



## **REQUEST FOR LETTERS OF INTENT: A Small Grant to Reduce Childhood Obesity in Your Community**

The Mountain West Prevention Research Center (MW-PRC) at the University of Utah is supporting a new grant opportunity for rural communities and small towns in Idaho, Montana, Nevada, New Mexico, Utah and Wyoming that want to adopt and deliver [Building Healthy Families \(BHF\)](#), a Family Healthy Weight Program recognized by the Centers for Disease Control. The goals of the MW-PRC are to provide an evidence-based program to communities that have identified childhood obesity as a priority health concern and support the recruitment of families into the program with a text messaging-based strategy. Communities who participate will receive a free online resource with all the training and materials needed to deliver BHF, technical support, and an opportunity to participate in a learning collaborative. The collaborative will allow communities to share strategies and ideas for successful engagement of families and for program implementation. Communities who are interested in adopting and delivering a family healthy weight program to families they serve are encouraged to apply.

### **BHF Program Overview:**

Building Healthy Families (BHF) is a program that has demonstrated success in whole family health promotion and achieving and maintaining a healthy body weight. The program aims to support families in making sensible and sustainable changes to their eating and physical activity using research-tested behavior change strategies.

**Program duration:** The 12-month program includes an informational session for interested families, 12 weekly family sessions (2 hours each), and 6 refresher sessions (~90 minutes each).

**Delivery Format:** BHF is best delivered in-person in an accessible community space.

**Session content:** Families learn to set goals to create healthier lifestyles in a fun, interactive environment together.

**Who should attend:** Children between the ages of 6 and 12 years old with a BMI at or above the 95<sup>th</sup> percentile are eligible to participate. Because BHF is a program designed for the whole family, parents/guardians and siblings of any age or weight status are encouraged to attend each session.

**Cohort size:** We recommend delivering the program to groups of about 6 to 10 families.

### **What the MW-PRC team will provide:**

**Training resources:** We will provide an online training platform to train your community-based teams to deliver the BHF Program.

**Family recruitment:** Historically, we've found that the biggest challenge that communities face when implementing a family healthy weight program is recruiting families to participate. This project will provide you with technical support and guidance for recruitment by integrating with a local clinical partner's electronic health record to identify eligible families and reach out to them via text message to offer enrollment in BHF. The research team will also provide the technology platform and manage the text messaging recruitment strategy.

**Financial support:** This funding opportunity will provide the support for the BHF Online resources package, necessary program supplies, and \$10,000 to cover start-up costs.

**Implementation support:** Quarterly throughout the project, the research team will meet individually with your organization and in groups of similar community-based organizations who



are also implementing BHF. We'll identify barriers to recruitment and program implementation and help identify strategies to support you in successful program delivery.

### **What you'll need to be successful:**

**A program delivery organization:** A local organization with a dedicated person/team to deliver BHF. Delivering BHF will require on average about 4 hours per week for 2 to 3 coordinators.

**A clinical program recruitment organization:** A community health center or other clinical partner to develop a sustainable referral pipeline for the BHF program. The family recruitment strategy in this project will leverage the electronic health record in local community health centers to identify and reach out to eligible families. The organizations who will lead recruitment must be willing to partner with our research team on patient outreach.

Communities are responsible for identifying organizations to fill both roles.

### **Application Process:**

#### **Step 1 *Submit a Letter of Intent by November 22, 2024***

You must submit the letter of intent (LOI) to be eligible to submit a community narrative. To submit an LOI, [click here](#) and fill out the form. Please send any questions to MW-PRC@utah.edu.

There will be an informational webinar on **November 18<sup>th</sup> at 12pm MT** to share additional information on this funding opportunity and answer questions that you may have. Click [here](#) to register for the webinar.

#### **Step 2 *Complete a pre-application survey***

The project lead and at least 2 members from each organization listed on the LOI must complete a pre-application survey 7 days after submitting the LOI. Our team will send a link to this survey once we receive your completed LOI Template.

#### **Step 3 *Submit a Community Narrative by January 3, 2025***

The second step will include the completion of a 1000-word (approximately 2 pages) response to questions related to your community public health priorities and potential plans to implement BHF. Our team will reach out to those that have met the requirements of steps 1 and 2 with additional details.

There will be an opportunity to ask questions related to your submission on **December 12<sup>th</sup> at 2pm MT**. A zoom link will be sent to those that submit an LOI.

### **Eligibility Requirements and Community Selection**

1. Any rural community or small town within the MW-PRC service area (Utah, Wyoming, Montana, Idaho, Nevada or New Mexico). We anticipate selecting up to 2 communities in each state.
2. To be eligible for this funding opportunity, communities must include a clinical site or partner that is willing to work with the MW-PRC team to implement electronic health record-based recruitment and text messaging-based outreach.
3. Timely completion of all application materials.