All fields are required unless otherwise noted.



# **Bell Let's Talk Diversity Fund Application**

As part of Bell's commitment to take a strong stance against racism, social injustice and the impacts on ethnocultural communities, the Bell Let's Talk Diversity Fund supports the mental health and well-being of members of Black, Indigenous and People of Colour (BIPOC) communities around Canada.

We applaud the work organizations are doing to support the BIPOC community. To support this work, the 2023 Bell Let's Talk Diversity Fund is now open and applications can be submitted until June 14. The Bell Let's Talk Diversity Fund supports organizations with projects aiming to reduce the stigma around mental illness and/or increase access to culturally informed mental health and well-being support for BIPOC communities in Canada. To learn more about the projects we have funded to date, please click <u>here</u>.

The 2023 Bell Let's Talk Diversity Fund Application is designed to understand your organization, the project for which you are seeking funding, the impact the project will have on the mental health and well-being of the BIPOC community and its cultural relevance. As a reminder, the Bell Let's Talk Diversity Fund eligibility and criteria are available <u>here</u>.

To help guide us, we have engaged a broad circle of advisors, including mental health experts and people with lived experience from within these communities who will assist us in the Fund review process as well as providing advice on directions and priorities, and consultation on the development and future evolution of the Fund.

Organizations will be informed of the status of their applications by November 2023 and the first payment will be disbursed in early 2024.

If you need further assistance, please send an email to <u>diversitymentalhealth@bell.ca</u>.

This form is equipped with an auto-save feature. With the unique link that is provided, your application form can be started, accessed, worked on, and submitted from any computer. Please keep a record of this unique link in a safe place to return to your in-progress form at a later date.

After submitting the application, you can review and save your application simply by saving the URL or save as a PDF by clicking Actions -> Print.

# Overview

You can move forwards and backwards in the application before completing all questions if needed by clicking the blue lines above.

Additional information is provided to help understand some of the questions. Please look for the **?** next to some of the questions in this application for more information.

# Where is your organization registered or located?

- o Canada
- Outside of Canada
- The Bell Let's Talk Diversity Fund only supports Canadian registered charities, non-profit organizations, and community organizations.

# Is this a revised submission from a previous year?

- o Yes
- **No**

# (If "yes" is selected)

Please confirm the year of the original submission.

- o **2022**
- o **2021**
- o **2020**

# Please confirm that you have submitted the same project for the Bell Let's Talk Diversity Fund for the year specified above. Include the name of the project and a brief description (700 characters maximum).

# Type of request

# Support for a mental health project impacting BIPOC communities

The project for which you are requesting our funding has a short-term, long-term or ongoing objective to reduce the stigma around mental illness and/or provide support for the mental health and well-being of BIPOC communities.

# Support for a research based project

If your organization is requesting our support for a research based project, please note that the Bell Let's Talk mental health initiative only considers research projects on an invitation basis.

# Sponsorship of an event

If your organization is requesting our support for an event, such as a golf tournament, a dinner or gala, or any other type of community event, please note that the Bell Let's Talk Diversity Fund does NOT support these kinds of initiatives.

# Support for capital campaign

If your organization is requesting a donation to fund a capital program such as a new building or piece of major equipment, please note that the Bell Let's Talk Diversity Fund does NOT support these kinds of requests.

# What type of request are you making?

- o Support for a mental health project impacting BIPOC communities
- Support for a research based project
- o Sponsorship of an event
- Support for capital campaign
- ▲ The Bell Let's Talk Diversity Fund only supports projects that are addressing the stigma around mental illness and supporting the mental health and/or well-being of BIPOC communities.

### Which option below best describes your project request? Not sure? Click to expand

Strengthen Teams: Build capacity (skills & knowledge), increase resiliency of staff, volunteers, front line service providers etc.

**Enhance Service Offering:** Create a new service, adapt content to different cultures, update or improve online resources, program improvements or enhancements

**Process, Performance & Evaluation:** Evaluation, operational enhancements, organizational performance improvements

**Raise Awareness:** Advocacy, public education, raising organizational profile, fundraising events, promote services, address stigma

**Support Existing Programming:** Funding for existing programs, ideas to deepen impact with existing clients, serve more clients, program expansion to new regions

- Strengthening teams
- o Enhancing service offerings
- o Processes, performance, and evaluation
- o Raising awareness
- o Supporting existing programs

# (If "Strengthening teams" is selected)

- A. Please choose the category that best captures the goal of the project.
- o Enhance skillsets
- o Increase staff resiliency
- o Other:

# B. Please choose the activity that best describes the activity to be funded.

- o Build staff capacity
- o Run training programs
- o Invest in staff wellness
- o Other:

# (If "Enhancing service offerings" is selected)

- A. Please choose the category that best captures the goal of the project.
- o Establish new service
- Update online resources
- $\circ$  Other:

# B. Please choose the activity that best describes the activity to be funded.

- Adopt new technologies
- Program creation or adaptation
- Respond to service gaps
- Staff and volunteer resources
- Fund innovation
- Purchase supplies and site renovation
- Create/update public resource
- o Other:

# (If "Processes, performance, and evaluation" is selected)

- A. Please choose the category that best captures the goal of the project.
- o Develop and uphold standards
- Process and performance
- o Evaluation
- o Other:

# B. Please choose the activity that best describes the activity to be funded.

- Develop standards of care
- Support research and evaluation
- o Increase service effectiveness
- Staff and volunteer resources
- o Other:

# (If "Raise awareness" is selected)

- A. Please choose the category that best describes the goal of the project
- o Anti-sigma / Change perceptions
- o Increase awareness of services
- o Raise organizational profile
- o Achieve legislative change
- Other: (add text box)

# B. Please choose the activity that best describes the activity to be funded.

- Fund awareness campaign
- o Public education
- o Front line services education
- o Create/update public resource
- o Raise awareness of services
- o Fundraising support
- o Other:

# (If "Support existing services" is selected)

- A. Please choose the category that best captures the goal of the project.
- o Deepen client impact
- o Expand to new regions
- Ongoing program funding
- Serve more clients
- o Other:

# B. Please choose the activity that best describes the activity to be funded.

- Increase service effectiveness
- Program creation or adaptation
- Respond to service gaps
- o Staff and volunteer resources
- Increase access to existing services
- Ensure access to existing services
- Equipment, supplies and site renovation
- o Establish new facility
- o Other:

# Select the community (ies) your project will support (% needs to total 100)

<u>Communities</u>	Percentage	Applicable
Black	0%	Yes
		No
Indigenous	0%	Yes
		No
People of Colour	0%	Yes
		No
Other	0%	Yes
		No
Total percentage (must equal 100%) ▲ Percentages must total 100%	0%	

# Select the age group(s) your project will support (% needs to total 100)

Age	Percentage	<u>Applicable</u>
0-12	0%	Yes
		No
13-17	0%	Yes
		No
18-25	0%	Yes
10-20		No
26-64	0%	Yes
20-04		No
65+	0%	Yes
		No
Total percentage (must equal 100%) ▲ Percentages must total 100%	0%	

# How is the project delivered?

- o Virtual
- o In-Person
- $\circ$  Hybrid

### Where does your project have an impact in Canada?

- o Canada
- o International
- The Bell Let's Talk Diversity Fund does not provide grants outside of Canada. You will not be able to submit a request for an international project.

#### Where in Canada?

- Nationally (across all of Canada)
- o Across multiple provinces
- Within a province or territory

*(If "Across multiple provinces" or "within a province or territory" is selected)* **Please select all of the provinces and territories that apply.** 

#### Is there a specific city or community where this project will have its primary impact?

- o Yes
- o No

#### Please specify the city or community.

#### In what capacity are you submitting this request?

We need to know your role with regard to the beneficiary organization (i.e., the organization that will receive the funding).

The Bell Let's Talk Diversity Fund only accepts requests submitted by employees or volunteers of the beneficiary organization.

The Bell Let's Talk Diversity Fund does not support individuals seeking funds for themselves or for other individuals or families. Nor do we provide grants to or through third-party / contract fundraisers. Only organizations that meet our criteria for funding are eligible to apply.

- o I work / volunteer for the organization that will receive the support
- o I am a contract fundraiser
- o I am an individual seeking funds for myself or another individual / family
- As stated in our <u>Funding Criteria</u>, please note that the Bell Let's Talk Diversity Fund does not consider requests from individuals, families, or contract fundraisers. You will not be able to submit a request.

#### Have you spoken to anyone at Bell about this application?

- o Yes
- o No

(if "yes" is selected)

Please provide the name of the Bell contact you spoke with and any relevant details of the discussion (700 characters maximum).

# Organization Information

# Which of the following best describes your organization?

- o Registered charity
- Non-profit organization
- Community organization
- o Other

#### Enter the name of the beneficiary organization or registration number and select from the list provided.

Should this request be approved, is this the name to which payment should be directed?

- o Yes
- **No**

# (If "no" is selected)

If there is a different name, branch or department to which payment should be directed, please enter it here.

Is the address displayed above the correct address for this request?

- o Yes
- o No

*(If "no" is selected)* Organization Details Address

Address Line 2 (optional)

City

Province/State (optional)

Postal/ZIP code (optional)

Country

### Organization email address (general inbox)

Organization web site address (required)

#### Facebook page (if available)

e.g. http://www.facebook.com/username/

#### Twitter page (if available)

e.g. @username

#### Instagram page (if available)

e.g. @username

#### LinkedIn page (if available)

e.g. @username

#### Are you a mental health organization?

A mental health organization's mission is to educate the public, break down barriers and provide mental health services and support. Only those organizations whose primary focus is offering mental health services and supports should select "yes".

o Yes

• **No** 

Please provide a brief overview of your organization (1,200 character maximum).

#### Please provide the number of years the organization has been in operation.

#### Is the organization led by an individual from the BIPOC community it serves (e.g., Executive Director)?

 $\circ$  Yes

• **No** 

Is the organization governed or managed by a board of directors, council or committee that is 50% or more representative of the BIPOC community the organization serves?

- o Yes
- **No**

#### Please identify which communities are represented on the board or committee (600 character maximum).

#### Is your organization a political party or an organization that advocates a particular political agenda?

- o Yes
- **No**
- Please note the Bell Let's Talk Diversity Fund does not fund political organizations.

#### Has your organization previously received funding from Bell?

- o Yes
- o **No**
- (If "yes" is selected)

# Please provide details for any grants or financial support you have received from Bell and/or Bell Let's Talk in the past 11 years.

Project name or	<b>Description</b>	<u>Amount</u>	Program	<u>Year</u>	
purpose					
+ Add another past project					

# **Contact Information**

Are you the primary contact person for this request?

o Yes

• **No** 

Please provide your details for this request.

First name

### Last name

Title

Email

# Phone number

(\_\_\_\_) \_\_\_-

# **Extension (optional)**

\_\_\_\_

# Mobile (optional)

\_\_\_) \_\_\_-

# Extension (optional)

# Request

# What is the name of the project you are seeking funding for?

### Is this a new (i.e. start-up) project or an ongoing one?

- o New
- Ongoing

# What is the duration of the project?

- o 1 year
- o 2 years
- o 3 years
- o 4 years
- o 5 years

Please note that preference will be given to projects with a 2-5 year time period.

### Please select the target start date

yyyy-mm-dd

If approved, the first payment will be disbursed in early 2024.

#### If applicable, please select the target completion date

yyyy-mm-dd

# How much funding are you requesting?

The request should be between \$50,000 - \$100,000. The Bell Let's Talk Diversity Fund may provide a grant amount for less than requested; when this happens, the grantee must submit a revised budget within the amount approved. Payments will be made in yearly installments.

#### What is the total budget for the overall project?

#### Is this project sustainable beyond Bell's funding?

- o Yes
- o No

Please tell us about your plans to ensure the services can continue after Bell's funding (bring in additional funding, training of the team, etc.) (700 characters maximum).

# Please provide the budget line items for this funding project/initiative (i.e. administration, salaries, program materials, travel, etc.)

<u>Cost</u>

**Description** 

+ Add another

### Please specify the exact budget expense(s) the grant request is for (as outlined in the question above)

# Details

### What is the primary objective of this project? (Select all that apply)

- Care and access
- o Anti-stigma

Please describe your project (750 character maximum)

Tell us about your plans and how this project will have an impact on improving access to mental health care, supports and services and/or reducing stigma in the BIPOC community (800 character maximum)

# Please explain how this project is based on an evidence and a culturally-informed approach (700 character maximum).

#### **Evidence-based**

Demonstrating evidence-based entails making decisions about how to provide or support mental health care by integrating the best available evidence with practitioner expertise and other resources, and with the characteristics, state, needs, values and preferences of those who will be affected. Evidence is research findings derived from the systematic collection of data through observation and experiment and the formulation of questions and testing of hypotheses. Its goal is to eliminate unsound or excessively risky practices in favor of those that have better outcomes.

# **Culturally-informed**

Culturally-informed refers to the acknowledgment, respect, and integration of patients' and families' cultural values, beliefs, and practices.

Please indicate the anticipated number of clients, individuals and/or staff this project will help or impact (direct beneficiaries).

Existing number of clients (current, existing clients served by organization)

Outcomes and Measurable Indicators of Success

Outcome

The desired change, final result of your project or how lives will improve as a result of the project.

*Example:* An organization applies for funding for a project that provides art therapy for people who have experienced mental health issues in combination with peer support counselling. The art therapy project to be implemented is evidence-informed and is used by other mental health organizations in other regions of the country.

The predicted outcome might include:

The clients' self worth, confidence and social connectedness will improve and positively influence their quality of life. The peer support counselling facilitates access to other local mental health supports.

# **Measurable indicators**

A metric or verifiable factor that demonstrates the desired outcome is being accomplished. These should be measurable (e.g., self assessment; pre and post surveys; percentage change; increase or decrease in absolute numbers; the number of individuals supported by a program; etc.).

# Example:

For the outcome listed in the example above, indicators that show you have achieved them could include: 275 clients have participated in art therapy classes twice per week. Through the peer support workers, 137 clients received guidance and information on coping tools and resources throughout the community and have received referrals to a variety of social service agencies and case-workers for specialized individual needs.

Deliverables would include providing the opportunity to participate in 2 classes per week that combine art therapy with peer support counselling and skill building.

The request is aligned with Bell's program because the organization is applying to replicate a project that is evidence-informed and helps people with mental health issues improve the quality of their lives and obtain access to local mental health supports.

# What are the predicted outcomes for this project? What measurable indicator(s) will determine that you have been successful in achieving these outcomes?

Predicated outcome(s)	Measurable indicator(s)	
+ Add another		

# Grant recipients will be expected to complete a post-project survey one year after receiving the funding. Do you agree to complete your post-project survey on-time?

o Yes

o No

Annual post-project surveys that provide information on the project achievements against the stated objectives is a requirement for being eligible for funding.

# Almost Done!

First, here's some information about our grants approval process.

# What's next?

After you submit this form, we'll review your grant request. We consider each request carefully, so we kindly ask for your patience as we go over the details.

We'll notify you by email that we have received your request. After that, we'll let you know if it's been approved or declined by November 2023.

# Agreement

By submitting this application, I confirm that:

(a) I am submitting this request with the full knowledge and approval of the organization's Board of Directors and / or Executive Director.

(b) I have the authority to submit this request and agree to the conditions described below.

(c) All information contained herein is true and accurate to the best of my knowledge.

(d) My organization (i) has obtained all necessary intellectual property rights and third party consents required to conduct its operations and undertake the projects the Bell funding is applied to, and (ii) will indemnify and save Bell harmless from any third party claims against Bell in connection with the project.

Should Bell agree to provide support for the project proposed in this application, I agree that:

(a) My organization will provide additional information such as references (including names of other funders and their respective contact information) to Bell, if required;

(b) Information about this project may be highlighted in some of Bell's corporate communication vehicles;

(c) My organization will complete a project evaluation survey within the timelines set by Bell;

(d) My organization will not be eligible to apply for another Bell Let's Talk grant for 12 months from the date of the grant

(e) My organization will use the funds granted by Bell to support the project described in this application.(f) The Bell Let's Talk Diversity Fund may provide a grant amount for less than that requested; when this happens, my organization will submit a revised budget within the amount approved.

(g) All organizations and programs supported by this funding are required to have appropriate and relevant safeguarding processes, including responsible hiring practices and when possible background and reference checks on staff and volunteers in place to ensure the safety and security of all participants.(h) Bell, in its sole discretion, may at any time, with notice to my organization, withdraw the funding grant and discontinue any further funding or donations.

(i) I will provide Bell with approval to use our organization logo for the purposes of internal and external promotions and media relations.

(j) My organization will notify Bell if we are unable to complete the project as submitted no later than June 2024.

□ I have read the Agreement above and agree to all the terms therein.