness of mental health issues post during and in the wake of Covid.”

—Foundation professional, New York, New York

(CLF) donated \$5 million to multiple global organizations fighting the pandemic, including Partners in Health, Direct Relief, Feeding America, the International Rescue Committee, the World Health Organization and her native country of Barbados. As noted in Inside Philanthropy, CLF is dedicated to health and emergency response initiatives, including partnering with the International Planned Parenthood Federation and Engineers Without Borders to make reproductive health clinics in the region more disaster-resilient. Rihanna also teamed up with Jack Dorsey to provide \$4.2 million to Los Angeles victims of domestic violence impacted by the COVID-19 lockdowns.

Intermediaries and Associations

The public health field has a strong philanthropic infrastructure that has been growing for decades. It has particularly sophisticated and influential philanthropy-serving organizations (affinity groups) and quite few funder intermediaries, some of which have been discussed in previous sections.

The 55-year-old [Public Health Institute](#), with an annual operating budget of \$250 million, prioritizes building health equity through a robust roster of worldwide projects all dedicated to improving community wellbeing. It develops “research, leadership and partnerships to build strong public health policy, programs, systems and practices.” RFPs are also available for specific project needs via the [website](#). The Public Health Institute frequently serves as a fiscal partner, especially to allow the rapid, effective scaling of public health responses.

The [CDC Foundation](#) was established by Congress to accelerate collaboration among the Centers for Disease Control, philanthropists, and private organizations to advance public health in the U.S. and globally. It focuses on occupational health and

safety, monitoring e-cigarette use among youth, climate health, healthy people and homes in the Navajo Nation, chronic disease, birth defects and injury and violence prevention. Each project features CDC experts and “at least one outside funder.” RFPs for specific projects requiring nonprofit support or input are available online. These function as subgrants to larger projects.

[Fund for a Safer Future](#) is a funder network targeting common-sense gun reform. Since FSF launched in 2011, it has grown from five to over 30 funders – including the Annie E. Casey, Joyce and Heising-Simons foundations, and the EveryTown for Gun Safety Support Fund. That growth is itself a sign of progress, but it’s also coincided with some of the worst incidents of gun violence in U.S. history, which appear to be never-ending. To combat frustrating inaction on the federal level, the Fund for a Safer Future has supported organizations that work on other paths. Since it was founded a little over a decade ago, FSF’s pooled grantmaking has grown to more than \$3 million annually, and its members have made more than \$135 million in grants through their respective foundations. FSF has supported, for example, an increase in the number of extreme risk protection orders, which temporarily remove firearms from those at risk of harm to themselves or others (also known as “red flag” laws). Since 2014, at least 19 states have adopted or strengthened these measures.

“Through a number of grantees, we have helped create an ecosystem where these laws have been tested, proven and are now being expanded,” David Brotherton, the vice chair of FSF [told IP](#) “We by no means claim total credit: We are not the only funders and boosters of this strategy. But I do think our collective support has given them an accelerated opportunity to be taken up in counties

and states and cities all over the country. And the spread is significant.”

The social justice organization [Common Counsel Foundation](#) “advises, provides fiscal sponsorships and builds operational capacity for movement organizations, and is home to multi-funder collaborative initiatives.” It works nationally and across issues with a strategy of supporting long-term change for “low-income people, women, youth, people of color and others working for justice, equity and a healthy, sustainable environment.” It works with funders and donors to set grantmaking priorities, primarily grassroots organizations and leadership.

Network Spotlight

Fund for a Safer Future

Fund for a Safer Future (FSF) is a national network of funders pooling resources supporting common-sense gun safety reform. The organization awards grants to nonprofits working in a wide range of fields toward the common goal of reducing gun violence. Recent grantees include the Center for American Progress, Ceasefire Pennsylvania Education Fund and Alliance for Gun Responsibility.

Given the scale of public health needs and the size of the COVID-19 crisis, cooperation among funders, agencies and nonprofits is critical to making progress. As described in the introduction of this brief, the 40-year-old [Grantmakers in Health](#) galvanized philanthropic organizations to advance public health, including drafting an open letter to the Biden administration on the need to address poverty and its role in health inequities. In announcing the Grantmakers in Health strategic vision through 2025, Cara V. James, president and CEO, [wrote](#) that equity will be at that organization’s

forefront with a focus on better health initiatives that reach everyone, and efforts to advance “trust-based” philanthropy. Grantmakers in Health is not a grantmaking organization, but rather an organization of grantmakers.

Health and Environmental Funders Network (HEFN) aims to mobilize philanthropy around environmental health and justice. Like Grantmakers in Health, HEFN is not a grantmaking organization, but rather an organization of grantmakers and a source for news on its members’ funding activities. Members have access to training, research, collaborative opportunities and a grants database HEFN runs with the [Environmental Grantmakers Association](#) (EGA). HEFN has more than 60 members. Some of the larger players in environmental health within its ranks include the [Kresge Foundation](#), W.K. Kellogg Foundation, Heinz Endowments, JPB Foundation, [California Endowment](#), Wallace Foundation, John Merck Fund and the 11th Hour Project at the Schmidt Family Foundation. As we see across the field, these kinds of funders work under many umbrellas, including public health and education, human rights and equity, tech and chemistry safety, economic stability, climate change preparedness and resilience, and air and water quality policy.

The [American Public Health Association](#) celebrates 150 years of advocacy in 2022. As the professional organization of the field, it voices support for public health funding, policy and prioritization in Washington and elsewhere. While not a grantmaker, it helps direct public health conversations and provides tools, such as the “[Speak for Health](#)” initiative, that allow advocates to sharpen their skill set and advance public health issues in the U.S.

An Analysis of Opportunities & Challenges

Public health is generally considered to be the domain of government, presenting challenges much too vast for private philanthropy to address. Still, the government's inadequacies and politically induced limitations produce gaps and opportunities that private philanthropy has always taken leadership to address. Whether it is supporting model programs in the hopes that governments see the value and scale them, or working to influence public perceptions and build toward larger systemic change that affects a broad array of health outcomes, philanthropy can and should step up. But the very nature of philanthropy, guided by the interests and perspectives of those who have benefited the most from the current system, sometimes means that donors have on blinders when it comes to priority setting.

The private war on disease. In 2014, a [New York Times](#) article warned that billionaires are waging a “private war on disease” by privatizing science and medicine and pouring large amounts of money into the health issues that concern them most, even those not necessarily where the greatest amount of good or most lives saved might be achieved.

“For better or worse, the practice of science in the 21st century is becoming shaped less by national priorities or by peer-review groups and more by the particular preferences of individuals with huge amounts of money to give,” Steven A. Edwards told the *Times*. Moreover, a significant portion of the money tends to go to diseases that “disproportionately affect white people,” such as cystic fibrosis, further illustrating that BIPOC communities are too often overlooked by philanthropy with serious consequences.

While the article cites impressive, broader contributions—\$700 million to MIT from Eli Broad to research the genetic basis of disease, \$30 million from Ronald O. Perelman to advance research in women's cancers—it also raises additional concerns that outsized giving is papering over the government's underfunding of science and research.

Large-scale government investment and national-level initiatives are needed to build equity and ensure the long-term health of all Americans. “Philanthropy is no substitute for government funding,” Robert W. Conn, president of the Kavli Foundation, told the *Times*. “You can't say that loud enough.”

The opportunity to share power. As highlighted in the “Big Issues & Beyond” section of this brief, public health philanthropy is expanding beyond disease prevention and wellness toward addressing social determinants of health and racial inequities in health outcomes. Within this new direction lies opportunity, but only if philanthropy listens and builds true equity and power-sharing throughout individual organizations, leading experts [told IP](#).

Orlando Watkins, vice president and chief program officer for the Boston Foundation, [told IP](#) that while shifting funding toward BIPOC-led grantseekers and their communities during the pandemic was an important part of the response, it's not clear that funding will continue. When the pandemic finally begins to wane, foundations must transition to enduring support and solutions for BIPOC-led organizations and goals.

“Many of us have made statements and launched standalone ‘equity’ portfolios, but a closer examination of grantmaking decisions – who receives funding, how much, and for how long – reveals a striking absence of equity,” Watkins said. He argues that it is time for foundations and donors to focus on “(advancing) fiscal health for BIPOC-led nonprofits and display a willingness to identify the racial inequity inherent in our foundations’ relationships, ventures and staffing.” He identifies several actions for achieving that, including educating holders of donor-advised funds of the value of adopting an equity lens, improving diversity among philanthropic boards and staff, and sharing progress transparently.

Inside Philanthropy August 2020 Survey

“I think there is a growing realization that philanthropic money and social action don't align. A new fundraising model for supporting social action institutions must be found.”

—Fundraiser, Little Neck, New York

Raymond Foxworth of First Nations Development Institute says the solution requires funders to do a lot more listening and to let go of deficit-oriented approaches, such as framing issues with more negative terms such as “food insecurity.” Instead, he advocates that they look to Native communities for offering transformative, positive responses, like community farming, farm-to-table, and farm-to-school solutions. Foxworth believes that philanthropy should also let Indigenous communities define for themselves what public health means, regarding current definitions as too narrow.

“Philanthropy too often comes to Indigenous communities using very deficit-based language –

you’re fat, you’re obese,” Foxworth said, rather than investigating how Indigenous cultures have survived for more than a century despite “very hateful policies.” The lens used to understand Indigenous communities is steeped in colonialism, deficit indicators and data. Philanthropy needs to interrogate and understand these biases. “It enriches the conversation when Indigenous communities participate,” Foxworth said. “It doesn’t stall the conversation.”

Foxworth advises grantseekers to ensure their values align with the funders they approach. “The money is great in terms of supporting programs, but if there is not an alignment of values and mission, bad things can happen over time,” he said.

Resources

Reports & Data Sets

Budget of the United States Government, Fiscal Year 2023. (2022). Office of Management and Budget.

[Climate change impacts](#). (August 13, 2021). National Oceanic and Atmospheric Administration.

Farrow, F., Rogers, C. & Henderson-Frakes, J. (December 2020). [Toward health and racial equity: Findings and lessons from Building Healthy Communities](#). Center for the Study of Social Policy and California Endowment.

[Giving USA 2022: The annual report on philanthropy for the year 2021](#). (2022) Giving USA.

Hill, H. & Artiga, S. (August 22, 2022). [COVID-19 cases and deaths by race/ethnicity: Current data and changes over time](#). Kaiser Family Foundation.

[Interactive Map: US abortion policies and access after Roe](#). (2022). Guttmacher Institute.

Mckillop, M., & Alpert Lieberman, D. (July 2022). The impact of chronic underfunding on America's public health system: Trends, risks, and recommendations. Trust for America's Health.

[Pathways to power: The impact of building healthy communities. Impact Studies Summary Report](#). (March 2022). Center for Outcomes Research and Education.

Odedina, F. & Stern, M. (November 11, 2021). [Role of funders in addressing the continued lack of diversity in science and medicine](#). NatureMedicine.

[Philanthropy and COVID-19: Examining two years of giving](#). (March 25, 2022) Candid and the Center for Disaster Philanthropy.

Viergever, R. & Hendriks, T. (February 18, 2016). [The 10 largest public and philanthropic funders of health research in the world: what they fund and how they distribute their funds](#). Health Research and Policy Systems.

Thank You

Thank you to these individuals who were interviewed:

Raymond Foxworth, Vice President, Grantmaking, Development and Communications, First Nations Development Institute

Brittany Giles-Cantrell, Program Director, de Beaumont Foundation

Kelly Henning, MD, Public Health Program Lead, Bloomberg Philanthropies

Kristin Schubert, Interim Vice President, Program, Robert Wood Johnson Foundation

Feedback?

The State of American Philanthropy is an ongoing project. Each SAP brief will be updated periodically to integrate new information, additional data and evolving perspectives. This brief was originally posted to Inside Philanthropy in March 2023. It has not yet been updated. If you have comments or information you'd like to share with us, please email us at managingeditor@insidephilanthropy.com.