

## Opportunity for Partnership

### OVERVIEW

The [Center for Advancing Rural Health Equity \(CARHE\)](#) at Dartmouth Health seeks ideas for projects to improve health equity in rural northern New England communities within NH, VT, and ME. This request solicits project ideas with strong potential to reduce health inequities for people living in rural areas from groups interested in receiving project support from CARHE staff and partnering to expand learning and advance equity. In the coming year, CARHE will prioritize projects that address food and nutrition security and/or support for pregnant or postpartum populations; other health equity project proposals will also be considered. Ideas could focus on improvement or expansion of an existing program or service, or development of new programs or services. Selected projects will receive project support from CARHE for a period of 9-15 months. If you are interested in shorter term support, please complete a [brief partnership form](#) on our website.

### CARHE SUPPORT

CARHE will partner with each selected team to understand their unique needs and create a plan for support. Support for selected projects may include, but is not limited to, the topics below:

- best practices to advance equity
- evaluation planning
- data collection, management, analysis and visualization (quantitative and qualitative)
- authentic engagement of community members, people receiving services, and people with lived experience
- communications and dissemination of successes and learning (e.g., via the CARHE newsletter, social media, annual CARHE Gathering, etc.)
- coordination of project team meetings
- development and/or coordination of trainings and workshops related to rural health equity
- support with identifying and applying for funding

CARHE can also help identify partners from research, education, health care, community services or other sectors, and make connections with students to support selected projects. CARHE staff can assist with additional project activities based on need and capacity.

### EXPECTATIONS OF SELECTED TEAMS\*

- Work with CARHE staff at the start of the project period to identify project needs and develop a plan for CARHE project support, including meeting cadence with CARHE staff
- Work with CARHE to develop project materials that will be helpful to the success of the project (e.g. SMART goals, evaluation plan, plan for engagement of clients/consumers/patients, etc.)
- Work with CARHE to explore opportunities for researchers, clinicians, or students to partner with you on your project
- Complete and submit one interim progress report and a final report about the progress of the project and support from CARHE
- Participate in CARHE supported workshops and events as relevant
- Participate in 2-4 cross-project learning opportunities
- Be willing to share your project results so others can learn from your work

*\*It is a CARHE priority to be a good partner in this work. We look to project teams as the lead and will be as flexible as possible to support projects based on need and capacity*

#### **ELIGIBILITY**

We are seeking project ideas from non-profit and community-based organizations located in NH, VT, and ME. Projects must be completed in 9-15-months.

#### **PROJECT FOCUS AREAS**

Ideas must be aligned with [CARHE's Strategic Framework](#). While all ideas aligned with this framework are welcome, we will prioritize project ideas that address inequalities in access to healthy food and nutrition and supportive systems of care for those who are pregnant or postpartum. Other ideas will also be considered such as ideas that address the needs of specific groups of people who experience unjust health outcomes (LGBTQ, BIPOC, veterans, people with disabilities, older adults, among others); and/or geographic areas experiencing inequities.

## SUBMISSION PROCESS

Submit your project idea by sending the following materials in a single file (Word or PDF), and a video file if choosing the video option, to [carhe@hitchcock.org](mailto:carhe@hitchcock.org) by **5:00pm on March 13, 2024**:

1. A 1-2 page abstract using template provided (see page 7) that includes the project title; applicant organization; name, title or role, email address, and phone number for lead person; key partners; one paragraph description of the project; and initial thoughts on what types of CARHE support you think would be helpful.
2. Project description: Information can be submitted in one of two ways: a 1-3 page written description (single spaced, 11 pt font) or 2) in a 1-3 minute video. Videos can be submitted as video files or YouTube links (please include video links in the abstract). Project descriptions should follow the instructions below.

### Project Description Instructions

Your video or written description of your project should address the following questions. We understand that your responses may reflect initial thinking and that these ideas may shift over time. Please note that content and supplemental information exceeding three pages or three minutes will not be considered in the review process.

1. **What is the health equity issue that your project will address?**
  - Describe the rural health inequity (ies) that the project will address.
    - What kinds of data illustrate this inequity?
    - Which population(s) are most impacted by the health issue?
    - What is the geographic focus and how does rurality impact the issue?
2. **What are your project goals and intended outcomes?**
  - What are the main project goal(s)?
  - What outcomes do you hope to achieve over a 9-15 month period?
3. **What will your project do to address inequity?**
  - What will the project will do over a 9-15 month period to help address the identified health inequity?
  - What ideas do you have about strategies and activities you might use?
4. **What are your initial ideas about how you will evaluate your project?**
  - What ideas do you have for evaluating your project?
  - How will you measure your impact on health equity?
5. **How do you plan to engage the community to participate in your project?**
  - Describe how you will involve clients, consumers, community members, and/or people with lived experience in in the project:
    - How will you gather and use their input?
    - How will you share the result of your project?
6. **Who are the key partners you might collaborate with during this project?**
  - Please identify organizations or sector representatives you are interested in partnering with (clinical, education, community-based services, research, advocacy groups, etc.).
    - For each partner, indicate whether they are already committed to partnership or if they are potential partners.
7. **What support do you need for your project?** (*Note: examples of the type of support CARHE provides are listed above*)
  - How would support from CARHE will help you to achieve your goals?
  - What other sources of support do you have for your project?

## REVIEW CRITERIA

The following criteria will be used in deciding which projects to support. Applicants are encouraged to address the following:

Criteria	Description	Points
Relevance to rural health equity in northern New England	Project explicitly addresses a health inequity, including a focus on populations most impacted by the health issue in northern New England.	20
Feasibility and impact	Project goals and outcomes are feasible in the timeframe. Project has a realistic chance of being completed in the 9-15 month period; and of making an impact on the identified community/population.	15
Evaluation and dissemination	Includes ideas for measuring the success of the project, including how health equity will be measured. They have ideas for sharing information about the project results with the community.	10
Engagement of people with lived experience	Explains how the project will engage people impacted by the issue (e.g. clients, consumers, community members, people with lived experience).	15
Partnership	At CARHE we strive for equitable partnerships. Has the project idea already identified a partner from health care, research, community service or education OR is the project team willing to partner with person(s) from one or more of these sectors?	15
CARHE support	Identifies specific types of support that CARHE could provide that would help to advance the work.	15
Addresses a CARHE strategic focus area*	Project addresses a CARHE strategic focus area.	5
Additional focus	Project addresses some aspect of healthy food and nutrition and/or supportive systems of care for those who are pregnant or postpartum.	5

\* CARHE Strategic focus areas include:

- *Address inequalities in access to healthy food and nutrition*
- *Improve access to safe and affordable housing*
- *Reduce transportation barriers and make it easier for people to get where they need to be*
- *Improve access to care for rural people with behavioral health needs including substance use disorder*
- *Provide a supportive system of care for those who are pregnant and postpartum in rural areas*

## KEY DATES

**February 12, 2024:** Partnership opportunity opens and is posted to our website:  
<https://www.dartmouth-health.org/carhe>

**February 15, 2024:** Information session (recording will be posted to our website)

Time: 11am-12pm

Link: <https://dhvideo.webex.com/dhvideo/j.php?MTID=m24e783c50ce9cc37e1116a68bc9d3cab>

Tap to join from a mobile device:

[+1-408-792-6300,,26334717958###](tel:+14087926300,26334717958) Call-in toll number (US/Canada)

Join by phone:

1-408-792-6300 Call-in toll number (US/Canada)

**March 13, 2024:** Submit proposal by 5:00pm via email to [CARHE@hitchcock.org](mailto:CARHE@hitchcock.org)

**April 5, 2024:** Selected projects receive notice of CARHE support

**May 2024 – April 2025:** Project period

## QUESTIONS?

We will collect questions received by February 16, 2024 and post answers to our website by February 20, 2024.

[CARHE@hitchcock.org](mailto:CARHE@hitchcock.org)

<https://www.dartmouth-health.org/carhe>

## Appendix 1: Key Definitions

Community Engagement	A two-way exchange of information, ideas and resources that offers opportunities for communities to exercise power in decision-making. It considers the diversity of communities, including culture and race, and creates an inclusive and accessible process.
Disparity	Although the term disparities is often interpreted to mean racial or ethnic disparities, many dimensions of disparity exist in the United States, particularly in health. If a health outcome is seen to a greater or lesser extent between populations, there is disparity. Race or ethnicity, sex, sexual identity, age, disability, socioeconomic status, and geographic location all contribute to an individual's ability to achieve good health
Health	The WHO defines health as 'a state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity'.
Health Equity	As defined by the United States Centers for Disease Control and Prevention, "health equity is achieved when every person has the opportunity to attain their full health potential, and no one is disadvantaged for achieving this potential because of social position or other socially determined circumstances."
Health Inequity	As defined by the United States Centers for Disease Control and Prevention, health inequity is the differences in health outcomes that are systematic, avoidable and unjust.
Health Outcomes	A change in the health of an individual, a group of people or a population that is attributable to an intervention or a series of interventions
Social determinants of health	Defined by the World Health Organization (WHO) as "the circumstances in which people are born, grow up, live, work and age, and the systems put in place to deal with illness. These circumstances are in turn shaped by a wider set of forces: economics, social policies, and politics."
Social Needs	Includes food, transportation, housing, medical care, safety and employment
Social Justice	Social justice is a communal effort dedicated to creating and sustaining a fair and equal society in which each person and all groups are valued and affirmed. It encompasses efforts to end systemic violence and racism and all systems that devalue the dignity and humanity of any person
Social Risk Factors	Adverse social conditions associated with poor health, including food insecurity and housing instability. A person may have many social risk factors but fewer immediate social needs
Sustainability	The physical development and institutional operating practices that meet the needs of present users without compromising the ability of future generations to meet their own needs

ABSTRACT TEMPLATE (2 pages max)

**Project title:**

**Applicant organization:**

**Organization address:**

**Lead applicant name:**

**Title or role:**

**Email address:**

**Phone number:**

**Link to video description** (*include if submitting via video option*):

**Desired CARHE support:** Select the types of support you are looking for that CARHE could help provide.

Select all that apply:

- Advise on best practices to advance equity
- Evaluation planning
- Data collection, management, analysis and visualization (quantitative and qualitative)
- Support engagement of clients, consumers, or people with lived experience
- Communications and dissemination (e.g. via the CARHE newsletter, social media, annual CARHE Gathering, etc.)
- Coordination of project team meetings
- Development of trainings and workshops related to rural health equity
- Support finding and/or applying for funding
- Other, please describe:

**List partners involved (identify if proposed or committed):**

**Brief description of the project:**