

Cambria Health Foundation

2026 Request for proposals

Healthy and Connected Aging

This RFP will support strategies that advance whole-person health among older adults (55+) who are kinship/grandfamily caregivers. Strong applications will clearly address the needs of older adult kinship/grandfamily caregivers in a comprehensive approach that serves the entire kinship family.

At a glance:

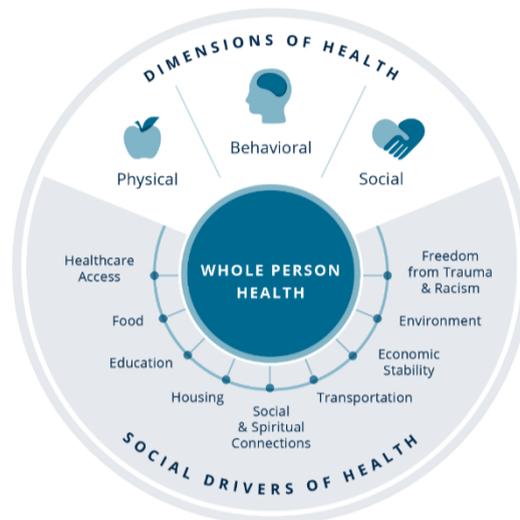
- Applications close Thursday, April 9, 2026 at 5:00 p.m. Pacific Time.
- Covers services provided in Oregon, Washington, Idaho, Utah and Tribal Nations within these states.
- We anticipate grant amounts of up to \$50,000 and a time frame of up to 24 months.
- Open to U.S. 501(c)(3) organizations, accredited schools or universities, government and public agencies and federally recognized Indian Tribal entities.
- Our website:
<https://www.cambriahealthfoundation.org/>



About us

Cambia Health Foundation is the corporate foundation of Cambia Health Solutions, which is dedicated to making health care more person-focused and economically sustainable. Founded in 2007, the foundation has made purposeful philanthropic investments of more than \$137 million to improve health care experiences and outcomes for people and families.

We are currently working to advance whole-person health by expanding access to behavioral health in underserved communities across Oregon, Washington, Idaho and Utah. The term *whole-person health* reflects our belief that health is personal, multidimensional and interconnected.



Our 2022-2026 strategic plan focus areas

We prioritize investments in three areas that span all ages and phases of life:

Resilient Children and Families

We invest in behavioral health access for young children and their caregivers. By focusing on early intervention, we build resilience and improve health outcomes.

Healthy and Connected Aging

We focus on solutions that reduce isolation and loneliness among older adults by strengthening social connectivity, care coordination, and behavioral health access within whole-person health models.

Health Care Workforce

We support expanding, diversifying and training the workforce to reduce behavioral health provider shortages in our region. By strengthening the paid and unpaid workforce we enable wellness and prevention, reduce stigma and increase collaborative care models.



For older adults (55+), whole-person health includes independence, security, productivity, social connectivity, care coordination, and the integration of social, behavioral and physical health. These approaches are demonstrated to help older adults better manage their chronic conditions, reduce isolation and loneliness, and improve their quality of life.

RFP strategy



The aim of this RFP is to support whole-person health among older adults who are kinship or grandfamily caregivers and their families. According to Generations United, the terms “grandfamilies” and “kinship families” are used interchangeably to refer to “families in which grandparents, other adult relatives, or close family friends are raising children whose parents are unable to do so.” Unlike other intergenerational family structures, the parents of children in kinship/grandfamilies are not part of the household. Between 2022 and 2024, an estimated 101,000 children lived in a kinship/grandfamily arrangement in Oregon, Washington, Idaho and Utah.

Per a comprehensive report from the U.S. Government Accountability Office (GAO), in 2018 over 60% of children in kinship/grandfamilies were living with grandparents, followed by 25% with other relatives and 13% with non-relatives such as close family friends. While data on other relative and non-relative kinship/grandfamily caregivers is not readily available, data is available for grandparents raising grandchildren—almost 66% were 55 years old or older, nearly two-thirds were women, over 45% were people of color, nearly half were not employed and almost 20% lived below the federal poverty line.

Many kinship/grandfamilies experience trauma or mental distress related to their circumstances. Many also face challenges accessing available resources and services, affording basic needs including housing and health care, navigating complex legal matters or becoming socially isolated. Approximately 95% of kinship placements occur outside of the formal foster care system, which excludes their caregivers from accessing financial support and other assistance programs available for foster families. As an added challenge, becoming a kinship/grandfamily caregiver often happens with little, if any, time to prepare.

At the same time, with sufficient support, kinship/grandfamilies are able to adjust and thrive. Compared to other arrangements, being in a kinship/grandfamily is associated with improvements in mental health, academic achievement, community connection and stability.

This RFP will support strategies that advance whole-person health among older adult (55+) kinship/grandfamily caregivers by strengthening social connections, expanding access to behavioral health services, and/or improving mental health and wellbeing. We believe there are many different approaches an organization may take to achieve this, and we look forward to considering proposals that are tailored to the specific needs and strengths of kinship/grandfamilies in your respective communities.

Outcomes and impacts

Strong applications will clearly include the needs of older adult kinship/grandfamily caregivers within the context of the entire kinship family, and will directly connect to one or more of the following:

- Increase social connection through age-friendly or intergenerational programs.
- Increase access to mental health services or supports through whole-person health approaches.
- Reduce rates of anxiety, depression or poor mental health.
- Reduce barriers to living well, aging in community, or accessing health and social services.

Eligibility

- Proposed work must support kinship/grandfamily caregivers and their families. Organizations that serve a broader population may be eligible to apply if they are able to submit a proposal and budget that focuses exclusively on kinship/grandfamily caregivers and their families.
- Proposed work must exclusively serve populations within Oregon, Washington, Idaho, Utah and/or sovereign American Indian tribes within those states.
- Proposed projects must be facilitated through either a U.S. 501(c)(3) organization, accredited school or university, government or public agency or federally recognized Indian Tribal entity. Fiscal agents are eligible to serve as applicants on behalf of organizations doing charitable work.
- If you are not sure if your proposed work is eligible, please reach out to our team and ask.

How to apply

Submit your application by **Thursday, April 9, 2026 at 5:00 p.m. Pacific Time** through the online application on our website, cambiahealthfoundation.org.

- Use the application portal to access your existing account or create a new account.
- Check our website for information on frequently asked questions (on the **Current Funding Opportunities** page).
- Let us know if you need help. We welcome any and all questions you may have.

Funding guidelines

We expect to award grants of up to \$50,000 each, totaling \$300,000 throughout our geographic region in this RFP. We anticipate grant start dates in July 2026. The grant period can last up to 24 months after the initial start date. Please note, these are general guidelines for planning purposes; details will be finalized with funding recipients.

RFP deadlines and timeframe

March 5, 2026 at 12:00 p.m. Pacific Time
The single-stage application opens on our website.

April 9, 2026 at 5:00 p.m. Pacific Time
The application closes (please note this is a Thursday).

Week of June 1, 2026
Applicants will be notified of final decisions.

July 2026
Proposed work begins.

We're here to help

Questions about eligibility or RFP focus? Please contact us before you apply. Submit your question(s) to:

Robert Korycinski, Associate Program Officer
Robert.Korycinski@cambiahealth.com
(801) 333-6935

Cambia Health Foundation values equal opportunity for all members of the community and embraces the importance of diversity and inclusion in achieving health equity. Our grant partners join us in not discriminating based on age, sex, race, creed, color, ethnicity, sexual orientation, gender identity, pregnancy, marital status, military service, other protected veteran status, disability, national origin, political affiliation, religious belief or any other status in their leadership, staffing or provision of services.

Preview of reporting requirements for funded projects

Cambia Health Foundation is dedicated to ensuring that its investments are mission-driven and positively impact the communities we serve. The evaluation process is clear, simple and focused on outcomes. It respects organizations of different sizes, experiences, values, beliefs and traditions. It balances quantitative and qualitative methods to inform and guide Cambia Health Foundation decisions while improving grant partner services. Cambia Health Foundation staff use an evaluation model that fits our evaluation philosophy.

We have four primary goals for evaluation and grant reporting:

- Good stewardship of funds entrusted to us for the benefit of the community.
- Grant partner learning and quality improvement.
- Communication about results and impact.
- Transparency around barriers and challenges.

Reporting frequency and requirements depend on the grant size and time frame. We are committed to asking only for what we will use and focusing on what is important to the organization and those served. When it comes to our grant partners, our intent is to develop relationships that are positive, honest, trusting and committed to improvement.

Cambia Health Foundation reserves the right to:

- Reject any or all proposals submitted.
- Reject a proposal that does not include all required information and documentation.
- Modify RFP and program guidelines, including submission deadlines.
- Contact you to discuss your proposal and/or others referenced in the proposal.
- Request additional information or verification.

What will not be funded

Cambia Health Foundation is interested in learning what resources are necessary to achieve intended results. However, we will not fund the following as part of this funding opportunity:

- Endowments.
- Capital campaigns.
- Political causes or events.
- Sacramental or theological functions of religious organizations.
- Existing deficits.
- Retroactive expenses.
- Sponsorships.
- Programs that do not primarily serve Oregon, Washington, Idaho, Utah and/or the sovereign American Indian tribes within those states.

We reserve the right to add to this list on a case-by-case basis.