



REQUEST FOR APPLICATION

Comprehensive Community Approaches that Address Childhood Trauma to Prevent Substance Misuse

Date of release: November 8th, 2019

Applications are due by 5 pm E.T. on Tuesday, November 26, 2019

Background and Funding Overview

Traumatic childhood events such as abuse, neglect, and witnessing crime, parental conflict, mental illness, and substance abuse can result in long-term negative effects on learning, behavior and health. Often referred to as adverse childhood experiences (ACEs), these types of events create dangerous levels of stress that can derail healthy brain development and increase risk for smoking, alcoholism and other substance use disorders, depression, heart disease, and dozens of other illnesses and unhealthy behaviors throughout life.

Adverse Childhood Experiences (ACEs)

ACEs are significant disturbances in a child's life that impact her or his ability to function in healthy ways. They were initially investigated in 1998 by the CDC-Kaiser Permanente ACE study to examine the link between ACEs and physical and mental health outcomes.ⁱ

- ACEs include all forms of child abuse (emotional, physical, or sexual), neglect (physical or emotional), or household dysfunction (divorce, violence, incarceration, substance abuse, or mental illness).
- Findings of the study indicated that the more ACEs a child experienced, the greater the risk of chronic health conditions, anxiety disorders, low life potential, and even early death.
- As the number of ACEs increases, so does the risk for negative health outcomes.
- Almost two-thirds of study participants reported at least one ACE, and more than one in five reported three or more ACEs.ⁱⁱ

With support from the Centers for Disease Control and Prevention (CDC), the National Association of County and City Health Officials (NACCHO) is pleased to offer a funding opportunity for the implementation of evidence-based approaches through comprehensive community efforts to mitigate the harms of ACEs.

NACCHO will select and fund up to two awards through this Request for Applications (RFA). Eligible applicants may request up to \$500,000 to support project activities. The project period shall begin upon both parties' full execution of the contract and will end July 31, 2020

As a leader, partner, catalyst, and voice for the nation's nearly 3,000 local health departments (LHDs), NACCHO seeks to ensure the conditions that promote health, equity, and security for all people in their communities. The purpose of this funding opportunity is to build the evidence-base for promising and best practices in opioid misuse, abuse and overdose prevention at the intersection of public health and public safety.

Geographic Focus

Applicants responding to this RFA must be serving a county within the Appalachian Region. The Appalachian Region, as defined in the Appalachian Regional Commission (ARC)'s authorizing legislation, is a 205,000-square-mile region that spans the Appalachian Mountains from southern New York to northern Mississippi. It includes all of West Virginia and parts of 12 other states: Alabama, Georgia, Kentucky, Maryland, Mississippi, New York, North Carolina, Ohio, Pennsylvania, South Carolina, Tennessee, and Virginia. The Region includes 420 counties and 8 independent cities in 13 states and has a population of 25 million people. Compared to the rest of the nation, the Appalachian Region faces disproportionate disparities related to educational attainment, employment, income, and health outcomes.

In a study of rural children and adults, 56.5% of rural adults surveyed reported having ACE exposure. Among those with any ACE history, 25.8% experienced four or more ACEs. Thus, people who report

having an ACE are at higher risk of having more than one ACE. ⁱⁱⁱ Children in rural areas were also more likely than their urban counterparts to report other ACEs: the divorce or separation of parents, living with a parent who served time in jail or prison, witnessing domestic violence, living with someone who was mentally ill or suicidal, and living with someone who had a problem with alcohol or drugs.^{iv}

Eligibility and Contract Terms

Before applying, consider the following requirements:

- The applicant must be a nonprofit 501 (c) (3) organization or a governmental entity.
- The applicant must be located in the Appalachian Region according to the Appalachian Regional Commission https://www.arc.gov/appalachian_region/CountiesinAppalachia.asp.
- The applicant must serve a county population fewer than 125,000 people according to the U.S. Census Bureau, City and Town Population Totals: 2010-2017, Incorporated Places: 2010 to 2017, United States.
- The applicant's proposal must involve a comprehensive approach encompassing public safety (police, sheriff, High Intensity Drug Trafficking Area (HIDTA) site), public health, schools (or school system), communities, and families.
- The applicant's proposal must identify and expand upon an existing initiative that addresses ACEs.

Selected applicants will be required to identify and designate an agency to enter into a contract with NACCHO for the submission of the deliverables specified in the contract and serve as a fiscal agent for the project. Agreement with NACCHO's standard contract terms and conditions is a requirement. **No modifications to the terms or contract language will be made. Applicants that cannot agree to NACCHO's contract language should not apply for this initiative.** Read the [standard contract language](#) for more information. As part of the application, the contractor/organization will be asked to verify that they have read NACCHO's standard contract language and have provided a copy to the individual with signing authority at your organization for advanced consideration. It is the responsibility of the selected site to return a signed copy of the contract no later than December 15th, 2019. All questions should be sent via email to opioidepidemic@naccho.org and will be reviewed in consultation with CDC staff.

Application

- Review the requirements and expectations outlined in this RFA.
- Applications must be submitted to NACCHO's Overdose Prevention Team at opioidepidemic@naccho.org by **November 26, 2019, at 5:00pm ET**. Submissions after this deadline will not be considered.
- The submitted application package must include the following:
 - Brief narrative (**no more than 4 pages**) that addresses
 - **Strategy and Approach:** Broadly describe the programmatic strategies and activities for which you seek funds. What strengths or assets in the community you serve will you build on? What would a fully implemented program look like, and what is required to reach it?
 - **Impact:** What outcomes are you committed to achieving as a result of this project? How will your community be better off? Will any new policies or systems be in place? How would these results position you to achieve longer-term outcomes in the future?
 - **Target Population:** Describe the participants who will be included in the work for which you seek funding. This might include children, parents, and/or providers/educators. Please include estimates of the following as applicable to your program: any eligibility criteria for participants; the total number of

expected participants; and anticipated breakdown by age (for children), race/ethnicity, and geography.

- **Program Development:** How have you used input from program participants and/or beneficiaries to inform your programs and services? Remember that participants/beneficiaries could be a combination of providers, teachers, police and families. What data sources are you using to inform your program development?
 - **Partnerships:** Describe the role of each partner (public safety, public health, and school system) and how they will work together to plan and implement programs. Describe additional community partnerships that will be involved in this effort.
 - **Organizational Capacity:** Applicants should demonstrate the ability to expedite contracting, hiring, and procurement processes in order to implement activities identified in the proposal. What has your organization achieved in the past year to advance its mission and improve its capacity to undertake the work proposed in this application? How will you build on the current capacity with this funding (e.g. hiring staff, training opportunities)?
 - Copy of all key personnel C.V.s, highlighting relevant knowledge, skills, and abilities.
 - Letter of Support from at least two partners (e.g. law enforcement, public health)
 - [Anticipated budget](#). (template provided)
 - [Anticipated work plan](#). (template provided)
 - Complete the [Vendor Information Form](#) and [W-9](#).
- Applications should be emailed to opioidepidemic@naccho.org in (1) **one e-mail by November 26th, 2019, at 5:00 pm E.T.** NACCHO will confirm receipt of application within one business day of submission. Please use the subject line “*Comprehensive Community Approaches that Address Childhood Trauma to Prevent Substance Misuse RFA.*” NACCHO will not accept any applications received after the deadline.

Notification of award will be made on or around December 4th, 2019. All necessary information regarding the project and application process may be found below.

Funding for this initiative is supported by the Centers for Disease Control and Prevention (CDC) cooperative agreement NU38OT000306-02-01 entitled *Strengthening Public Health Systems and Services through National Partnerships to Improve and Protect the Nation’s Health*.

Project Requirements and Expectations

NACCHO and CDC will serve as technical support for the selected communities. The CDC scientists will assist funded site with completing the deliverables and providing any technical assistance needed throughout the project, including support linking to existing CDC efforts in the state or region. NACCHO will also assign a point person for each site and specific support will include overall contractual oversight for the project (e.g., establishing contracts with local health departments or other entities, invoicing and payments, final reports from each site to capture facilitators, barriers, and best/promising practices).

The selected applicant will be required to provide specific deliverables for this award:

- **Participate in progress tracking through regular technical assistance calls with NACCHO and CDC.** Provide updates on activities, the status of deliverables, and budget;
- **Collaborate with NACCHO, CDC and partners for all evaluation activities** including process and outcome evaluation;
- **Assist NACCHO in developing a case study** of the initiative and implementation guide for other jurisdictions; and

- **Submit an annual progress report (APR)** to include information about the work, lessons learned, successes and challenges experienced during the project, and any tools or resources developed.

Selection process and criteria

The Proposal Narrative should use single-spaced, Times New Roman 12-point font and not exceed four (4) pages in length (attachments do not count towards the page limit). All applications will be reviewed and scored by both NACCHO and CDC. The criteria listed below will be used to evaluate proposals. The budget will not be included in the scoring criteria but is required for complete application submissions. NACCHO will not review incomplete applications.

- 1) Strategy and Approach (20%)
- 2) Impact: (10%)
- 3) Target Population (10%)
- 4) Program Development (10%)
- 5) Partnerships (20%)
- 6) Organizational Capacity (10%)
- 7) Workplan (20%)
- 8) Budget (**template provided**)
 - Applicants must provide a line item budget, using the template provided, and brief narrative justification of the items included in their proposed budget for up to 7 months.
 - The purpose of the line-item budget is to demonstrate that the applicant has considered appropriate funding needed to accomplish the proposed work and that the applicant has a reasonable expectation of being able to expend the funds within the given project period. No match is required for project funds; however, applicants can indicate where in-kind funds will be used to support project activities. All federal regulations included in [45 CFR 75](#) will be mandated for awardees. Non-allowable expenses are listed below:

Unallowable Costs

- 1) The provision of medical/clinical care.
- 2) Research.
- 3) Direct funding or expanding the provision of substance abuse treatment.
- 4) Public safety activities that do not include clear overlap/collaboration with public health or other partners and objectives. Please note that all proposed projects should leverage public health, public safety, and other partner collaborations to address ACEs in their jurisdiction.

B. Additional Attachments

- Complete and submit the [Vendor Information Form](#) and [W-9](#)

Applicants will be notified of their selection status by e-mail to the project point of contact on or around **December 4th, 2019**. Selected applicants will be required to confirm participation and agreement with the contract scope of work after receiving a notification. The designated point of contact for selection must be available to receive and respond to the notification in a timely manner.

I. Key Dates

Event	Date
Application Period Closes	November 26 th , 2019, at 5:00 pm ET
Award Notification	December 4th, 2019
Kick-off call with NACCHO and CDC	December 6th, 2019 11am ET
Site Visit	TBD by NACCHO, CDC and selected applicant

II. Attachments

Please find below, links to additional information, forms, and resources needed for this application submission:

- [Anticipated budget.](#)
- [Anticipated work plan.](#)
- NACCHO [standard contract language](#)
- Vendor Information Form – [Form](#)
- W-9 – [Form](#)

ⁱ Jia H, Muennig P, Lubetkin EI, Gold MR. Predicting geographical variations in behavioural risk factors: an analysis of physical and mental healthy days. *J Epidemiol Community Health*. 2004 Feb;58(2):150-5.

ⁱⁱ Felitti, Vincent J et al., Relationship of Childhood Abuse and Household Dysfunction to Many of the Leading Causes of Death in Adults. *American Journal of Preventive Medicine*, Volume 14, Issue 4, 245 - 258

ⁱⁱⁱ Talbot JA, Szlosek D, Ziller EC. Adverse Childhood Experiences in Rural and Urban Contexts. Maine Rural Health Research Center. 2016 Apr;Policy Brief 64:10.

^{iv} https://mchb.hrsa.gov/nsch/2011-12/rural-health/pdf/rh_2015_book.pdf#page=51, Accessed October, 2019