

# Grant Guidance 2026



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Episcopal Health Foundation (EHF) is pleased to share the first Grant Guidance under our new finalized **Strategic Framework 2025-2030**. This framework reflects the lessons we have learned with our partners and deepens our commitment to addressing the root causes of health inequities in Texas. This framework also guides work to change systems and remove barriers to improve health, not just health care for all Texans.

#### **Please review the Framework before applying.**

We invite existing and new partners, community-based groups, service providers, policy advocates, and collaborative networks to join us. Together, we can build on the knowledge and experience that communities bring to shaping health in their own neighborhoods.

We know we are issuing this Grant Guidance during a time of uncertainty for many organizations working to improve the health of Texans. While we cannot predict the future, we remain committed to listening to our partners, learning from national trends, and applying those insights to our grantmaking. As a result, EHF's approach to grantmaking may change to accommodate the realities our partners face.

As you review the finalized Strategic Framework and this Grant Guidance, you will see some topics and areas where we, along with our partners, have made positive change over the course of many years. You'll also see some new areas that we are excited to explore with our partners. Our intent is for this Grant Guidance to clearly communicate our funding priorities for potential grant applicants. We strive to be clear in what we are looking for, even in a rapidly changing environment. While we hope to answer some questions through this Grant Guidance, we know we cannot anticipate all potential questions.

After reading this Grant Guidance and Strategic Framework, we invite interested organizations to explore how their work aligns with EHF's mission and to connect with a Program Officer to discuss potential opportunities.

If you do not already have an assigned Program Officer, please email [applicationassistance@episcopalhealth.org](mailto:applicationassistance@episcopalhealth.org) for assistance.



# Action Areas

Main focus areas of our work

Under our new Strategic Framework, EHF's **Action Areas** are the main focus areas where we concentrate our work: **Health and Health Care Services**, **Healthy Communities**, and **Health Policies** that shape people's lives.

These Action Areas are the center of our efforts because they reflect large, intersecting systems that influence every part of health.

EHF defines **well-being** as the integration of non-medical drivers of health (NMDOH) with traditional health care. This includes accessible care and health-promoting communities supported by inclusive policies.

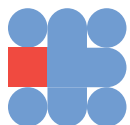




# Impact Drivers

Core ways we drive change

Across these Action Areas, we are now using what we call **Impact Drivers**. These are the core ways EHF works to drive change for health, not just health care, and they run through everything we do—from research and partnerships to community engagement and grantmaking.



**Strengthening  
Comprehensive  
Care**



**Accelerating  
Innovative  
Health Financing**



**Activating  
Community  
Voices**



**Maximizing  
Connections to  
Health Coverage  
and Benefits**



**Supporting  
Community  
Health Workers**



**Promoting  
Multi-Sector  
Collaboration**

For Cycle 1 (January–May 2026), EHF’s funding opportunities will be aligned with the following Impact Drivers:

- **Strengthening Comprehensive Care**
- **Activating Community Voice**
- **Maximizing Connections to Health Coverage and Benefits**

At this time, EHF does not anticipate funding work aligned with the other Impact Drivers during Cycle 1. We will provide updates regarding our funding priorities for Cycle 2 in the Spring of 2026. The application process for Cycle 2 is scheduled to start in June, with grants awarded in December.

We acknowledge that timely proposals may emerge. We may consider those proposals on a limited basis depending on alignment with our framework and available resources. Please contact a Program Officer to discuss further.



# Current Funding Opportunities

## → Strengthening Comprehensive Care

EHF prioritizes expanding access to a full range of health services including behavioral, early relational health, maternal, pediatric, preventive, and primary care. Supported strategies may leverage both clinical and non-clinical services to address broader non-medical drivers of health.

Examples of investments include but are not limited to:

- Enhance access to services through direct providers, including clinics, food banks, and maternal and mental health providers.
- Strengthen partnerships among providers and community organizations to deliver more integrated and coordinated services.
- Explore additional approaches with a Program Officer.

## → Activating Community Voices

EHF seeks to elevate the voices of communities most affected by health disparities. Supported efforts focus on strengthening the ability of residents and local organizations to influence the systems and decisions that shape their health.

Examples of investments include but are not limited to:

- Support community-driven efforts to identify and advocate for community health priorities.
- Build the advocacy capacity of local organizations, collaboratives, congregations, and community groups to impact system level issues.
- Explore additional approaches with a Program Officer.

## → Maximizing Connections to Health Coverage and Benefits

EHF supports programs that help Texans understand, enroll in, and access health and social benefits. These services reduce health inequities by tackling barriers such as access to care and food insecurity.

Examples of investments include but are not limited to:

- Expand health coverage and public benefits enrollment services through partnerships with community-based organizations.
- Strengthen public benefits utilization by improving program design, integrating services, and increasing access.
- Explore additional approaches with a Program Officer.

# Priorities for Change

## Big health challenges where positive change can ripple out across communities

Certain health conditions and events serve as warning signs that systems and circumstances need to be improved in Texas. These negative, but preventable, health-related conditions, Food and Nutrition Security, Maternal Health, and Diabetes Prevention, cannot be improved by medicine alone and are deeply affected by underlying non-medical factors.

EHF pays special attention to these **Priorities for Change** because when we make positive progress on them, the ripple effects go far beyond the specific issue. Better nutrition supports healthier pregnancies. Stronger maternal health strengthens families. Preventing diabetes reduces future illness and costs.

Applicants are welcome to describe how their proposed work in Strengthening Comprehensive Care, Activating Community Voices and Maximizing Connections to Health Coverage and Benefits also support these Priorities for Change.

**However, alignment with one of EHF's Priorities for Change is not required.**



### Food and Nutrition Security

Good nutrition is essential for good health. Yet more than four million Texans experience food insecurity, often triggering a chain of additional health challenges. Communities and populations that are under-resourced, including older adults, families with lower incomes, and residents in rural areas, frequently face the greatest barriers to accessing affordable, nutritious food.

Examples of investments include but are not limited to:

- Improving access to affordable, nutritious food, particularly in areas with limited food access
- Integrating food security and healthy food resources within health care settings
- Supporting policy efforts that enhance access or address barriers to affordable, nutritious food
- Building community capacity, including multi-sector coalitions or collaboratives, to strengthen local food systems and address barriers to access



### Maternal Health

Fostering healthy communities, supporting early relational health, and increasing access to health services and social support all contribute to healthy pregnancies and postpartum well-being. These conditions lay a strong foundation for the long-term physical and mental health of both mother and child.

Examples of investments include but are not limited to:

- Providing respectful, culturally responsive team-based care in underserved areas
- Promoting early relational health for infants and their caregivers
- Expanding social and emotional support services during the perinatal and early childhood period
- Integrating maternal behavioral health into perinatal and pediatric care
- Supporting policies that improve maternal health outcomes

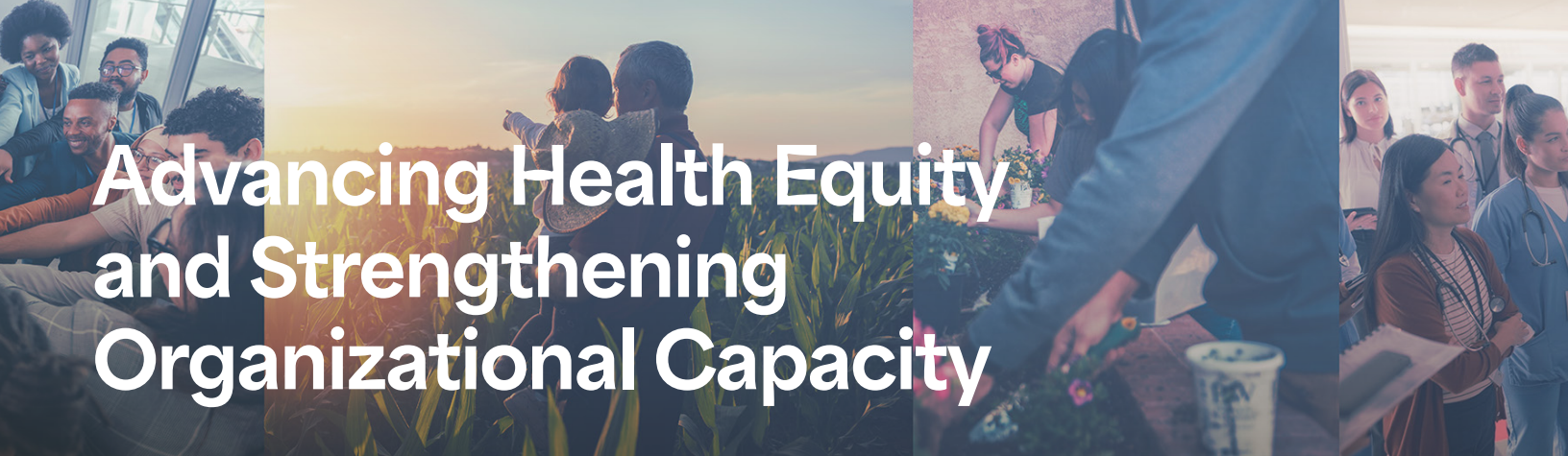


### Diabetes Prevention

Nine in ten cases of diabetes are preventable. In Texas, diabetes rates exceed the national average, with certain geographic regions and socioeconomic groups experiencing a disproportionate burden. Addressing these disparities presents a critical opportunity to improve health outcomes and reduce long-term healthcare costs.

Examples of investments include but are not limited to:

- Developing community-based diabetes prevention (DP) programs for children and adults
- Supporting active living and healthy eating as foundational strategies for preventing diabetes
- Advocating for policies that facilitate prevention-focused interventions and create healthier environments that encourage active living and good nutrition
- Supporting public education and community awareness initiatives
- Improving diabetes prevention knowledge in practicing healthcare professionals



# Advancing Health Equity and Strengthening Organizational Capacity

## Health Equity Approach

For Texas to fully realize its great potential, all Texans must have the ability to thrive. Health equity is an essential part of that future.

Using the Robert Wood Johnson Foundation's definition, health equity means that "everyone has a fair and just opportunity to be as healthy as possible. This requires removing obstacles to health such as poverty, discrimination, and their consequences, including powerlessness and lack of access to good jobs with fair pay, quality education and housing, safe environments, and health care."

## Capacity Building

EHF defines capacity building as strengthening the internal systems, skills, and structures that enable organizations to do their work more effectively, sustainably, and equitably. This work helps nonprofits improve operations, deliver stronger results, and remain resilient over time.

While capacity building can take many forms, EHF supports organizations interested in building their internal capacity in the following interconnected domains:

- **Leadership & Governance** Strategic planning, succession planning, board development, governance, and stewardship.
- **Financial & Business Management** Maximizing federal and other revenue streams; strengthening financial systems and leadership; financial planning; pursuing strategic partnerships, mergers, and acquisitions; and building the capacity to use EHF funding to secure and manage additional resources.
- **Program Strategy & Development** Program design, logic model and theory of change development, measurement and evaluation, data analysis and use, and research.
- **Community Engagement & Partnerships** Authentic collaboration with residents or clients, congregations, and community groups; amplifying lived experience to guide strategy and programming; and strengthening storytelling and narrative work.

# Application Process

## 2026 Grantmaking Timeline

EHF will have two open grant cycles in 2026.

During Cycle 1 (January 2026–May 2026), EHF will give priority to proposals aligned with the following Impact Drivers: **Strengthening Comprehensive Care**, **Activating Community Voices**, and **Maximizing Connections to Health Coverage and Benefits**.

While we welcome proposals aligned with other Impact Drivers, they are unlikely to be considered in this cycle and may not be considered until a later date. Updates regarding EHF’s funding priorities for Cycle 2 (July 2026–January 2027) will be provided in Spring of 2026.

| Grant Cycle | LOI Open | LOI Due  | Application Due | Notification of Award |
|-------------|----------|----------|-----------------|-----------------------|
| → Cycle 1   | 01/05/26 | 01/16/26 | 03/06/26        | 05/28/26              |
| Cycle 2     | 06/23/26 | 07/10/26 | 09/04/26        | 12/18/26              |

## EHF Grants Portal: Fluxx

EHF uses the Fluxx online portal to manage our grantmaking process.

Visit <https://ehf.fluxx.io> to get started.

- **First-time users**

Under Create an Account Now: select Grants Registration and complete the eligibility requirements and register your organization information.

- **Returning users**

Enter your email and password and click the Next Button. If you do not remember your password, click on the forgot password link, enter your email address and click submit.

## Application Steps

1

### Step 1: Letter of Inquiry (LOI)

The first step in the process is submitting a brief LOI through the Fluxx portal. The LOI helps determine alignment with EHF’s Strategic Framework before inviting a full application. LOIs consist of:

- A working project title
- A short description of proposed work (150 words)
- Funding request

We strongly encourage organizations to discuss their LOI with their Program Officer prior to submission. If you do not yet have a Program Officer, contact: [applicationassistance@episcopalhealth.org](mailto:applicationassistance@episcopalhealth.org)

EHF will email applicants within four weeks of submission to inform applicants whether they are invited to complete a full application.

2

### Step 2: Full Application

If invited to move forward, applicants can access the full application in the Fluxx portal.

Similar to the LOI process, we recommend connecting with your Program Officer before submitting the full application. Program Officers are available to discuss ideas, respond to questions, and help facilitate alignment with EHF’s Strategic Framework.

After you submit your application, you will communicate with your Program Officer throughout the review process. After EHF’s Board of Directors reach a final decision, you will be notified by email regarding the decision for your request.

# Legal Compliance

All EHF grant-funded activities must comply with applicable federal and state non-discrimination laws.

Requirements include:

- Programs must be open to all eligible individuals, regardless of race, gender, religion, national origin, or other protected characteristics.
- Programs may address health disparities using race neutral metrics such as geography or socioeconomic status.

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## Frequently Asked Questions

Many of your questions can be answered here or at [episcopalhealth.org/grantmaking](https://episcopalhealth.org/grantmaking).

### How do I access Fluxx, EHF's grantmaking portal?

- To access Fluxx, go to [ehf.fluxx.io](https://ehf.fluxx.io). The Fluxx homepage includes important information, such as deadlines, submission guidance and more.
- For additional help with Fluxx, contact: [applicationassistance@episcopalhealth.org](mailto:applicationassistance@episcopalhealth.org).

### Who do I reach out to with technical or compliance-related questions?

- EHF's Grants Management Team can assist with technical issues, user access, contracts, and payments.
- EHF's Grants Management Team can be reached at [applicationassistance@episcopalhealth.org](mailto:applicationassistance@episcopalhealth.org).

### Who do I contact with programmatic questions?

- Reach out to your assigned Program Officer. Their contact information is listed in your application and invitation email.
- If a Program Officer has not yet been assigned, please reach out to [applicationassistance@episcopalhealth.org](mailto:applicationassistance@episcopalhealth.org).