PUBLIC HEALTH FUND of Ohio

HEALTHPATH

Request For Proposals: Improving Maternal and Infant Health by Addressing Community Barriers to Healthcare Access

Maternal and infant health remain critical public health priorities across Ohio. Ohio's State Health Improvement Plan (SHIP) identifies improving maternal health, reducing infant mortality, and addressing disparities in maternal and infant outcomes as essential strategies for improving the health and well-being of Ohio communities.

Healthy pregnancies and healthy infants depend on timely, continuous access to high-quality healthcare before, during, and after pregnancy. Yet many Ohio communities continue to experience barriers to prenatal, postpartum, and infant healthcare, particularly in areas facing provider shortages, limited maternal healthcare infrastructure, and persistent social and economic challenges. These barriers contribute to disparities in maternal and infant health outcomes and are especially evident across many rural, Appalachian, and urban communities.

To identify communities for this funding opportunity, the Public Health Fund of Ohio (PHFO) and HealthPath Foundation of Ohio (HealthPath) analyzed county-level indicators related to maternal and infant health outcomes, healthcare access, healthcare workforce capacity, and community conditions.

Rural and Appalachian Communities

This analysis identified **Adams, Ashtabula, Athens, Clark, Fayette, Highland, Meigs, Pike, Scioto, and Vinton** counties as experiencing some of Ohio's greatest barriers to accessing prenatal, postpartum, and infant care:

- Six counties have no OB-GYN providers, and six counties have no hospital-based obstetric services, significantly limiting access to prenatal care and labor and delivery services close to home.
- Infant mortality rates range from 5.6 to 19.8 deaths per 1,000 live births, while first-trimester prenatal care ranges from 61.6% to 78.7%.

Urban Communities

Recognizing that maternal and infant health disparities also persist in Ohio's largest metropolitan areas, **Hamilton and Cuyahoga counties** were intentionally included in this funding opportunity.

- In Hamilton County, the Black infant mortality rate was 21.0 deaths per 1,000 live births, compared to an overall county rate of 9.3 deaths per 1,000 live births.
- In Cuyahoga County, fetal death rates ranged from 0.0 to 23.44 per 1,000 live births plus fetal deaths, with the highest rates concentrated in predominantly Black, high-poverty neighborhoods.

Through this funding opportunity, PHFO and HealthPath seek to strengthen healthcare access through improved care coordination, navigation, and community-informed solutions that improve outcomes for pregnant individuals, postpartum individuals, infants, and families.

The Opportunity

The Public Health Fund of Ohio (PHFO), in partnership with the HealthPath Foundation of Ohio (HealthPath), seeks to improve maternal and infant health by investing in sustainable approaches that strengthen access to prenatal, postpartum, and infant healthcare.

For this funding opportunity, healthcare access includes improving timely connections to prenatal, postpartum, and infant healthcare; strengthening care coordination; improving continuity of care; and reducing community barriers that prevent families from obtaining needed healthcare. PHFO and HealthPath recognize that direct service activities may be included; however, competitive proposals should demonstrate how the project will create sustainable improvements in healthcare access that extend beyond the grant period. A total of up to $300,000 is available through this funding opportunity. PHFO and HealthPath anticipate awarding up to six grants of up to $50,000 each over the two-year grant period.

Funding Priorities

Applicants should propose projects that strengthen access to maternal and infant healthcare for pregnant individuals, postpartum individuals, and infants. Projects may address one or more of the following priorities.

Expand Access to Prenatal, Postpartum, and Infant Healthcare

Projects should improve timely access to maternal and infant healthcare throughout pregnancy and the first year after birth. Examples may include, but are not limited to:

- Improving referral pathways between maternal and infant healthcare providers and community-based organizations.
- Strengthening care navigation to help individuals connect to prenatal, postpartum, behavioral health, pediatric, and supportive maternal and infant healthcare services.
- Expanding access to maternal and infant healthcare through innovative service delivery models, coordinated partnerships, or technology-enabled solutions.
- Improving continuity of care across healthcare settings, including transitions between pregnancy, delivery, postpartum, and infant care.

- Reducing barriers that delay or prevent individuals from obtaining recommended maternal and infant healthcare services.

Strengthen Care Navigation and Coordination

Projects should improve how pregnant individuals, postpartum individuals, and families move through maternal and infant healthcare and community support systems by:

- Creating stronger coordination between maternal and infant healthcare providers, public health agencies, and community organizations.
- Developing standardized referral and follow-up processes for maternal and infant healthcare services.
- Improving communication and information sharing among organizations supporting maternal and infant healthcare.
- Building partnerships that increase access to maternal and infant healthcare and related supportive services.
- Strengthening systems that help individuals successfully navigate maternal and infant healthcare throughout pregnancy, the postpartum period, and infancy.

Reduce Community Barriers to Healthcare Access

Projects should address community conditions that make it difficult for pregnant individuals, postpartum individuals, and families to access maternal and infant healthcare by:

- Developing community-informed solutions that reduce barriers to accessing maternal and infant healthcare.
- Partnering with organizations that strengthen access to maternal and infant healthcare through community support systems.
- Using local data and community input to identify barriers to maternal and infant healthcare and develop solutions.
- Improving coordination between maternal and infant healthcare providers and organizations that address social and community needs.
- Strengthening partnerships between maternal and infant healthcare providers and trusted community organizations to improve access to prenatal, postpartum, and infant healthcare.

Projects are not expected to address every funding priority. Applicants should focus on the priorities most relevant to their proposed approach and community needs.

Desired Outcomes

Applicants should propose meaningful, measurable outcomes that align with their proposed project and demonstrate sustainable improvements in healthcare access. While specific outcomes will vary based on the proposed project, PHFO and HealthPath anticipate projects will contribute to one or more of the following:

Short-Term Outcome Indicators:

- Increased access to prenatal, postpartum, and infant healthcare.
- Improved coordination between healthcare providers and community organizations.
- Increased successful referrals to healthcare and supportive services.
- Improved patient navigation and care coordination.
- Increased awareness and utilization of available maternal and infant healthcare resources.

Intermediate Outcome Indicators:

- Improved continuity of care throughout pregnancy, the postpartum period, and infancy.
- Reduced barriers to accessing healthcare services.
- Increased utilization of recommended prenatal, postpartum, pediatric, and behavioral healthcare.
- Stronger collaboration among healthcare providers, public health agencies, and community organizations.
- Improved healthcare experiences for pregnant individuals, postpartum individuals, and families.

Systems-Level Outcome Indicators:

- Sustainable improvements in healthcare delivery, coordination, or navigation.
- New or strengthened cross-sector partnerships.
- Improved referral systems, operational workflows, or care coordination processes.

- Policies, protocols, or organizational practices that strengthen healthcare access beyond the grant period.
- Scalable or replicable approaches that improve healthcare access within and across communities.

Project-Level Measures

Specific project-level indicators and output measures (e.g., participants served, referrals completed, or organizations engaged) will be developed collaboratively with PHFO and HealthPath following grant award to ensure they are meaningful and appropriate for each funded project.

Cohort Learning

Grantees will be invited to participate in a virtual cohort learning session during the grant period. The session will be designed to foster peer learning, encourage the exchange of promising practices, and strengthen collaboration among funded organizations to support sustainable improvements in healthcare access.

Counties of Focus

PHFO and HealthPath selected counties using a data-informed approach that considered maternal and infant health outcomes, healthcare access, healthcare workforce capacity, and community conditions. This analysis identified ten counties experiencing some of Ohio's greatest barriers to accessing prenatal, postpartum, and infant healthcare.

Recognizing that significant disparities also exist within Ohio's largest metropolitan areas, Hamilton and Cuyahoga counties were intentionally included. Although these counties have greater overall healthcare capacity, longstanding racial and geographic inequities continue to contribute to disproportionate maternal and infant health outcomes, highlighting the need for stronger care coordination, healthcare navigation, and community-informed solutions.

PHFO and HealthPath invite proposals from organizations serving one or more of the following 12 counties:

- Adams
- Ashtabula
- Athens
- Clark
- Cuyahoga
- Fayette
- Hamilton
- Highland
- Meigs

- Pike
- Scioto
- Vinton

Populations of Focus

Through this RFP, PHFO and HealthPath will prioritize initiatives that serve pregnant individuals, postpartum individuals, and infants through age 1 who experience barriers to accessing maternal and infant healthcare. Based on county-level data reviewed, priority populations include individuals living in rural, Appalachian, medically underserved, and economically disadvantaged communities, as well as Black and Hispanic populations, who experience persistent disparities in maternal and infant health outcomes.

Eligibility

To qualify for a grant under this RFP:

- Organizations must be a 501(c)(3) nonprofit or government organization serving at least one of the 12 counties of focus.
- Organizations without 501(c)(3) status may be eligible to apply through a fiscal sponsor. Fiscal sponsorships will be reviewed on a case-by-case basis. Organizations interested in this option should contact PHFO at info@publichealthfundohio.org before applying to ensure eligibility.
- Organizations with an active HealthPath Foundation of Ohio or Public Health Fund of Ohio grant are ineligible to apply for additional funding until their current grant period concludes.
- An organization's total funding request should be inclusive of the Indirect Cost Rate. Please see PHFO's full policy with tiered indirect cost rates based on organizational budget size under our Frequently Asked Questions (FAQs).
- Organizations may submit one application per funding opportunity. Organizations affiliated with a university, hospital, or other institution with multiple departments or locations must coordinate internally, typically through a centralized office such as Operations, a Foundation, or a Grants Office to ensure a single, unified submission. For universities, hospitals, or other organizations with affiliated foundations, we respectfully request that applications be submitted through the foundation. Applications submitted outside of the institution's foundation may not be considered. This policy is also available under our Frequently Asked Questions (FAQs).

Funding Exclusions

PHFO and HealthPath will not consider requests supporting:

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- Capital campaigns
- Healthcare levies
- Lobbying or political campaigns
- Emergency needs
- Scholarships
- Endowments
- Grants to individuals

Evaluation Criteria

Proposals will be assessed based on the following:

- **Eligibility and Alignment**: The organization meets all eligibility requirements and demonstrates strong alignment with the purpose, funding priorities, and vision of this funding opportunity.
- **Project Design and Measurable Outcomes**: The proposal presents a clear, well-designed approach aligned with the funding priorities and includes meaningful, measurable outcomes with an appropriate evaluation plan.
- **Community-centered Approach**: The proposal demonstrates meaningful engagement of people with lived experience throughout project design, implementation, decision-making, and evaluation.
- **Data-informed Approach**: The proposal demonstrates an understanding of local needs by using relevant data to identify barriers, inform project design, and support the proposed solution.
- **Organizational and Partnership Capacity**: The organization demonstrates the experience, leadership, staffing, partnerships, and infrastructure necessary to successfully implement and manage the proposed project.
- **Sustainability, Potential Risks and Mitigation Strategies**: The organization outlines realistic plans for sustaining the project beyond the grant period and addressing potential risks with mitigation strategies.

Application Deadline & Process

Proposals must be submitted through PHFO's online grants management system by **October 6th at 11:59 p.m. EST**. Notice of decisions will be issued by **November 20th, 2026**, and grant payments are expected to be completed by the end of **January 2027**.

For New Users/Applicants: Please click "Create New Account" to complete the registration process and create your login credentials.

For Existing Users/Applicants: Please enter your credentials and log in. If you forgot your password, please use the "Forgot your Password?" link to the left to reset your password.

Not Sure? If you believe your organization has a profile but are unsure of the login credentials, do not create a new organization profile. Contact our Grants Manager with your organization's name and tax ID number (EIN) to receive your username and password.

Learn more about the Public Health Fund of Ohio here.

Contact Information

For all questions regarding eligibility, the online application process, or this funding opportunity, please contact info@publichealthfundohio.org.

Supporting Documentation and Resources

Cradle Cincinnati. (2025). *A community snapshot*: 2025 Hamilton County maternal & infant health.

Cuyahoga County Board of Health. (2024). *2023 Fetal Infant Mortality Review annual report*.

Health Resources and Services Administration. (n.d.). Maternal and infant health mapping tool.

Ohio Department of Children and Youth. (2024). *2023 Ohio infant mortality report*.