

Looking for Money

Common Mistakes People Make in the Search for Funding

By Michelle Meadows

Closing the Gap, Looking for Money • April 1998

“On the hit TV show *ER*, it only took a couple of episodes for Nurse Hathaway to find funding for a free clinic. The approach went something like this: Figure out which one of your colleagues is secretly rich. Get him to set up a meeting with his rich grandmother. Get the grandmother to fall for your charm and winning personality. And voilà—a large sum of money arrives by messenger. In real life, the search for funding is more complicated.

A common mistake is beginning a search without a solid understanding of your funding needs. “People come in and say they’re looking for money, but then that’s all they know,” says Ramona Lucius, a supervisor at the Funding Information Center of the Beaumont Library in Texas. “They haven’t thought about what amounts they’re looking for, whether they need funds for a particular time period, what *exactly* they need the money for, or any other details.” But without these specifics, the funding search is on shaky ground.

Effective results come from researching funding prospects by subject, geographic area, and type of support, according to *The User-Friendly Guide to Funding Research and Resources* published by the Foundation Center. In workshops on how to find grants for health and human services, Lucius sets up fund searching scenarios and walks participants through the best approaches for obtaining information.

Another common mistake is underestimating the time it takes to identify funding prospects. “It’s typical for beginners to think that they can come in and throw a prospect list together in an hour or two,” says Lucius. “But you really need at least two days of research to find out which funders truly match your needs.”

In choosing organizations to approach, variety really can be the spice of life. “Some people don’t check out a funding source because they’ve never heard of it or because nobody from their organization ever thought about it,” says Steve Moore, a special assistant with the Office of Minority Health (OMH), U.S. Department of Health and Human Services. “But they might be surprised at how well these ‘unlikely sources’ could come through.”

A significant amount of funding for health and human service comes from government agencies, but corporations are giving too, a fact that may be lesser known. In 1996, Abbott Laboratories distributed more than 5,400 grants, and the largest portion went to health and welfare agencies. More than half of all grants given by Bell Atlantic in the second quarter of 1997 went to health and human services projects.

Companies that have no specific categories for health often have categories that relate to health. For example, the Ben & Jerry’s Ice Cream Company lists children, families, and disenfranchised groups as areas of interest. In approaching companies, keep in mind that face-to-face meetings are most effective. So even if you make an initial

inquiry by phone or letter, try to land a meeting so that you can get in and talk about your program.

In addition to learning about a company’s priority subject areas, it’s worth it to get a hold of a list of past grant recipients and information on the kind of proposals the company likes to see. In the case of Ben & Jerry’s, the foundation supports social change over social service, which means grant reviewers would look more favorably on a youth-led effort to train minority youth leaders than an afterschool program for minority youth.

When submitting proposals, carelessness tops the list of blunders, according to experts. The general consensus is that taking shortcuts gets you nowhere. Repackaging old information, submitting outdated material, sending in a proposal that wasn’t spell-checked, and failing to call an agency for clarification on directions all fall into this category. According to Georgia Buggs, a special assistant with OMH, “many people don’t take opportunities to get accessible information.” There are offices of sponsored programs and other comparable offices in agencies that will give input on proposals—input that is much more useful early on in the process, she said.

Such feedback can prevent grantseekers from missing the mark. “It’s important to read requests for proposals carefully so that you can understand what’s being requested,” Buggs said. “Sometimes, we give people a little information on a national health problem in an RFP and we’re asking them to tell us about how that problem affects their area. But they still might send in a proposal that isn’t tailored to their geographic area. And without the local problem statement, they can’t move to their goals and objectives.”

This is where a fresh set of eyes can help, says Howard Kelley, DDS, a public health analyst in OMH’s Division of Information and Education. “Let someone—preferably someone who hasn’t been involved in writing the proposal—read it. If that person has questions, reviewers are likely to have questions also,” he said. “You can’t assume that you’re being clear when you’re so close to the subject.”

Another common mistake is trying to squeeze your program to fit grant guidelines even when it’s a stretch. You’ll be more successful if you know your goals and then go after funders with that in mind. Also, resist any temptation you may have to claim that your approach is unique when it really isn’t.

Alex Repace, the research grants coordinator at the American Health Assistance Foundation, adds: “If you don’t follow instructions and leave gaps in your information, we do notice.” Repace notes that missing deadlines is also fairly common. “Deadlines can change from year to year, but some people don’t check and end up sending in proposals based on last year’s deadline,” said Repace. “That kind of mistake could have been prevented with a quick phone call.” ❖

