



**HEALTHY PEOPLE 2020 GRANT PROGRAM FOR CHAPTERS
REQUEST FOR PROPOSALS
EMPOWERING FAMILIES, THE MEDIA, OR COMMUNITIES TO ADDRESS THE
MENTAL HEALTH CRISIS OF CHILDREN AND YOUTH**

Healthy People 2020 presents a comprehensive, nationwide health promotion and disease prevention agenda. It is designed to serve as a road map for improving the health of all people in the United States during the second decade of the 21st century. Healthy People 2020 represents the third time that the US Department of Health and Human Services (HHS) has developed 10-year health objectives for the nation.

The Healthy People 2020 Grant Program for Chapters provides 5 chapters with grants of \$20,000 each to develop innovative programs to accomplish pediatric objectives as defined by HHS.

PROGRAM GOALS

The overall goal of the Healthy People 2020 Grant Program for Chapters is to work with a coalition of health care professionals as well as public health, scientific, and parent organizations to promote programs related to empowering families, the media, or communities to address the mental health crisis of children and youth. The specific Healthy People objectives to be addressed through this grant opportunity are within the following focus areas: AH-3, AH-9, AH-10, AH-11, ECBP-2.3, ECBP-2.4, ECBP-7.4, ECBP-10.2, ECBP-10.3, EMC-1, EMC-2, IVP-41, IVP-42, MICH-34, MHMD-2, MHMD-3, MHMD-4.1, MHMD-5, MHMD-6, MHMD-7, MHMD-10, MHMD-11.2. Please note that this program is sponsored by the *AAP Friends of Children Fund*.

ELIGIBILITY AND SELECTION CRITERIA

Chapters cannot apply for a grant if their program was funded the previous year (DE, IN, KY, NH, and RI). All proposals are reviewed by the Healthy People 2020 Chapter Grant Review Committee, which is comprised of members of the District Vice Chairpersons Committee. Proposed programs must demonstrate the following prerequisites:

- Specifically address 1 or 2 objectives within the Healthy People 2020 objectives listed above and below.
- Include a letter of support from the chapter (**only one application per chapter will be considered**).
- Include a description on how the program is integrated into chapter activities and strategic plan.
- Include an evaluation component to promote project sustainability.
- Include a concrete timeline for goals to be accomplished.

Priority will be given to proposals that

- Include letters of support from community collaborative partners.
- Demonstrate innovative and creative approaches.
- Focuses on populations with health disparities who are adversely affected by obstacles that impede their ability to maintain or improve their own health.
- Demonstrate potential for continuation of the program beyond funding period including potential sources of future funding.

- Show collaboration with other organizations to promote the benefits of empowering families, the media, or communities to address the mental health crisis of children and youth.
- Exhibit family/parent/youth engagement

EXAMPLES OF PROGRAM ACTIVITIES

Once you have identified a program that will affect positive change for **empowering families, the media, or communities to address the mental health crisis of children and youth**, you should begin to work within your community to locate resources to help you implement your program. Below are descriptions of each Healthy People 2020 objectives. **Chapters only need to select 1-2 objectives within the Healthy People 2020 objectives for the application:**

FOCUS AREA:	Adolescent Health
AH-3	Increase the proportion of adolescents who are connected to a parent or other positive adult caregiver
AH-9	Increase the proportion of middle and high schools that prohibit harassment based on a student’s sexual orientation or gender identity
AH-10	Reduce the proportion of public schools with a serious violent incident
AH-11	Reduce adolescent and young adult perpetration of, and victimization by, crimes
FOCUS AREA:	Educational and Community-Based Programs
ECBP-2.3	Increase the proportion of elementary, middle, and senior high schools that provide comprehensive school health education to prevent health problems in violence
ECBP-2.4	Increase the proportion of elementary, middle, and senior high schools that provide comprehensive school health education to prevent health problems in suicide
ECBP-7.4	Increase the proportion of college and university students who receive information from their institution on suicide
ECBP-10.2	Increase the number of community-based organizations (including local health departments, Tribal health services, nongovernmental organizations, and State agencies) providing population-based primary prevention services violence
ECBP-10.3	Increase the number of community-based organizations (including local health departments, Tribal health services, nongovernmental organizations, and State agencies) providing population-based primary prevention services mental illness
FOCUS AREA:	Early and Middle Childhood
EMC-1	(Developmental) Increase the proportion of children who are ready for school in all five domains of healthy development: physical development, social-emotional development, approaches to learning, language, and cognitive development
EMC-2.4	Increase the proportion of parents who receive information from their doctors or other health care professionals when they have a concern about their children’s learning, development, or behavior

FOCUS AREA:	Injury and Violence Prevention
IVP-41	Reduce nonfatal intentional self-harm injuries
IVP-42	Reduce children’s exposure to violence
FOCUS AREA:	Maternal, Infant, and Child Health
MICH-34	(Developmental) Decrease the proportion of women delivering a live birth who experience postpartum depressive symptoms
FOCUS AREA:	Mental Health and Mental Disorders
MHMD-2	Reduce suicide attempts by adolescents
MHMD-3	Reduce the proportion of adolescents who engage in disordered eating behaviors in an attempt to control their weight
MHMD-4.1	Reduce the proportion of adolescents aged 12 to 17 years who experience major depressive episodes (MDEs)
MHMD-5	Increase the proportion of primary care facilities that provide mental health treatment onsite or by paid referral
MHMD-6	Increase the proportion of children with mental health problems who receive treatment
MHMD-7	Increase the proportion of juvenile residential facilities that screen admissions for mental health problems
MHMD-10	Increase the proportion of persons with co-occurring substance abuse and mental disorders who receive treatment for both disorders
MHMD-11.2	Increase the proportion of primary care physician office visits where youth aged 12 to 18 years are screened for depression

Following are **examples** of programs that chapters may wish to consider:

- Quality Improvement project that works to increase screening for depression in adolescents in practice settings.
- Collaborate with state National Alliance on Mental Illness (NAMI) affiliate to organize a project to support local children/adolescents and their families who suffer from mental illness.
- Work with schools, the media, and community organizations to educate patients and parents about signs of depression
- Physicians need to play a key role in mental health screening and follow-up. Using care coordinators can be an effective tool to help these patients.
- Evidence-based home visiting models as an extension of the medical home to strengthen families and assess needs and identify resources.

USE OF GRANT FUNDS

Grant funds must be used for implementation of new programs. Operational costs of existing programs will not be funded. Each budget line item must include an expense justification and clearly support the project objectives outlined in the proposal.

ALLOWABLE EXPENSES

- Community forums
- Project staff salary

- Consultant fees
- Office expenses/supplies
- Pilot, research, and implementation projects*
- Other direct expenses for implementation previously awarded grants purposes

UNALLOWABLE EXPENSES

- Construction
- Capital equipment and/or expenses (i.e., rent, office equipment, computer software)
- Indirect costs/overhead
- Existing program activities
- Supplemental funding to previously awarded grants

*** Project proposals that require institutional review board (IRB), may only be considered if the approval process will not extend the project beyond the 18 month grant cycle.**

SAMPLE BUDGET

ACTIVITY	DESCRIPTION/FORMULA	\$ AMOUNT
2 part-time staff	\$20/h x 300 h x 2	\$ 12,000
Teleconference calls	\$50/call x 5 calls	\$ 250
Staff local travel	700 miles @ \$0.50/mile	\$ 350
Coalition member meetings	8 meetings @ \$225/meeting	\$ 1,800
Bilingual consultant fee	\$50/h x 15 h	\$ 750
Consultant fee to design promotional pieces	\$50/h x 20 h	\$ 1,000
Production of bilingual promotional materials	800 booklets @ \$3 each	\$ 2,400
Printing of evaluation follow-up survey	200 posters @ \$1 each	\$ 200
Office supplies	600 pages x \$0.06/page	\$ 36
In-kind services from the chapter (if applicable)		\$ 200
TOTAL		\$ 20,000

REPORTING PROCEDURES

Funds will be distributed to the chapter at the onset of the approved program. All funds must be spent within 18 months of initial funding. A progress report will be due after 6 months, and a 12-month written report addressing program evaluation is required. Additionally, a final report is due at the end of the funding period (within 24 months). The final report must include all of the following:

- Financial documentation on how funds were spent.
- Copy of evaluation instrument.

- Summary of data indicating the effect on the Healthy People 2020 objectives related to empowering families, the media, or communities to address the mental health crisis of children and youth.
- Analysis of outcome measurements, including number of people served (ie, pediatricians, families, youth, parents).
- Plans for continuation of program (if applicable).

The information provided in your final report will be evaluated and shared with AAP staff and chapter leaders for possible replication and/or future programs. **Templates will be provided and will be required for completion of the reports.**

APPLICATION PROCEDURES

An application for funding must be submitted by the pediatrician who is initiating and coordinating the proposed Healthy People 2020 grant, **and the application must be reviewed by the chapter president.** A secondary contact (who may be a pediatrician or other child advocate who is coordinating the administrative work) also may be named. **Attachments are limited to 6 single-sided pages and must include letters of support.**

Applications must be sent electronically and are due in the national office by 11:59 pm, Friday, March 30, 2018.

Preliminary notification of award recipients will be made no later than May 31, 2018. The chapter, as well as the primary contact pediatrician, will be notified of the award in writing.

INQUIRIES AND TECHNICAL ASSISTANCE

The AAP Division of Chapter and District Relations is the administrator of the Healthy People 2020 Grant Program for Chapters. Please direct any questions to Hope Hurley at hhurley@aap.org. **You may wish to have an additional individual proofread the application and share feedback with you regarding the content and budget prior to submission.** Applicants are also encouraged to contact their District Vice Chairperson for guidance.

Completed applications must be sent electronically to:

Hope Hurley, Manager, District Relations
E-mail: hhurley@aap.org

The Healthy People 2020 Grant Program for Chapters is sponsored by the AAP Friends of Children Fund.



A charitable fund of the
 American Academy of Pediatrics