NIH funding opportunities

Faculty of Medicine and Health Sciences: Research Development and Support 26 Apr 2016 (#13)

[Click on blue <u>hyperlink</u> for further information]

The NIH funding opportunities listed below are only a **selection** of pre-screened, currently open health funding opportunities for which **South African institutions are eligible to apply**. For a comprehensive selection of NIH funding opportunities, please visit <u>www.grants.nih.gov</u>.

Please be advised that you **must contact the Research Grants Management Office (RGMO) Pre-Awards** (Dr Christa Coetsee <u>cdevries@sun.ac.za</u>) as soon as possible to inform of your intent to apply and then <u>confirm</u> at least 30 days before the submission date. The NIH grant is submitted institutionally. All final application documents MUST reach the RGMO seven (7) workdays before NIH application due date.

Important notices

 Notice of Intent to Publish a Funding Opportunity Announcement for Research on Disparities in Surgical Care and Outcomes R01 (NOT-MD-16-005) and R21 (NOT-MD-16-006) National Institute on Minority Health and Health Disparities.

1. Understanding HIV Rebound

Letter of Intent due date: June 29, 2016

Hyperlink: <u>(RFA-AI-16-028)</u>

Type: P01

Application Due Date: July 29, 2016, by 5:00 PM local time of applicant organization. Applicants are encouraged to apply early to allow adequate time to make any corrections to errors found in the application during the submission process by the due date. Applicants should be aware that on-time submission means that an application is submitted error free (of both Grants.gov and eRA Commons errors) on the application due date.

Purpose: The purpose of this Funding Opportunity Announcement (FOA) is to support multi-disciplinary, Program Project applications aimed at understanding specific mechanisms, biomarkers, and pathways associated with rebound of HIV viremia. Research should focus on viral rebound in: 1) HIV/SIV-positive hosts who initiated antiretroviral therapy early after infection, had fully suppressed viremia for an extended period, and who later stopped therapy, 2) HIV/SIV-positive hosts receiving an intervention aimed at controlling or delaying HIV rebound, or 3) HIV/SIV-positive hosts receiving an intervention aimed at diminishing or eradicating viral reservoirs. <u>Examples of appropriate research topics include but are not limited to:</u> Modeling and defining the parameters that affect time to HIV rebound and the slope of the rebound curve; Identification of the cellular and anatomical source(s) of rebound virus; Determination of the timing of establishment of the latent reservoir in pediatric individuals and the cell types involved; Elucidation of the mechanisms that govern spontaneous activation (not reactivation by a latency reversing agent) of latent infectious HIV provirus in vivo or in primary cells isolated from infected individuals; Identification of the immune correlates associated with reservoir clearance or control versus those associated with viral rebound; Determination of whether or how reservoirs expand following treatment interruption; Identification of biomarkers that predict HIV rebound

<u>Applications proposing the following will be considered non-responsive and will not be reviewed:</u> Studies limited to basic mechanisms of viral latency and reversal that do not extend to primary cells from HIV/SIV-infected hosts or to in vivo studies; Therapeutic or vaccine discovery or development without a component that addresses basic science questions related to viral rebound; Studies of HIV/SIV reservoirs that do not focus on replication-competent virus that gives rise to rebound viremia; Studies involving latency reversing agents, unless they are part of a combination strategy to diminish or eradicate viral reservoirs where rebound will be examined in vivo after the combination strategy has been employed; Clinical trials

Budget: The following NIH components intend to commit the following amounts in FY 2017 to fund 2-3 awards: NIAID= \$4,000,000 & NIMH= \$500,000. Application budgets are limited to \$1,000,000 in direct costs and need to reflect the actual needs of the proposed project. The scope of the proposed project determines the project period. The maximum project period is 5 years.

2. Improving Smoking Cessation in Socioeconomically Disadvantaged Populations via Scalable Interventions		
Letter of Intent due date: Not Applicable	Hyperlink: <u>(PAR-16-201)</u>	Type: R21
	<u>(PAR-16-202)</u>	R01

Application Due Date: October 11, 2016; June 13, 2017; October 11, 2017; June 13, 2018; October 11, 2018, June 13, 2019 by 5:00 PM local time of applicant organization. Applicants are encouraged to apply early to allow adequate time to make any corrections to errors found in the application during the submission process by the due date. *Applicants should be aware that on-time submission means that an application is submitted error free* (of both Grants.gov and eRA Commons errors) on the application due date.

Purpose: The purpose of this Funding Opportunity Announcement (FOA) is to provide support for innovative and promising intervention research designed to improve smoking cessation outcomes among socioeconomically disadvantaged populations. Specifically, this FOA is intended to stimulate research efforts aimed at the development of smoking cessation interventions that: 1) are targeted to socioeconomically disadvantaged populations, and 2) could be made scalable for broad population impact. Applicants may propose projects that develop and test novel cessation interventions with the potential to be scaled up, as well as projects that focus on enhancing the effectiveness, quality, accessibility, utilization, and cost-effectiveness of currently scaled smoking cessation interventions. This FOA provides funding for up to 2 years for protocol development and early phase, pilot, or exploratory projects.

Budget: **R21**-Direct costs are limited to \$275,000 over an R21 two-year period, with no more than \$200,000 in direct costs allowed in any single year. **R01**-Application budgets are not limited but need to reflect the actual needs of the proposed project. The maximum project period is 5 years.

3. Investigator-Initiated Clinical Sequencing Research

Letter of Intent due date: September 20, 2016

Hyperlink: (PAR-16-209)

Type: R01

Application Due Date: October 20, 2016, by 5:00 PM local time of applicant organization. **Aids application due dates:** November 15, 2016, by 5:00 PM local time of applicant organization. Applicants are encouraged to apply early to allow adequate time to make any corrections to errors found in the application during the submission process by the due date. *Applicants should be aware that on-time submission means that an application is submitted error free* (of both Grants.gov and eRA Commons errors) on the application due date.

Purpose: The purpose of this funding opportunity announcement is to broaden the NHGRI investigator-initiated portfolio in genomic medicine by stimulating research that informs the implementation of genome sequencing in clinical care. This includes, but is not limited to, studies of whether and how clinical genome sequencing impacts disease diagnosis and treatment, studies that address current barriers to the implementation of clinical genome sequencing, and studies of approaches to improve the identification and interpretation of genomic variants for dissemination in clinical settings.

Budget: NIH intends to fund an estimate of 5-7 awards, corresponding to a total of up to \$4,000,000, for fiscal year 2017. Future year amounts will depend on annual appropriations. Application budgets are not limited but need to reflect the actual needs of the proposed project. The scope of the proposed project should determine the project period. The maximum project period is 4 years.

4. Leveraging Cognitive Neuroscience Research to Improve Assessment of Cancer Treatment Related Cognitive Impairment			
Letter of Intent due date: Not Applicable	Hyperlink: (PAR-16-213)	Type: R21	
	<u>(PAR-16-212)</u>	R01	
Application Due Date: October 12, 2010; Appl 11, 2017; Octob	an 10, 2017, Annil 11, 2019, October 10, 2019, Annil 11, 2010		

Application Due Date: October 13, 2016; April 11, 2017; October 10, 2017; April 11, 2018; October 10, 2018; April 11, 2019. Apply by 5:00 PM local time of applicant organization. Applicants are encouraged to apply early to allow adequate time to make any corrections to errors found in the application during the submission process by the due date. *Applicants should be aware that on-time submission means that an application is submitted error free* (of both Grants.gov and eRA Commons errors) on the application due date.

Purpose: This Funding Opportunity Announcement (FOA) encourages transdisciplinary research that will leverage cognitive neuroscience to improve traditional measurement of cognitive impairment following cancer treatment, often referred to as "chemobrain." A better understanding of the acute- and late-term cognitive changes following exposure to adjuvant chemotherapy and molecularly-targeted treatments, including hormonal therapy, for non-central nervous system tumors can inform clinical assessment protocols with downstream implications for survivorship care plans.

Budget: R21 - The combined budget for direct costs for the two-year project period may not exceed \$275,000. No more than \$200,000 may be requested in any single year. R01 - Application budgets should reflect the actual needs of the proposed project. The maximum project period is 5 years. The scope of the proposed project should determine the project period.

5. Program for Extramural/Intramural Alcohol Research Collaborations

Letter of Intent due date: 30 days prior to the application due date Hyperlink: (PAR-16-214) Type: U01 Application Due Date: <u>Standard dates</u> and <u>Standard AIDS dates</u> apply. Apply by 5:00 PM local time of applicant organization. Applicants are encouraged to apply early to allow adequate time to make any corrections to errors found in the application during the submission process by the due date. *Applicants should be aware that on-time submission means that an application is submitted error free* (of both Grants.gov and eRA Commons errors) on the application due date.

Purpose: The purpose of this funding opportunity is to encourage collaboration between alcohol researchers in the extramural community and those within the NIAAA intramural research program. The objective of this Funding Opportunity Announcement is to bring together the research expertise that, as a functioning collaborative unit, will address key alcohol-based research questions that would not otherwise be possible by the same individuals working towards similar goals in isolation. The goal of the research proposed by the collaborating investigators should address questions that advance the alcohol research field with respect to issues surrounding alcohol use disorders including dependence and the effects of alcohol on health. The NIH Intramural Scientist will be a tenured or tenure-track scientist from the NIAAA Intramural Research Program, with whom the PD/PI has made prior contact for the collaborative project.

Budget: Application budgets need to reflect actual needs of the proposed project and may not exceed \$250,000 direct cost per year. These funds may only be used to support the activities within the PD(s)/PI(s) (extramural scientists) research laboratory. The scope of the proposed project should determine the project period. The maximum period is five years.

D71 - International Research Training Planning Grant: To plan for the preparation of an application for a D43 international research training grant or for a U2R international research training cooperative agreement.

D43 - International Research Training Grants: To support research training programs for US and foreign professionals and students to strengthen global health research and international research collaboration.

DP1 – NIH Director's Pioneer Award (NDPA): To support individuals who have the potential to make extraordinary contributions to medical research. The NIH Director's Pioneer Award is not renewable.

DP3 – Institutional Training and Director Program Projects -Type 1 Diabetes Targeted Research Award: To support research tackling major challenges in type 1 diabetes and promoting new approaches to these challenges by scientific teams.

P01 – Research Program Projects: For the support of a broadly based, multidisciplinary, often long-term research program which has a specific major objective or a basic theme. A program project generally involves the organized efforts of relatively large groups, members of which are conducting research projects designed to elucidate the various aspects or components of this objective. Each research project is usually under the leadership of an established investigator. The grant can provide support for certain basic resources used by these groups in the program, including clinical components, the sharing of which facilitates the total research effort. A program project is directed toward a range of problems having a central research focus, in contrast to the usually narrower thrust of the traditional research projects supported through this mechanism should contribute or be directly related to the common theme of the total research effort. These scientifically meritorious projects should demonstrate an essential element of unity and interdependence, i.e., a system of research activities and projects directed toward a well-defined research program goal.

P20 – Research Program Projects and Centers -Exploratory Grant: To support planning for new programs, expansion or modification of existing resources, and feasibility studies to explore various approaches to the development of interdisciplinary programs that offer potential solutions to problems of special significance to the mission of the NIH. These exploratory studies may lead to specialized or comprehensive centers.

R01 – NIH Research Project Grant Program: most common NIH program; to support a discrete, specified, circumscribed research project; generally 3-5 years; budget may be specified, but generally <\$500,000 p.a. (direct costs).

R21 – NIH Exploratory/Developmental Research Grant: encourages new, exploratory and developmental research projects (could be used for pilot or feasibility studies); up to 2 years; budget total generally <\$275,000 (direct costs).

R03 – NIH Small Grant Program: limited funding for short period to support e.g. pilot / feasibility study, collection of preliminary data, secondary analysis of existing data, smallcontained research projects, development of new research technology, etc.; normally for "new investigators"; not renewable; up to 2 years; budget generally <\$50,000 (direct costs).

R21/R33 - Phased Innovation: The R33 award is to provide a second phase for the support for innovative exploratory and development research activities initiated under the R21 mechanism. Although only R21 awardees are generally eligible to apply for R33 support, specific program initiatives may establish eligibility criteria under which applications could be accepted from applicants demonstrating progress equivalent to that expected under R33.

R25 – NIH Education Projects: used in a wide variety of ways to promote an appreciation for and interest in biomedical research, provide additional training in specific areas, and/or to develop ways to disseminate scientific discovery into public health and community applications.

R34 - Clinical Trial Planning Grant Program: To provide support for the initial development of a clinical trial, including the establishment of the research team; the development of tools for data management and oversight of the research; the development of a trial design and other essential elements of the study, such as the protocol, recruitment strategies, and procedure manuals; and to collect feasibility data.

U01 – NIH Research Project Cooperative Agreement: supports discrete, specified, circumscribed projects to be performed by investigator(s) in an area representing their specific interests and competencies; many types of cooperative agreements, e.g. Clinical Trials Centers; generally no budget upper limit but may be specified.

U24 – Resource-Related Research Projects – Cooperative Agreements: To support research projects contributing to improvement of the capability of resources to serve biomedical research.

U01 – NIH Research Project Cooperative Agreement: supports discrete, specified, circumscribed projects to be performed by investigator(s) in an area representing their specific interests and competencies; many types of cooperative agreements, e.g. Clinical Trials Centers; generally no budget upper limit but may be specified.

UH2/UH3 – NIH Phase Innovation Awards Cooperative Agreement: To support the development of new research activities in categorical program areas. (Support generally is restricted in level of support and in time.) The UH3 award is to provide a second phase for the support for innovative exploratory and development research activities initiated under the UH2 mechanism. Although only UH2 awardees are generally eligible to apply for UH3 support, specific program initiatives may establish eligibility criteria under which applications could be accepted from applicants demonstrating progress equivalent to that expected under UH2.

U2R – International Research Training Cooperative Agreements: Cooperative agreement mechanism for D43 to support research training programs for US and foreign professionals and students to strengthen global health research and international research collaboration.

U19 - Research Program-Cooperative Agreements: supports a research program of multiple projects directed toward a specific major objective, basic theme or program goal, requiring a broadly based, multidisciplinary and often long-term approach. A cooperative agreement research program generally involves the organized efforts of large groups, members of which are conducting research projects designed to elucidate the various aspects of a specific objective.

Glossary of selected acronyms:

FOA Funding Opportunity Announcement

- PA Program Announcements (click on "PA" to search for further funding opportunities)
- **<u>RFA</u>** Request for Applications (click on "RFA" to search for further funding opportunities)

Complete Glossary and acronym list of NIH Terms



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