



## Hepatitis B Foundation Hep B United Mini-Grants Program 2026 Request for Funding Proposal

**INTRODUCTION:** The Hepatitis B Foundation is offering mini-grants for one (1) year to Hep B United coalition partners working on hepatitis B education, prevention, screening, and linkage to care activities. Up to 7 awards will be given ranging from \$5,000 to \$10,000 each.

**ELIGIBILITY:** In order to qualify for this award, applicants should be able to demonstrate that they have in place an active, local coalition focusing on hepatitis B education, screening and linkage to care activities. *Eligible applicants* must be <u>current (or affiliated with) Hep B United members</u> of at least six months with the capacity to directly implement the proposal, collect data as required, provide written reports, manage the funds appropriately and be located within the United States.

**PURPOSE:** The purpose of this RFP is to enhance the capacity of Hep B United coalition partners to conduct hepatitis B education, testing and linkage to care in their local communities. *The emphasis of this RFP is focused on programs to address hepatitis B among African immigrant, Asian American, Native Hawaiian and Pacific Islander (AA & NH/PI) communities, and persons who use drugs (PWUD). This RFP supports activities at the local coalition level to advance the hepatitis B priority areas of the U.S. Department of Health and Human Services' Viral Hepatitis National Strategic Plan.* 

## This RFP focuses on Hep B United's Strategic Priority Areas:

- 1) Increasing awareness, screening, prevention and education to reduce hepatitis B-related health disparities, including implementation of the universal adult hepatitis B vaccination recommendations:
- 2) Improving linkage to care and access to culturally and linguistically appropriate patient navigation services to prevent hepatitis B related liver disease and cancer; and/or
- 3) Strengthening surveillance or community-level data collection to detect hepatitis B transmission and disease trends.

**PROPOSAL:** All applicants are to focus on at least one of the priority areas above and develop related activities to support coalition building and maintenance, education and training, and testing and linkage to care efforts. Activities can include, but are not limited to:

- Developing local coalition infrastructure (including partnership development and partner training);
- Implementing the <u>#justB storytelling campaign</u> within local education and community engagement efforts; creating new story-focused educational programming, including story circles; focusing on reducing stigma, fostering open HBV discussion and move people towards screening;
- Identifying/developing systems and strategies to educate communities and/or providers and/or implement new ACIP hepatitis B immunization recommendations for adults ages 19-59 years;
- Developing and implementing strategies towards improving uptake of the universal adult hepatitis B screening and vaccination recommendations.

- Increasing hepatitis B disaggregated data (conducting formalized data collection, analysis, and/or dissemination, and/or using new technologies to collect community-based HBV screening data);
- Identifying and addressing specific local barriers to hepatitis B screening and linkage to care;
- Developing and implementing strategies for reaching specific, hard-to-reach populations in your communities, to improve testing, vaccination, and/or linkage to care;
- Developing strategies based upon a comprehensive family/household approach, to improve hepatitis B knowledge, awareness, and testing of household/family members of infected mothers.
- Assessing hepatitis B-related stigma in a local community and/or developing strategies to address stigma as a means to improve hepatitis B screening.

Project sites will be offered ongoing support and training throughout the 12-month project period. This will focus on improving skills (i.e. data collection and management; technology; IRB). Training and support will also allow project sites to make use of best practice models and existing educational tools and resources for African immigrant, Asian American, Native Hawaiian and Pacific Islander communities and PWUD. Project sites will be expected to evaluate their project and complete/submit final reports to the Hepatitis B Foundation and present their findings.

## PROJECT SITE REQUIREMENTS:

- Ongoing communication with the Hepatitis B Foundation (HBF), including regular phone calls (schedule will be determined at a mutually convenient, regular date).
- Participation in the mini-grants training webinar (scheduled at the start of the 12-month project period).
- Participation in monthly Hep B United coalition calls (if applicable) and Hep B United training webinars
- Provide a 6-month and 12-month written report that includes evaluation
- Provide a "lessons learned" presentation on a monthly Hep B United call, webinar, and/or annual summit

## SUBMISSION DEADLINE

All items must be submitted by **5:00 PM PST on January 15th**, **2026**, online via Survey Monkey. Applicants will be notified of our award decision by **February 9th**, **2026**. The funding period will run from **March 1-November 15**, **2026**. Grant funding contingent on fulfillment of expected federal funding. Any questions you might have please send them via email to: **Shreya.Koirala@hepb.org**.

**PROPOSAL FORMAT:** The application, should be submitted online here: <a href="https://www.surveymonkey.com/r/DDFQFKP">https://www.surveymonkey.com/r/DDFQFKP</a>

| Question<br>Number | Question   | Point Value |
|--------------------|--|-------------|
| 1                  | Eligibility: Are you currently an official HBU coalition affiliated with a local hepatitis B coalition in the United States?   | No score    |
| 2                  | If you answered Yes to question 1, have you been a member of HBU for more than six months?   | No score    |
| 3                  | Eligibility: Are you planning to focus on PWUD,<br>African immigrants, Asian Americans, and/or<br>Pacific Islander communities within your proposal?   | No score    |
| 4                  | Address  | No score    |
| 5                  | Primary Grant POC  | No score    |
| 6                  | Organization Mission   | 3           |
| 7                  | How many individuals did your organization serve in the last calendar year?  | 2           |
| 8                  | Briefly describe the services you provided within the last calendar year   | 4           |
| 9                  | Please describe the populations you serve (race/ethnicities, languages, age, other key demographics)   | 2           |
| 10                 | Please provide an overview of your coalition/organization including your history, membership, priorities   | 5           |
| 11                 | Please describe your coalition's/organization's previous work related to hepatitis B within PWUD, African immigrant, Asian American and/or Pacific Islander communities.   | 5           |
| 12                 | Please describe any data that has been collected within your coalition or organization related to hepatitis B and PWUD, African immigrant, Asian American and/or Pacific Islander communities. (Data collection for example could include hepatitis B prevalence or vaccination coverage, hepatitis B knowledge assessments, etc.). If you have not yet collected any hepatitis B data in your community, please describe what data you think are most needed. | 5           |
| 13                 | Is your coalition/organization current receiving funding for hepatitis B activities? If so, please describe how your proposed project will be complementary and not duplicative.   | No score    |
| 14                 | What HBU priority area(s) does your project focus on? Check all that apply   | 2           |
| 15                 | Are the communities you serve represented in your program's staff or leadership? How so?   | 2           |
| 16                 | Please describe the goals and activities of your project   | 5           |
| 17                 | Please describe the expected impact of your project, and why this project is needed in your community  | 5           |

| 18 | How will you evaluate the impact and outcomes of your program?  | 5 |
|----|---|---|
| 19 | Please provide a breakdown of your budget for this program: If your mini grant request is supplementing an existing program, please detail how the requested grant funding will be used. You may attach it as a separate file at the end of this application. | 5 |
| 20 | Please provide at least two letters of support for your application   | 5 |

All questions and answers will be posted on the Hep B United website, to ensure that everyone will have access to responses. Those interested in applying are strongly encouraged to email questions beforehand to Shreya Koirala at <a href="mailto:Shreya.Koirala@hepb.org">Shreya.Koirala@hepb.org</a>.