BACKGROUND
Over the past four decades, obesity rates have soared among all age groups. Today, nearly one-third of children and adolescents in the United States are either overweight or obese.\(^1\) Obese and overweight children and adolescents are more likely to become obese adults,\(^2,3\) placing them at increased risk for type 2 diabetes, heart disease, stroke, hypertension and certain forms of cancer.\(^4\)

Together, the American Heart Association (AHA) and the Robert Wood Johnson Foundation (RWJF) are working to reverse the childhood obesity epidemic in the United States by 2015 and to decrease racial, ethnic and income disparities in prevalence. Through our Voices for Healthy Kids’ Strategic Campaign Fund, the AHA is targeting the following six state, local and tribal advocacy priorities:
- Reduce access to unhealthy competitive foods in schools
- Reduce unhealthy beverage consumption using pricing (dis)incentives
- Increase incentives and demand for strengthening industry self-regulation and government regulation of food marketing to kids
- Increase the number of healthy food retail outlets receiving funding from food financing initiatives in underserved communities
- Increase the use of joint use agreements and street-scale improvement in underserved communities
- Improve physical activity standards in out-of-school/out-of-class time in underserved communities

THE PROGRAM
The Voices for Healthy Kids’ Strategic Campaign Fund is awarding grants with a mix of lobbying and non-lobbying resources to support strategic issue advocacy campaigns focused on fighting childhood obesity through state, local, and tribal public policy campaigns aligned with the Voices for Healthy Kids policy priorities outlined above. Applications must be specific to an individual campaign for public policy change in one state, local or tribal geographic location. We are not awarding regional grants, multi-location funding, or support for technical assistance-based support strategies. Specifically, grantee proposals must be:
- **Impactful:** The specific binding policy being pursued must actually deliver population impact
- **Viable and Promising:** The application must be engaged in a viable and promising childhood obesity public policy effort

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\(^{[2]}\) Ibid.

\(^{[3]}\) Ibid.

\(^{[4]}\) Ibid.
• *Supported by Match*: The applicant will commit a small amount of its own funds and resources that will provide critical ownership, additional advocacy operations, and increase the potential for sustainability
• *Compliant*: Grantees must follow compliance requirements mandated by the AHA

Priority will be given to campaigns reaching the highest need populations and/or those with the greatest potential to impact wider movement-building impact and momentum.

**TOTAL AWARDS**
Voices for Healthy Kids is allocating awards up to $90,000 per award for a period of up to one year with potential renewal. In addition to this base level of funding, grantees will be supported by a robust technical assistance initiative and also have priority access to supplemental additional potential resources (including Rapid Response). The awards mentioned above are for non-lobbying activities only.

Additional award funds are available for lobbying activities and will be determined based on the proposal submitted by each applicant. The need for lobbying funds is evaluated separately from the non-lobbying funding requested within this application.

**ELIGIBILITY CRITERIA**
Applicants must be nonprofit organizations that are tax-exempt under Section 501(c)(3) of the Internal Revenue Code and are not private foundation or non-functionally integrated Type III supporting organizations (no government agencies). AHA will require IRS documentation of 501(c)(3) status through the application process.

Specific core competencies required are:
• Experience in working with diverse populations, especially underserved communities that are at greatest risk for obesity, including lower-income communities and communities of color
• Strong leadership, organization, fiscal and project management skills
• An independent interest in reversing the epidemic of childhood obesity at the state, local or tribal level, including the ability to sustain work beyond the period of this grant
• Capable and willing to pursue lobbying activities or mobilize close partner organizations bringing this capability to the project.

**BUDGET**
A budget must be submitted with each application and should be consistent with the type of funding requested (Open RFA or Rapid Response). When completing the budget, please keep in mind that this application is for non-lobbying activities only and up to $90,000 (under AHA Non-Lobbying Support in the excel document). As mentioned above, award funds are available for lobbying activities and will be determined separately from this application. Therefore, it is important to demonstrate in the budget and budget narrative all funding needs - non-lobbying, the coalition’s match and lobbying dollars.
Grants will not be awarded for curricula development or implementation, equipment, operations of physical activity, nutrition or similar participant-based programs, capital expenditures, academic research or other non-advocacy purposes.

**MONITORING**
AHA monitors grantees’ efforts and careful stewardship of grant funds to assure accountability. Grantees will be required to submit periodic narrative, financial, compliance and outcomes reports.

**APPLICATION PROCESS**
An application is included as an attachment.

Applications will be evaluated by an independent review committee and announcement of awards will be made approximately 6-8 weeks after submission.

Organizations wishing to apply should submit their completed applications and required attachments to: [Voicesforhealthykids@heart.org](mailto:Voicesforhealthykids@heart.org)

For Questions regarding the application, please contact [Jill.Ceitlin@heart.org](mailto:Jill.Ceitlin@heart.org)

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<thead>
<tr>
<th>Open RFA Budget Requirements</th>
<th>Rapid Response Budget Requirements</th>
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<tbody>
<tr>
<td>• One Campaign Coordinator position</td>
<td>• Funding cannot be used for staff salaries</td>
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<td>• Legal contingency no less than 5% of the operating budget to support the cost of outside counsel determined by AHA (5% calculation should be made on the total direct cost of activities before adding in indirect costs)</td>
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