The Johns Hopkins Global Center for Childhood Obesity

Where Systems Science Meets Public Health

RAPID RESPONSE PILOT STUDIES
Request for Applications (RFA)

Release date:	**February 15, 2012**
Proposals Due:	**March 30, 2012, 5:00 PM (Eastern Standard Time)**
Funding Available:	**Up to 3 projects per round, each at $20,000 to $30,000 total cost; (2 rounds each year, semi-annually)**
Informational Teleconference:	**February 28, 2012, 9:00 A.M. (Eastern Standard Time)**
Earliest Project Start Date:	**April 16, 2012**

A. BACKGROUND

The Johns Hopkins Global Center for Childhood Obesity (JHGCCO) conducts research, training and outreach in systems science approaches to advance understanding of the causes of childhood obesity world-wide, and find effective interventions to combat epidemic childhood obesity and non-communicable diseases. Systems science approaches are needed to understand how influences on eating behavior, physical activity, and body weight across the spectrum from "cell to society" interact to cause or perpetuate increasing rates of childhood obesity. Johns Hopkins has created this new center with funding from a National Institutes of Health (NIH) Center grant (see http://grants.nih.gov/grants/guide/rfa-files/RFA-HD-10-001.html) plus additional institutional resources.

The JHGCCO is implementing four complementary research projects that address etiologic and intervention questions pertinent to its mission, as well as mechanisms to support relevant research, training, and pilot studies. The global focus will foster cross learning across diverse communities and settings.

One of the Center's key goals is to accelerate the identification of novel, systems-oriented environmental change and policy approaches to address the childhood obesity epidemic. This RFA, therefore, solicits applications for pilot studies through a Rapid Response funding mechanism that will only support opportune pilot and feasibility projects that might not be fundable via the regular NIH review cycles.

Note: there will be future RFA releases, planned semi-annually, as well as a provision for applications during the interim between RFAs. Information will be provided on the JHGCCO website at http://www.jhgcco.org/

B. PURPOSE

This RFA provides funds for researchers to collect time-sensitive data for impending environmental or policy changes. Pilot projects should use a systems science framework, but need not use system science methods. The JHGCCO seeks to jumpstart systems-oriented childhood obesity research in a rapidly-changing physical or policy environment by supporting opportune pilot and feasibility projects with timelines that would not allow funding through the regular NIH review cycles. Support from this RFA will enable researchers to more successfully compete for additional funding at the NIH or elsewhere to collect follow-up data and complete the evaluation of policy and/or environmental changes.

Studies funded through this program will contribute to assessment of the effects or potential effects of existing or impending policy, system, and/or environmental changes— (e.g., schools, homes, food and dining outlets, health care settings, community-based organizations)—on children's diet, physical activity, energy balance and weight status.

C. CRITERIA FOR RESPONSES TO THE RFA

This RFA is an open call for time-sensitive projects germane to the process or outcomes of existing or impending environmental and policy evaluations and/or changes ("natural experiments"). In general, we are interested in supporting novel, rigorous projects that utilize systems science concepts and framework, but not necessarily system science models or analyses, to understand the environmental mechanisms driving childhood obesity, and can lead to the development or confirmation of effective interventions to prevent or reduce childhood obesity.

C. 1. Time sensitivity

Only projects for which the applicants can demonstrate why:

- ✓ The project would not be timely if funded through a regular NIH review cycle (any funding round)
- ✓ It is critical or advantageous to begin the research project as early as April 2012 (this funding round)
- ✓ Data generated from this funding will increase the chance of obtaining additional funding for a complete evaluation of the policy and/or environmental change under study.

C.2 Systems Science

Pilot projects should use a systems science framework, but need not use system science methods.

C.3. Relevance

Only projects for which the results will have direct relevance to understanding one of the following:

- ✓ what policies or environmental changes are worth attempting for preventing or reducing childhood obesity
- ✓ effectiveness of the policies or environmental changes that have been undertaken
- ✓ what is needed to implement a promising policy or environmental change

Some examples of potential topics of interest are:

- Effects of recent or impending changes to children's food environments, including schools, and food venues
- Effects of recent or impending changes to children's physical activity environment, including schools, community recreation centers, city parks, and sports venues
- Linking recent environmental and policy changes to changes in childhood obesity-relevant behaviors.

Selected definitions for clarification of the scope of this RFA are in the Appendix.

More information is also provided at the JHGCCO website, and in the original NIH RFA (http://grants.nih.gov/grants/guide/rfa-files/RFA-HD-10-001.html).

C.4. JHGCCO collaboration requirements

To benefit most from the Center's support, eligibility for these awards also requires a plan to collaborate with a JHGCCO-affiliated investigator. The details of the collaboration, including any associated limited budgetary support, will be mutually agreed upon between the PI and the collaborator(s). The Center collaborator will assist the funded pilot project team in maximizing their benefit from the Center's support and resources. A list of the potential JHGCCO collaborators is available on the Center website. Potential applicants may contact these investigators directly, or request facilitation of contact from the Director of the JHGCCO Rapid Response Pilot Core (RRPC), Dr. Lawrence Cheskin (lcheskin@jhsph.edu).

C.5. Who can apply

Proposals are welcomed from investigators with diverse backgrounds and at varying career levels worldwide. Investigators must be affiliated with a university, agency, or research center that meets the same eligibility criteria that apply to NIH funding. See http://grants.nih.gov/grants/guide/rfa-files/RFA-HD-10-001.html. Junior and minority investigators are strongly encouraged to apply. World-wide researchers are all eligible, and the Center encourages investigators in non-US based institutions to apply.

D. FUNDING AVAILABLE

The JHGCCO will dedicate $100,000 each year over the next five years to fund 3-5 pilot projects in the range of $20,000 to $30,000 each in total costs, depending on the nature of the proposal. Up to 3 pilot projects will be funded in this round.

If the PI is a faculty member of Johns Hopkins Bloomberg School of Public Health, 1:1 co-funding from the School will be provided. Indirect costs up to 10% of the direct cost will be allowed for the primary funding institution, but will not increase the total funding provided. Applications which can benefit from their own institution's co-funding are encouraged.

E. AWARD PERIOD

The maximum duration of a pilot project that does not entail primary data collection is limited to 12 months; if primary data are to be collected, up to 24 months project duration is possible. The earliest project start date is April 16, 2012.

F. HOW TO APPLY

F.1. Deadline and submission mechanism

Applications are due at 5:00 PM, EDT (US), Friday, March 30, 2012.

A PDF or Word file of the application, in English, should be sent electronically to Dr. Lawrence Cheskin, RRPC Director (lcheskin@jhsph.edu). Please put "RRPC Pilot Project Submission" in the subject line of the email message. Applicants will receive e-mail confirmation by April 3, 2012. Email Li Chen (lchen95@jhsph.edu) to enquire if receipt is not confirmed by this time.

F.2. Informational teleconference

The RRPC will host a teleconference for potential applicants on **February 28, 2012 at 9:00 am** (US Eastern Standard Time). Participation in this call is strongly recommended, but not required. To sign up for the teleconference, please email Li Chen (lchen95@jhsph.edu) with a subject line of "Childhood Obesity Pilot Project Conference Call", and provide your contact information.

F.3. Application format

1. **Cover page**, containing title of proposal, PI, institution, and a summary (<=300 words) of the proposed work.

2. **Research plan** (limited to 5 pages, single-spaced, 11-point or larger, with 1-inch margins) containing the following sections:

- Specific Aims
  - In brief, what problem is being addressed
  - What are the specific objectives and long-term goals of the project?
  - In brief, what is the approach to achieving these aims?
- Responsiveness to the RFA
  - Explain why the proposed research is time sensitive and would miss an opportunity if it were submitted to the regular NIH review cycle (see C1, above)
  - What aspects of this project use a systems science framework? (see C2)
  - How is this project relevant to one or more of the issues of the type listed under C3?
- Research Strategy
  - Significance: Provide background on the importance of the problem and potential impact of this line of research on childhood obesity
  - Innovation: What elements of the project are innovative compared to other research on population-level influences and interventions on childhood obesity

    - Approach: How will the data be obtained and analyzed? What are the expected results and the potential challenges and limitations (and how will they be addressed)?
    - Next steps: What is the nature of future research or policy that will be facilitated by this study?
- Human subjects considerations
- Project Timeline

3. **References (**1-page limit; additional to the 5 page narrative)
4. **Budget** for entire proposed period of support, in US dollar equivalents. A separate narrative justification for each item requested should be included (no page limit)
5. **Biosketches** (Use NIH format, 4-page limit (with personal statement) per senior/key person). A MS Word version of the format and instructions can be downloaded from the NIH or JHGCCO website.

G. REVIEW

Each pilot project proposal will be evaluated based on significance, responsiveness to the RFA (time sensitivity, systems orientation, innovation, and relevance to the JHGCCO goals) and investigator qualifications. Special consideration will be given to projects led by new investigators, as defined by the NIH.

H. AWARD ADMINISTRATION AND REPORTING REQUIREMENTS

The JHGCCO reserves the right to negotiate with the pilot project Principal Investigator (PI) regarding project scope, budget, and methods before funding is committed. Pilot study PIs must submit brief quarterly reports (on a 2-page form) detailing the progress of the research and any unanticipated obstacles; and a 5-page final report, due at the end of the study period. If applicable, IRB review and approval are required prior to initiation of research.

I. CONTACT

RRPC Director, Dr. Lawrence J. Cheskin (lcheskin@jhsph.edu, 1-410 502-0145); or Co-Director, Dr. Shiriki K. Kumanyika (skumanyi@mail.med.upenn.edu, 1-215 898-2629). When inquiring by email (preferred, for tracking of initial inquiries), please put “Childhood Obesity Pilot Project Inquiry” in the subject line.

Appendix: Some Relevant Definitions and Clarifications

Examples of Policy or Intervention Content

- Changes in food environment, including schools and child care; food venues
- Changes in children's physical activity environment, including schools, community recreation centers, city parks, and sports venues
- Collecting preliminary data regarding the effect of the latest policy changes on childhood obesity-relevant behaviors.
- Supporting novel pilot and feasibility projects that utilize applied science to understand the environmental mechanisms driving childhood obesity, and lead to the development of interventions that have the potential to prevent childhood obesity and reverse current childhood obesity trends.

Examples of Policy or Intervention Type

- Legal strategies (city, state, regional, national, international) including taxation, regulation of food composition, advertising regulation in any channel, including on packages, within stores, and digital channels, giveaways, etc; menu-labeling; front of pack labeling; zoning permits for retail food outlets; litigation; traffic ordinances; building codes, etc.
- Policies of companies or trade associations (e.g., self-regulation) related to food or physical activity products or environments, including employee benefits or insurance coverage
- Health care system policies, including third party payers
- Policies that provide funding for environmental improvements (e.g., community infrastructure)

Examples of Policy or Intervention Relevance

To support decisions about initiating, retaining, or enhancing specific, population level policy changes with a potential direct impact on food, physical activity or weight-related behavior of children[1]

[1] Institute of Medicine, Bridging the Evidence Gap in Obesity Prevention. A Framework to Inform Decision Making. Summary, page 6