

Engaging and Empowering Vulnerable Families and Communities to Prevent Opioid Use Disorder and Overdose

Request for Proposal

I. About the Foundation

The [Foundation for Opioid Response Efforts](https://forefdn.org) (FORE) was founded in 2018 as a private 501(c)(3) national, grant-making foundation focused on addressing the nation's opioid crisis. FORE is committed to funding a diversity of projects contributing solutions to the crisis at national, state, and community levels. FORE's mission is to convene and support partners advancing patient-centered, innovative, evidence-based solutions impacting people experiencing opioid use disorder (OUD), their families, and their communities.

II. Introduction

FORE has been engaged in advisory discussions with a range of experts around the country on topics related to preventing opioid misuse and use disorder. Opioid misuse often begins in adolescence and in the context of adverse events or stressors, hence there is a strong need to focus on engaging and supporting children and families that are most vulnerable, including those with a parent or other family member with OUD, those in which family members have been separated for a time, and those in very low-income communities.

It is estimated that one in eight (8.7 million) children ages 17 or younger resided in households with at least one parent who had a substance use disorder (SUD) in the past year. Furthermore, the opioid crisis has resulted in an increased number of children in the foster care system, as well as living in poverty. Growing up under these circumstances can undermine a child's sense of safety and stability and put them at risk for other adverse childhood experiences (ACEs). Adverse experiences such as these increase the risk of the child engaging in substance use as they become adolescents and young adults.

The prevalence of SUD within families underscores the need for a comprehensive approach to OUD prevention, one that addresses the needs of the entire family (both addressing prevention for the child and recovery for the adult), is community-based and culturally informed, and attends to the traumatic experiences that may accompany substance use.

Opioid overdoses are at the highest level ever in the United States with over 67,000 opioid overdose deaths in the past twelve months, in large part due to the COVID-19 pandemic. Additionally, levels of anxiety, depression, and other indicators of emotional distress have risen significantly throughout the pandemic. A shortage of evidence-based prevention options due to implementation challenges, as well as a lack of funding and resources to

address related social determinant of health, among other reasons, has made it difficult for communities to prevent the next wave of the crisis. We believe there are opportunities to expand the evidence base of what really works, target attention and program development to highly vulnerable families, lift up current models which have shown positive outcomes, and determine how to implement and sustain them in more communities.

III. Funding Opportunity

FORE will provide grant support for specific projects that aim to improve, expand, and/or scale evidence-based family-, school-, and/or community-based prevention services for children and families, **particularly for those at highest risk.**

This RFP targets projects which can develop, adapt, explore, and/or evaluate promising evidence-based models of family- and community-based prevention for OUD and overdose. By **family-based interventions**, we are particularly interested in taking a holistic approach to the needs of every family member, recognizing that some may be in OUD treatment and/or recovery, while others would benefit from preventive measures. By **community-based interventions**, we are interested in approaches which meet children and families where they are, including within schools and “after school” activities, as well as health care settings. Currently, this opportunity will focus on projects in the following three areas which, based on discussions with experts in the field, are needed to improve prevention efforts in communities nationwide:

- 1) **Mitigating the Impact of ACEs on Families.** As stated above, ACEs and trauma play a large role in whether an individual is more susceptible to developing an SUD. People with high ACE scores are more likely to start using drugs or alcohol at an early age and are up to ten times more likely to experience addiction compared with people who have not experienced childhood trauma. Projects in this focus area include evidence-based prevention models that target children and families at highest risk, including families who have a caregiver in treatment, recovery, or actively using substances.
- 2) **Developing Models for Racial and Cultural Minorities and Addressing Inequities.** In recent years, the gap in the rate of opioid overdoses among racial minorities, such as Black and LatinX individuals, and white Americans has narrowed significantly. The nation’s ‘war on drugs’ has also led to a disproportionate number of children in these communities to grow up without a parent present. Despite the pressing need, the presence of effective interventions in minority communities is limited. Projects in this focus area include developing culturally informed and inclusive prevention models that address health inequities and are effective in diverse communities of color, and identifying routes to successful sustainability.
- 3) **Addressing and Managing Pain, Emotional Distress, and Trauma.** Alleviating physical and/or emotional pain is a common reason for initiating misuse of opioids and other substances. Projects which help children and adolescents develop healthy ways of responding to pain with interventions or supports that may be based in schools, homes, or communities will be considered.

FORE prioritizes work which incorporates a focus on patient-centered solutions and on health equity, as well as reaching diverse high-risk populations. FORE also assesses projects within a framework of meeting one or more of our overarching objectives of supporting: 1.) policy initiatives, 2.) professional education, 3.) payer and provider strategies, and 4.) public awareness.

Proposed projects should be able to contribute to long-lasting improvements in family- and community-based prevention, thereby contributing to addressing aspects of the national opioid crisis. Competitive applications will demonstrate clear, immediate needs, as well as the potential to inform long-term, broader impact, sustainability, and scalability. Applicants must also demonstrate a commitment to and support for the proposed project from their organizational leadership.

Applicants may apply for a grant of up to \$500,000 a year for up to three years. Award amounts and project duration must align with the scope of work and the capabilities of the applying organization. Projects may be proposed for less than three years in duration but may not exceed these limits.

IV. Eligibility

For information regarding your organization’s eligibility for a FORE grant, please visit the [Grants & Funding](#) page on our website. If you have further questions regarding eligibility for a FORE grant, please contact info@ForeFdn.org.

V. Key Dates

Applications (see Section VI below) will be accepted until 11:59 PM EST on September 20, 2021 and grants will be awarded in early 2022.

July 20, 2021:	RFP released on FORE website
September 20, 2021:	Last possible day to submit Concept Note (see Section VI below)
October 1, 2021:	Latest notification for request for Full Proposal
February 28, 2022:	Earliest notification of final decisions (subject to change)

VI. Application Requirements and Selection Process

All applications must be submitted through FORE’s online grants management system. [You can access the application here.](#)

The first step in the application process is to submit a short, structured Concept Note. The prompts in the Concept Note are below:

- Briefly describe the immediate unmet need that this proposal seeks to address (max. 100 words)
- Provide a brief summary of the anticipated project goal (max. 50 words)
- Briefly describe the strategy and approach the proposed project will seek to accomplish the project goal (max. 150 words)

- Briefly describe the expected outcomes for the project. What impact with this project have on opioid use disorder patients, vulnerable families and communities, and/or the field (max. 100 words)
- Briefly describe your organization and its qualifications for successfully completing the project (max. 100 words)

FORE will evaluate all submitted Concept Notes for responsiveness to the RFP and alignment with FORE's mission and interests. Selected projects will be invited to submit a Full Proposal, which consists of a brief proposal, line-item budget, as well as required organizational documents. Applicants will have up to four weeks from notification to submit the Full Proposal.

FORE will evaluate all submitted proposals and seek independent expert review as needed. The review process may include feedback to selected applicants on proposals and recommended revisions. Funding recommendations for selected proposals will be prepared by FORE program staff and presented to the FORE Board of Directors for final approval. All approved proposals will then be the subject of a grant agreement between FORE and the grantee organization which will specify the grant period, payment schedule, specific deliverable requirements, and reporting timeline.

There is no expectation of any specific number of awards, and FORE reserves the sole right to not recommend the funding of any applications. FORE is not obligated to provide feedback on unfunded proposals, but may, to the extent possible, provide summarized feedback on Full Proposals upon request.

VII. Contact

Questions about this funding opportunity should be addressed to info@ForeFdn.org.