

For Immediate Release

Too Few Foundations Promoting Health Equity Among the Poor and Disadvantaged, Report Says

Just 31 percent of domestic health funders prioritized underserved Americans

Washington, D.C. (4/5/2011) –Geography, poverty, literacy rates and other social factors exert greater cumulative influence on disparate health outcomes in the United States than do disease, injury or mortality.



Yet, less than one third of 880 foundations and institutional grantmakers that give billions towards health-related causes in the U.S. have made addressing the needs of underserved communities their top priority, according to the National Committee for Responsive Philanthropy (NCRP), a research and advocacy group that monitors philanthropic giving.

"If improving the health of our nation is important to philanthropy, then we have to focus more on the needs of the most underserved and on making these communities integral participants in systemic reform efforts," said Aaron Dorfman, executive director of NCRP, which released the new report on the heels of the first anniversary of passage of the Affordable Care Act. "We can't

wait for health reform to slowly trickle down, especially given the uncertainty of the current political climate."

In "[Towards Transformative Change in Health Care](#)," longtime foundation veteran and report author Terri Langston highlights the tremendous need and opportunities to address health outcomes and health policy inclusively, citing the work of currently existing philanthropic institutions that are leading by example.

"I am inspired by the innovative and forward-thinking programs being funded by a number of philanthropies across the country," said Langston. "I share their stories with the grantmaking community in the hopes that others will learn from them, emulate the work and help move our country closer toward health equity. Especially at this critical time of implementing health reform, we can't afford not to."

Langston and NCRP recommend two strategies for health funders to improve significantly the impact of their philanthropy: allocating at least 50 percent of their grant dollars to benefit underserved communities and 25 towards advocacy, community organizing and civic engagement that promotes long-term systemic reform.

Analysis by NCRP also shows that of the 363 foundations that gave an average of at least \$1 million in domestic health grants from 2007-2009, only 28 percent dedicated at least half of their grantmaking for the intended benefit of underserved communities. Only 7 percent designated at least a quarter of their grantmaking for systemic change.

Within the full sample of 880 foundations analyzed, NCRP identified 22 grantmaking institutions that met or exceeded both recommended levels of support. Five of these foundations include: The California Endowment, The California Wellness Foundation, the Colorado Trust, Blue Cross Blue Shield of North Carolina Foundation and Quantum Foundation (Fl.)

NCRP used the Foundation Center's intended beneficiary coding system to develop its definition of "marginalized communities," which includes, but is not limited to, those who are economically disadvantaged; women and girls; people with HIV/AIDS; people with disabilities; aging, elderly and senior citizens; immigrants and refugees; crime/abuse victims; offenders and ex-offenders; and LGBTQ citizens.

"NCRP's new report describes concretely how its principles for effective philanthropy can be operationalized to promote transformational change," said Lauren LeRoy, president and CEO of Grantmakers In Health. "At this critical time created by the passage of health reform, it points the way for bold action by health funders to reduce health inequalities and build a high-performing system."

According to the report, foundations should leverage the tremendous opportunity that the Affordable Care Act provides to address some of the nation's most pressing health problems, including obesity, diabetes and other chronic diseases, by emphasizing health and influential social factors for all communities' wellbeing that can reduce the need for expensive medical interventions.

Langston offers practical suggestions for funders that seek to improve the effectiveness of their health grantmaking, including working collaboratively with other foundations, government and advocacy organizations, and initiating "place-based" work in their communities.

" [Towards Transformative Change in Health Care](http://www.ncrp.org/paib/health-philanthropy) " (<http://www.ncrp.org/paib/health-philanthropy>) is available for free on NCRP's website.

The National Committee for Responsive Philanthropy in Washington, D.C., is a national watchdog, research and advocacy organization that promotes philanthropy that serves the public good, is responsive to people and communities with the least wealth and opportunity, and is held accountable to the highest standards of integrity and openness.

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