

LGBTQ+ Community Suicide Prevention Mini-Grant Application (due 5:00pm August 7, 2020)

The Oregon Alliance to Prevent Suicide in partnership with the Oregon Health Authority (OHA) is offering one-time mini-grants of up to \$20,000 for local projects that increase protective factors for the LGBTQ+ community during this complicated time of COVID-19. Strong applications will demonstrate: Commitment to racial equity; Alignment with the Alliance's focus on hope, help, and healing; and creative collaboration with local partners.

We encourage organizations and community groups who have not previously focused specifically on suicide prevention work to consider applying. Applications for small projects and out-of-the-box ideas are welcome. Organizations chosen will be invited to receive project support from Trauma Informed Oregon and evaluation support from Program Design & Evaluation Services (paid for by OHA).

We are looking for projects that are: grounded in your local work and energy, attentive to and reflective of the diversity in your community, trauma-informed, and COVID-responsive, with priority given to historically under-resourced communities such as BIPOC (Black, Indigenous, people of color), disabled, rural, and frontier. Projects could focus on increasing protective factors, by any of the following, or by a new creative approach:

- Effective coping and problem-solving skills to promote resiliency;
- Building strong and supportive relationships with partners, friends, family, schools, and/or social institutions;
- Strengthening community supports and connection amongst LGBTQ+ people;
- Increased access to “the right help at the right time” (mental/physical healthcare, basic needs, social supports, etc.);
- Skill building in conflict management, emotional regulation, problem solving & social-emotional learning;
- Establishing/promoting positive social norms and reduction of stigma, bullying and microaggressions;
- Amplifying LGBTQ+ voice and perspectives in community;
- Bystander empowerment (development of allies);
- Safe dating and healthy relationships.

Applications will be reviewed by the Alliance's LGBTQ+ Advisory Group with Trauma-Informed Oregon, Basic Rights Oregon, and OHA. Applications will be chosen to represent geographic diversity across Oregon. Grantees will be notified by the email contact provided. We expect grant decisions to be made by August 14, 2020.

Submit applications to Kris Bifulco (kbifulco@aocmhp.org) AND Sierra Henderson (shenderson@aocmhp.org). You may also contact Kris if you have an idea, but you're not sure it fits the criteria. Kris is happy to be a sounding board and a support, if this application feels confusing or unclear in any way.

A Note from The Alliance

The Oregon Alliance to Prevent Suicide and its LGBTQ+ Advisory Group are committed to dismantling white supremacy and all its branches, including heterosexism, ableism, misogyny, etc. We carry this mission into our goals of promoting hope, healing, and transformation to reduce suicide.

We recognize that BIPOC (Black, indigenous, people of color), disabled, and LGBTQ+ communities are most acutely impacted by COVID 19 due to layers of systemic oppression. Natural supports are not as easily accessible while sheltering in place and that physical distancing and isolation may lead to increased feelings of vulnerability. We also know that when our most vulnerable communities are supported, connected, and resourced, we all thrive.

APPLICATION: DUE BY 5PM AUGUST 7, 2020

Name of Organization:

Phone:
Email:
Address:

Name of Contact Person:

Phone:
Email:
Address:

Project or activity proposed *(Please be as specific as possible including **date(s)**, **location**, **intended audience or population**, **age group of focus**, **community support**; **a few paragraphs to one-page description**, but take more space if needed.)*

In the next three questions, please describe how this project will build toward a suicide-safer LGBTQ+ community by increasing protective factors.

1. What is the need or problem of focus for this project?
2. Below are some protective factors that increase wellness, promote positive health outcomes, and prevent suicide. Which of these does the project seek to increase? *(Check all that apply.)*

<input type="checkbox"/> Social connection	<input type="checkbox"/> Purposefulness in life
<input type="checkbox"/> Family acceptance	<input type="checkbox"/> Strong coping skills
<input type="checkbox"/> Positive accepting adult	<input type="checkbox"/> Spirituality
<input type="checkbox"/> Effective, accessible behavioral healthcare	<input type="checkbox"/> Sense of hopefulness
<input type="checkbox"/> Community connectedness	<input type="checkbox"/> Other: _____
3. What are the expected results of this project? How will your organization know you were successful in increasing those identified factors above?
4. Who are the community partners involved in this project? *(Check and specify all that apply.)*

<input type="checkbox"/> Suicide prevention organization: _____	<input type="checkbox"/> Community organization: _____
<input type="checkbox"/> School: _____	<input type="checkbox"/> Faith community: _____
<input type="checkbox"/> Local government: _____	<input type="checkbox"/> Other: _____

5. Please provide a projected budget for your project below (supplies, technology, paid time/salary, overhead, etc.):

Total amount of funding needed for project: _____

Amount of mini-grant funding requested (up to \$20,000): _____

Other funding sources for this project (if needed): _____

6. Recipients of mini-grants will have the option of assistance from Trauma Informed Oregon, and Program Design & Evaluation Services, which we encourage organizations to utilize. What assistance or guidance could this project use from Trauma Informed Oregon and/or PDES?

7. What follow-up or ongoing work will this project need? As this is a one-time mini-grant, how will you address any ongoing or follow-up work that emerges from this project?

Mini-grant award recipients are asked to submit a brief one-page report of the project or activity. Details of this request will be emailed to mini-grant recipients when grant is awarded.



LGBTQ+ Community Suicide Prevention Mini-Grant Report

Due Date: _____

Please send report to AOCMHP at

Name of Organization:

Phone:

Email:

Address:

Name of Contact Person:

Phone:

Email:

Summary of project or activity completed:

Estimated and actual expenses:

What barriers did this project encounter in the work of this project?

How did this project mitigate these barriers?

Did this project connect with Trauma Informed Oregon (TIO) for assistance? How did the guidance from TIO shape the project?

What challenges remain following this project?

What does this organization see as its next steps in facing this challenge?

Has this organization been involved in the work of their Regional Suicide Prevention Coalition or the Oregon Alliance to Prevent Suicide?

If no, would this organization be interested in being connected?

How can the Oregon Alliance to Prevent Suicide support your organization's work moving forward?

- Training on these topics: _____
- Technical assistance (If on a specific issue: _____)
- Funding
- Connecting to partner organizations
- Sharing resources