

# 2020 Call for Proposals

Concept Paper Deadline: September 16, 2020 (3 p.m. ET)

## HEALTHY EATING RESEARCH: SPECIAL SOLICITATION ON BEVERAGE CONSUMPTION IN EARLY CHILDHOOD

### BACKGROUND

Optimal nutrition and a healthy weight are critical for child health and well-being. Proper nutrition is particularly important during a child's early years, as key nutrients are critical for neurodevelopment and both short-term and long-term physical and mental health. Longitudinal studies show that eating behaviors established during early childhood track throughout youth and adolescence. Yet, the majority of children and adults in the U.S. do not eat a diet that aligns with recommendations from the [2015 Dietary Guidelines for Americans](#). Unhealthy dietary patterns can start as early as infancy and while poor nutrition has significant consequences at all ages, childhood is an especially vulnerable time with negative impacts on overall short- and long-term health, cognitive development, school performance, and risk of chronic diseases later in life. This is especially true for low-income children, children of color, and children living in low-resourced, high need communities where access to resources that support healthy dietary patterns are limited.

The amount of added sugars in young children's diets is especially concerning as current intakes exceed recommendations across all age groups. Added sugars contribute to a diet that is calorie dense but nutrient poor, and increases the risk of developing obesity, dental caries, cardiovascular diseases, and obesity-related cancers. Most of the added sugar in children's diets comes from sugar-sweetened beverages (SSBs), including sodas, fruit-flavored drinks, sports drinks, and sweetened tea. Fruit-flavored drinks are the most commonly consumed SSB in young children. Evidence has also emerged showing that adequate hydration in early childhood is important for optimal cognitive functioning. Drinking water instead of SSBs can help decrease added sugars and calories, which is important because [small shifts in caloric intake can help prevent obesity in young children](#). Also, exposing young children to water may help develop a preference for water during these critical years when taste preferences are forming.

Research demonstrates that SSB consumption increases as children age. The Feeding Infants and Toddlers Study (FITS) found that the percentage of young children (0 to 4 years) consuming a SSB on the day of the survey increased from 9% at 6-12 months to 29% at 12-24 months and 46% at 2-4 years. A recent study using National Health and Nutrition Examination Survey (NHANES) data found that by 4-5 years, half (51%) of children consumed SSBs on the day of the survey. Racial and ethnic disparities also exist, with Black children consuming more SSBs and less water than White or Hispanic children. Drinking water instead of SSBs is an important obesity prevention strategy. The water crisis in Flint, Michigan highlighted the importance of and need for ensuring that all communities have equitable access

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to quality and safe drinking water. Even in communities with access to safe water, negative perceptions of tap water quality are widespread.

The Robert Wood Johnson Foundation (RWJF) has provided national leadership in efforts to address the childhood obesity epidemic and improve the health of all of our nation's children, especially those in lower-income communities and communities of color. This work continues today as part of its vision to build a national Culture of Health that enables everyone in our diverse society to lead healthier lives now and for generations to come. Founded in 2005, Healthy Eating Research (HER) is an RWJF national program that was part of the Foundation's landmark commitment to reverse the childhood obesity epidemic. Over time, HER has expanded its scope beyond obesity to include a focus on improving dietary quality, food security, and access to affordable and high quality foods in lower-income and racially and ethnically diverse communities, with an intentional health equity lens.

In 2018, with RWJF support, HER developed a national research agenda to reduce the consumption of SSBs and increase access to and consumption of safe water among 0- to 5-year-olds. The *research agenda was developed through a rigorous mixed methods approach* that included a national advisory committee, extensive literature reviews, stakeholder surveys, key informant interviews focused on the needs of high risk priority groups, and an in-person convening of experts. Through this process, a lack of consensus from health professionals on what young children should be drinking as part of a healthy diet was identified as one major barrier to shifting consumption.

As a result, in 2019, HER convened an expert panel representing four key national health and nutrition organizations—the Academy of Nutrition and Dietetics (the Academy), the American Academy of Pediatrics (AAP), the American Academy of Pediatric Dentistry (AAPD), and the American Heart Association (AHA)—to develop comprehensive recommendations for beverage consumption consistent with a healthy diet for children from birth to age 5. The *consensus statement*, released in September 2019, concluded that SSBs (including soft drinks/soda, fruit drinks, fruit-flavored drinks, fruitades, sports drinks, energy drinks, sweetened waters, and sweetened coffee and tea beverages) are not recommended for children ages 0 to 5. The expert panel also recommended that children 12 months to 5 years should drink primarily plain water and milk.

Despite this progress, there is still a lack of evidence on how best to achieve alignment with these recommendations. The *national research agenda* and the *expert panel recommendations* lay the groundwork for this new CFP, which is focused on filling existing knowledge gaps as well as informing and advancing strategies and policies related to reducing SSB consumption and promoting water in young children. Achieving equity in beverage consumption patterns and addressing ethnic/racial and income disparities will require addressing social determinants of health that impact food choices and the food environment.

## THE HEALTHY EATING RESEARCH PROGRAM

Healthy Eating Research (HER) is an RWJF national program that supports research on food and nutrition policy, systems, and environmental (PSE) strategies with strong potential to impact the health and well-being of children at a population level and advance health and nutrition equity in low-income

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and racially and ethnically diverse communities. HER aims to help all children achieve optimal nutrition and a healthy weight and reduce nutrition-related health disparities. HER issues calls for proposals (CFPs) to solicit scientifically rigorous, solution-oriented proposals from investigators representing diverse disciplines and backgrounds.

HER is focused on accelerating evidence-based, strategic, actionable and equitable solutions for improving children's nutrition, diet quality and weight and overall health and well-being.

Our program goals are threefold, to:

- Establish a research base for policy, systems, and environmental strategies that improve child health and advance health equity in the areas of diet quality, nutrition, and healthy weight.
- Build a vibrant, multidisciplinary field of research and a diverse network of researchers.
- Ensure that findings are communicated effectively to inform the development of solutions with the goal of promoting health equity.

Applicants are encouraged to visit the Healthy Eating Research website at [www.healthyeatingresearch.org](http://www.healthyeatingresearch.org) to learn more about the program.

## *Funding Opportunity*

This CFP aims to fund research that advances policy, systems, and environmental (PSE) strategies that have the strongest potential to decrease consumption of sugar-sweetened beverages (SSBs) and/or increase access to and consumption of safe water among young children, ages 0 to 5 years, in the United States.

Findings are expected to advance RWJF's efforts to ensure that all children and their families have the opportunity and resources to experience the best physical, social, and emotional health possible, promote health equity, and build a Culture of Health. Approximately \$1.8 million will be awarded under this CFP, resulting in the funding of about eight to ten grants. Each grant will award up to \$225,000 for up to 24 months. Smaller grants, such as those involving secondary data analysis, which can be conducted with smaller budgets and in shorter periods (e.g., under \$200,000 for 12-18 months) will allow us to fund more grants.

All grant proposals have a two-phase application process, including an initial three-page concept paper and subsequent full proposal (if invited).

## *Targeted Age Groups and Priority Populations*

The target population is children ages 0 to 5 years old in the United States, with high priority on those who are at highest risk for poor nutrition and obesity, specifically lower-income families and racially and

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ethnically diverse populations (Black, Latinx, American Indian/Alaska Natives, Asian Americans, Native Hawaiians, and Pacific Islanders).

## *Priority Topic Areas for this Special Solicitation*

SSBs are a significant contributor to children's unhealthy diets, containing excess calories and few, if any, nutrients. Overconsumption is associated with excess weight gain and obesity, as well as an overall decrease in dietary quality. Trends indicate that on any given day almost 50 percent of young children in the U.S. consume a sugary drink and that Black children have the highest intakes of SSBs. Further, despite the many benefits of drinking water, many children in the U.S. do not drink enough water. According to nationally representative data, one in two children is inadequately hydrated, and one in six did not drink any tap water on the day of the survey; these statistics are more pronounced among children of color, as compared with white children. Given the importance of early childhood for developing lifelong healthy dietary behaviors, RWJF is interested in PSE strategies that have the strongest potential to reduce SSB consumption (especially fruit-flavored drinks) and increase safe drinking water access and intake among low-income and children of color (ages 0 to 5) who are at greatest risk for poor nutrition and obesity.

For this CFP, RWJF is interested in research focused on young children (ages 0 to 5) in two main areas:

- 1) SSB pricing strategies and taxes; and
- 2) Achieving equity in reducing SSBs and increasing safe water access and intake.

In order for PSE strategies to be successful in reducing disparities in SSB consumption and ultimately achieving equity in beverage consumption patterns, the social, cultural, economic, political, and environmental contexts need to be taken into account. In a recent AJPH Perspective, *A Framework for Increasing Equity Impact in Obesity Prevention*, Dr. Shiriki Kumanyika emphasizes that disparities related to obesity and other health problems cannot be remedied without attention to underlying inequities and identifies ways to give greater priority to equity issues when undertaking PSE strategies and related research. Moreover, the article states that, "meeting the challenges of achieving equity in contexts for healthy eating, active living and obesity prevention requires that those engaged adopt an explicit 'equity' lens using principles of social justice, acknowledging the realities of social inequities, and designing and evaluating interventions accordingly."

Research efforts are needed to understand the determinants of beverage patterns among high-risk groups and to develop tailored, culturally relevant strategies to improve beverage intake that also address the social determinants of health. For this CFP, proposals addressing PSE strategies to reduce SSB access/consumption and/or increase water access/consumption should be linked with approaches that account for or directly address social determinants of health.

Below are some examples of research questions in each area. (Note these are examples only and we are interested in other key ideas as well).

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## **SSB pricing strategies and taxes**

1. What is the influence of SSB taxes on parent/caregiver purchases and child's beverage intake especially among 0- to 5-year-olds from racially and ethnically diverse populations? Are there differential tax effects among families of color compared to white or higher income families?\*
2. What are the effects of programs funded by SSB taxes on young children's health and wellbeing, SSB consumption, and on health and social inequities? What are the effects on parents' attitudes and norms about offering SSBs to children?\*
3. What can modeling or simulation studies tell us about the impact of SSB tax strategies or tax revenue on children's health and well-being?\*
4. How do pricing or other economic incentives and disincentives influence access, purchase, and consumption of SSBs and water, and how do these influences vary by ethnicity/race and income? What is the best combination of strategies to reduce SSB intake/purchases and increase water consumption?\*
5. Who from the community is involved in tax adoption? What roles do they play? How much power and influence do they have? How does the extent of community involvement affect tax design and adoption? Do people of color and with lower incomes support SSB taxes (before and after implementation)?\*
6. What are effective strategies for reversing and preventing preemption as a threat to SSB taxes?\*
7. What are the most effective ways to message SSB tax campaigns to voters, policymakers, consumers, and priority populations—and to counter industry messages opposing taxes?
8. Do SSB taxes lead to product reformulation with less added sugars? If so, are non-nutritive sweeteners being added to replace sugars?
9. Do attitudes and beliefs about SSBs and tap water consumption and purchases change because of exposure to tax campaigns and/or to tax-funded programs? Are there differences in changes across income or racial/ethnic groups?

## **Achieving equity in reducing SSBs and increasing safe water access and intake**

1. Among priority populations targeted in this CFP, what are the consumption determinants and attitudes about SSBs (especially fruit-flavored drinks), 100% juice, flavored milks, plant-based milks, toddler milks, and non-caloric sweetened beverages, and/or perceptions of water safety, accessibility, appeal and intake?\*
2. What is the effectiveness of strategies to decrease SSBs and increase water access, appeal, and intake in priority populations, and in key settings such as homes, child care, Pre-K, health care, food stores, and restaurants?\*
3. How can we reduce unhealthy SSB marketing and targeted marketing to parents and young children?\*
4. What retail strategies (in food stores and restaurants) for price, promotion, placement, and marketing would be effective in decreasing SSBs and/or promoting water appeal and consumption?\*

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5. What can be done to improve the labeling or packaging of fruit-flavored drinks, such as limiting product label or nutrition claims or pictures of fruits on packaging? How does the impact of warning labels vary by race/ethnicity, socioeconomic status, and literacy?\*
6. Do interventions that combine both water promotion and SSB reduction strategies have synergistic effects for reducing SSB intake and substituting water?\*
7. Is there a difference between young children participating in WIC and non-WIC participating children on type of beverages consumed, and if so, why?
8. What is the effectiveness of specific public awareness or social media campaigns—both general education and counter marketing—on young children’s intake of SSBs and/or water? How do different communication channels affect impact? Types of messages?

\* Denotes priority research questions as identified by HER and RWJF.

## *Types of Studies*

Studies could include any of the following: experimental or quasi-experimental studies; secondary analyses of existing datasets; evaluations of PSE interventions or natural experiments; intervention studies in child care, retail, or restaurant settings; retrospective analyses of PSE change successes; case studies; financial, economic, or cost-effectiveness studies; health impact assessments; statistical modeling or simulation studies; policy and legal analyses to identify or evaluate promising PSE interventions; and quantitative meta-analyses.

## *Overall Study Guidelines*

- All proposed studies in response to this CFP must have a clear impact on 0- to 5-year-olds in the U.S.; however, studies do not have to include the entire age range of 0 to 5, and could focus only on one age group such as preschool-age children.
- Research studies funded through this CFP must make a clear connection between the study’s PSE strategies and specific indicators of beverage access, purchases, intake, or child health and well-being.
- Priority populations are infants and young children, 0 to 5 years old, from lower-income communities and racial and ethnic populations at highest risk for obesity and nutrition-related health disparities.
- Within the target population, RWJF is particularly interested in supporting efforts that will impact those at highest risk for poor health and well-being outcomes (e.g., Black, Latino, American Indian/Alaska Natives, Asian Americans, Native Hawaiians, and Pacific Islanders; children living in lower-income rural communities), with the aim of promoting health equity. This work ranges from changes at the state or national level to those taking place at the organizational or community levels. Proposals focusing on these areas and having the potential to reach those in greatest need will be given priority, especially if strategies have the potential to be replicated and scaled up if effective.
- Studies focused solely on behavior change at the individual level or nutrition education interventions **will not** be funded.

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- Studies conducted in real-world settings are preferred. Experimental studies or laboratory simulations must show promise for generalization to real-world settings, especially in lower-income and racially and ethnically diverse populations.
- Researchers should seek input from key stakeholders—such as advocates, policymakers, school or community leaders, parents, or children—in order to develop feasible, relevant, and sustainable studies.
- Applicants must include at least one representative of the community or stakeholder group targeted (e.g., advocate, community leader, policymaker) as an ongoing adviser.
- Proposals should describe the strategies that will be used to communicate research results. Specific plans should be outlined for communicating and disseminating research results to advocates, decision-makers, policymakers, relevant stakeholders, and scientists.
- **When developing the proposal, it is important to take into account that grant extensions and no cost extensions are discouraged and an exception would be granted only under rare circumstances.** Reasons such as IRB approval or recruitment taking longer than expected will not be approved. Therefore, researchers need to be realistic (and not idealistic) in what can be achieved within the time frame of the grant.
- Awards will be made from Duke University to the principal investigator's home institution. Indirect costs (up to 12% for U.S. colleges/universities and hospital or health systems; up to 20% for nonprofit organizations; and 0% for for-profit organizations or government entities) are included in the total project awards *per RWJF budget guidelines*.
- Proposed projects may be conducted as supplements to existing studies. Project co-funding is welcome; sources and amounts must be fully described in the proposal. The added value of the proposed research grant should be clearly described.

## TOTAL AWARDS

Approximately \$1.8 million will be awarded under this CFP, resulting in the funding of about 8-10 grants, each up to a maximum of \$225,000 and 24 months in duration.

Research projects involving both primary data collection and secondary data analyses will be considered. Proposals requesting lower budget amounts and shorter periods (e.g., 12-18 months) are highly encouraged.

## FOUNDATION FUNDED

The grant opportunity outlined in the call for proposals is contingent upon final funding confirmation from the Robert Wood Johnson Foundation for such grants.

## ELIGIBILITY CRITERIA

- Preference will be given to applicants that are either public entities or nonprofit organizations that are tax-exempt under Section 501(c)(3) of the Internal Revenue Code and are not private foundations or Type III supporting organizations. Additional documentation may be required by Duke University.

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- Applicant organizations must be based in the United States or its territories.
- The focus of this program is the United States; studies in other countries will be considered only to the extent that they may directly inform U.S. policy.

## **OUR EQUITY, DIVERSITY, AND INCLUSION COMMITMENT**

The Robert Wood Johnson Foundation is committed to building a Culture of Health that provides everyone in America a fair and just opportunity for health and well-being. Achieving this goal requires focus on equity, diversity, and inclusion. To that end, we are committed to fostering diverse perspectives. We recognize that individuals' perspectives are shaped by a host of factors, such as their race, ethnicity, gender, physical and mental ability, age, socioeconomic status, gender identity and expression, sexual orientation, familial status, education, religion, legal status, military service, political affiliation, geography, and other personal and professional experiences.

We know that the presence of diverse perspectives alone is not sufficient. Therefore, we also are committed to creating inclusive environments where all individuals are encouraged to share their perspectives and experiences. We believe that only through valuing our differences and similarities, and remaining vigilant in advancing equity, will we be able to maintain an equitable workplace and actively pursue equity in all aspects of our work. We commit to being continuous learners and working alongside others to cultivate equity, diversity, and inclusion.

## **SELECTION CRITERIA**

Once invited, full proposals will be reviewed by a committee composed of HER national program office staff, national advisory committee members, other expert reviewers by invitation, and RWJF senior staff. The committee will use the following criteria to assess proposals:

- Ability to identify and assess PSE strategies that promote the health and well-being of children at the population-level, specifically focused on strategies to decrease consumption of SSBs and increase access to and consumption of safe water among 0- to 5-year-olds in the United States;
- Relevance to the needs of children in lower-income communities and racially and ethnically diverse populations at highest risk for poor nutrition, health and well-being outcomes;
- Degree to which the proposal accounts for or directly addresses the social determinants of health impacting beverage consumption. Specifically, we will assess whether the proposals significance, specific aims, research design and methods, and communications plan take into account intention, ability, and approaches to address health disparities and or equity issues, and whether the research team (including consultants) has the necessary experience to do so.
- Degree to which the strategies are widely applicable, feasible, and sustainable;
- Clarity of study goals, hypotheses, methods, and outcomes;
- Use of a clear theoretical framework, conceptual model, or rationale;



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- Scientific rigor of proposed research and analytic methods, including quality of the measures and data to be used;
- Research qualifications and experience of the investigator(s) and appropriateness of disciplines and perspectives represented;
- Appropriateness of proposed budget and project timeline, including the realistic feasibility of completing the project within the specified funding period;
- Approaches for communicating and disseminating research results to advocates, decision-makers, policymakers, and scientists that go beyond an exclusive focus on peer-reviewed publications and/or academic conference presentations; and
- The presence of any real or perceived conflict of interest (either financial or other personal considerations).

A national advisory committee reviews Healthy Eating Research proposals and makes funding recommendations to Foundation staff. All funding decisions are made by RWJF. RWJF does not provide individual critiques of proposals submitted.

## **EVALUATION AND MONITORING**

An independent research group selected and funded by RWJF will conduct an evaluation of the Healthy Eating Research program. As a condition of accepting these funds, we require grantees to participate in the evaluation.

Grantees are expected to meet HER requirements for the submission of narrative and financial reports, as well as periodic information needed for overall project performance monitoring and management. We may ask project directors to participate in periodic meetings and give progress reports on their grants. At the close of each grant, the lead agency is expected to provide a written report on the project and its findings suitable for wide dissemination.

## **USE OF GRANT FUNDS**

Grant funds may be used for project staff salaries, consultant fees, data collection and analysis, meetings, supplies, project-related travel, and other direct project expenses, including a limited amount of equipment essential to the project. In keeping with RWJF policy, grant funds may *not* be used to subsidize individuals for the costs of their health care, to support clinical trials of unapproved drugs or devices, to construct or renovate facilities, for lobbying, for political activities, or as a substitute for funds currently being used to support similar activities.

## **HOW TO APPLY**

Applications for this solicitation must be submitted electronically via the RWJF online system.

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To apply for this special solicitation, visit <http://my.rwjf.org/applyFromWebsite.do?cfp=3113> and click the “Apply Online” link.

If you have not already done so, you will be required to register at [my.rwjf.org](http://my.rwjf.org) before you begin the application process. Applicants should log in to the system and familiarize themselves with online submission requirements well before the final submission deadline. Program staff may not be able to assist all applicants in the final 24 hours before the submission deadline. There are two phases in the application process:

## *Phase 1: Concept Paper*

All applicants must submit: 1) a concept paper narrative of up to three pages (1.5 line spacing) describing the study; and 2) biosketches for key personnel. Applicants must follow the instructions and use the templates provided in the online system.

## *Phase 2: Full Proposals (if invited)*

Selected Phase 1 applicants will be invited to submit a full proposal narrative of up to 15 pages (1.5 line spacing) accompanied by a budget and budget narrative and additional supporting documents. Applicants must follow the instructions and use the templates provided in the online system.

Please see the table below for a complete list of key dates and deadlines for the two phases.

Please direct inquiries to:

### **Healthy Eating Research**

Phone: (800) 578-8636

Email: [healthyeating@duke.edu](mailto:healthyeating@duke.edu)

## *Late Submissions*

Per RWJF policy, HER will accept only those proposals that are completed/submitted at the time of the deadline. Because one of our Guiding Principles is to treat everyone with fairness and respect, RWJF’s deadline policy applies to all applicants. Applicants are expected to notify the program administrator immediately if experiencing difficulty with the online proposal system that may interfere with a timely submission. To do so, click on the “Contact Us” link found in the “Resources” area on the left side of most screens within the online proposal site. We encourage you to submit your proposal in advance of the deadline so that any unforeseen difficulties, e.g., technical problems, may be addressed well before the deadline.

RWJF and HER do not provide individual critiques of proposals submitted.

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The HER program has a national advisory committee that makes recommendations about grants to Foundation staff. RWJF will make all final grant decisions.

## PROGRAM DIRECTION

Direction and technical assistance for this program is provided by Duke University, which serves as the national program office located at:

### Healthy Eating Research

Duke Global Health Institute

310 Trent Drive

Duke Box 90519

Durham, NC 27708

Phone: (800) 578-8636

Email: [healthyeating@duke.edu](mailto:healthyeating@duke.edu)

Website: [www.healthyeatingresearch.org](http://www.healthyeatingresearch.org)

Responsible staff members at the national program officer are:

- Mary Story, PhD, RD, *director*
- Megan Lott, MPH, RD, *deputy director*
- Erin Escobar, MPH, *senior research manager*

Responsible staff members at the Robert Wood Johnson Foundation are:

- Jamie Bussel MPH, *senior program officer*
- Jennie Day-Burget, *communications officer*
- Mateusz Szalda, *program financial analyst*

## KEY DATES AND DEADLINES

- **August 12–September 16, 2020 (3 p.m. ET)**  
RWJF online system available to applicants for concept papers.
- **September 16, 2020 (3 p.m. ET)**  
Deadline for receipt of concept papers. Those submitted after the deadline will not be reviewed.
- **October 7, 2020**  
Applicants notified whether they are invited to submit a full proposal.
- **November 11, 2020 (3 p.m. ET)**  
Deadline for receipt of invited full proposals. Those submitted after the deadline will not be reviewed.\*
- **January 2021**  
Notification of finalists.

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- **March-April, 2021**

Awards begin.

\*All proposals for this solicitation must be submitted via the RWJF online system. If you have not already done so, you will be required to register at [my.rwjf.org](http://my.rwjf.org) before you begin the application process. All applicants should log in to the system and familiarize themselves with online proposal requirements well before the final submission deadline. Staff may not be able to assist all applicants in the final 24 hours before the submission deadline.

## **ABOUT THE ROBERT WOOD JOHNSON FOUNDATION**

For more than 45 years the Robert Wood Johnson Foundation has worked to improve health and health care. We are working alongside others to build a national Culture of Health that provides everyone in America a fair and just opportunity for health and well-being. For more information, visit [rwjf.org](http://rwjf.org). Follow the Foundation on Twitter at [www.rwjf.org/twitter](http://www.rwjf.org/twitter) or on Facebook at [www.rwjf.org/facebook](http://www.rwjf.org/facebook).

Sign up to receive email alerts on upcoming calls for proposals at <http://www.rwjf.org/manage-your-subscriptions.html>.

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